



INFORMATION REPORT

TO:	Mayor and Members Board of Health
COMMITTEE DATE:	September 26, 2022
SUBJECT/REPORT NO:	Public Health Services Organizational Update September 2022 (BOH22011(a)) (City Wide)
WARD(S) AFFECTED:	City Wide
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SIGNATURE:	

COUNCIL DIRECTION

Not Applicable.

INFORMATION

The purpose of this report is to provide a brief Public Health Services organizational update, including updates regarding Ministry of Health program and performance reporting requirements and implementation of the PHS performance management and monitoring system.

An organizational update was provided to the Board of Health in June 2022 (Report BOH22011). Since that time, Public Health Services has continued to make progress on achieving our 2022 priorities of continued COVID-19 response, addressing the deficits of care, and staff wellness. The following paragraphs provide a brief update on each priority.

The Infectious Disease and Vaccine Programs continue to balance COVID-19 response, while also working to resume full service-levels and address the service backlogs and deficits of care in non-COVID areas. Both teams have completed extensive scenario-based planning and identified the required staffing complement for the remainder of 2022; all positions within the Vaccine Program have been filled, the

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Infectious Disease Program continues to recruit required key leadership and frontline positions. With increased case counts and outbreaks due to the 7th wave of COVID-19, as well as expanded eligibility for the COVID-19 vaccine (i.e., 4th dose/2nd booster and approval of vaccine for ages six months to five years old), workload related to COVID-19 response remains high. However, teams have made progress in addressing priority service backlogs and deficits of care, such as inspections of high-risk childcare facilities and personal services settings, routine immunizations for students (e.g., Hepatitis B, Human Papillomavirus (HPV), Meningococcal, etc.), and *Immunization of School Pupils Act* (ISPA) screenings. In addition, the teams have been integrating COVID-19 work into Infectious Disease and Vaccine Programs by actively merging teams and re-aligning staff within the current organizational structure, training and cross-training staff, and integrating business processes.

Public Health Services reported on the priority areas for recovery to the Board of Health in April 2022 (Report BOH22003(a)). An update and timeline for the initiation of recovery and catch-up in priority areas was provided to the Board of Health in June 2022 (Report BOH22011). Appendix “A” to Report BOH22011(a) provides a status update as of the beginning of August 2022. Many of the programs responsible for recovery and catch-up work are still in the recruitment, onboarding, and planning stages.

Public Health Services has also continued to prioritize staff wellness by allowing time for vacations and rest over the summer months. In addition, St. Joseph’s Healthcare Hamilton has been facilitating Coping & Resilience Support Sessions for staff. The purpose of these sessions is to create a safe and supportive space for staff to connect with their peers and validate their experiences to support healing and recovery.

As indicated in the June 2022 Organizational Update (Report BOH22011), Public Health Services is in the process of returning to a regular performance monitoring and management cycle for all programs. In terms of monitoring program data, staff have focused on identifying measures for recovery initiatives first. These measures will be used to monitor the achievement of targets and intended outcomes throughout 2022. Program specific measures have been identified for each program area and as of the end of June 2022, programs are monitoring results on a monthly basis.

In addition, the Ministry of Health is also resuming their program and performance reporting requirements. As a reminder, boards of health are required to report to the Ministry of Health on program activity and performance as per the Public Health Accountability Framework. The framework is included within Chapter 3: Strengthened Accountability of the Ontario Public Health Standards and Organizational Requirements. Program activity and performance is reported to the Ministry through submission of: 1) the Q4 Standards Activity Report; and, 2) the Annual Report and Attestation. The Q4 Standards Activity Report is normally due January 31 of the following funding year and

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consists of Ministry determined process-level measures to monitor program activities. Due to COVID-19, the Q4 program activity information was deferred in 2020 and 2021. The Annual Report and Attestation is normally due April 30 of the following funding year and consists of outcome-level measures to demonstrate impact and program achievements. Due to COVID-19, the Annual Report was deferred in 2019 and 2020. Boards of health are also required to monitor and report on financial performance on a quarterly basis through the Standards Activity Reports, addressing any variance throughout the year. Financial reporting continued throughout the COVID-19 pandemic.

The Q2 2022 Standards Activity Report (STAR) was submitted to the Ministry on July 29, 2022. The report included a financial forecast, which shows a pressure of \$7.9M due to costs related to COVID-19 Response and COVID-19 Vaccine Administration. The Province has communicated that public health units will be eligible for reimbursement of all extraordinary COVID-19 related costs over and above the Annual Service Plan & Budget subsidized expenditures in 2022, as in previous years. The Q2 STAR also included program data for 2020 and 2021. The Ministry has indicated that the program data for 2022 will be required as part of the Q4 2022 STAR. The Ministry has not yet communicated if a 2021 Annual Report will be required or what information will be required within the 2021 and/or 2022 Annual Reports.

Through the remainder of 2022, Public Health Services will continue to expand our performance and monitoring system in alignment with the annual planning, budget and accountability reporting cycles. Status updates regarding implementation will continue to be provided to Board of Health at future meetings.

APPENDICES AND SCHEDULES ATTACHED

Appendix "A" to Report BOH22011(a): Status Update: Timeline to Initiate Recovery & Catch-Up by Priority Area