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From: Gordon Fleming <gordon@alphaweb.org>
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ATTENTION
CHAIRS, BOARDS OF HEALTH
MEDICAL OFFICERS OF HEALTH
ASSOCIATE MEDICAL OFFICERS OF HEALTH
SENIOR MANAGERS, alPHa AFFILIATES

Dear alPHa Member,

Please find attached the proceedings of the alPHa Winter Symposium, which was held in Toronto on February 21, 2019. Links to the presentations are included in the attached and posted in the [alPHa Presentations Library](#). They are also collected in a [single document](#) should you wish to have them all at once.

Please note that materials related to the afternoon Boards of Health and COMOH meetings will be distributed separately to the members of those Sections.

We hope you find this information useful and invite you to join us for the [alPHa Annual Conference in Kingston!](#)



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Association of Local
PUBLIC HEALTH
Agencies

WINTER SYMPOSIUM PROCEEDINGS

Thursday, February 21, 2019
Chestnut Conference Centre
89 Chestnut St., Toronto

Welcoming Remarks Symposium Chair: Dr. Robert Kyle, alPHA President



Dr. Robert Kyle, President of alPHA welcomed delegates to alPHA’s Winter Symposium, with an acknowledgement that it was held on the Ancestral Traditional Territories of the Ojibway, the Anishnabe and the Mississaugas of the New Credit, which is covered by the Upper Canada Treaties.

He thanked the Medical Officers of Health, Associate Medical Officers of Health, Affiliates, and Board of Health members – particularly those who are new to their role – for demonstrating their dedication to the

public health system by attending this event in an unpredictable climate, both political and actual. He also read a letter of greeting that was received from the Minister of Health and Long-Term Care.



Plenary – Making the Connection Between Public Health and Mental Health

Speaker: Lori Spadorcia, Vice President, Communications and Partnerships, Centre for Addiction and Mental Health (CAMH)

Commentators: Trudy Sachowski, Chair, alPHA Boards of Health Section & Dr. Christopher Mackie, Chair, Council of Ontario Medical Officers of Health



Lori Spadorcia gave a brief history of the Centre for Addiction and Mental Health’s Toronto campus, to illustrate the importance of breaking down both literal and figurative walls to drive policy change and attitudes related to mental health. The campus itself has evolved from an asylum isolated from the city to an integral and welcome part of the surrounding neighbourhood, as have many of the people who have benefitted from its services.

Despite the measurable progress, there are still science, justice and advocacy gaps. Research on the physiological and psychological factors underlying mental health continues but what is unknown still

outweighs what we have learned. Investments in how the justice system deals with mental health are not where they should be and public funding of effective treatments (e.g. cognitive behavioural therapies) is largely absent. The stigma that remains around mental health issues aggravates these gaps, in that it makes advocacy by or on behalf of people living with mental health issues very difficult.

She then reinforced the importance of asking why some diseases get treatment and others get judgment with the

assertion that the burden of mental illness and addictions is higher than that for all cancers combined. It has in other words become an enormous and poorly addressed health issue that could benefit from the same upstream approaches that we use to address physical wellbeing.

She used the example of housing, which has become one of CAMH's top advocacy priorities, to illustrate this idea. The evidence that stable housing is one of the strongest determinants of health is robust and CAMH has had a great deal of success, despite the predictable challenges and resistance, in transitioning close to 100 patients into the community. This however remains a matter that is not being adequately addressed through public policy, and even the most complex cases can be transitioned with the proper supports within a well-connected system of multisectoral care with central access points, strong continuing care and monitoring.

A broader advocacy focus is the message that mental health is health, because it remains marginalized and poorly understood by the health and education systems, employers and society at large. This magnifies the haphazard approaches following diagnoses of mental disease, which in turn highlights the importance of achieving parity with the clear and accepted responses following diagnosis of physical disease. She submitted that the upstream determinants of health approach will be an important foundation for employing a common language for both. In addition, discovery and innovation will remain the foundation of treating mental health the same way that we do physical health, opening options for treatment and, most importantly, providing hope.



