



# **Equity, Prevention, Impact:** Ottawa Public Health's 2023-2027 Strategic Plan

2024 Quarter 2 and Quarter 3 Update



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# **Table of Contents**

Preamble	3
Goal 1: Equity-Driven	4
Summary of Status, Highlights, and Challenges	4
Goal 2: Create Conditions to Live Well and Thrive	6
Summary of Status, Highlights, and Challenges	6
Goal 3: Promote Well-being and Reduce Harms	10
Summary of Status, Highlights, and Challenges	11
Goal 4: Focus on Prevention	16
Summary of Status, Highlights, and Challenges	16
Goal 5: Enrich our Workplaces	18
Summary of Status, Highlights, and Challenges	18

# Preamble

### Equity, Prevention, Impact: Ottawa Public Health's (OPH) 2023-2027 Strategic Plan

was adopted by the Board of Health in June of 2023. The Strategic Plan includes five strategic goals to drive progress in targeted areas for change. This strategic update is based on the performance measures identified in the December 2023 action plan and also considers progress on key deliverables, available resources, and dependencies.



As of the end of quarter three of 2024, OPH progressed towards its planned target for goal four, and was slightly under target for goals one, two, three and five. The progress statuses are defined as:

- Green: On track and progressing as planned.
- Yellow: Minor challenges but is still manageable and there are plans in place to address the challenges.
- Red: Major challenges or risks that threaten success.



# **Goal 1: Equity-Driven**

In working to improve population health outcomes and opportunities, we collaborate to eliminate health inequities, systemic racism, discrimination, and oppression.

Summary of Status, Highlights, and Challenges

Status			
Q4 2023 – Q1 2024	Q2 2024 – Q3 2024	Q4 2024 – Q1 2025	Q2 2025 – Q3 2025

### Highlights

### Sociodemographic Data

- Continued to support applicable teams<sup>1</sup> to advance the collection, analysis, and use of sociodemographic data (SDD). This includes launching SDD collection in new program areas and engaging teams already collecting to explore opportunities to enhance data quality for usability and completeness. As of Q3 2024, 68% of applicable teams are maintaining or advancing SDD implementation.
- Planned a Data to Action Community Dialogue event in collaboration with the Ottawa Local Immigration Partnership (OLIP) to present findings and discuss the dissemination and use of analyzed SDD from clients in the Healthy Babies Healthy Children (HBHC) program. The event occurred in October of 2024.
- Continued to engage City of Ottawa (the City) and community partners, including the Ottawa Aboriginal Coalition, on data governance.

# Addressing Health Equity

 Completed a rapid health equity situational assessment survey with all applicable OPH teams that provide direct programs and/or services to the public. The survey aimed to assess existing organizational capacity to improve health equity through all programs and services and identify department-wide actions that are required to increase capacity effectively and efficiently. Preliminary findings demonstrate success and capacity in the areas of partnerships and community engagement and modifying and orienting services. While progress is being made, further collaboration and action is



<sup>&</sup>lt;sup>1</sup> Applicable teams include those were collecting client sociodemographic data (SDD) has been deemed appropriate and necessary to understand and respond to inequities; and, where readiness and adequate resources are in place to commence or advance this work (collection, analysis, and use) in 2024.

needed to develop the conditions to support sustained and systematic department-wide progress to impact and improve health equity. Next steps include completing the analysis of the rapid health equity situational assessment survey findings. These findings will be used to identify and prioritize actions and guide work in 2025.

#### **Diverse Partnerships and Engagement**

 Launched the OPH Engagement Guide to Leadership Team members following an internal and external review process. Members of the OPH Leadership Team, Public Health Medicine Unit, and the Indigenous Specialists were engaged to provide feedback on the guide. The guide was also reviewed by the following partners: Community Development Framework, Sandy Hill Community Health Centre, Britannia Woods Community House, and the AIDS Committee of Ottawa. A more comprehensive launch of the Engagement Guide is planned for 2025 that will aim to include Engagement Cafés with facilitated discussions to build momentum and seek cross-departmental opportunities to coordinate engagement.

#### Challenges

#### **Sociodemographic Data Collection**

The collection, analysis, and use of SDD is complex. OPH is balancing the desire for universal data collection with the need for high-quality, complete data. To achieve this, OPH is applying a team-based, multi-disciplinary approach. Because this approach is inherently more resource intensive, OPH has established agreement on applicable teams where collection, analysis, and use of SDD can be advanced at an appropriate pace. Requirements, such as dedicated resources within programs, need to be further explored to transition SDD collection, analysis, and use into programs routine operations.

