



INFORMATION REPORT

TO: Mayor and Members Board of Health	WARD(S) AFFECTED: CITY WIDE
COMMITTEE DATE: February 4, 2013	
SUBJECT/REPORT NO: 2012 PHS Strategic Business Plan - Progress Report BOH11016(c) (City Wide)	
SUBMITTED BY: Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services Department	PREPARED BY: Debra Clarke (905) 546-2424, Ext. 5752
SIGNATURE: 	

Council Direction:

Not Applicable

Information:

The Public Health Services (PHS) 2012 Strategic Business Plan (SBP) was approved by the Board of Health in June 2012. The Business Plan aligned with the City's Vision, the 2012-2015 City Strategic Plan, priorities expressed and approved by the Board of Health and Council over the previous year, provincial direction and community need. This report provides an update on the progress toward the approved objectives, and describes the transition and connection between the 2012 PHS SBP and the 2013 Departmental Business Plan (DBP). Changes to the next planning cycle and relationship to the budget process and Service Delivery Review (SDR) are also outlined.

The PHS 2012 SBP was structured to reflect the three Corporate priorities:

- A Prosperous and Healthy Community
- Valued and Sustainable Services
- Leadership and Governance

The priorities were also incorporated into divisional work plans and program operational plans.

Appendix A provides details of each of the PHS approved objectives and priorities, status updates and additional comments to clarify implementation progress and projected activities to the end of 2012.

The following are some of the key accomplishments since the June 2012 report to the Board of Health. The progress made on all the objectives was in addition to the usual on-going daily work of providing programs and services to the community.

Highlights of the 2012 Status Report:

i) Foundation Building

Every organization must have a strong foundation from which to provide its programs and services. These include work planning and monitoring systems, training programs, budgeting systems, effective partnerships and many others. For Public Health Services, there are legislated requirements for this business infrastructure, as outlined in the Foundational Standard of the Ontario Public Health Standards, as well as the Organizational Standard for Public Health. Accreditation provides peer review of PHS business practices on an annual basis. The 2012 SBP activities under the ***Valued and Sustainable Services*** and ***Leadership and Governance*** priorities focused PHS on building and renewing this foundation.

One key priority area was to develop workforce competencies, or skills, abilities and knowledge. This is essential for staff to work effectively and address community needs. In 2012, two activities were undertaken. Firstly, the Management Development Program was developed and implemented based on the Management Needs Assessment undertaken in 2011. By the end of 2012, four sessions were delivered with six further sessions to be held in 2013. Secondly, a Core Competencies Needs Assessment was undertaken for all staff, and a Development Plan is being created.

A second key priority for the foundation was the building of processes and systems to monitor progress, demonstrate accountability and provide the feedback needed to ensure PHS is going in the right direction, identify where improvements can be made and provide information to support effective decision-making. In 2012, program indicators were developed to help measure compliance with the Ontario Public Health Standards and the Accountability Agreement with the Province. A data warehouse is also in the early stages of development, the purpose of which is to house data from all program areas which can be analyzed and reported on to better inform program, management and Board of Health decision making.

PHS has also been fully engaged with the Service Delivery Review (SDR) process which has provided an overview of the programs and services PHS provides, where each program sits in comparison with required service levels, and the costs of each program. This will be used by management to identify what we do well and where improvements may be made to ensure that resources are being optimally utilized.

Finally, every business needs an effective base from which to operate, and an important initiative for 2012 was finding offices for PHS which would optimize work across the department, and with key partners, in addition to supporting the development of the downtown core. Progress in 2012 included establishing the lease with McMaster to co-locate in the new health campus, and work towards the lease for the second downtown location for most of the remainder of PHS staff. The physical consolidation of PHS also means preparing for a new way of doing business that leverages technology and improves business processes, while supporting staff through the changes. To this end, work groups have been established which include staff from all levels, so that employees are engaged in the process to create the most functional workspace possible.

ii) *Contributing to a Prosperous and Healthy Community*

PHS has been engaged in several initiatives to improve the *built environment* and act on the *determinants of health*, leading to health equity.

In relation to *built environment area*, PHS staff have:

- Been involved in consultations with a number of committees and plans related to transportation;
- Made great strides towards healthy communities with implementation of the Smoke-free Outdoor Recreational Areas By-law;
- Implemented the Air Quality Health Index (AQHI); and
- Reported back on the Air Quality Task Force and moving forward on recommendations to further improve Hamilton's air quality.

