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AN OVERVIEW OF THE BOARD OF HEALTH

The Community and Health Services Committee recommends the following report dated September 3, 2009, from the Commissioner of Community and Health Services and the Regional Solicitor be deferred to the October 14, 2009 Community and Health Services Committee meeting.

1. RECOMMENDATION

It is recommended that:
1. This report be received for information.

2. PURPOSE

This report has been prepared at the request of the former Health and Emergency Medical Services Committee to provide an overview of the board of health for Regional Council, in order for it to carry out its legislative duties and responsibilities as the board of health under the *Health Protection and Promotion Act* (the Act). It outlines the legal framework for public health in Ontario, the duties and responsibilities of the board of health as well as providing an introduction to the public health system.

3. BACKGROUND

The *Health Protection and Promotion Act* governs boards of health in Ontario

The Act is the principal legislation that governs boards of health in Ontario. This Act and its regulations deal with both regulatory and administrative matters relating to public health. Currently, there are 22 regulations under the Act which cover a wide range of public health subjects.

A board of health is a governing body that governs an area of jurisdiction—"the health unit"

The Act requires that every health unit have a board of health. The role of the board is to ensure the provision of public health programs and services to the residents within the specific catchment area of the health unit (in our case, York Region boundaries). In Ontario, boards of health are generally either independent boards or municipal corporations. The majority of boards of health are independent boards and are deemed corporations without share capital under the Act. With respect to municipal boards of

health, the municipal corporation comprises the board of health. The municipal corporation has all of the powers of a board of health under the Act and it is comprised of its municipal Council members. While a municipality may have a sub-committee in place to specifically review information and reports relating to public health, the municipal Council, as the board of health, is ultimately the authority responsible for the decision making.

The City of Toronto's board of health, however, is a unique model. It is a quasi independent body with a legal existence completely separate from the municipality.

The role of the Medical Officer of Health is set out in the Act

The Medical Officer of Health reports to the board of health on issues relating to public health concerns and to public health programs and services. The Medical Officer of Health is selected by the board of health and is approved by the Minister of Health and Long-Term Care. The Medical Officer of Health is responsible for the management of public health programs and services. The Medical Officer of Health also has authority under the Act to issue orders with respect to health hazards and communicable diseases in order to decrease and eliminate risk to the health of residents.

4. ANALYSIS AND OPTIONS

The Ontario Public Health Standards set legislative requirements for public health service delivery for boards of health in Ontario.

In Ontario, public health functions are legislated into mandated programs under the Act. These mandatory programs are science and evidence-based and articulate the minimal standards expected. They are revised periodically, with the last revision having been made in 2008. There are five major program areas:

1) Infectious diseases
2) Environmental health (related to public health program areas)
3) Chronic diseases and injuries
4) Emergency preparedness (related to public health program areas)
5) Family health

There are 25 protocols that specify in detail the actions expected. There is an underlying "Foundational Standard" that includes the principles of population health assessment, surveillance, research and knowledge exchange, and program evaluation. Public health program expenditures are cost-shared with the Province on a 75:25 (provincial 75%: regional 25%) basis with a few initiatives being funded 100% by the Province.

Core functions of public health include preventing disease, protecting and promoting health

In other countries, public health may encompass different health services. For example, in the United Kingdom, public health is also responsible for hospitals, psychiatric day facilities and planning for overall health care delivery. In the United States, public health also provides for general medical services for the uninsured.

In Canada, the Pan-Canadian Public Health Network—made up of representatives from the Provinces, Territories and the Federal Government—defined the core functions of public health as comprising of:

- Prevention of diseases and injuries.
- Control of infectious and reportable diseases.
- Protection from health hazards.
- Promotion of health.
- Monitoring of health status.
- Evaluating public health services.
- Researching public health problems.

Standards set out goals, societal outcomes, board of health outcomes and requirements, and compliance may be checked by assessors

The Ontario Standards are structured as goals, societal outcomes, board of health outcomes, and requirements. Compliance to standards used to be assessed by the Province through the use of a survey instrument—the Mandatory Program Compliance Survey. This instrument is no longer being used and is expected to be replaced by performance indicators that the Province of Ontario is developing. However, the Province conducts assessments of a select few boards of health every year, with assessors checking on a range of issues from governance to program delivery.

Performance Indicators can assist boards of health to be accountable

York Region has been at the forefront in the development of local public health performance indicators, having developed a Balanced Scorecard for Public Health in 2007. The Province is in the midst of developing performance measures for public health. Other methods for assessing performance and allowing boards of health be accountable include reports to Health and Emergency Medical Services Committee and Council, presentations to Committee, and the response to specific queries.

Public health functions as a system with multiple components

Public health functions as a system with multiple components. At the provincial level, there are three ministries that fund public health – Health and Long Term care, Children

and Youth Services, and Health Promotion. The Ontario Health Protection and Promotion Agency is in its early days of being established and will provide science based support to public health. Board of health members in Ontario have the opportunity to network with colleagues through meetings and conferences organized by the Association of Local Public Health Units. This organization provides a platform for advocacy and development of healthy public policy.

At the federal level, the Public Health Agency of Canada plays a critical role in liaising with international public health authorities like the World Health Organization, Pan American Health Organization and the Centers for Disease Control and Prevention in Atlanta.

5. FINANCIAL IMPLICATIONS

There are no specific financial implications associated with this report. However, the approved 2009 Public Health Branch budget is $49.8 million gross and $10 million net.

6. LOCAL MUNICIPAL IMPACT

There are no local municipal implications associated with this report. Public health programs and services are provided to all nine local municipalities comprising York Region.

7. CONCLUSION

Regional Council is the board of health for The Regional Municipality of York, and its powers and responsibilities are articulated in the *Health Protection and Promotion Act*. The Ministry of Health and Long-Term Care legislates the mandatory programs and services boards of health are to provide and sets out minimal. Public health functions as a system with local, provincial, federal and international components to achieve optimal health protection, disease prevention and health promotion objectives.

For more information on this report, please contact Dr. Karim Kurji, Medical Officer of Health at Ext. 4012.

The Senior Management Group has reviewed this report.