#### **Diverse Partnerships and Engagement**

Lessons learned through the pilot phase of the engagement plan show the limited scalability of an exhaustive and evergreen partner list. OPH is adjusting the approach to leverage a suite of tools and strategies including operational planning, internal conversations, the OPH Engagement Guide, and partner perception polling. Most recently, revisions to operational planning were implemented to collect more robust information on OPH teams' engagement with partners.



# **Goal 2: Create Conditions to Live Well and Thrive**

Influence changes in the built, natural, and social environments that promote health and well-being, and address the impacts of climate change. Essential to this is the interconnection between health and nature.

Summary of Status, Highlights, and Challenges

# Health and Housing



 Recent efforts focus on strengthening partnerships to advance integration of health and housing system planning. These initiatives included hosting the Future of Health and Well-being series with Algonquin College, informing local partners' applications for the proposed provincial Homelessness, Addictions, Recovery and Treatment Hub (HART Hubs) applications, and supporting transition plans for impacts related to the anticipated closure of the Somerset West Community Health Centre (SWCHC) Consumption Treatment Site (CTS).

#### **Geospatial Storytelling**

 Continued the evolution of the draft Geospatial Health Framework and piloting new approaches using geospatial data to inform healthy public policy and public health decision-making. This includes leveraging Environics data and mapping to inform emergency preparedness cooling strategies and exploring opportunities to inform City planning using health and well-being spatial data sets.

# **Emergency Management**

In April, the BOH received the <u>Emergency Management at Ottawa Public Health</u> <u>Annual Update</u> report. The report informed the BOH of OPH's emergency management activities in 2023 and 2024 (up to April). The information below provides information on key emergency preparedness initiatives in Q2 and Q3 of 2024.

- Participated in provincial emergency management initiatives:
  - Attended engagement sessions to inform opportunities for Emergency Management Ontario and the province on the modernization of *Emergency Management and Civil Protection Act.*
  - Led the OPH Ministry of Health Respiratory Pathogen Season Debrief and submitted a final report to the Ministry of Health.
  - Participated in the provincial Heatwave 2024 Active Observer Program exercise, aimed at evaluating and improving the provincial response capabilities to extreme heat emergencies.
  - Participated in the Ontario Pre-Season Heat Season Workshop, aiming to provide an overview of activities for the 2024 Ontario Heat Season and present the Wildfire Smoke and Air Quality Reference Document.
- Conducted local internal and external respiratory preparedness table-top exercises to validate roles, identify planning gaps, and ensure clear coordination and communication for respiratory season 2024-2025 readiness.



- Facilitated an extreme heat table-top exercise to test and strengthen the response, collaboration, and communication within the Extreme Heat, Cold and Smog Planning Committee.
- Engaged with OPH programs and community partners to implement Social Capital in the Capital interventions, which focus on building and sustaining relationships and networks between community agencies, families, friends, and neighbors.
- Continued engagement within the Parkwood Hills community through outreach, education and participation in stakeholder committee. Parkwood Hills is a fifth quintile neighbourhood with a large volume of residents living in high rise buildings.
- Delivered the emergency preparedness for older adults in priority high-rises pilot project focusing on improving preparedness and resilience among those living alone and people with disabilities, particularly for extreme heat events and power outages. Geospatial mapping identified the top five priority buildings. Outreach interviews were well received by building managers and resources were provided to share with residents, with an invitation for OPH to return next spring.
- Delivered public education to support those most affected by local emergencies and events.
  - Collaborated with the Office of Emergency Management (OEM) to create communication products for dissemination among groups, such as Ottawa Community Housing and the Council on Aging, aimed at educating residents about emergency preparedness.
  - Delivered emergency preparedness presentations for approximately 285 residents, specifically targeting older adults, at Ottawa Community Housing buildings. The presentations were a collaboration between OPH's Emergency Management Team and Community Engagement Team and used a train-the-trainer model to build capacity.
  - Developed impactful content emphasizing the importance of community connections in emergencies during Emergency Preparedness Week.
  - Prepared for and responded to the solar eclipse in April, which included coordination with OEM, the Ministry of Health Emergency Operations Centre, childcare services, school boards, and the Ottawa Public Library. OPH also disseminated public health messaging on the health risks and harm reduction practices for viewing the solar eclipse.
  - Launched content on <u>ParentingInOttawa.ca</u> to help families with emergency preparedness. The webpage includes information on



preparing an emergency kit and developing an emergency plan among other content.