In relation to the *determinants of health* PHS staff have:

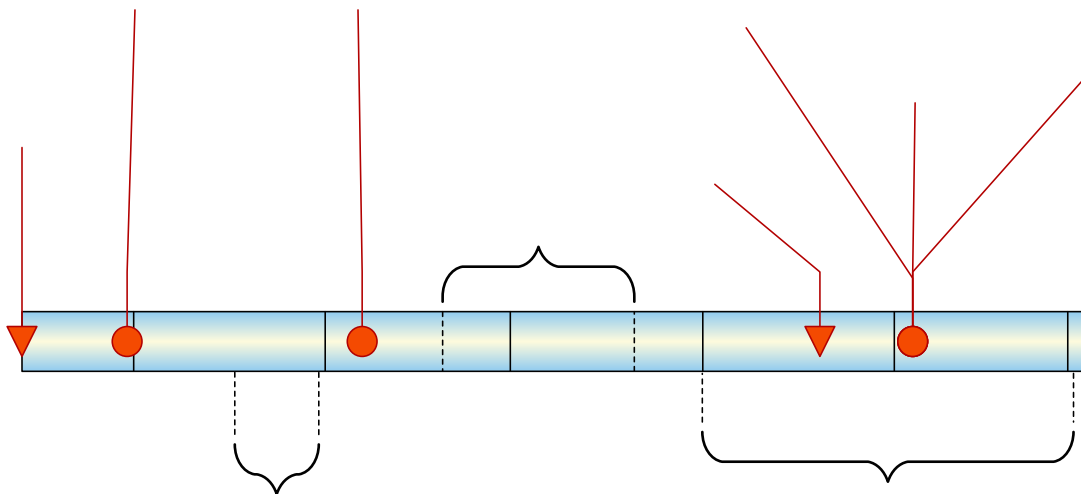
- Been working with community partners on the Mental Health and Addictions Strategy, looking at how to integrate this until the Local Health Integration Network strategic plan and provincial Health Links initiative;
- Developed a secondary school curriculum on the social determinants of health which will be piloted into 2013; and
- Been working closely with the Neighbourhood office to develop and respond to Neighbourhood Action Plans.

2013 - Building on the Foundation:

In order to have a more effective and efficient process of planning and resourcing work, the City has aligned its strategic and business planning with budget planning. This will ensure that goals are set first within the context of community need, and then resources planned keeping in mind the community's ability to pay. Diagram 1 below provides an overview of the relationship between the planning and the budget processes, as well as with the SDR.

The PHS 2013 DBP was based on the 2012-2015 City Strategic Plan, and also incorporated provincial directives and emerging community needs. The coming year will see the consolidation of the foundational elements built in 2012 into ongoing business practices, and further supporting the planning cycle by providing better access to key information necessary for effective decision-making. Further highlights will be provided in the presentation on the 2013 DBP.

Diagram 1: Relationship of the Planning Cycle (DBP) to Budget and SDR Cycle



Next Steps:

On-going monitoring of the 2013 DBP is essential to ensure that implementation is on track and to assess any need for adjustment. The Public Health Services Management Team will monitor the DBP quarterly and provide an annual report to the BOH in Q4 2013, consistent with other departments.

Appendices / Schedules

Appendix A – Public Health Services 2012 Strategic Business Plan Progress Report

PUBLIC HEALTH SERVICES 2012 STRATEGIC BUSINESS PLAN

Progress Report as of December 31, 2012

*Working to be the best place in Canada to raise a child,
promote innovation, engage citizens and provide diverse economic opportunities*

*Delivering quality public services
that contribute to a healthy, safe and prosperous community, in a sustainable manner*

*Living Our Values:
* Accountability * Cost Consciousness * Equity * Excellence * Honesty * Innovation * Leadership * Respect * Teamwork **

Status Legend	
★	Completed
✓	On Schedule
←	Behind Schedule

Objective Legend	
CSP	City Strategic Plan Project
BOH	Board of Health Project
PD	Provincial Directive and/or required under Ontario Public Health Standards or Ontario Public Health Organizational Standards
N	New Department Project

Corporate Priority #1 – A Prosperous & Healthy Community

WE enhance our image, economy and well-being by demonstrating that Hamilton is a great place to live, work, play and learn.

