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RAPID RISK FACTOR SURVEILLANCE SYSTEM

The Community and Health Services Committee recommends the adoption of the recommendations contained in the following report dated May 18, 2010, from the Commissioner of Community and Health Services for approval by the Board of Health.

1. RECOMMENDATIONS

It is recommended that:

1. The Commissioner of Community and Health Services be authorized to enter into a purchase of service agreement with the Institute for Social Research related to health research services for risk surveillance (rapid risk factor surveillance system) for a three-year period (2010-2012).

2. Council approve the sole source purchase of services from the Institute for Social Research for the period of 2010-2012.

2. PURPOSE

This report is prepared 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.* It requests Council authorization to enter into a Purchase of Service Agreement with the Institute for Social Research related to the administration of the Rapid Risk Factor Surveillance System (RRFSS) for York Region for a three-year period.

3. BACKGROUND

York Region Public Health currently uses RRFSS to obtain timely local health data and monitor emerging issues

RRFSS is a series of ongoing monthly telephone surveys designed to monitor trends in health risk behaviours in Ontario health units. Using random digit-dialing methodology, the Institute for Social Research at York University interviews 100 adults aged 18 years and older on a monthly basis in each RRFSS-participating health unit. Through interviews that are 20 minutes in length, on average, information is collected on health issues such as smoking, immunization, obesity and chronic diseases, as well as on emerging issues such as West Nile Virus, Severe Acute Respiratory Syndrome (SARS) and H1N1 influenza. Health units receive data from the Institute for Social Research three times during a 12-month data collection period.

RRFSS began after a successful pilot project in Durham Region and now includes most of the Ontario population

In 1999, the Durham Region Health Department pilot tested an adult rapid risk factor surveillance survey in partnership with Health Canada, Cancer Care Ontario and the Ministry of Health and Long-Term Care. It was modeled after the Behavioural Risk Factor Surveillance System conducted by the Centers for Disease Control and Prevention in the United States and was carried out by the York University Institute for Social Research. An evaluation by an outside agency of the pilot study found it to have been highly successful. Receipt of data was timely and useful, and the questionnaire could be adapted to meet local needs.

Due to the success of the pilot project, the survey became a permanent part of health surveillance in the Durham Region Health Department, and an invitation for participation was issued to other health units. RRFSS has been operating in York Region since February 2001.

Twenty-two of Ontario's 36 health units participated in RRFSS in 2009, representing about 85 percent of the population of the province. For the year 2009, the Institute for Social Research completed a total of 25,920 interviews in participating health units.

Public health units collaborate on developing core questions for RRFSS and may also develop health-unit specific questions in response to local need

Health units participating in RRFSS collaborate on the development of survey modules. RRFSS questions are selected according to health unit priorities and emerging issues, prior use in population surveys, and the availability of reliable and valid testing data.

The RRFSS survey consists of core and optional questions. All participating health units ask core questions. In 2009, there were 54 questions designated as core content, related to chronic diseases, flu immunization, falls, general health, women's health issues, smoking, Body Mass Index, cell phone use while driving, colorectal screening, vegetables and fruit consumption and physical activity. Socio-demographic information, such as household composition, income, marital status, and demographics of children are also part of the core modules which all health units are required to ask as part of RRFSS.

Individual health units are able to add health unit-specific questions to address local emerging issues or to support the planning and evaluation of services. Any participating health unit can create new optional questions. Optional modules in the 2009 RRFSS for York Region included sun safety, breastfeeding, family violence, food safety in the home and support for smoke-free public places.

4. ANALYSIS AND OPTIONS

RRFSS assists the Region to meet Ontario Public Health Standards for surveillance and population health assessment

RRFSS data meet mandated population health information requirements of public health units. Health units require local health data on a regular and timely basis to assist with:

- Prioritization of health issues.
- Development of operational plans and health unit activities.
- Evaluation of effectiveness of programs, services and strategies.
- Monitoring of progress towards indicators and objectives.
- Informing and influencing local interests.
- Monitoring of trends over time.

RRFSS fills a unique niche and has become an integral part of program planning, evaluation and accountability activities within public health programs of the York Region Community and Health Services Department. For example, RRFSS results related to West Nile Virus identified the need for increased public health education on personal protection, and results on pesticide use were used to develop the Pesticide Reduction Guidelines for Lands Owned by the Regional Municipality of York. The implementation of RRFSS in York Region has minimized the need for one-time surveys by individual programs, provided timely information to enable a quick response to emerging issues, and maximized efficiency through coordination with other partner health units.

A sole source purchase would ensure comparability of results between health units

In order to ensure that survey results can be compared between different jurisdictions and to enable benchmarking between peer health units, the survey should be carried out in a consistent manner by the same contractor for all RRFSS-participating health units each year.

5. FINANCIAL IMPLICATIONS

The annual cost to each health unit participating in RRFSS is approximately $50,000. This amount is included in York Region's approved budget and the province contributes 75% funding, leaving a net tax levy impact of $12,500 annually. Total costs for participation in RRFSS over a period of three years will be approximately $150,000.

6. LOCAL MUNICIPAL IMPACT

The annual results of the RRFSS initiative have provided the Community and Health Services Department with timely information about risk factor behaviours, health

knowledge and awareness levels in the community, which assists in the planning and evaluation of programs and services for all York Region residents.

7. CONCLUSION

RRFSS continues to demonstrate its value in the identification of emerging health issues, priority setting, planning and evaluation of public health programs. It is recommended that York Region enter into a three-year Purchase of Service Agreement with York University's Institute for Social Research for the administration of RRFSS.

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.