



CITY OF HAMILTON
PUBLIC HEALTH SERVICES
Office of the Medical Officer of Health

TO:	Mayor and Members Board of Health
COMMITTEE DATE:	January 13, 2020
SUBJECT/REPORT NO:	Public Health Modernization (BOH20004) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Carolyn Hureau (905) 546-2424 Ext. 6004
SUBMITTED BY:	Dr. Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services
SIGNATURE:	

RECOMMENDATION

- (a) That the Board of Health submit the attached letter (Appendix “A” to Report BOH20004) to the Minister of Health in response to the Discussion Paper on Public Health Modernization (Appendix “B” to Report BOH20004); and,
- (b) That the Chair and Vice-Chair of the Board of Health participate in the in-person consultation with the Ministry on February 11, 2020 to further discuss public health modernization.

EXECUTIVE SUMMARY

The Ministry of Health released a discussion paper on public health modernization in November 2019 (Appendix “B” to Report BOH20004). The discussion paper outlines key strengths of public health in Ontario and identifies four key challenges:

1. Insufficient capacity;
2. Misalignment of health, social, and other services;
3. Duplication of effort; and,
4. Inconsistent priority setting.

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The paper also included 21 specific discussion questions about how to best address these challenges and build on existing strengths in order to modernize and transform the role of public health in improving the health of Ontarians at both the provincial and local levels.

An online survey for staff, consultations with senior leadership, a review of previous correspondence from the Board of Health and other organizations, as well as relevant reports, informed this report and the attached letter to the Minister of Health (Appendix “A” to Report BOH20004).

In preparing Hamilton Public Health Services’ response, the following key principles of public health modernization were taken into consideration:

- That the unique mandate of public health be maintained;
- That the core functions of public health be continued;
- That the focus of local public health agencies be maintained at the local level;
- That sufficient funding and human resources be ensured;
- That a risk management approach to public health modernization be used to identify where the greatest capacity challenges are and focus on those first; and,
- That both provincial and local level public health agencies need to be strengthened and coordinated as a public health system for Ontarians.

The following recommendations were developed based on the key themes from the consultations and review:

- That an overarching provincial public health system strategy be developed that clearly outlines the roles and responsibilities of the Ministry of Health, Public Health Ontario, and local public health units;
- That local public health services continue to be responsive and tailored to the health needs and priorities of each local community, including those of vulnerable groups or those with specific needs such as the Indigenous community;
- That public health senior and medical leadership be maintained at the local level to provide advice to municipal councils and participate in strategic community partnerships;
- That Ontario’s public health system remain financially and administratively separate and distinct from the health care system;
- That any changes to the public health system leverage and build on the strong partnerships and collaborations that currently exist at the both provincial and local levels;
- That local governance have strong accountability and leadership;
- That mechanisms be included to ensure that the total funding envelope is stable and protected for the full delivery of all public health programs and services;

- That the Ministry of Health and Public Health Ontario provide stronger leadership and centralized support for policy and strategy development, health promotion messaging and campaigns, research, and competency development;
- That Public Health Ontario and local public health units have distinct and complementary roles with respect to population health assessment, epidemiology, and evaluation;
- That any changes to the public health system utilize a risk management approach to identify where the greatest capacity, or other challenges are and focus on those first; and,
- That Hamilton Public Health Services remain as an organization within the City of Hamilton, and its jurisdiction also remain the same, as it serves a good size population, and has the support and strategic benefits of being amalgamated within the City.

Alternatives for Consideration – See Page 6

FINANCIAL – STAFFING – LEGAL IMPLICATIONS

Financial: No financial implications.

Staffing: No staffing implications.

Legal: No legal implications.

HISTORICAL BACKGROUND

On April 11, 2019 the Ontario Budget was announced which included plans to modernize the public health system by consolidating 35 health units into 10 new regional Public Health Entities. The budget also recommended a \$2 million reduction in total provincial funding by 2022, including adjustments to the current funding formula that would download a significant portion of costs to municipalities.

On August 19, 2019 the Minister of Health announced the Province had heard the need for more time and consultation with respect to public health modernization. In addition, the Province notified public health units that they would:

- Hold-off on funding changes until January 2020 at which point the funding formula would shift to a 70% provincial and 30% municipal share for all public health programs under the Ontario Public Health Services except for the new Ontario Seniors Dental Care Program and Healthy Babies, Healthy Children;

- Cap the impact on municipalities from this funding shift to 10% of current funding levels for 2020; and,
- Provide public health units with one-time funds to help with the transition.