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
<p>CSP</p> <p>1.3 Promote economic opportunities with a focus on Hamilton's downtown core, all downtown areas and waterfronts.</p>	<p>Finalize plans for the creation of the Downtown McMaster Health Campus including the consolidation of Public Health Services</p>	<p>T. Bendo All Divisions CMO FCS PED - Real Estate PW - Facilities</p>	<p>Present accommodations options for second downtown office to GIC</p> <p>Finalize Functional Program for offices</p> <p>Determine best utilization of shared space</p> <p>Procure furniture and fixtures</p> <p>Finalize leases</p> <p>Undertake Administrative Review</p>	<p>★</p> <p>✓</p> <p>★</p> <p>✓</p> <p>✓</p> <p>←</p>	<p>Approval with conditions received at May 16th, 2012 GIC.</p> <p>Functional program finalized for McMaster Health Campus. Finalization of second downtown office will begin Jan 2013.</p> <p>Functional program for shared space completed 2012.</p> <p>Furniture and fixtures to be procured once physical plans for office sites finalized</p> <p>Lease finalized with McMaster. Lease negotiations with Yale Properties, approved at Jan GIC, awaiting council ratification.</p> <p>Administrative review RFP issued and cancelled due to cost of consultant. Next steps to be determined based on changes to other corporate processes already begun.</p>
<p>CSP</p> <p>1.4 Improve the City's transportation system to support multi-modal mobility and encourage inter-regional connections.</p>	<p>Develop an integrated, multi-modal, public transportation program, including implementation of rapid transit, conventional transit, active transportation (e.g. pedestrian, cycling) and the associated transportation demand management plan</p>	<p>E. Pezzetta HL HP</p>	<p>Provide consultation regarding health implications (risks, benefits, strategies) of transportation planning</p>	<p>✓</p>	<p>HP responding as related issues are identified. HL Chronic Disease Prevention and Injury Prevention involved with consultation with Active & Safe Routes to School Committee; Hamilton Cycling Committee; Transportation Master Plan; Pedestrian Master Plan; Public Works Lead, Completed Stepping IT Up pilot project; School Site Design and Planning report completed Sept 2012.</p> <p>Healthy Living commitment made to contribute "health impacts business case" and possible presentation to Public Works led GIC report scheduled for Feb 25/13.</p>

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
<p>CSP</p> <p>1.5 Support development and implementation of neighbourhood and City wide strategies that will improve the health and well-being of residents.</p>	<p>Complete the development of neighbourhood plans in selected priority neighbourhoods and complete a funding strategy to guide how the City of Hamilton will support the implementation of neighbourhood plans</p>	<p>N. Tran G. McArthur All Divisions</p>	<p>Establish links with corporate approaches</p>	<p>✓</p>	<p>Manager seconded to Neighbourhood Office. Quarterly meetings held between PHS and Neighbourhood Development Strategy</p>
			<p>Identify PHS linkages with corporate Neighbourhood Development Strategy, including membership on corporate workgroups by end of 2011</p>	<p>★</p>	<p>SDOH PHN participating in neighbourhood planning workgroups as of Q2, 2012. Plans under review to determine actionable items for 2013.</p>
	<p>Develop a mental health and addiction services coordination strategy between City of Hamilton and community partners to rationalize existing services and improve access to care (e.g. CREMS, social navigator)</p>	<p>G. McArthur E. Richardson CPS FH HL HP</p>	<p>Establish internal steering committee</p>	<p>★</p>	<p>Steering committee established with CSD, HES, PHS, Police Q1, 2012.</p>
			<p>Establish community leadership committee</p>	<p>★</p>	<p>Initial meetings held with police, hospitals, City staff, LHIN. Larger community steering committee has been formed under McMaster Family Medicine to look at Health Links initiative for Hamilton. PHS participating.</p>
			<p>Maintain linkages with pilots: Police Social Navigator Pilot, Hospital ER Pilot</p>	<p>✓</p>	<p>Social Navigator pilot began in June 2012. Linkages established with SJHC and Family Health Team navigators. Pilot completion extended to Q3 2013.</p>
			<p>Determine priorities for first year</p>	<p>✓</p>	<p>LHIN has established Central Health Links led by McMaster Family Medicine. PHS is a partner. Project manager will be hired by Q1 2013 to map existing programs and support community steering committee.</p>
<p>Develop 3 year workplan</p>	<p>✓</p>	<p>Will be developed subsequent to release of LHIN strategic plan by Q2 2013</p>			

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
	Develop and implement a maternal health strategy to decrease low birth weight by targeting smoking, nutrition and access to primary care	D. Barr-Elliott FH	<p>Work with a community coalition to develop and implement a maternal health strategy to decrease low birth weight by targeting smoking, nutrition and access to primary care</p> <p>Protect, promote and support breastfeeding by working towards Baby Friendly Community accreditation status</p> <p>Support the implementation of the Nurse-Family Partnership program at both local and provincial level</p> <p>Ensure that all relevant PHS programs and services are provided in manner that is congruent with the Hamilton Parent Charter of Rights</p> <p>Plan for and implement changes to Healthy Babies Healthy Children protocol</p>	<p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p>	<p>An inventory of related services in a specific neighbourhood was completed. Geographic location of possible interventions selected. Decision made to form a working group to examine opportunities for action. Recruitment underway.</p> <p>Corporate policy launched and staff training initiated. Collecting local data through Infant Feeding Study, developing BFI community coalition</p> <p>The Hamilton Nurse-Family Partnership team is providing consultation to BC sites. One additional Public Health Nurse will be funded by the Hamilton Community Foundation for three years.</p> <p>In 2012 the focus was on increasing awareness among PHS staff and the community. In 2013 the focus will be on supporting implementation of toolkit.</p> <p>New HBHC protocol released late Nov 2012. Initial implementation planning completed and plans made to collaborate with hospital partners in Jan 2013.</p>

