

Ottawa Board of Health Meeting
Notes for Dr. Vera Etches Verbal Report
Monday, April 15, 2019

Thank you Chair, and good evening, bonsoir, kwe everyone.

I would also like to begin by honoring Métis Elder Jo MacQuarrie, she was truly a remarkable person, we will continue to share her message and echo her passionate voice to promote reconciliation and address Indigenous health inequities. May she rest in peace.

In tonight's verbal report, I will be focusing on the significant changes to Ontario's public health system that were announced as part of the budget.

Before describing the specific announcements, I want to tell you why I chose to specialize in public health and preventive medicine and I want to highlight the core functions of the public health system.

As a medical student and then family physician, I saw so many people, in clinics and emergency rooms, in hospital, who were there because they had failed to receive the supports that would keep them well. I remember an older man who had not accessed care until his arthritis had made him almost unable to move – he did not know how to read and had suffered poor health because of it. I remember a mother, who was a newcomer, whose baby I caught and how isolated she was after the birth of her baby, unaware of the supports available for healthy growth and development. These individual interactions are precious and important points of care, and, they showed me the need to create communities and a health system that prevents poor health. After 14 years of work alongside the diverse professionals in the public health system, I am more convinced than ever that people need a strong public health system to be healthy, safe and well.

(Slide 1) There are five classic functions of the public health system, as shown on this slide. I think of population health assessment first because that is like our diagnostic tool. Epidemiologists use their skills to measure the health of the population and point us towards what interventions or treatments are necessary.

The next handful of slides provide examples of how we carry out the other public health functions here in Ottawa. We work within the community, supporting people from before they are born through the end of life, with programming and service offerings that are most often delivered in partnership.

- OPH assists families prenatally and with newborns so that they may get a good start in life. Created in partnership with CHEO, Our Parenting In Ottawa/Être parents à Ottawa website, is a resource for parenting right through the teen years and on this site people can learn more about connecting to a nurse on-line, options for telephone or chat support, and our most intensive support for parents, in-home visiting by public health nurses and home visitors with different cultural backgrounds, to which people can self-refer. Screening of new parents, usually after the birth of a child, also identifies risk factors that trigger this additional support. The PIO website is a resource for grandparents, also, to brush up on the latest evidence-based approaches to early childhood development. For every \$1 spent on early childhood development, the health care system saves up to \$9 in future spending on health, social and justice services.
- OPH reaches school aged children through health promotion activities and programs such as vision screening in school. Many school children are not benefitting from free optometrist eye exams and 3 to 5% are at risk of permanent vision loss each year in Ottawa. Therefore, OPH is piloting screening 5 year olds in school and working with local optometrists to increase access to glasses as needed.
- OPH provides immunization services to reduce the harms caused by infectious diseases. In addition to school-based immunizations, OPH has ventured into giving childhood and catch-up immunizations to populations with barriers to primary care, such as in shelters for families with unstable housing and for refugees, in partnership with the Centretown CHC and the YMCA. Every \$1 spent on immunizing children with the measles-mumps-rubella vaccine saves \$16 in health care costs.

We see the need for this work in our City today, as this month OPH entered into an enhanced response to investigate two cases of measles in individuals who recently travelled internationally. These measles cases are not connected. OPH is working closely with local health care providers and hospitals to contact individuals and families who may have been exposed to the infectious case.

- OPH engages youth and emerging adults, on their ground, through social media and online interactions. Health communications is a core function and channel for health promotion. We have more followers on Twitter, 55,000+, than any other local public health organization in North America. We have some great material for you to re-tweet.

- OPH Engages in partnerships, such as with Inner City Health and Community Health Centres, to assist people with substance use issues to reduce the harms from substance use and find a pathway to treatment and reduction or cessation of use. As the need to address opioid overdose continues, we are also focussing on the myths about cannabis and continuing to shine a light on the substance causing the greatest burden of illness after tobacco – alcohol. Every \$1 spent on mental health and addictions saves \$7 in health costs and \$30 dollars in lost productivity and social costs.
- Speaking of tobacco, one of OPH's roles is to promote and protect health through healthy public policies, and the City of Ottawa has been a leader around by-laws that create smoke-free spaces. Every \$1 invested in tobacco prevention programs saves up to \$20 in future health care costs. Following Board support to engage the provincial and federal governments on the related subject of vaping, the Mayor, Chair and I had a chance to convey our concerns about promotion of vaping products to the provincial and federal Ministers of Health earlier this month.

Other public policy work that we engage in relates to advancing reconciliation with Indigenous communities. Municipal policy is a special focus, such as transportation policy. In fact, the Official Plan that guides development in the City of Ottawa is currently in consultation and you have an opportunity to let Councillors know that building walkable, connected communities is important to you for the health of the population.

- OPH also partners with the City of Ottawa as an active participant in city-wide emergency responses such as last fall's tornado/power outage and the Westboro bus crash earlier this winter. That being said, we also work with partners to plan and prepare for emergencies – before they occur.
- The LHIN has supported OPH's work in partnership with the city Recreation Department to provide our growing population of seniors with fitness and wellness programs that includes falls prevention – the number one cause of injury-related emergency room visits and hospitalizations among older adults.
- Lastly, OPH promotes mental health across the lifespan. A resource for workplaces is the video series called "have THAT talk", which is on YouTube and comes with facilitators' guides that can be used by teams to promote mental health in the workplace. Two new videos were just released this week to

address the topic of mental health for newcomers and people from diverse backgrounds.