Following Lori's presentation, Trudy Sachowski (Chair of alPHA's Boards of Health Section) and Dr. Christopher Mackie (Chair of alPHA's Council of Ontario Medical Officers of Health) were invited to provide further comments from a public health perspective and lead the ensuing discussion.

Trudy spoke of the prevalence of alcohol abuse in her community and the importance of getting to people when they are young through schools, teams, positive reinforcement, supports for assistance, seminars and educational sessions. In the north, this also requires partnering with indigenous associations to ensure that any intervention or program is culturally sensitive and is led by the indigenous community.



Lori agreed with these points and added that having different partners at the table has contributed to the success of a variety of initiatives. Implementing mental health strategy takes a village, which includes schools, social services, police, public health etc., as the audiences are often the same, so innovation and a variety of coordinated approaches can be employed. It is also important to understand that audience through involvement – there is no standard approach that can be expected to work in all cases.

Dr. Chris Mackie continued with a reference to the stigma, noting that the subject of his Master's degree was de-institutionalization of mental health and indicating that this needs to focus on providing supports to individuals who need them and not strictly on reducing the burden on the institutions themselves. He observed that mental health was only incorporated into the Ontario Public Health Standards in 2018, and that this will provide an important foundation for building on the activities that public health had already initiated (e.g. early years, anti-bullying and post-partum programs) by making it a core part of its practice and facilitating further collaboration to reduce the enormous burden of illness. Public health can have a tremendous impact through prevention approaches, especially if the potential of programs such as Healthy Babies, Healthy Children can be unlocked

through proper funding and resources. Roles in secondary and tertiary prevention where mental illnesses and physical illnesses such as TB intersect are also becoming clearer.

The ensuing discussion covered the importance of raising awareness and translating it into action and well-resourced programs and services (the Bell “Let’s Talk” campaign was referenced), addressing workplace culture, building community capacity, and reinforcing the idea that determinants of health – especially when applied in the earliest stages of life – will improve mental health outcomes just as much as they do physical ones.

alPHa Strategic Plan

Speaker: Maria Sanchez-Keane, Principal Consultant, Centre for Organizational Effectiveness



Dr. Robert Kyle welcomed Maria Sanchez-Keane to facilitate a session that would give delegates the opportunity to provide feedback on the new alPHa Strategic Plan, which has been under development throughout the past year.

She provided a summary of the process so far and the agreed-upon strategic directions, indicating that this phase is intended to gather further direction from the membership on implementation of the plan. The work on this began some time ago and has been developed through input from two alPHa Boards and their respective Executive Committees as well as alPHa staff. Delegates were asked to continue

the focus on what alPHa can do to advance public health through the leveraging of its diversity of membership and variety of perspectives in three key areas and considering criteria that should be employed in decision-making processes.

Small-group discussions were organized for each of the key areas (strengthen the local public health system, especially local public health, by leading the dialogue with governments and Ministries; provide leadership in building collaborations and alliances focusing on provincial and municipal levels; build opportunities for multiconstituent connections amongst alPHa members). Written / oral feedback was collected to inform the next version of the Plan. Further work on this will be done by the alPHa Board of Directors during their February 22nd and April 26th meetings. The final Strategic Plan is expected to be presented to the membership during the June 2019 Conference in Kingston.



Panel – Managing Risk in Public Health

Moderator:

Dr. Peter Donnelly, President & CEO, Public Health Ontario

Panelists:

Dr. Penny Sutcliffe, MOH, Public Health Sudbury & Districts

Dr. Robert Kyle, MOH, Durham Region Health Department



This panel was assembled to provide members with a chance to build on previous alPHa sessions on risk management ([2015](#) and [2016](#)) at a time when significant systemic changes are occurring.