- Initiated the development of program-level Continuity of Operation Plans (CoOPs) for all OPH programs to support preparedness for prolonged emergencies and monitor for and mitigate impacts of disruptions to priority populations. This work is part of OPH's response to the recommendations from Dr. Gully in the <u>How Ottawa Public Health (OPH) Responded to the COVID-19</u> <u>Pandemic: A Review</u> report. Sixty three percent of OPH programs have finalized a program-level CoOP.
- Presented the <u>Sharing Experiences</u>, <u>Building Resilience for the Future: A</u> <u>Learning Exchange on COVID-19 After Action Reviews</u> webinar through the Public Health Ontario. The presentation provided a summary of Dr. Gully's observations of the response. As of Q3, 50% of the recommendations in the report have been addressed.
- Finalized, for submission, a research publication on the inclusion of an Equity Officer role within the Incident Command Systems to the Canadian Journal of Emergency Management, contributing to the body of knowledge in emergency management.

### **Climate Change Mitigation and Adaptation**

- Completed the Climate Change and Health Vulnerability Assessments (CCHVAs) on extreme heat, vector-borne diseases, wildfire smoke, food- and waterborne illnesses, and ultraviolet radiation due to stratospheric ozone depletion. In November 2024, the Board of Health received the <u>Climate</u> <u>Change and Health Vulnerability Assessment</u> report detailing the findings and key actions identified from the CCHVAs for OPH, the City, and partners to consider.
- Continued work with the City's Strategic Initiatives Climate Change and Resiliency Service Area on community engagement messaging related to climate change to at-risk populations with support from the Ontario Resource Centre for Climate Adaptation (ORCCA). A prioritization matrix was completed and will be tested with an internal working group to validate findings.
- Assisted the cost-benefit analysis of climate change action work by providing health impact costing. The project is being led by the City's Strategic Initiatives Climate Change and Resiliency Service Area and supported by ORCCA.
- Submitted a funding application to Health Canada's HealthAdapt for the three projects listed below. Successful applicants will be notified soon.
  - Project 1: equity-focused communication and engagement



- Project 2: fire-hydrant water fountain with misting feature in equitybased locations
- Project 3: cooling Options Analysis for Social Housing

#### Challenges

#### Provincial Planning Statement (PPS), 2024

The PPS came into effect October 20, 2024. Key changes include the removal of all policy statements referencing healthy communities. Despite strong City of Ottawa Official Plan policies that support healthy communities, the revisions to the PPS significantly reduce the legislative levers to advance health and well-being through land use and transportation planning.

#### **Public Health Capacity**

Resource constraints are affecting initiatives within this goal. OPH is missing opportunities to provide comments on development applications during the planning review process. The ability to provide comments on applications is the downstream translation of policy, where OPH can leverage the Official Plan and Master Plan policies. During this reporting period, OPH was unable to comment on eight development applications due to a lack of capacity. The prioritization of the CCHVAs is a contributing factor. OPH is seeking funding through the HealthAdapt funding application to support the implementation of the CCHVA results thereby allowing greater focus on upstream policy work.

### Meaningful Engagement and Relationships

Collaboration across multiple levels of government is essential to advancing healthy public policies. Overlaying the complexities of both the housing and health systems to better integrate health and housing and finding leverage points will take time and effort. Establishing new relationships is a crucial step in this process. Recently, OPH applied for the Public Health Association of Canada's Intersectoral Action Fund; however, funding was not granted.

# **Goal 3: Promote Well-being and Reduce Harms**

Advance innovative and comprehensive approaches to promote mental health and substance use health while reducing stigma; and decreasing harms associated with substance use, addiction, and suicides across the lifespan.