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
			Develop with community partners an integrated seamless system of support for all postpartum women consistent with change in HBHC policy direction	✓	New HBHC protocol released late Nov 2012. Initial implementation planning completed and plans made to collaborate with hospital partners in Jan 2013.
	Improve access to children and family services in collaboration with community partners through the implementation of a single access point initiative	D. Barr-Elliott N. Tran FH	Work with Best Start to determine how best to provide a single point of access to services and information for children and families	✓	Contributing to Best Start deliberations
	Support HRPR action plan and develop a program to improve access to healthy food for those in greatest need	N. Tran E. Pezzetta HL	Develop pilot food voucher program for BOH consideration	✓	Options presented to May BOH. Decision made not to pursue further. BOH presented in Oct 2012 with alternative Good Food Box option targeting 500 out of the 6,000 eligible single OW recipients. Funding from CSD and HCF. PHS to provide evaluation.
			Participate in development of school nutrition programs	✓	Awaiting further direction from CMO.
	Develop a plan to prevent childhood obesity (with cost impacts)	D. Barr-Elliott E. Pezzetta FH HL	Complete situational assessments for activity friendly communities and healthy food system and define priority areas for action	✓	Situational assessments completed; priority areas definition underway;

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
			<p>Identify two topics with potential of policy development and complete position papers for endorsement by BOH</p>	✓	<p>Active Friendly Communities position paper replaced with "health impacts business case" at Feb 25/13 GIC re: City's transportation system. Healthy Food Systems position paper drafted and will be presented in 2013 in alignment with Food Strategy plan going forward.</p>
			<p>Review results of Peel Health Units literature review to determine effective interventions to prevent childhood obesity in children 0-6 years</p>	⊛	<p>Peel Health Unit literature review has been reviewed, completed in Q3, 2012</p>
			<p>Develop a plan based on effective interventions that focuses on preventing childhood obesity in children 0-6 years</p>	✓	<p>Overall plan under development: exploring expansion to 0-12 years. Raising the Bar and Nutristep have been implemented in child care centres for completion by end of 2012.</p>
			<p>Develop linkages to provincial childhood obesity strategy</p>	✓	<p>Provincial "Healthy Kids Panel" developed with provincial PH representation to reduce childhood obesity. Awaiting further actions from Healthy Kids Panel</p>
<p>Protect, promote and support breast feeding for healthy mothers and babies by achieving Baby Friendly Community Accreditation Status by 2014</p>		<p>D. Barr-Elliott</p>	<p>Corporate and PHS policy development Education of all PHS employees</p>	✓	<p>Corporate policy launched and staff training initiated. Collecting local data through Infant Feeding Study, developing BFI community coalition</p>

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
	Implement 10 year Housing and Homelessness Action Plan	R. Hall HP	Provide individualized supports to facilitate housing retention and ownership Support development of quality, safe and suitable housing options	✓ ✓	Further specific objectives to be developed in 2013 SBP, related to PHS involvement. Further specific objectives to be developed in 2013 SBP, related to PHS involvement.
BOH	Take action on the Social Determinants of Health	N. Tran G. McArthur All Divisions	Establish PHS SDOH Committee Each division apply an equity lens to one program 75% of PHS managers and 50% of front-line staff will attend SDOH workshop Identify one health advocacy initiative and begin preparation for BOH Complete development of resource for schools on SDOH	⊛ ✓ ⊛ ✓ ✓	Committee Established Q2 2011 Equity lens from PHO has been adopted as tool each division to use in at least one program area. Equity lens tool has been piloted by one program in each division as of Q3 2012. At least 75% of PHS managers and 50% of front-line staff attended SDOH workshop in 2011/12 Initiatives selected: Activity friendly communities and healthy food systems. Active Friendly Communities to be incorporated into Feb 2013 Transit GIC Report. Healthy Food Systems to be incorporated into Feb 2013 Food Strategy BOH Report. Draft teaching resource document on poverty developed collaboratively with school boards. Select high schools are currently piloting resource document (Q4 2012)

