

<p align="center">Performance Report Public Health Funding & Accountability Agreement</p>
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Board of Health: Ottawa Public Health

Report Date: 31/Mar/2015

Indicator: % of tobacco retailers inspected twice per year for compliance with section 3 of the SFOA (Indicator 1.6)

Instructions

This report template should be used when the Ministry of Health and Long-Term Care (the "ministry") has identified a Performance Variance* and requests a Performance Report (see section 5.5 of the Public Health Funding & Accountability Agreement (PHFAA)).

Please enter information in the all boxes below. Please submit one report per Performance Variance. Please send the completed report to PHUIndicators@ontario.ca. If you have any questions about completing this report, please send an email to PHUIndicators@ontario.ca.

*Performance Variance as defined in section 1.2 (Definitions) of the PHFAA means the inability to achieve a Performance Target as set out in Schedule "D", as identified by the Province.

In the following boxes, please provide the details requested about the issue(s) contributing to the Performance Variance:

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A. Cause

Provide a brief explanation of the cause of the issue:

- *What factors or events prevented achievement of the Performance Target?*

In 2014 OPH achieved greater than 94% of the 100% target for indicator 1.6.

Contributing factors included the following:

1) Misclassification of 8 tobacco vendors:

*6 premises were closed but marked active. Changes made in 2015 in TIS to reflect this.

*1 premise was "restricted". Change made in 2015 in TIS to reflect this.

*1 premise was re-activated by summer student accidentally. Change made in 2015 in TIS.

2) Safety concerns:

*1 inspection was not completed as the tobacco vendor was very aggressive after receiving their 2nd fail on the business.

3) Automatic Prohibition:

*1 premise was not inspected twice as it was under AP (1 inspection completed).

3) Staffing issues:

*6 premises were not inspected due to HR issues with one of the TEO's.

B. Impact

Provide a brief explanation of the impact or anticipated impact of not achieving the performance target:

- *How has the issue(s) affected program or service delivery?*

1) While all retailers received one inspection, the impact was that 16 out of 494 retailers did not receive the mandatory second inspection for the year. Despite not achieving this indicator, vendor compliance (94.1%) with youth access legislation (indicator 1.4) still surpassed the provincial target of 90%.

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C. Plans for Resolution to Address the Performance Variance

Provide a brief explanation of the board of health's plans to improve performance:

- *What steps has the board of health **taken** or **is taking** to address the issue(s) that have led to the performance variance?*
- *Please describe any process changes, organizational changes, planning changes, and/or monitoring changes that the board of health is **planning** to implement to resolve the issue(s).*
- *Please outline the expected completion dates of the steps the board of health is taking to improve performance.*
- *What is the expected date that all steps will be completed?*
- *Please describe the monitoring schedule to ensure that planned changes are having the intended results.*

1) TEOs have reviewed the premise list and double checked tobacco vendor classifications to ensure they are correct. The 2015 premise list is accurate as of January 31, 2015.

2) Inspection deadlines have been set 30 days before actual target dates to ensure enough time to inspect any remaining tobacco vendors and to troubleshoot any technical problems that may have occurred with TIS.

2) HR issue is resolved. The TEO in question has been removed from SFOA enforcement activities. A new TEO has completed Foundations training and is receiving field training and mentorship from the other experienced TEO. Plans are in place to have back-ups for the 2 TEOs in the event staffing issues such as sick leave occur.

D. Plans for Resolution to Address Impacts of the Performance Variance

Provide a brief explanation of the board of health's plans to address the impacts of the performance variance:

- *What steps has the board of health **taken** or **is taking** to address the impacts of the performance variance?*
- *Please describe any process changes, organizational changes, planning changes, and/or monitoring changes that the board of health is **planning** to implement to resolve the issue(s).*
- *Please outline the expected completion dates of the steps the board of health is taking to resolve the issue(s).*
- *What is the expected date that all steps will be completed?*
- *Please describe the monitoring schedule to ensure that planned changes are having the intended results.*

1) Have increased oversight of this program through regular monthly reports to senior management, monthly program metrics reports and monthly meetings with program staff.

2) Premise list will be verified by July 1, 2015.

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Ministry Support

Please identify any provincial level supports which you feel would help the board of health to resolve the issue(s) or improve performance.

Please note that the purpose of this section is not to identify the need for additional funding. Funding approval is based on the annual Program-Based Grants approval process.

NA

Contact Information for Ministry Follow-Up

Please provide contact information for someone that the ministry can follow-up with for any questions about the Performance Report.

Contact:

Name: Hilda Chow

Title: Program Manager

Telephone: 613-580-6744 ext. 26272

E-mail: Hilda.Chow@ottawa.ca

The Medical Officer of Health is required to review and approve the completed Performance Report.

Approved by (Name):

Signature:

Medical Officer of Health

Date (dd/mm/yyyy):