### Summary of Status, Highlights, and Challenges

Status			
2023 – Q1 2024 <sup>2</sup>	Q2 2024 – Q3 2024	Q4 2024 – Q1 2025	Q2 2025 – Q3 2025
Highlights			
Reducing Stigma			
The internal ve and learners. I requires all sta building capace language, and completed the Leveraged the initiative in par Medicine and students about services across where to access resources and 84% after the project award In Q2 and Q3, training reporti	ersion of the training Pinecrest Queensway aff complete the exter- ity and in increased I availability of local s online stigma trainin second annual Subs thership with the City CAPSA to increase a t stigma, substance u is the spectrum of su services in Ottawa in placement. The projection from the University of OPH exceed it's targoing they have the neo- to use the information	stance Use Health and y, the University of Otta wareness among first y use health, person-first bstance use. The stude about stigma and subst increased from 27% bef ect received the top City f Ottawa. gets, with 90% of partic cessary skills to apply p	II OPH employees entre (PQCHC) now ng. This results in a and the impacts of over 215 people Stigma CityStudio wa School of year medical language and local ents' awareness of ance use health ore the placement to yStudio Ottawa
		tions and Substance U	
		knowledge mobilizatio	
	p won the City Manag	ger's Award of Distinction	on for Creativity and
•	esident and Commu		

All other Strategic Goals reflect activities and progress from Quarter 4 2023 and Quarter 1 2024.



- Delivered a workshop to representatives from different sectors, including health, schools, and social services, on the application of the dashboard for system, policy, and program planning.
- Developed a data backgrounder to influence the Royal Health Care Centre planning, which was also shared with the Ontario Health Centre of Excellence for Mental Health and Addictions.
- Presented to the Community Safety and Well-Being Plan Advisory Committee and the Project Step cabinet on the Overdose Response Strategy with a focus on data from the dashboard.
- Responded to multiple opportunities to advance healthy public policy by submitting recommendations related to tobacco and vapour products regulations, cannabis regulations, and alcohol policy. OPH also worked with school boards and the School Board Liaison Nurses on adapting and improving the *Smoke-Free Ontario Act* process with the implementation of the Policy/Program Memorandum 128.

### **Equity-Driven Interventions for Communities**

- Supported health and social services partners that work with equity-denied groups (EDGs) following the devastation of Hurricane Beryl. Partners were provided resources to support clients and their children to cope with stressful events.
- Supported the Bangladesh community in Ottawa following political killings. OPH shared information with Bangladesh immigrant residents and international Bangladeshi students living in Ottawa on mental health resources and referred them to community organizations and to the Bangladesh High Commission for assistance.
- Provided knowledge exchange to a delegation from the Health Promotion Board of Singapore on OPH's Mental Health Strategy, including digital initiatives such as the MHASUH Community Dashboard.
- Coordinated the Mental Health Week South Asian Community Conversation, which focused on reducing stigma around mental health.
- Collaborated with the Guiding Council on the launch of the new ANCHOR pilot program being offered in Centretown as an alternative response for mental health and substance use health crisis. OPH provided additional support by connecting the Guiding Council with representatives from the Somali community to explore options for alternative response that meets the specific needs of this community.

#### Gambling



 Launched a pilot project in collaboration with YMCA's Youth Gambling Awareness Program and school boards to provide workshops in schools during the 2024/2025 school year to grades 7 and 8 students on the topics of gaming, gambling, and media literacy to increase awareness of the harms related to online gaming and problem gambling among school aged children.

### **Suicide Prevention and Response**

- Completed the Youth Connections Ottawa pilot project evaluation. Results show that the program is increasing connections and use of resources at the centres where the Youth Connections Ottawa programs were hosted, which included a faith-based youth group within a racialized community, a group of newcomer youth, and an African, Caribbean, Black after-school group.
- Trained 763 intermediaries in capacity building sessions and knowledge exchange events that foster resilient communities with a focus on EDGs. This includes training and information on party safer, social connections, supporting and promoting positive mental health in diverse populations, coping with stress, and resources. This number includes the 217 community members reached through Our Community Our House events. One hundred percent of intermediaries intend to apply what they learned in the training.
- Increased community capacity to make Ottawa a suicide safer community for EDGs by facilitating ASIST training for Ottawa Community Immigrant Services Organization's multicultural liaison officers.
- Provided safeTALK training to 119 intermediaries who support vulnerable communities and individuals. Ninety-six percent of the safeTALK participants now feel prepared to talk openly and directly to a person about that person's thoughts of suicide.
- Advanced research for the Youth Nominated Support Team, a suicide prevention intervention for youth at risk of suicide.
- Provided knowledge exchange to a delegation from Korea on collaborative suicide prevention work. This was done with OPH, PLEO, and the Canadian Mental Health Association by presenting on the work and impact of the Youth Nominated Support Team and the Post Suicide Support team.