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
BOH	Reduce public health risks related to environmental health issues		Develop PHS-wide definition of priority populations	★	Completed in Q4 2011
		R. Hall H. Meghani HP	Develop and deliver Rural Water Quality Report to rural residents	★	Completed Q2 2012
		R. Hall M. Lawson	Implement public reporting of the Air Quality Health Index (AQHI)	★	Completed Q2 2012
		R. Hall HP PBI	That, staff bring forward the Terms of Reference, and Action Plan to the Board of Health, and a funding request be submitted to the Ministry of the Environment to assist with the costs of a pollution study;	★	At Dec 2012 BOH meeting, the BOH agreed to not have a study done. The BOH did agree to have Clean Air Hamilton to establish a working group to investigate and make recommendations to the City on actions that can be taken to reduce air pollution in Hamilton.
		R. Hall HP PBI	That staff be directed to establish an Air Quality Task Force, which is to include key stakeholders to determine whether pollution in neighbourhoods near Hamilton's industrial core is impacting human health, and report back to the Board of Health	★	At the Dec 2012 BOH meeting, the BOH recommended that a study not be done. The BOH did agree to have Clean Air Hamilton to establish a working group to investigate and make recommendations to the City on actions that can be taken to reduce air pollution in Hamilton.
		R. Hall HP	Investigate and inspect known and reported contaminated lands in the City that may present a health hazard to the public	Ongoing	Ongoing This is a mandatory program requirements as part of fulfilling OPHS requirements.
		R. Hall HP	Develop framework to better define and identify types of environmental health hazards	✓	Undertaking external scan of other jurisdictions - target for Q1 2013

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
		R. Hall HP	Develop and deliver an environmental lead awareness program that will attempt to reduce exposure to environmental lead for high-risk groups (children <7yrs, pregnant women and women who may become pregnant)	✓	Initial report to BOH Q3 2011. Campaign under development. Scheduled for June 2012 BOH meeting. Campaign is implemented and being monitored. Ongoing monitoring is required for effectiveness. Phase 2 is an outreach program to physicians in the community, expected to be completed by Q3 2013.
		R. Hall HP	Meet with environmental groups from across Hamilton to clarify mandate and hear their perspective on environmental priorities	★	Completed Q1 2012 – information has been incorporated into SDOH/ Neighbourhood Strategy
BOH	Reduce Exposure to Second Hand Smoke – Implementation of the Smoke-Free Outdoor Recreational Areas By-Law	N. Tran E. Pezzetta HL PBI	Develop and deliver a public education strategy Develop and implement strategically targeted visible, attractive promotions and signage for recreational and park areas	✓ ★	Public education continues throughout 2012, including paid newspapers, radio, Facebook advertisements, posters, Tobacco Hotline and City of Hamilton website. Receive complaints via Hotline and website. Completed. Q3 2012.
			Enforce By-law on a complaint basis using existing Tobacco Enforcement Officers applying a risk management model.	✓	Initial phase of enforcement beginning in May 2012 will primarily consist of education, and then move towards warnings and/or charges as appropriate.
			Develop and implement a City of Hamilton staff education and awareness program concerning compliance with the By-law.	✓	A variety of corporate communications channels and forums such as eNet, JHSCs, Bulletins, Orientation Manuals, and staff training have been developed and initiated across relevant departments/divisions.

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
BOH	Healthy Smiles Ontario (Low Income Dental Program Implementation)	G. McArthur CPS PBI	<p>Develop and implement an evaluation of implementation process and outcomes after the first year of enforcement activities.</p> <p>Increase capacity at 1447 Upper Ottawa clinic</p> <p>Fee for service budget to refer to private dental services</p> <p>Enhanced screening services for children 0-4 years and youth 14-17 years</p> <p>Mobile Preventive Services</p> <p>Promotion to increase uptake</p>	<p>✓</p> <p>★</p> <p>★</p> <p>★</p> <p>★</p> <p>★</p>	<p>Planned for 2013, after first year of enforcement activities to allow for assessment of a season of full enforcement. Can inform any adjustments necessary in preparation for 2015 Pan Am events. Preliminary plans for evaluation include measuring prevalence of exposure to smoking in parks, frequency of complaints and number of tickets issued, cigarette butt litter audits</p> <p>Clinic renovations completed Q2, 2012.</p> <p>Clients referred to private dentists Q1, 2012.</p> <p>Dental screening capacity has been increased using community locations including Ontario Early Years Centres, Arrell Youth Centre., Notre Dame House, Living Rock and City of Hamilton Libraries Q3, 2012.</p> <p>East End Public Health Clinic; Beasley Community Centre; Good Shepherd Centre Q2, 2012.</p> <p>Promotion activities included bus, mail, newspaper, radio, TV ads, and events with Women Health Educators to reach diverse cultural groups Q4, 2012.</p>
CSP 1.6 Enhancing Overall Sustainability	Development of a Community-based Climate Change Action Plan	R. Hall HP	Further specific objectives to be developed as part of 2013 SBP	✓	Report to go to BOH in Q 4 2012 with further specific objectives to be developed as part of 2013 DBP

Corporate Priority #2 – Valued & Sustainable Services

WE deliver high quality services that meet citizen needs and expectations, in a cost effective and responsible manner.

