Council Direction:

This report is the first annual report to the Board of Health (BoH) regarding the implementation of the Public Health Services (PHS) Strategic Plan 2007-2010, as outlined in Report BOH07023.

Information:

Executive Summary:

The Public Health Services Strategic Plan 2007-2010 was approved by the Board of Health in May 2007, and included six Goals.

- Goal A: Implement public health initiatives to improve local air quality.
- Goal B: Support community preparedness for and response to public health emergencies.
- Goal C: Maximize impact on community health in four key areas of chronic disease prevention: tobacco control, nutrition, physical activity and mental health.
- Goal D: Gather, analyze and disseminate information on health and its determinants.
- Goal E: Be recognized as public health experts in the community.
- Goal F: Recruit, develop and retain a competent, flexible workforce.

The PHS Strategic Plan most closely aligns with three Focus Areas of the City of Hamilton Strategic Plan that was approved in June 2008: Skilled, Innovative and Respectful Organization; Environmental Stewardship, and; Healthy Community.
Progress has been made on implementing each of the six Goals and the associated Action Plans, with a majority of activities on-target. Highlights from the first year of this four-year plan include:

- **Goal A:** Groundwork has been done to become a more active stakeholder in local efforts to improve air quality.

- **Goal B:** Emergency and pandemic plans have been updated and staff training has been conducted. Collaborative planning efforts have increased across the local health care sector, and pandemic preparedness sessions have been held with local organizations.

- **Goal C:** Significant progress has been made on realigning chronic disease prevention programming to focus on physical activity and nutrition, and the underlying social determinants of health. This has been accomplished through reviews of existing programs and of best practices.

- **Goal D:** Internal communications and knowledge transfer efforts include a revitalized PHS intranet site, and the establishment of a workgroup for community health status reporting. A collaboration project is underway with local acute care hospitals, to enhance infectious disease surveillance systems.

- **Goal E:** Improvements have been made to the nature and quality of communications between the Medical Officer of Health and individual BoH members, and with the local media.

- **Goal F:** Partnerships with national and provincial groups have been established along with a staff advisory group to advance efforts to meet Core Competency requirements and ensure staff is optimally prepared to meeting public health standards and service requirements, and to pilot performance management and measurement tools.

While there are many accomplishments, challenges to implementation have occurred due to: unplanned staff vacancies in key positions, delays because of external events such as outbreaks, changes the implementation plan, struggles balancing strategic and operational priorities, and limited opportunities to reallocate resources in support of strategic plan implementation.

Going forward, PHS staff will continue to monitor progress and further integrate the strategic plan into their business planning processes. The PHS Strategic Plan will be reviewed on an annual basis and modified to ensure that it remains responsive to internal and external environmental changes, such as the anticipated launch of the new Ontario Public Health Standards in January 2009, and a new provincial public health performance management framework in March 2009.
Background:
The BoH approved the four-year PHS Strategic Plan in May of 2007. The strategic plan contains six Goals. Figure 1 illustrates the relationship between the PHS Vision, Mission and Goals.

Three Goals address direct service delivery to residents and agencies: air quality (Goal A), emergency preparedness (Goal B), and chronic disease prevention (Goal C). Goal D focuses on the effective delivery of community health status information to decision makers within PHS, the City and across the community. The remaining Goals reflect the commitment to continuously improve the processes that support achievement of the public health mandate: building stronger relationships with stakeholders and the broader community (Goal E), and ensuring the workforce is optimally prepared and supported to meet the public health needs in Hamilton (Goal F).

Appendix A provides a copy of the PHS Strategic Plan 2007-2010.
An Integrated Business Planning Process:

Figure 2 illustrates the alignment between the PHS integrated business planning model and the corporate strategic plan.

The PHS Strategic Plan is aligned with the City of Hamilton Strategic Plan approved in June 2008. In particular, it mostly closely links with three Focus Areas: Skilled, Innovative and Respectful Organization; Environmental Stewardship, and; Healthy Community.

Directions set in the PHS Strategic Plan cascade down to business planning processes at the division and program level, through the annual operational and budget planning cycle. Ultimately, this translates into the work plans of individual PHS staff members.

The overall result is an integrated and coordinated roadmap for achieving our PHS Goals and contributing to the corporate strategic plan.

Key Accomplishments for 2008:

The following highlights some of our key strategic plan accomplishments in 2008. The specific Strategic Directions for each Goal are provided in Appendix A.

For all actions that were to be underway in 2008, the progress was assessed. This has been illustrated by the following series of graphs.