### **Overdose Prevention and Response**

- Continued the enhanced surveillance efforts in response to the service disruption of two partner CTS.
- Increased collaboration and planning among the four CTS to collectively plan for the closure of the SWCHC CTS and the new provincial requirements for the remaining sites:



- Supported the applications of two Ottawa area HART hubs, which included providing local data.
- Convened the Overdose Prevention and Response Task Force to ensure knowledge mobilization on current issues, including local overdose data, the announced closure of SWCHC CTS and the HART hub application process.
- Launched the <u>Stop Overdose Ottawa Alert System</u>, that had over 300 people sign up. The system supports increased community awareness of unregulated drug supply trends and overdose risks. In June, an alert was issued on nitazenes (nitazene opioids) found in counterfeit hydromorphone tablets in Ottawa.
- Launched drug checking services at OPH's Supervised Consumption Services. OPH provided knowledge exchange to other health units on the use of drug testing strips.
- Advanced Ontario Naloxone Program (ONP) partnerships with the Children's Hospital of Eastern Ontario (CHEO). Every emergency room department in Ottawa is now an ONP partner. The Ontario Naloxone Program (ONP) provides eligible organizations with naloxone kits to distribute to clients at risk of opioid overdose as well to their family and/or friends.
- Advanced the reach of OPH's course Overdose Prevention and Response. PQCHC now requires all staff complete the training. This results in building staff capacity and increased knowledge about stigma, types of drugs, drug intoxication and overdose prevention, naloxone, how to respond to an opioid overdose, and availability of local supports.
- Provided substance use health training, party safer messaging, and resources ahead of and during the festival season, reaching approximately 1,400 people. This includes in-person training to 22 security workers and 400 Carleton University student volunteers who were required to complete Party Safer training ahead of the school year. Over 1,200 naloxone kits were distributed.
- Increased health care provider knowledge of substance use health and harm reduction supports and services available in Ottawa by delivering a virtual sessions to over 300 public health professionals at The Ontario Public Health Convention and 65 medical doctors at the 73rd Annual Physician's Refresher Course hosted by the University of Ottawa.
- Launched the <u>Mental Health, Addictions and Substance Use Health Business</u> <u>Toolkit</u>. The toolkit includes resources to support local business, such as the <u>Who to Call poster</u>. Developed in collaboration with the Ottawa Police Service, and members of the business community, the Who to Call poster is a quick



reference to guide employees and business owners on who to call and where to go for more support with mental health, addictions and substance use health challenges they might encounter.

- Collaborated with The Ottawa Hospital and other partners on the Substance Use Disorder Integrated Pathways application submission to Ontario Health.
- Collaborated with Ottawa Police Service, CSSD and other City departments on the launch of the new CORE Frontline Task Force. The task force seeks to coordinate frontline efforts across service areas and collaborate to address emergency and emerging needs of residents in the Byward Market, Lowertown, and Sandy Hill neighbourhoods. The task force shares information, updates, and trends to plan and coordinate responses to resolve and respond to issues.

#### Healthy Growth and Development

- Completed the Steps to Wellness Cognitive Behavioral Therapy nine-week virtual sessions. A total of 27 participants registered, and Healthy Growth and Development is currently running three more groups.
- Received the first HBHC referral through AccessMHA after establishing a direct referral pathway for clients. AccessMHA is a regionally coordinated service that helps people in eastern Ontario find services for mental health and substance use health issues.
- Attached 18 HBHC clients in the Lowertown neighbourhood to primary care (Bruyère Family Health Team) as part of the primary care attachment initiative that is support by OPH, the Ottawa Health Team-Équip Santé Ottawa (OHT-ESO), and community partners.

### Challenges

Partners and the community continue to engage OPH for support regarding mental health, addictions and substance use health policies and programs. Specifically, OPH is relied on for support with system navigation, surveillance, and local data to inform health system planning and programs. OPH is recognized as a trusted and compassionate health partner, supporting communities in need and during crises. Despite the high demand for mental health and substance use health services and resources, partners' capacity for higher levels of engagement is limited. Competing priorities to address other basic human needs (food, housing, safety) is a contributing factor. OPH and partners are also experiencing increased pressures due to the provincial announcement on the closure of CTS sites and opening of HART Hubs.