Dr. Peter Donnelly launched the panel with introductory comments, observing that managing risk should be closely integrated into governance and there can be consequences if it isn't. He shared a story from his former career about a board of health CEO whose sole focus was on achieving targets without paying attention

to process and inherent risk led to high levels of workplace stress, “hockling the books” and an ignorance of underlying governance shortcomings. The negative outcome of this approach was entirely predictable, and the resulting organizational damage took years to undo.

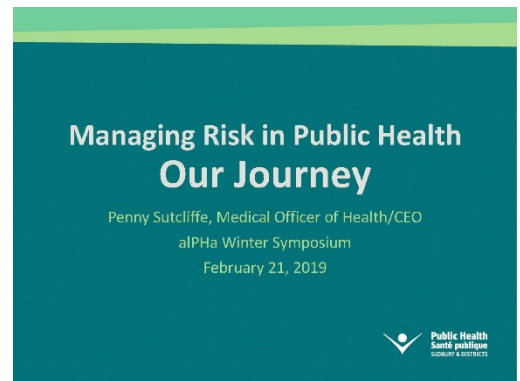
He continued with a similar story about a board of health in a small and insular community that concerned itself entirely too much with the day-to-day activities of operational staff without paying much attention to matters of governance. When the local dysfunction became apparent, the government had to send in agents to redress the situation, which was not looked upon kindly by the community.

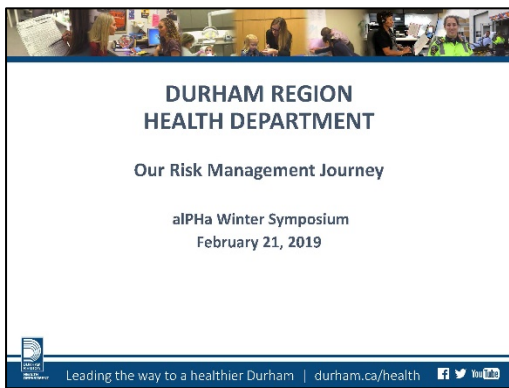
Taken together, these stories were meant to convey the idea that an effective governance structure keeps its eyes on but hands off what it is governing. By focusing on governance, it is easier to identify organizational risks to operational undertakings. In any case, it is essential to remind front-line staff of the value and importance of what they are doing.

Dr. Penny Sutcliffe continued with the storytelling direction, recalling a hot day in July 2016 when an overheated server room resulted in a critical failure of all Public Health Sudbury and Districts' communications systems. This in turn caused serious implications for service delivery and led to the realization that because there was no contingency plan, the outcome of this failure was far worse than it needed to be.

The response was a full examination of potential risks and their likely impacts in order to make decisions about allocating resources and included consideration of risk tolerance to make sure that opportunities would not be missed. The formal risk management policy and procedure is now embedded into the culture and operations of the agency, which equipped it well for the incorporation of risk management into the accountability requirements of the 2018 Ontario Public Health Standards.

She concluded with a summary of lessons learned and indicated that risk management must be a continuous process if it is to be effective. Dr. Donnelly referred to the summary of the process in Dr. Sutcliffe's presentation and suggested that while it may appear intimidating, one must measure this front-loaded work against what might be required after a failure that results from not doing it.





Robert Kyle, presenting in place of originally-scheduled Corinne Berinstein, outlined his health department’s risk management journey, which, like in Dr. Sutcliffe’s case, was prompted by a crisis.

The loss of an unencrypted USB key that contained the personal health information of more than 83,000 people who had visited Durham’s H1N1 immunization clinics in 2010 sensitized the Region to the importance of examining and fortifying its data and information systems. It has also been a primary consideration in Durham’s decision not to sign on to [Panorama](#) precisely because data hosting agreements have no language about managing risk in a

shared information system.

The formalization of the general local risk management approach contained many of the same elements outlined by Dr. Sutcliffe, including keeping organizational values and risk appetite in the background, developing risk-mitigation plans, and continual monitoring, reporting and evaluation. He echoed the importance of integrating risk management into the institutional culture, with leadership from the executive team and engagement of the management team.