On October 10, 2019, the Ministry of Health appointed Jim Pine (Chief Administrative Officer for the County of Hastings) as Special Advisor and Alison Blair (Assistant Deputy Ministry for Emergency Health Services) as Executive Lead for the renewed consultations on strengthening and modernizing public health and emergency health services. Shortly after, the Ministry of Health released a discussion paper on public health modernization with 21 questions to guide meaningful conversations. Since then, the Ministry of Health has been gathering feedback through a variety of avenues including an online survey, written submissions, and in-person stakeholder consultations.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

At this time, there are no policy implications or legislated requirements. The Ministry of Health has indicated that the renewed consultations are an information gathering exercise and has reiterated that no decisions regarding public health modernization have been made at this point.

RELEVANT CONSULTATION

An online survey containing the 21 questions from the Discussion Paper on Public Health Modernization was sent out to all staff in December 2019. In addition, consultation meetings were held with the General Manager of Health & Safe Communities and the City Manager.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

To inform Hamilton Public Health Services' collective response to the discussion paper, feedback obtained from the staff survey and leadership consultations was collated and analysed. Previous correspondence from the Board of Health and other organizations, as well as relevant reports were also reviewed.

The following key principles of public health modernization were used to guide Hamilton Public Health Services' response:

- That the unique public health mandate of keeping people healthy, preventing disease, and reducing health inequities be maintained;

- That the core functions of public health including population health assessment and surveillance, promotion of health and wellness, disease prevention, health protection and emergency management and response be continued;
- That the focus of local public health agencies be maintained at the local level to ensure services are tailored to the health needs and priorities of the community;
- That sufficient funding and human resources to fulfill public health's unique mandate be ensured;
- That a risk management approach to public health modernization be used to identify where the greatest capacity or other challenges are and focus on those first; and,
- That both provincial and local level public health agencies need to be strengthened and coordinated as a public health system for Ontarians.

Listed below are the recommendations that were developed based on the key themes from the collective input of staff and senior leadership:

- That an overarching provincial public health system strategy be developed that clearly outlines the roles and responsibilities of the Ministry of Health, Public Health Ontario, and local public health units;
- That local public health remains at the community level. It is imperative that local public health services be responsive and tailored to the health needs and priorities of each local community, including those of vulnerable groups or those with specific needs such as the Indigenous community;
- That there be local public health senior and medical leadership to provide advice on public health issues and participate in strategic community partnerships;
- That Ontario's public health system remain financially and administratively separate and distinct from the health care system;
- That any changes to the public health system leverage and build on the strong partnerships and collaborations that currently exist;
- That local governance have strong accountability and champion public health issues in the community, and that boards of health have proportionate representation to the communities they serve;
- That mechanisms be included to ensure that the total funding envelope is stable, predictable, and protected for the full delivery of all public health programs and services;
- That the Ministry of Health and Public Health Ontario provide stronger leadership and centralized support for the following areas:
 - Development of policies and strategies (especially related to health promotion and disease prevention) that include delineation of provincial and local roles and responsibilities, and include measurable goals;

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- Development of a digital health strategy that includes data standardization and interoperability of digital health solutions (e.g., electronic medical records) across both the public health system and broader health system;
 - Development and coordination of health promotion messaging, campaigns, and social marketing, with complementary local campaigns where appropriate;
 - Evidence reviews/synthesis and library services;
 - Development of a research agenda to inform best practice standards and evidence-informed strategies in collaboration with Ontario's post-secondary institutions and research institutes;
 - Coordination with other provincial ministries to ensure public health programs and services are planned and delivered more efficiently; and,
 - Competency development and capacity building (e.g., Indigenous cultural competency training).
- That Public Health Ontario and local public health units have distinct and complementary roles with respect to population health assessment, epidemiology, and evaluation. Public Health Ontario should provide scientific and technical expertise and conduct provincial-level analysis, while local public health units conduct local-level analysis and determine how best to execute provincial priorities and respond to local health issues within the community;
 - That any changes to the public health system utilize a risk management approach to identify where the greatest capacity, or other challenges are and focus on those first; and,
 - That Hamilton Public Health Services remain as an organization within the City of Hamilton, and its jurisdiction also remain the same as it serves a good size population, and has the support and strategic benefits of being amalgamated within the City.

Additional suggestions and perspectives on each of the four key challenges identified in the discussion paper are provided in the letter to the Minister of Health (Appendix "A" to Report BOH20004).

ALTERNATIVES FOR CONSIDERATION

The Board of Health could choose not to submit a response or engage in provincial consultation; however, this alternative is not recommended.

ALIGNMENT TO THE 2016 – 2025 STRATEGIC PLAN

Healthy and Safe Communities

Hamilton is a safe and supportive City where people are active, healthy, and have a high quality of life.

Our People and Performance

Hamiltonians have a high level of trust and confidence in their City government.

APPENDICES AND SCHEDULES ATTACHED

Appendix “A” to Report BOH20004: Letter to the Minister of Health

Appendix “B” to Report BOH20004: Discussion Paper: Public Health
Modernization