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
<p>CSP</p> <p>2.1 Implement processes to improve services, leverage technology and validate cost effectiveness and efficiencies across the Corporation.</p>	Complete a Service Delivery Review, establishing performance measures and identification of recommended service levels	T. Bendo J. Kohut All	Participate in City Service Delivery Review	✓	Service opportunities being reviewed by Council.
	Develop and implement a redeveloped website and associated management plan to provide more on-line transactions	T. Bendo J. Kohut All	Participate in redevelopment of City website	✓	RFP for technical solution closes Jan 22/13. Work group developing project plan.
	Implement the call handling review recommendations	T. Bendo All	Participate as required and as plan is developed	✓	Customer service training scheduled. Awaiting further steps from the Strategy Team.
	Develop an Information Services governance model and identify areas for improvement, consolidation and savings	T. Bendo J. Kohut All	Participate in development of new governance model and service rationalization	✓	Awaiting next steps from Strategy Team
	Review the feasibility regarding the implementation of an Employee Suggestion Program for the City of Hamilton.	R. Hall All	Participate on Employee Suggestion Committee	★	As per City Managers direction, this initiative is over.
Develop and implement a Financial Sustainability Plan	E. Richardson	Participate in development of financial sustainability plan	✓	Awaiting next steps from CMO/Corporate Services	

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
	Implement a Value for Money performance audit program	E. Richardson	Provide advice to internal audit on appropriate areas for VFM Audits	✓	Awaiting next steps from Internal Audit
			Participate in audits and develop Management Action Plans as required	✓	Awaiting next steps from Internal Audit
	Develop a Corporate template for the Departmental business plans, aligning to the 2012 – 2015 Strategic Plan and future budgets	E. Richardson	Participate in development of template, and implement once approved	⊛	Completed and implemented for the 2013 DBP.
BOH	Respond to critical demand work in priority (incl. outbreaks, infectious diseases, adverse water results, health hazards)	R. Hall J. Emili All	Develop policy and framework for critical response activities, including prioritized list of critical demand activities in each division with identified timelines for response	⊛	Framework developed and consultation occurred with councillors. Approved at BOH in May 2012.
			Develop monitoring and reporting system for critical demand driven activities in each division	✓	Work in progress. Completion expected by Q2 2013.
			Report annually to BOH on performance on response within identified timelines	✓	Developing Reporting framework. Completion expected by Q3 2012. To be incorporated into the 2013 BOH reports.
			Provide community with information and a Public Health response for critical health issues in a timely manner.	Ongoing	Ongoing

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
			Review and improve Food Safety Zone website accessibility	✓	Implementation of changes to the website will occur in 2013. Unable to complete in 2012 due to other priorities related to Green Card system. This will coincide with implementation of the red, yellow, green card system in 2013.
BOH, PD	Managing Program Performance	T. Bendo E. Richardson All	Develop performance indicators and targets for all programs	✓	Initial indicators developed as part of Accountability Agreement. Logic models (12 in 2012) and Surveillance Framework under development with programs.
			Develop system to monitor compliance	✓	Initial compliance report to BOH in Feb 2013.
			Review Organizational Standard and make recommendations for compliance	✓	Initial review of Organizational Standards complete and reviewed with BOH. Plans to address gaps incorporated into departmental plans. Continuing to address gaps.
			Work with province to develop Accountability Agreement for BOH consideration	⊛	Completed. Baseline measures and 2012 performance targets successfully negotiated Q2, 2012.
			Work with province on Developmental Indicators	✓	Awaiting further steps from province
BOH	Program Operational Plans	E. Richardson All	Complete operational plans for all programs.	Ongoing	Operational plans completed for 2011 and 2012 for all programs. 2013 Operational Plans to be developed following approval of 2013 DBP.

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
BOH	Financial Accountability - improve financial monitoring, reporting and performance	E. Richardson All	Achieve 100% compliance with corporate and provincial policies	Ongoing	Ongoing - Implemented new procurement procedures as per new policy. Awaiting next steps from HR re: roll out of major revisions to HR policies. Continuing to develop and utilize new tools for financial monitoring.
			Accurately forecast monthly position	✓	Completed Business Process Review on BERs. Implemented recommendations. Improved tools developed for forecasting. Moved forecasting to 6 times per year. Will incorporate analysis of historical trends into BER tool. Financial management training part of Management Development Program. Additional practical training to occur in May 2013
			Proactively manage budget based on forecasts	✓	Identified strategies to target systemic issues creating budget variances
BOH	E-Health Solutions Multi-year plan	T. Bendo E. Richardson All	Develop plan to implement electronic methods for client scheduling and registration, nursing documentation and clinic management	⊛	Plan presented to BOH October 2011
			Develop business case and capital budget requests for plan	⊛	Business case included in October BOH report. Capital request approved in 2012 budget. One time funding request submitted to the Province in 2012 budget submission. Funding request not received.
			Implement OSCAR: - Mental Health Q2 2012 - Sexual Health Q4 2012 - Family Health Q1 2013	✓	OSCAR was implemented for flu clinics and Mental Health in fall 2012. 2013 will focus on Sexual Health Clinics and Family Health Division.