Dr. Donnelly then summarized risk management as both a science and an art. It must be methodical and detailed, informed by risk appetite, and developed with the knowledge that, irrespective of the quality of planning, the human response to crises is rarely governed completely by reason.

The ensuing discussion focused on different kinds of risk and the incredible value of the application of lessons learned in planning. Many suggested that alPHa could have an important role in facilitating a system-wide risk management dialogue among its members, as well as supporting collective responses to some of the persistent issues where technology and protection of personal information intersect.



Evening Reception & Special Guest Lecture co-hosted by alPHa and the Dalla Lana School of Public Health



Introductions: Dr. Robert Kyle, President, alPHa & Professor Adalsteinn (Steini) Brown, Dean, Dalla Lana School of Public Health

Special Guest Speaker: Dr. Rueben Devlin, Special Advisor and Chair of the Premier’s Council on Improving Health Care and Ending Hallway Medicine

alPHa delegates were invited to conclude the day with an evening presentation from Dr. Rueben Devlin, who provided additional details and context for the vision of the Premier’s Council on Improving Health Care and Ending Hallway Medicine that was described in the

Council’s [initial report](#).

[COLLECTED SLIDE DECKS](#)

SPEAKER BIOS
(in order of appearance)

ROBERT KYLE has been the Commissioner & Medical Officer of Health for the Regional Municipality of Durham since 1991. He is an active member of many provincial and regional health organizations. For example, he is currently President of the Association of Local Public Health Agencies; Chair of the Durham Nuclear Health Committee; past Chair of the Port Hope Community Health Centre; Chair of the Public Health Ontario Board of Directors and Chair of its Governance Committee. Dr. Kyle is a former Medical Officer of Health for the Peterborough County-City Health Unit and Associate Medical Officer of Health for the Borough of East York Health Unit. He is also an Adjunct Professor, Dalla Lana School of Public Health, University of Toronto.

LORI SPADORCIA serves as the Vice President, Communications and Partnerships at the Centre for Addiction and Mental Health (CAMH). Her portfolio includes community engagement, public affairs, public policy, strategic planning and the Provincial Systems Support Program. She supports the alignment of mission critical activities which are designed to be responsive to CAMH's many stakeholders, and engaging partners and resources to better position the hospital to make a sustainable system contribution to mental health. As a senior advisor to Cabinet Ministers at the federal and provincial level, Ms. Spadorcia played a key role in finding solutions that yield advancements in public policy. In Ontario, she served as a senior adviser to the Minister of Finance, where she advised on the creation and execution of the provincial budget. As a policy and communications expert, Ms. Spadorcia is bringing awareness and understanding of mental illness to the broader public and working with governments and communities to develop policies to promote better health systems, support vulnerable populations and drive social change.

MARIA SANCHEZ-KEANE is the Principal Consultant for the Centre for Organizational Effectiveness, an organization she founded in 2000 that is focused on assisting non-profit and public organizations in the areas of strategy, capacity building and evaluation. She has worked within health, public health, child welfare, children's mental health, education and community health sectors.

TRUDY SACHOWSKI is a provincially appointed, active member of the Northwestern Board where she currently serves as Vice Chair, Chair of the Executive Committee and Chair of the Constitution Review Work Group. Trudy's volunteering has included numerous local, regional and provincial organizations for which she has received recognition locally and provincially. Trudy has completed one term on the alPHA Board of Directors as the North West region board of health representative. In this capacity, she serves on the current alPHA Executive Committee, chairs the Boards of Health Section and has participated on the alPHA 2018 Election Task Force and other planning tables for the association.

CHRISTOPHER MACKIE is the Medical Officer of Health and CEO for the Middlesex-London Health Unit, and is an Assistant Professor, Part Time at McMaster University. Before coming to London, Dr. Mackie was Associate Medical Officer Health for the City of Hamilton for four years. He also worked as a Public Health Physician with Public Health Ontario. As a COMOH representative for the South West Region, he is the current Chair of COMOH, a section of alPHA.