OPH is convening partners to prepare for and respond to the announced closure of the SWCHC Consumption and Treatment Service.

# **Goal 4: Focus on Prevention**

Gather, analyze, and share evidence on local health needs and inequities with the healthcare system to strengthen clinical prevention. We will engage with healthcare system partners to help inform decision-making.

Summary of Status, Highlights, and Challenges

Status				
Q4 2023 – Q1	2024	Q2 2024 – Q3 2024	Q4 2024 – Q1 2025	Q2 2025 – Q3 2025
Highlights				
Chronic Disea				
Indicato collabor CDP pe exempla • The On Prevent disease Ministry	ors proje rative p erforma ar topic tario Pu tion Wc prever y, PHO,	ect through Public Hea roject (LDCP) program nce indicators for loca area. ublic Health Leadershi orking Group develope ntion roles and respon and local public healt	nmon Chronic Disease alth Ontario's (PHO) Ic m. The project establis al public health units, u ip Table (PHLT) Chror ed advice and recomm nsibilities across public th units), and in the con discussion and review	bcally driven thed a core set of sing nutrition as an hic Disease endations for chronic thealth partners (the ntext of health
Supporting S	ystem	Partners to Access I	Evidence	
partners patient sharing	s to acc care. N eviden	cess evidence to inform loving forward, OPH v ce <sup>3</sup> on primary care a	portunities to support h m equitable healthcare will focus on gathering, ttachment <sup>4</sup> by neighbo entive care interventio	e planning and , analyzing, and purhood, including



<sup>&</sup>lt;sup>3</sup> Evidence is defined as community voice, local epidemiological data, and research.

<sup>&</sup>lt;sup>4</sup> Primary care attachment is defined as formal or informal patient access to the same individual primary care provider or group of providers.

health equity.<sup>5, 6</sup> OPH's Community Engagement Team will seek to embed community voices within this work to bring attention to the challenges of accessing primary and preventive care.

- Engaged healthcare system partners to inform equitable healthcare planning:
  - Attended monthly Champlain Family Medicine Community of Practice meetings related to respiratory season planning.
  - Engaged the OHT-ESO to discuss opportunities to improve primary care access for children under 5 years old.
  - Presented OPH's experience collecting, analyzing, using SDD to the OHT-ESO Health Equity Community of Practice and the OLIP Health and Well-being Sector Table.
- The OHT-ESO Performance Measurement Work Group released their SDD Common List along with a Rationale and User Guide intended to support health system partners to collect and use SDD. This was informed by OPH's experience and lessons learned.

# Challenges

Access to primary care improves health outcomes and saves healthcare dollars because providing continuous care over a person's lifetime lowers the risk of hospitalization, emergency department use, and the risk of re-hospitalization.<sup>7</sup> In January of 2023, the BOH received the memo <u>Update on Access to Primary Care for</u> <u>Ottawa Residents</u>. This memo outlined challenges of estimating primary care access. OPH is focused on working with local data partners to gather, analyze and share epidemiological data on primary care attachment, which is one dimension of primary care access. Within this context, there are challenges that OPH will need to navigate, notably in gaining a better understanding meaningful attachment. People who are attached to a primary care doctor in Ottawa but are unable to access timely primary



<sup>&</sup>lt;sup>5</sup> This will be guided by the research article: Persaud N, Sabir A, Woods H, Sayani A, Agarwal A, Chowdhury M, de Leon-Damre K, Ibezi S, Hmeed S, Katz A, LaFortune FD, Lesiw M, McFarlane T, Oberai A, Oladele Y, Onyekwelu O, Peters L, Wong P, Lofters A. Preventive care recommendations to promote health equity. *Canada Medical Association Journal*. 2023;195:E1250-73. Available from: <u>https://www.cmaj.ca/content/cmaj/195/37/E1250.full.pdf</u> [Accessed 26th September 2023].

<sup>&</sup>lt;sup>6</sup> Preventive care interventions are clinical activities that focus on preventing disease, injury, or harm to health rather than curing disease. Examples include vaccination, cancer screening, nutrition counselling, provision of smoking cessation medications and well-baby visits.

