

**Report to
Rapport au:**

**Ottawa Board of Health
Conseil de santé d'Ottawa
18 September 2023 / 18 septembre 2023**

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**Submitted by
Soumis par:**

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Ward: CITY WIDE / À L'ÉCHELLE DE LA VILLE File Number: ACS2023-OPH-PCS-0007

SUBJECT: 2022 Annual Report and Attestation to the Ministry of Health

OBJET: Rapport annuel 2022 et attestation au ministère de la Santé

REPORT RECOMMENDATION

That the Board of Health for the City of Ottawa Health Unit receive this report for information.

RECOMMANDATION DU RAPPORT

Que le Conseil de santé de la circonscription sanitaire de la ville d'Ottawa prenne connaissance de ce rapport à titre d'information.

BACKGROUND

The Ministry of Health requires all public health units to submit an *Annual Report and Attestation*. This is an annual reporting requirement, which provides year-end financial and program-related summaries.

The Ontario Public Health Standards ([OPHS](#)) establish requirements for public health programs and services, outline the expectations for boards of health, describing how programs are to be implemented, and define the responsibilities of boards of health in an integrated health system.

The Annual Report and Attestation reporting requirement aligns with the OPHS *Organizational Requirements* - specifically the expectations for the effective governance of boards of health and management of public health units through the following functions: monitoring and reporting, continuous quality improvement, financial management and compliance with Ministry expectations.

The 2022 Annual Report and Attestation is focused on year-end financial and programmatic details for 2022, as described below.

- **Narrative Base** – describes key activities and program achievements for specific Foundational and Program Standards.
- **Narrative One-time** – describes activities and outcomes of approved one-time projects/initiatives funded by the Ministry for the periods of January 1, 2022 to December 31, 2022 and January 1, 2023 to March 31, 2023.
- **COVID-19 Actuals** – reports on actual costs for the COVID-19 General Program and COVID-19 Vaccine Program
- **Base funding** – reports on actual costs per program under the Ontario Public Health Standards (OPHS)
- **One-time funding** – reports on actual costs per approved one-time funding projects/initiatives
- **Variance explanation** – provides explanations for variances over/under 3% for base funding programs
- **Summary by funding source** – reports on COVID-19 costs managed within mandatory programs
- **Program Outcome Indicators** – reports on provincially defined and locally developed indicators to inform Ministry understanding of how programs that may vary across public health units are monitored and measured for program success in achieving outcomes.
- **Attestation** – attests to specific requirements under the accountability domains of the OPHS and other programmatic requirements.
- **Certification** – certifies the information provided in the Annual Report is accurate

and complete, conforms with categories specified as eligible, that copies of all invoices/back-up documentation are available for review at the board of health and the signed/scanned reports submitted are identical.

OPH submitted the *2022 Annual Report and Attestation* to the Ministry of Health on August 31, 2023, signed by Dr. Etches as Medical Officer of Health and by Councillor Kitts as Board Chair.

DISCUSSION

In 2022, OPH delivered programs and services in accordance with the Ontario Public Health Standards. However, due to the COVID-19 pandemic response and the alignment with OPH's Continuity of Operations Plan, some programs and services were paused or reduced, affecting OPH's ability to achieve 100% compliance in all areas. These continued disruptions were experienced by public health units across Ontario and supported by the provincial Ministry of Health.

While many OPH resources were re-allocated to enable the response to the COVID-19 pandemic, critical response capacity was maintained for areas such as non-COVID-19 infectious diseases, food and water safety complaints, some components of Healthy Babies Healthy Children, among others. The programs and services that were offered provided supports identified by the community in areas most in need of these services. Innovative means were used to connect with communities in a way that streamlined and targeted services, making maximum use of OPH's human and financial resources.

Resumption of services continued in 2022, with more comprehensive school health programming, more work related to chronic disease and injury prevention, and more inspections of a variety of premises with Public Health Inspector capacity becoming more available as COVID-19 and other institutional outbreaks decreased.

In 2022, OPH's key achievements required contributions from across the department, for example:

- OPH collaborated with partners to expand its Neighbourhood Health and Wellness Hubs, which were established in neighbourhoods that are under-resourced during peak pandemic response to target OPH's COVID-19 immunization efforts at residents and communities facing the greatest barriers to access. These hubs were expanded in 2022 to become a one-stop shop of public health and social services that included dental screenings, Parenting in Ottawa drop-ins, mental health referrals as well as employment and social service supports.

- Equally vital to OPH's ongoing COVID-19 response in 2022 were partnerships with hospitals, primary care providers, Indigenous health partners, community health centres, community resource centres, clinic hosts, community and multicultural groups and pharmacies. Continued collaboration with these partners will be critical in reducing the health inequities highlighted by COVID-19 and improving health outcomes, particularly of Arab, African, Caribbean and Black (ACB) and Indigenous populations.
- Lessons learned from the pandemic were applied in re-orienting OPH programs, services and approaches with the goals of increasing practical actions to promote health equity and measure outcomes, increasing capacity to respond to greater infectious disease and immunization pressures, building on partnerships with health system partners and other organizations for coordinated and connected care, and prioritizing work to ensure sustainable workloads. Further, the improved collection of client socio-demographic data was a significant quality improvement initiative from 2020 through to 2022.
- The increased demand and need continues for mental health, addictions and substance use health programs, resources, supports and services. In collaboration with many partners, OPH has and will continue to work to address ongoing and emerging issues. Examples of OPH's work to foster resilient communities included: launch and dissemination of the Working Towards Wellness: Workplace Health and Wellness Guide to support workplaces; delivering capacity building training to Faith Leaders that builds their skills, knowledge, and comfort level in addressing mental health concerns, including crisis support and suicide interventions; and advancing mental health promotion through training to newcomers and racialized communities.

Examples of programs without 100% compliance, given the ongoing need for nurses and inspectors to respond to the COVID-19 Omicron variant in 2022, include:

- Implementation of public health interventions that address risk and protective factors to reduce the burden of illness from chronic diseases and preventable injuries.
- Carrying out routine inspections of all high and moderate risk fixed food premises, small drinking water systems, and recreational water facilities.

Nevertheless, OPH made good progress in each of these areas in 2022 and expects ongoing resumption of services in 2023-2024 in alignment with OPH recovery programming.

RURAL IMPLICATIONS

There are no rural implications associated with this report.

CONSULTATION

This report is administrative in nature and therefore no public consultation is required.

LEGAL IMPLICATIONS

There are no legal impediments to receiving the information contained in this report.

RISK MANAGEMENT IMPLICATIONS

As stated in this report, compliance was achieved for many programs and services, although some were paused due to pressures on the organization as a result of the COVID-19 Pandemic Response and the organizational staffing transitions during this time. As the pandemic response requirements reduce, OPH has and will continue to appropriately resume its programs and services.

FINANCIAL IMPLICATIONS

There are no direct financial implications associated with this report.

ACCESSIBILITY IMPACTS

There are no accessibility impacts associated with this report.

DISPOSITION

This report is for information. OPH will continue to monitor Ministry accountability, planning and reporting requirements. All reports will be submitted as per directions provided by the Ministry of Health and reporting to the Board of Health will be aligned with Ministry requirements and timelines.