PETER DONNELLY is President and CEO of Public Health Ontario (PHO), which provides evidence for policy formulation and undertakes public health capacity building, as well as provides integrated public health laboratory and surveillance systems. Prior to joining PHO, Dr. Donnelly was the Professor of Public Health Medicine at the University of St. Andrews in Scotland, where he established and led public health medicine research and teaching. From 2004 to 2008 he was the Deputy Chief Medical Officer to the Scottish Government, providing senior leadership and coordination at a national level. As the Director of Public Health in two jurisdictions, he was responsible for the delivery of local public health services and programs.

PENNY SUTCLIFFE was appointed as Medical Officer of Health for the Sudbury & District Health Unit in August 2000. Before coming to Sudbury, she was the Medical Officer of Health for Yellowknife, Northwest Territories. Her first position as Medical Officer of Health was with the Burntwood Regional Health Authority in northern Manitoba. A specialist in Community Medicine, Dr. Sutcliffe has a longstanding interest in socioeconomic inequalities in health and is a strong advocate for incorporating broader determinants of health into core public health programming. She is particularly interested in pursuing opportunities for healthy public policy development at the local and regional level

and to this end is engaged with local healthy community initiatives and with critically examining and modifying local public health practice.

DENIS DOYLE studied at Carleton University and York University. After a long career at Xerox Canada, Denis spent six years in Information Technology management at CIBC. Warden Doyle began serving on Township Council in 2006 and was elected as Mayor of Frontenac Islands in 2010. At the County, Warden Doyle serves on the Sustainability Advisory Committee and the Trails Advisory Committee. Denis was County Warden in 2014 – 2015 and has served on the Kingston, Frontenac, Lennox and Addington Board of Health since 2014. He has been Chair of the Board since January 2017.

KIERAN MOORE is the Medical Officer of Health for the Kingston, Frontenac, Lennox and Addington (KFL&A) Public Health Unit. At Queen's University, he is a Professor of Family and Emergency Medicine and the director for the Public Health & Preventive Medicine Residency Program. He is also an Attending Physician in the Department of Emergency and Family Medicine at the Kingston Health Sciences Centre. A champion for a national Lyme disease surveillance network to government, he presently serves as Network Director of the Canadian Lyme Disease Research Network.

EVENING GUEST LECTURE:

ADALSTEINN (STEINI) BROWN is Dean of the Dalla Lana School of Public Health at the University of Toronto and the Dalla Lana Chair of Public Health Policy at the University of Toronto. He is currently a member of the Premier's Council on Improving Healthcare and Ending Hallway Medicine. His past roles include senior leadership roles in policy and strategy within the Ontario government, founding roles in start-up companies, and extensive work on performance assessment. He received his undergraduate degree in government from Harvard University and his doctorate from the University of Oxford, where he was a Rhodes Scholar.

REUBEN DEVLIN is an orthopaedic surgeon who completed his medical school and orthopaedic training at the University of Toronto. During his 17 years practicing in Newmarket, he held senior hospital positions, including Chief of Surgery and Chair of the Medical Advisory Committee. He had a special interest in joint replacement and sports medicine. Subsequently, Dr. Devlin served as the President and Chief Executive Officer of Humber River Hospital in Toronto from 1999 to 2016. He was appointed as Special Advisor and Chair of the Premier's Council on Improving Health Care and Ending Hallway Medicine in June 2018. As Chair, he is leading a group of visionary health system leaders who have come together to identify for the Premier of Ontario and Minister of Health and Long-term Care strategic priorities and actions that will lead to improved health and wellness outcome for Ontarians, high patient satisfaction, and more efficient use of government investment using an effective delivery structure.

PLEASE JOIN US IN KINGSTON FOR THE aPHa ANNUAL CONFERENCE!

Dr. Kieran Moore, Medical Officer of Health and Dennis Doyle, Board of Health Chair for the Kingston, Frontenac, Lennox and Addington (KFL&A) health unit were on hand to personally invite Symposium delegates to aPHa's June 2019 AGM and Conference in Kingston, Ontario.