<sup>&</sup>lt;sup>7</sup> College of Family Physicians of Canada. The Value of Continuity—Investment in Primary Care Saves Costs and Improves Lives. Mississauga, ON: College of Family Physicians of Canada; 2021. Available from <u>https://www.cfpc.ca/CFPC/media/Resources/Health-Care-Delivery/Continuity-of-Care-one-pager-</u> ENG-Final.pdf.

care highlights the complexity between primary care attachment and meaningful attachment.

A multi-faceted approach and collaboration across the health sector is required to improve primary care attachment. Through its role in population health assessment and surveillance and integrating community partners, OPH can bring attention to the evidence on primary care attachment, barriers to accessing care, and preventive care interventions that promote health equity. This role must remain clear to effect change without creating unrealistic expectations on OPH.

# **Goal 5: Enrich our Workplaces**

Foster a diverse, inclusive, equitable, and healthy workforce grounded in a culture of learning and growth. We will support and develop employees and optimize and innovate our processes to better serve the community.

Summary of Status, Highlights, and Challenges

Status					
Q4 2023 – Q1 2024	Q2 2024 – Q3 2024	Q4 2024 – Q1 2025	Q2 2025 – Q3 2025		
Highlights					
A Diverse, Equitable	e, and Inclusive Wor	kforce			
in Q4. In addit	ion, 40 Leadership Te clusion (DEI) scenario-	n members in Q3 and am members participa based training related	ted in diversity,		
Leadership Te <ul> <li>Formed a DEI</li> </ul>	am members who hav	ons through scenario-b ve direct reports and 2 al Committee to reduc n planning process.	17 employees.		
<ul> <li>Launched the The procedure those who exp occurring betw identification of</li> </ul>	OPH Procedure to Ad provides a non-puniti perience, witness, or m veen OPH employees,	dress Microaggression ive or disciplinary resp nay be involved in a mi learners or volunteers utlining appropriate ac	onse mechanism for croaggression s by facilitating the		



 As of Q2, OPH exceeded the City of Ottawa's corporate diversity and inclusion targets for employees who identify as members of visible minorities, persons with disabilities and/or women. OPH was slightly under target for the number of employees who identify as Indigenous Peoples.

#### **Employee Psychological Safety and Well-being**

- Sixty-two employees attended Diversity Cafés hosted by the Wellness@Work (W@W) Committee. The sessions focused on burnout at work, microaggressions, and Indigenous inclusion. The sessions are intended to create an inclusive space for employees to ask difficult questions, listen and learn from colleagues, grow and contribute to enriching our workplace.
- Over 250 employees attended the Employee Recognition Event during Employee Recognition Month. The event was an opportunity for connection and to recognize the contributions and achievements of employees.

#### Equitable Learning and Development for All Employees

- Advanced succession planning through a holistic approach that incorporates a DEI lens. A working group was formed to create tools that capture employee interests in career advancement. This group is also assessing competency gaps to design development programs that support employee growth.
- Developed a departmental Learning and Development Strategy. The overall strategy is based on annual departmental learning and development needs assessment with quarterly monitoring and reporting of learning and development progress in service areas through the use of the IDP tool. In addition, the OPH Leadership Development Program was developed, which provides learning and development opportunities for current and future leaders. The program will be piloted with 16 employees between Q4 of 2024 and Q1 of 2025. The leadership program will enhance the City's Corporate Leadership program, which the OPH Leadership Team informed.
- Launched a tool to monitor the number of employees with an Individual Development Plan (IDP). The tool can be used to gather insights into OPH learning and development needs and employees' areas of interest.

#### Challenges

#### Wellness@Work

There are many priorities in the W@W plans, and Committee members' time and resources are limited. Some initiatives within the plan are best led by the Leadership



Team, which is also experiencing capacity challenges. To advance within these constraints, a more focused approach must be taken by identifying priority areas and who can best contribute to advance W@W.

# Learning and Development

The advancement of equitable learning and development opportunities for all employees relies on accurate information on individual and Service Area needs. As such, the timely and continuous use of the IDP tool is critical. Initial uptake of the tool was lower than expected and the data collected to date is not sufficient to accurately determine departmental learning and development needs. The tool will be implemented more broadly in 2025.

The OPH-specific Leadership Development Program proposed by the Learning Centre requires a significant amount of dedicated financial resources, as well as participant time. Advancement of the pilot Leadership Development Program is contingent on selecting the participants for the first cohort that can commit to full participation. Competing workload priorities at the end of the year may require a delay in the program implementation.

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