

**Performance Report  
Public Health Funding & Accountability Agreement**

**Board of Health:** Ottawa Public Health

**Report Date:** 02/03/2015

**Indicator:** % of confirmed iGas cases where initiation of follow-up occurred on the same day as receipt of lab confirmation of a positive case (Indicator 3.4)

**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](mailto:PHUIndicators@ontario.ca). If you have any questions about completing this report, please send an email to [PHUIndicators@ontario.ca](mailto: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:

**A. Cause**

*Provide a brief explanation of the cause of the issue:*

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

In 2014, for sixty-two of sixty-three (98.4%) confirmed iGas cases, follow-up was initiated the same day that Ottawa Public Health (OPH) received lab confirmation. In a single case, the after-hours protocol for hospital labs to report cases of iGas to OPH was not followed. On Sunday, July 6, 2014 a laboratory report for an iGAS case was sent to OPH by fax rather than reported to the CD Manager on-call via telephone, as instructed on OPH resources. As such, the case report was not picked-up until Monday morning when staff returned to the office, at which time follow-up was initiated immediately.

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**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?*

There was no untoward effect from the delayed initiation of follow-up for this case of iGAS or any contacts of the case. Unfortunately, even though Ottawa Public Health initiated appropriate and immediate follow-up upon receipt of the report, our performance in terms of this particular accountability agreement indicator is negatively impacted.

**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.*

The Supervisor of the Communicable Disease Control Program followed-up with the Infection Control Manager for the implicated hospital to reinforce the after-hours reporting procedures, to ensure that the resource developed by Ottawa Public Health for laboratory staff regarding on-call reporting procedures is posted in the appropriate locations for staff reference, and to request that these procedures be reviewed with the appropriate staff in the hospital to prevent delayed notification in the future.

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**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.*

We will continue to reinforce reporting requirements and processes with our hospital partners whenever possible to ensure timely and appropriate follow-up of communicable diseases requiring immediate public health follow-up.

**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.*

OPH works closely with our partners to ensure effective and timely reporting of communicable diseases during both regular business hours and after-hours. While public health units (PHUs) can influence our partners awareness of appropriate on-call reporting procedures, the follow through is not within OPH control. In this case staff responded immediately upon receipt of the notification the next business day. In this specific situation, including this single case in the denominator creates an inaccurate reflection of the program's performance. In this type of situation, OPH requests that the Ministry consider modifying the year-end data verification process whereby PHUs could request, and justify, why specific cases should be removed from the denominator.

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**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: Brenda MacLean

Title: Program Manager, Communicable Disease Control and Outbreak Management

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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):