- If progress is on schedule, a score of +1 is noted.
- If actions have progressed ahead of schedule, a score of +2 is noted.
- If progress is behind schedule, a score of -1 is noted.
- Actions that are not yet due to be underway are noted as 0.
**Goal A: Implement public health initiatives to improve local air quality.**

- PHS was a major sponsor of the *Upwind/Downwind Conference* in May 2008, and remains a contributing member of Clean Air Hamilton.
- Health Protection and Healthy Living Divisions have committed to ongoing collaboration to provide feedback on policy and planning efforts by other City departments that impact local air quality.
- Preliminary investigations have been done of technologies that will provide real-time air quality reporting, and allow for modelling and predicting air quality.

**Goal B: Support community preparedness for and response to public health emergencies.**

- The PHS Emergency and Pandemic plans have been updated for 2008.
- A draft Pandemic Emergency Plan has been developed for establishing local assessment and treatment centres.
- Educational sessions on Pandemic Preparedness have been provided to the Chamber of Commerce, family physicians, retirement homes, and seniors’ organizations.
- Staff emergency response training has been conducted.
- Preparations have begun for the annual City Emergency Exercise in Q4 2008.
Goal C: Maximize impact on community health in four key areas of chronic disease prevention: tobacco control, nutrition, physical activity and mental health.

- An inventory tool has been developed in order to create a comprehensive inventory of City programs and initiatives addressing chronic disease prevention.
- A literature search of best practices has been initiated.
- An audit tool has been developed and implemented to assess the social determinants of health.
- Plans have been developed to provide additional staff training on the social determinants of health in Q1 2009.

Goal D: Gather, analyze and disseminate information on health and its determinants.

- A Community Health eStatus Reporting System Workgroup has been established, to develop a multi-year plan for the creation of local health status reports.
- Initial planning has begun with Hamilton Health Sciences and St. Joseph’s Healthcare for an Acute Care Enhanced Surveillance System project.
- The revitalized PHS Intranet site has been launched, increasing communication and knowledge transfer across PHS.
Goal E: Be recognized as public health experts in the community.

- Communication between the Medical Officer of Health and the BOH and individual Councillors has been enhanced through individual meetings and proactive communications.
- Progress has been made in improving the relationship between the Medical Officer of Health, the Communications Officer for PHS and the media.
- A media monitoring system has been introduced, to support timely and proactive responses to public health issues profiled in the media.
- Implementation has begun for improvements identified by the BOH review of the Communication Policy.
- An application process has been introduced for the Learning and Development Fund supporting staff development in public health core competency areas.

Goal F: Recruit, develop and retain a competent, flexible workforce.

- PHS has partnered with the Public Health Agency of Canada (PHAC) to launch our Core Competency program with a series of workshops beginning Q4 2008.
- In collaboration with alPHa and three other public health units, Hamilton PHS has applied for funding for a two-year project to develop and pilot performance measurement and management tools.
- A staff survey was done of the biannual Medical Officer of Health’s Face-to-Face-face staff events.
• Numerous division-specific internal communications improvements have been initiated, including Meet-the-Director meetings, internal communication committees, and regular e-mail updates on decisions made at senior management team and BoH meetings.

**Key Challenges in 2008:**

Despite the fact that progress has been made in all six Goal areas and that a majority of Actions are on target, there have been challenges that directly impacted the implementation timelines. These include:

- Staff vacancies in key positions responsible for supporting Goal action plans have especially impacted Goal D. In particular, recruitment and retention issues have delayed filling the Associate Medical Officer of Health and Epidemiologist positions.

- Delays in Goal A activities have occurred because of staffing requirements to address external events such as: infectious disease outbreaks; environmental issues such as the Biedermann Packaging fire and chemical spill, and; implementation timelines for provincial initiatives such as Small Drinking Water Systems, Hedgehog inspection software and Ontario Public Health Standards development and planning.

- Changes in the appropriateness and relevance of some original action plans have become necessary, as new information became available and circumstances changed. Goal C Chronic disease prevention efforts are now focused on physical activity and nutrition, postponing concentrated efforts directed at address tobacco control and mental health factors, due to the magnitude of this issue.

- Difficulties continue with balancing strategic and operational priorities. Across all PHS divisions, service delivery demands exceed available human and funding resources. This results in work that supports strategic plan implementation becoming secondary priority to demand and urgent issues, which in turn translates into delayed implementation timelines. Examples include the need to participate in other City priorities as well as new emerging issues. Implementation of and coordination through the City Strategic Plan should help to clarify priority work and improve planning and coordination of activities across City Departments so that strategic priorities can be met.

**Expectations for 2008/2009:**

In 2008/2009, major initiatives include:

- Review and adjustment of the PHS Strategic Plan will occur in Q4 2008, to reflect the 2008 experience and the new corporate Strategic Plan, ensuring that it remains responsive to internal and external environmental changes.