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
BOH	Evidence-based practice and decision-making	<p>T. Bendo All</p> <p>J. Emili T. Bendo</p> <p>T. Bendo J. Emili</p> <p>T. Bendo J. Emili</p> <p>T. Bendo All</p>	<p>Develop data architecture for PHS which will support key performance indicator reporting and surveillance PHS wide</p> <p>Align research activities with the Strategic Plan/Strategic Business Plan</p> <p>Develop staff competencies to support evidence-based decision-making</p> <p>Review model for health status monitoring and surveillance activities</p> <p>Produce 5 new health status reports - Cancer incidence and mortality - Alcohol, gambling and drugs - Oral health - Emergency Preparedness - Food Safety</p>	<p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p>	<p>Consultant has provided recommendations for data architecture for PHS. 2013 capital request submitted to expand Information system to include all of Public Health.</p> <p>Consultations within PHS complete. Report to BOH Q4 2012. Key partners to be identified and MOUs developed Q2 2013</p> <p>Review roles of program staff and specialized staff, and develop staff competency development plan. Completion Q4 2013.</p> <p>Plan to be developed in Q1 2013 for surveillance and Q3 2013 for health status.</p> <p>4 Completed: - Healthy Eating, Healthy Weights & Physical Activity in Hamilton - Emergency Preparedness - Cancer incidence & Mortality - Alcohol, gambling & drugs 4 for Completion in Q1 2013: - Oral health - Child Health - Food safety - Healthy Eating Healthy Weights & Physical Activity in Hamilton: SES differences</p>

Objective	Strategic Action	PHS Lead & Divisions involved	Activities	Status	Comments
BOH	Continually improve programs and services	T. Bendo All	Undertake program evaluations/situational assessments within 7 programs: - Media Evaluation; - Non-Management Learning Needs; - Vector-Borne Disease Logic Model Development & Evaluation Framework; - Waterdown Sexual Health Clinic Service Evaluation; - VPD School Program Evaluation; - Prenatal Evaluation;	✓	<p>4 completed:</p> <ul style="list-style-type: none"> - Media Evaluation; - Non-management Learning Needs - Vaccine Preventable Diseases School Program Evaluation - Vector-Borne Disease Logic Model Development & Evaluation Framework <p>1 scheduled for completion Q1 2013:</p> <ul style="list-style-type: none"> - Waterdown Sexual Health Clinic Service Evaluation; <p>Withdrawn:</p> <ul style="list-style-type: none"> - Prenatal Evaluation
BOH	Monitoring and Evaluation	All	Document monitoring and evaluation activities in operational plans and ensure used to inform/change subsequent year's program planning.	Ongoing	Program monitoring & evaluation activities are being integrated into operational plans. Documentation of changes to subsequent year's program planning is incorporated into operational plans.
BOH	Rationalization of Schedule 20 of the Licensing By-Law subsequent to Ontario Retirement Homes Act	R. Hall HP	Review new Ontario Retirement Homes Act and its regulations, and make recommendations to Board of Health for modifications to Schedule 20 to reduce duplication while ensuring health and safety of residents of Schedule 20 facilities remain protected.	★	Analysis of draft regulations completed and recommendations submitted to Province. Report approved by council in 2012 with recommendations to amend Licensing Bylaw and monitor the financial impacts as part of 2013 budget process. Completed.

Corporate Priority #3 – Leadership & Governance

We work together to ensure we are a government that is respectful toward each other and that the community has confidence and trust in

Objective	Strategic Action	PHS Lead & Divisions	Activities	Status	Comments
<p>CSP</p> <p>3.1 Engage in a range of inter-governmental relations (IGR) work that will advance partnerships and projects that benefit the City of Hamilton.</p>	<p>Develop and maintain a list of priority and “shovel-ready” projects, across all Departments, in order to more efficiently present opportunities for collaboration with other levels of government</p>	<p>E. Richardson</p>	<p>Develop a list of PHS priority initiatives</p>	<p>Ongoing</p>	<p>Priority initiatives developed yearly as part of the planning process.</p>
<p>CSP</p> <p>3.2 Build organizational capacity to ensure the City has a skilled workforce that is capable and enabled to deliver its business objectives</p>	<p>Implement a workforce management strategy</p>	<p>E. Richardson</p>	<p>Develop profile of current workforce, including early retirements</p> <p>Forecast workforce supply and skill demands</p> <p>Participate in development of and implement a succession planning program for leadership and critical need positions</p> <p>Develop and implement a leadership and management development plan</p>	<p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p>	<p>Initial steps accomplished as part of succession planning for leadership and critical need positions (see below)</p> <p>Awaiting next steps from HR</p> <p>Contributed to development as member of SMT.</p> <p>Management development program developed based on needs assessment in coordination with HR, and implementation began Q3 2012 to run to Q4 2013.</p>