By ensuring that Ottawans get a healthy start, remain healthy, are able to quickly return to health and well-being at all ages, the public health system delivers value for money.

In an era where there is a greater focus on providing better, more timely and patient-centred care, the public health system more than carries its weight, making significant contributions to reducing the demands placed on hospitals and primary care providers. Public health actions now result in fewer emergency room visits today, as well as the prevention of more visits tomorrow.

Moving now to the announcements in the budget last Thursday. (Slide 12)

- In 2019–20:
 - Improve public health *program and back-office efficiency and sustainability* while providing consistent, high-quality services, be responsive to local circumstances
 - Adjust provincial–municipal *cost-sharing of public health funding* (currently about 75 provincial, 25 municipal)
 - Streamline the Ontario Agency for Health Protection and Promotion (*Public Health Ontario*) to enable greater flexibility with respect to non-critical standards based on community priorities
- By 2020-21
 - Establish *10 regional public health entities and 10 new regional boards of health* with one common governance model
 - Modernize Ontario's public health *laboratory system* by developing a regional strategy to create greater efficiencies across the system and reduce the number of laboratories
 - Remove back-office inefficiencies through digitizing and streamlining processes to ensure public health agencies focus their efforts on providing better, more efficient front-line care

- By 2021-22:
 - Achieve *annual savings of \$200M* by modernizing public health units through regionalization and governance changes to achieve economies of scale, streamlined back-office functions and better coordinated action by public health units
 - The current provincial contribution for cost-shared programs is \$750M, which leads to the figure of 27% of the funding being cut that has been discussed in the media.

The Ministry of Health and Long-Term Care has not yet communicated with the public health field about this budget direction. There is not yet any information available about what this means specifically for Ottawa Public Health.

Slide 13 – There are many questions raised by the provincial budget. Answers to these questions will be important to guide next steps. While the direction to establish 10 regional public health agencies is clear, the timelines and process used for implementation are likely areas where we can influence.

Slide 14 - What I do know is that we will likely have to look at the priorities for how we spend our money, so I have included a couple of slides that remind us of the current breakdown of our budget. Much of the school health funding actually goes towards provision of immunizations in schools.

Slide 15 – Most of our budget is for salaries, wages and benefits, so any reductions will most likely have implications for employees.

While the changes are significant and raise important concerns about maintaining capacity for carrying out core protection, promotion and prevention work, there are opportunities that could be realized with a regional approach.

Slide 16 – Previous reviews of the public health system after SARS led to recommendations that there be fewer health units in Ontario. Larger health units have greater capacity for foundational standards like population health assessment, for recruitment and retention of skilled professionals, and are able to mobilize more quickly for urgent responses. The province has indicated that savings could come with more collaboration on back-office practices, like purchasing, and digital processes. Ottawa Public Health is very interested in initiatives that could involve electronic records, for instance.

Another key opportunity that is part of the evolving health system landscape in Ontario is that Ontario Health Teams are forming. Ontario Health Teams are intended to focus on the coordination of care for patients and on improving their defined population's health. I believe that there is a role for the participation of public health agencies, who can focus on prevention, protection and health promotion, informed by patient and community health needs. I see a future where public health units can work with multiple OHTs, providing:

- guidance on understanding the population in a geographic area to ensure that the teams understand the complex needs of the populations they serve;
- capacity building and promoting supports, including environmental supports, that lead to chronic and infectious disease prevention, healthy living, substance use and injury prevention;
- reach into the extensive networks that public health fosters - links with education, municipalities and others - that will facilitate community-based awareness and response to emerging health needs, with a focus on equity; and,
- the planning and management expertise to support the prevention and control of communicable diseases and emergency responses that will not be restricted to the clients of any single Ontario Health Team.

OPH's mission is to work together with our community to improve, promote and protect the health and well-being of the people of our city. I anticipate that participation as a member of the Ontario Health Teams that will form in Ottawa will help to achieve this mission, as well as aid with the objective of reducing the pressure on health care providers. The capacity to carry out public health work could be strengthened within Ontario Health Teams.

Slide 17 – What is important to keep as a guiding principle is that the population's health needs vary across the province and so flexibility for local adaptations to service provision is key. Maintaining a way for municipalities to influence delivery of public health services is important, not only because elected officials represent the needs of their populations but also because many of the drivers of health are outside of the healthcare sector. With a regional lens on public health programming, efforts need to be made to keep specific needs of Indigenous communities or Francophones as priorities. As we move forward with implementation of 10 regional health units, the goal must be timely and quality public health services that prevent disease and injury for all now and into the future.

Slide 18 – This is a slide I use to highlight that not only are local municipalities partners, but so are local school board, social services, police and many others.

Lastly, the way forward...

Health is not just about the individual or healthcare, health is also about the communities in which we live and the social, political and economic policies that shape our environment. As you can see in this slide, the social and built environments are much greater contributors to our overall health when compared to our biology and the health care we receive.

As I described the role of public health, I think you will be able to recognize that some of our interventions (like immunization and harm reduction) fall in the overlap between public health practice and the healthcare system, as depicted on this slide. The public health sector also values the connections with municipal, education and other sectors, some of which I have mentioned, to address the determinants of health. In order to improve the population's health, capacity must be maintained to do the unique work of public health – initiatives focused on prevention, protection and health promotion.

Chair that concludes my verbal report. I am happy to answer any questions. Merci.