- Solidification of the PHS Strategic Plan monitoring system and business planning process.
• Development of an implementation plan for a performance measurement system, in conjunction with Provincial Performance Management Framework that is targeted for release in March 2009.

• Implement new PHS employee orientation program, and staff Core Competency workshops

• Complete literature reviews on best practices in public health initiatives to improve air quality; advance partnerships with HIEA and private air monitoring companies;

• Influence Health Canada to implement locally the Air Quality Health Indicator system

• Improve integration of Social Determinants of Health within PHS programming

• Develop framework for improving partnership development and relationship maintenance

• Implement recommendations from fall Health & Safety audit

• Continuation of challenges in balancing the appropriate allocation of resources in order to meet legislative requirements (e.g. introduction of new Ontario Public Health Standards), external events that require surge capacity (e.g. infectious disease outbreaks, demand issues and environmental hazards, and strategic plan commitments.

Elizabeth Richardson, MD, MHSc, FRCPC
Medical Officer of Health
Public Health Services
### Corporate Values

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<tr>
<th>Accountability</th>
<th>Excellence</th>
<th>Honesty</th>
<th>Innovation</th>
<th>Leadership</th>
<th>Respect</th>
<th>Teamwork</th>
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### PHS Vision Statement

Public Health Services will be an effective, innovative and efficient organization that is recognized as essential to the health and well-being of people in Hamilton.

### PHS Mission Statement

Hamilton Public Health Services works together with the community to assess, promote and protect health, and to prevent disease and injury.

### Goal A: Implement public health initiatives to improve local air quality.

<table>
<thead>
<tr>
<th>Strategic Directions:</th>
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<tbody>
<tr>
<td>A1. Identify best practices in public health initiatives to improve air quality.</td>
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<td>A2. Influence municipal policy and planning.</td>
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<td>A3. Advance partnerships.</td>
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<td>A4. Advocate for leadership to other levels of government.</td>
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<td>A5. Establish baseline and develop indicators to monitor progress, and evaluate air quality and initiatives.</td>
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### Goal B: Support community preparedness for and response to public health emergencies.

<table>
<thead>
<tr>
<th>Strategic Directions:</th>
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<tr>
<td>B1. Develop a comprehensive process to maintain the Public Health Emergency Plan.</td>
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<td>B2. Increase internal capacity to respond to Public Health Emergencies.</td>
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<td>B3. Lead the co-ordination of Pandemic Planning in Hamilton.</td>
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<td>B4. Ensure effective integration with the City’s Emergency Response and Preparedness Program.</td>
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### Goal C: Maximize impact on community health in four key areas of chronic disease prevention: tobacco control, nutrition, physical activity and mental health.

<table>
<thead>
<tr>
<th>Strategic Directions:</th>
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<tbody>
<tr>
<td>C1. Integrate chronic disease prevention across Public Health Services.</td>
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<tr>
<td>C2. Identify best practices in chronic disease prevention and reorient chronic disease prevention activities to ensure optimal reach and effectiveness.</td>
</tr>
<tr>
<td>C3. Establish baseline measures and develop indicators to monitor progress and inform program planning and evaluation.</td>
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<tr>
<td>C4. Advocate for environments that support healthy behaviours.</td>
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Goal D: Gather, analyze and disseminate information on health and its determinants.

<table>
<thead>
<tr>
<th>Strategic Directions:</th>
<th>D1. Define core indicators and information sources (a) to inform program planning and evaluation, and (b) to monitor community health status.</th>
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<tbody>
<tr>
<td></td>
<td>D2. Develop external partnerships to create an information exchange network.</td>
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<td>D3. Enhance internal information sharing within Public Health Services.</td>
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<td></td>
<td>D4. Enhance data analysis and utilization skills of Public Health Services staff.</td>
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<td>D5. Use program data to monitor plans and operations in an ongoing way.</td>
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Goal E: Be recognized as public health experts in the community.

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<thead>
<tr>
<th>Strategic Directions:</th>
<th>E1. Further develop the relationship with the new Board of Health.</th>
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<td></td>
<td>E2. Develop and implement a media relations strategy.</td>
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<td></td>
<td>E3. Build and maintain positive relationships with key community stakeholders including other public health organizations.</td>
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<td>E4. Develop and maintain staff expertise in all areas of public health practice.</td>
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Goal F: Recruit, develop and retain a competent, flexible workforce.

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<th>Strategic Directions:</th>
<th>F1. Ensure that all staff meet required Public Health Core Competency standards.</th>
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<td>F2. Offer career development opportunities.</td>
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<td>F3. Create a workplace that fosters pride and satisfaction in work.</td>
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<td>F4. Enhance strategies to improve open and timely communication across all parts of Public Health Services.</td>
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<td>F5. Cultivate the development of cultural competencies in PHS staff.</td>
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