Objective	Strategic Action	PHS Lead & Divisions	Activities	Status	Comments
			Developing an attraction and retention strategy that fosters a diverse and inclusive workforce	✓	Awaiting next steps from HR
			Develop the role of the Nursing Practice Advisor	✓	Developing logic model and work plan for the Nursing Practice Advisor.
	Revise the existing performance management system and implement across organization	E. Richardson	Participate in HR process using information gained from PHS Core Competency Pilot	✓	Contributed to development of new corporate core competencies and PA tool. HR to pilot in 2013; Incorporated new competencies in Management Development Program.
BOH	Manage performance to improve workforce effectiveness	E. Richardson	Achieve 90% completion of performance appraisals	✓	Increased completion rate from 58% to 81% in 2011. Final 2012 numbers available Q1 2013.
	Develop core competencies of staff	T. Bendo E. Richardson	Determine staff competency development priorities	↔	Survey of staff professional development needs completed. Plans will be developed to address priority needs in 2013. Delayed due to vacancy of position. Position filled and work restarted.
CSP	Develop and implement an internal communication strategy	T. Hall	Participate in corporate process	✓	Awaiting next steps from CMO
3.3 Improve employee engagement	Development of new Corporate Employee Recognition Program	E. Richardson	Participate in corporate process	✓	Awaiting next steps from CMO
	Implement the Healthy Workplace Strategy	K. Leung L. Beaudoin	Participate in corporate process	✓	Awaiting Healthy Workplace Advisory Committee to present Strategy to SMT.

Objective	Strategic Action	PHS Lead & Divisions	Activities	Status	Comments
N	Develop an organizational effectiveness strategy and implementation plan to support the successful achievement of PHS strategic goals.	G. McArthur E. Richardson	Development of a change management process about organizational effectiveness and demonstrating the values in PHS Consolidation plans are aligned with organizational effectiveness and values	✓	Change Management process adopted. Application to organizational effectiveness initiatives ongoing
CSP 3.4 Enhance opportunities for administrative and operational efficiencies	Leverage technology to streamline workflow processes, enable better workforce management, and assist in management decision making Implement the Employee Attendance Management Action Plan to decrease absenteeism	E. Richardson E. Richardson	Track progress through Employee Engagement Survey beginning in 2013 and every 2-3 years ongoing. Implement Position Management Participate in Automated Workflow & Approvals & Employee & Manager Self-Service	↔	Change Management plan under development for PHS Consolidation Project Team. Plan completion by Q1 2013 Recommend employee engagement survey tools for PHS by Q2 2013. Delayed timing due to other priorities. Verification completed for second time in Q1 2012 Awaiting next steps from HR
BOH	Human Resources Policies and Procedures	E. Richardson G. McArthur All Corporate HR	Participate in implementation Complete review of all human resource policies and procedures and establish more formal mechanisms for regular review.	✓	Participating in HR's Management Action Plan to reduce sick absences by 10% by Q4 2014. Corporate HR workplan established for 2013. Related PHS Departmental policies and procedures are continuing to be updated based on approved Corporate policies and procedures

Objective	Strategic Action	PHS Lead & Divisions	Activities	Status	Comments
BOH	Position Descriptions	E. Richardson All Corporate HR	Collaborate with Human Resources to develop position descriptions for all staff.	←	PHS draft volunteer policies and procedures have been shared with Human Resources. HR policy is delayed and no new end date has been determined. PHS will complete Dept P&P by Q1 2013.
Previous CSP Foster positive relationships between staff and Board of Health	Ensure requests from individual BOH members are addressed in the most appropriate manner		Recommend approaches for the consideration of the Board of Health on how to appropriately address such requests	★	Director and AMOH job descriptions completed in 2010. Manager and non-union job descriptions completed as posted during 2011. New corporate competency model being piloted in 2013. Further work on JD's once corporate model confirmed. Completed 2012
BOH Support effectiveness of Board of Health members	Continuing education of BOH members	E. Richardson	OCCHA encouraged Board of Health members to Participate in continuing education opportunities to facilitate their knowledge skills, and understanding relative to their roles and responsibilities.	✓	Notifications for educational opportunities continue to be sent to BOH. First BOH Workshop delivered in Q3 2012 on Emergency Response.

Objective	Strategic Action	PHS Lead & Divisions	Activities	Status	Comments
BOH	Health & Safety	T. Bendo	<p>Conduct monthly workplace inspections in a manner consistent with agency policy & legislation.</p> <p>Provide WHMIS training to all new staff and assess training needs annually.</p>	<p>Ongoing</p> <p>✓</p>	<p>Workplace inspections are being conducted on a monthly basis.</p> <p>On-line WHMIS training developed and incorporated into Orientation to PHS Project. To date approximately 90% of staff have completed training. New employees complete training as part of their orientation.</p>