Report to Rapport au:

Ottawa Board of Health Conseil de santé d'Ottawa 15 June 2015 / 15 juin 2015

Submitted on June 5, 2015 Soumis le 5 juin 2015

> Submitted by Soumis par: Dr./ D^r Isra Levy

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Ward: CITY WIDE / À L'ÉCHELLE DE LA File Number: ACS2015-OPH-IQS-0008

VILLE

SUBJECT: UPDATE: OTTAWA BOARD OF HEALTH PUBLIC HEALTH FUNDING AND ACCOUNTABILITY AGREEMENT

OBJET: MISE À JOUR : ENTENTE DE RESPONSABILISATION ET DE FINANCEMENT EN SANTÉ PUBLIQUE DU CONSEIL DE SANTÉ D'OTTAWA

REPORT RECOMMENDATIONS

That the Board of Health for the City of Ottawa Health Unit approve the 2015 Public Health Funding and Accountability Agreement Performance Indicator Targets, as outlined in Document 2.

RECOMMANDATIONS DU RAPPORT

Que le Conseil de santé de la circonscription sanitaire de la ville d'Ottawa approuve les objectifs liés aux indicateurs de rendement dans l'entente de responsabilisation et de financement en santé publique de 2015, conformément au Document 2.

BACKGROUND

In January 2014, the Ministry of Health and Long-Term Care (MOHLTC) released the 2014-2016 indicators for the Public Health Funding and Accountability Agreement (PHFAA), formerly the Public Health Accountability Agreement (PHAA) (ACS2014-OPH-IQS-0001). The PHFAA was expanded to 27 indicators that include 17 Health Protection and 10 Health Promotion indicators. In 2015, Ottawa Public Health (OPH) is required to measure and report on 15 performance indicators.

In April 2015, the Board of Health (BOH) received for information 2014 year-end results, approved 2014 Performance Reports for three indicators and directed OPH staff to submit the report including corrective actions and supporting documents to the MOHLTC (ACS2015-OPH-IQS-0006).

DISCUSSION

RECOMMENDATION 1: Approve the 2015 Public Health Funding and Accountability Agreement Performance Indicator Targets, as outlined in Document 2.

As outlined in Document 1, the MOHLTC commenced the negotiation process for the 2015 performance indicator targets on April 28, 2015. OPH continues to be supportive of greater transparency, accountability and continued performance improvement. OPH provided a preliminary response to the MOHLTC regarding these proposed targets pending review and approval of the BOH. A summary of the proposed targets are included in Document 2.

RURAL IMPLICATIONS

There are no rural implications to this information report.

CONSULTATION

The purpose of this report is administrative in nature and therefore no public consultation is required.

LEGAL IMPLICATIONS

There are no legal impediments to implementing the recommendation in this report.

RISK MANAGEMENT IMPLICATIONS

There are no risk management implications to receiving this report.

FINANCIAL IMPLICATIONS

There are no financial implications to receiving this report.

ACCESSIBILITY IMPACTS

There are no accessibility implications to receiving this report.

TECHNOLOGY IMPLICATIONS

There are no technology implications associated with receiving this report.

SUPPORTING DOCUMENTATION

Document 1: Letter from Laura Pisko, Director, Health Promotion Implementation Branch, Ministry of Health and Long-Term Care and Paulina Salamo, A/Director Public Health Standards, Practice & Accountability Branch, Ministry of Health and Long-Term Care to Dr. Isra Levy, Medical Officer of Health regarding 2015 Health Promotion and Health Protection Performance Indicator Target Setting Process (April 28, 2014)

Document 2: 2015 Public Health Funding and Accountability Agreement Performance Indicator Targets

DISPOSITION

OPH will submit this report and the supporting documents to the MOHLTC.