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RAPID RISK FACTOR SURVEILLANCE SYSTEM PURCHASE OF SERVICE

The Community and Health Services Committee recommends the adoption of the recommendation contained in the following report dated September 24, 2012, from the Commissioner of Community and Health Services and the Medical Officer of Health.

1. RECOMMENDATIONS

It is recommended that:

1. The Commissioner of Community and Health Services be authorized to enter into an annual purchase of service agreement with the Institute for Social Research related to ongoing public health survey services (Rapid Risk Factor Surveillance System) for the period 2013-2015, to an upset limit of $158,000 over three years.

2. PURPOSE

This report is prepared for 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 for York Region for a three-year period.

3. BACKGROUND

Health units use the Rapid Risk Factor Surveillance System to monitor current and evolving public health issues

Rapid Risk Factor Surveillance System (RRFSS) is an ongoing series of telephone surveys conducted in various Ontario health units to monitor health risk behaviours and public opinion on key public health matters and emerging issues.

RRFSS began in 1999 as a pilot project at the Durham Region Health Department in partnership with Health Canada, Cancer Care Ontario and the Ministry of Health and Long-Term Care. The survey has since become a permanent part of health surveillance in the province. Twenty of Ontario's 36 health units participated in RRFSS in 2011, representing about 72 percent of the population of the province.

York Region has been using RRFSS since February 2001.

The Institute for Social Research conducts RRFSS surveys on behalf of participating health units

The Institute for Social Research at York University uses computer-assisted telephone interview technology to collect information on behalf of participating health units. A random sample of 100 adults (18+) is interviewed each month in each RRFSS-participating health unit. For the year 2011, the Institute for Social Research completed a total of 23,339 telephone interviews in participating health units.

Health units receive data from the Institute for Social Research three times during a 12-month data collection period.

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 questions, based on emerging issues, data gaps, and the expected reliability and validity of the data. The survey consists of core and optional questions.
All participating health units ask core questions. In 2011, questions designated as core content were related to general health, women's health issues, smoking, Body Mass Index, and physical activity. Socio-demographic information, such as household composition, income, marital status, country of birth/immigrant status, and demographics of children are also part of the core modules that 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. Optional modules in the 2011 RRFSS for York Region addressed topics such as food safety disclosure, breastfeeding, fruit and vegetable consumption, and food safety in the home.

A pilot project began in 2011 to collect data from across Ontario to produce provincial estimates from RRFSS. An evaluation of this pilot is being funded by Public Health Ontario.

4. ANALYSIS AND OPTIONS

RRFSS provides timely data, helping the Public Health Branch meet mandated requirements and minimizing the need for one-time surveys

The Ontario Public Health Standards mandate public health units to assess community health status, including assessing trends and changes in local population health. This

helps health units in conducting activities such as:

- Development of programming and operational plans
- Evaluation of effectiveness of strategies
- Monitoring of progress towards indicators and objectives

In conjunction with data from other sources such as the Canadian Community Health Survey and the Census, RRFSS data help public health units meet these mandated population health information and surveillance requirements.

The unique niche of RRFSS is in the timeliness of data receipt, which enables health units to track current issues and minimizes the need for one-time surveys by individual programs. For example, RRFSS results were used to inform decisions on smoke-free outdoor recreational spaces in local municipalities and on the expansion of the YorkSafe Inspection Disclosure Initiative.

Using RRFSS ensures comparability of results between health units and maximizes efficiencies

Entering into a contract with the Institute for Social Research ensures that the survey is carried out in a consistent manner by the same contractor for all RRFSS-participating health units each year. This enables survey results to be compared between different jurisdictions and allows benchmarking between peer health units.

In addition, coordination with other health units results in efficiencies for all partners, who work collaboratively not just to develop modules but also to address technical and data issues.

Link to key Council-approved plans

Ongoing use of RRFSS is an important part of York Region Public Health's program planning and evaluation activities, to ensure appropriate public health response to the community's needs. It contributes to the *2011 to 2015 Strategic Plan* strategic objective "Optimize the health of the community for all ages and stages through health protection, prevention and promotion initiatives."

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 approximately $12,500 annually.

Based on historical trends, it is possible that contract costs may increase up to 3% each year. This would result in total costs for participation in RRFSS over a period of three

years of approximately $158,000.

6. LOCAL MUNICIPAL IMPACT

Annual results of the RRFSS survey have provided the Community and Health Services Department with timely information about risk factor behaviours and awareness levels in the community, which assists in the planning and evaluation of programs and services for all York Region residents.

7. CONCLUSION

It is recommended that York Region enter into a three-year agreement with York University's Institute for Social Research for the administration of RRFSS. This will enable York Region Public Health to meet mandated population health assessment requirements in a timely, consistent, and cost-effective way.

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.