



Health system transformation is underway in Ontario, with a focus on access, quality and value for money. The foundation for an accountable, transparent, integrated, and evidence-informed system that provides the right care at the right time in the right place and promotes healthy living has been established through Action Plan for Health Care, 2012. The person-centred framework established in the Patients First: Action Plan for Health Care, 2015 aims to: provide faster access to the right care; deliver better coordinated and integrated care in the community, closer to home, provide the education, information and transparency people need to make the right decisions about their health, and protect the universal public health care system by making decisions based on value and quality.

Public health has a key role to play in achieving the aims of the person-centred framework for strategic action. As part of the broader health system transformation efforts underway in Ontario, the Ministry of Health and Long-Term Care (MOHLTC) has embarked on a process to modernize the 2008 Ontario Public Health Standards (OPHS) and the 2011 Ontario Public Health Organizational Standards (Organizational Standards) ("Standards Modernization"). The Standards Modernization process will provide the opportunity to review and clearly define public health's role and contributions within the broader health system transformation process.

Executive Steering Committee:

An Executive Steering Committee for the Standards Modernization (the "ESC"), which reports to the MOHLTC, has been established to provide overall strategic leadership and guidance on the review of the Standards Modernization with a goal to strengthen and enhance accountability and transparency within the public health system. The ESC Terms of Reference are included in Appendix I.

The ESC is chaired by **Dr. David Jones**, former Chief Public Health Officer of Canada, and is executively sponsored by **Ms. Roselle Martino**, Assistant Deputy Minister of Population and Public Health Division, MOHLTC and **Dr. David Williams**, Chief Medical Officer of Health of Ontario. Members of the Committee include:

Mr. Michael Barrett

Chief Executive Officer, South West Local Health Integration Network (LHIN representative)

Mr. Bjorn Christensen

Director, Environmental Health, Niagara Regional Public Health Department (alPHa representative)

Dr. Robert Cushman

Former City of Ottawa Medical Officer of Health and Chief Executive Officer, Champlain Local Health Integration Network

Dr. Peter Donnelly

President and Chief Executive Officer, Public Health Ontario

Ms. Kaiyan Fu

Provincial Chief Nursing Officer, MOHLTC

Ms. Jessica Hill

Chief Executive Officer, Ontario College of Family Physicians

Mr. Michael Jacek

Senior Advisor, Association of Municipalities of Ontario

Dr. Robert Kyle

Commissioner and Medical Officer of Health, Regional Municipality of Durham (COMOH representative)

Ms. Kate Manson-Smith

Assistant Deputy Minister, Local Government and Planning Policy Division, Ministry of Municipal Affairs and Housing (MMAH)

Dr. David McKeown

Medical Officer of Health, Toronto Public Health (City of Toronto representative)

Mr. Darryl Sturtevant

Assistant Deputy Minister, Strategic Policy and Planning Division, Ministry of Children and Youth Services (MCYS)

Dr. Ruta Valaitis

Associate Professor. School of Nursing, McMaster University

Update

The ESC's first meeting was held on December 18, 2015. In their opening remarks the Committee's Executive Sponsors, Dr. David Williams and Ms. Roselle Martino, emphasized the need for the work to be strategic, system-focused and innovative. The objective is to build on existing strengths and explore opportunities for a strengthened system whereby:

- public health service providers work in a coordinated, integrated way that facilitates optimal delivery of public health functions across the full continuum of health;
- a set of modernized standards for public health programs and services support local flexibility. maintaining the ability to adapt to shifting evidence and science; and,
- the linkages that exist between public health and primary care are strengthened in order to maximize the contribution of public health within the broader system.

The ESC reviewed its Terms of Reference and the mandate for the Standards Modernization Process. The ESC examined the overall structure of the province's current OPHS and began considering the challenges and opportunities facing the sector and broader system. These included challenges and opportunities related to system integration; new and emerging issues of public health importance; establishing outcome measures to inform and validate interventions; generating collective approaches through shared accountability; and the use of evidence to support decision-making. The Practice and Evidence Program Standards Advisory Committee ("PEPSAC") reporting to the ESC has been established to address these areas in detail to inform on-going discussions and decisions.

Dr. David Jones led a discussion on the topic of tension between flexibility and consistency, which the Committee is responsible for addressing through the standards.

The ESC also began to review the scope of its work in the context of the release of the discussion paper Patient's First: A Proposal to Strengthen Patient-Centred Health Care in Ontario. The ESC discussed opportunities for strategic alignment with the paper's vision and its work to establish a set of standards that can emphasize public health as an important input and influence into the broader health system. Specifically, the ESC agreed that public health should strengthen and support system capacity for epidemiology, program planning and evaluation to help primary health fill those gaps.

A commitment was made to discuss the broader engagement plan across the sector as it was acknowledged that the success of the Standards Modernization process very much depends on involvement, consultation and engagement.

The ESC met again on February 23, 2016 and April 19, 2016. In February, the ESC discussed health disparity and equity and considered approaches to revise the OPHS to ensure greater emphasis on

population health assessment to inform planning of programs and services. The ESC also had a preliminary discussion on the scope of the OPHS. In April, the ESC had a detailed discussion on the scope of the OPHS and began considering opportunities for greater efficiency, taking into consideration the work of other sectors.

For information, contact: Paulina Salamo, A/Director, Public Health Standards, Practice and Accountability Branch, Ministry of Health and Long-Term Care at Paulina.Salamo@ontario.ca or (416) 327-7423.

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Standards Modernization Process Executive Steering Committee TERMS OF REFERENCE

BACKGROUND

As part of the public health renewal agenda, the ministry released the Ontario Public Health Standards (OPHS) in 2008 and the Ontario Public Health Organizational Standards (the "Organizational Standards") in 2011. The OPHS and 27 incorporated protocols are guidelines issued by the Minister under the *Health Protection and Promotion Act* (HPPA); which establish the minimum requirements for fundamental public health programs and services to be delivered by Ontario's 36 boards of health. The Organizational Standards establish the minimum management and governance requirements for all boards of health and public health units and are operationalized via the Public Health Funding and Accountability Agreement.

CONTEXT

Health care system transformation is underway in Ontario, with a focus on access, quality and value for money. The foundation for an accountable, transparent, integrated, and evidence-informed system that provides the right care at the right time in the right place and promotes healthy living has been established through Action Plan for Health Care, 2012. The person-centred framework established in the Patients First: Action Plan for Health Care, 2015 aims to: provide faster access to the right care; deliver better coordinated and integrated care in the community, closer to home, provide the education, information and transparency people need to make the right decisions about their health, and protect the universal public health care system by making decisions based on value and quality.

As part of the broader health system transformation efforts underway in Ontario, the Ministry of Health and Long-Term Care (MOHLTC) is conducting a review of the OPHS and Organizational Standards (Standards Modernization). Demonstrating an accountable, efficient and transparent system are key objectives of Ontario's health care transformation agenda and public health can play a key role in achieving these aims through the Standards Modernization process. The Standards Modernization process will provide an opportunity to clearly define public health's role and contributions within the broader health system transformation process.

MANDATE

The Executive Steering Committee (ESC) will provide overall strategic leadership and guidance for the OPHS and Organizational Standards modernization process (Standards Modernization) by identifying a focused scope of practice for public health units; how public health units should deliver and integrate services; and the structure and capacity required to deliver efficient and effective services. The modernized OPHS will reflect the scope of programs and services that the government will expect to be provided by public health units.

The objectives of the Standards Modernization process are to develop programmatic and organizational standards that are informed by evidence and best practice, responsive to priority issues in public health, and are aligned with the government's strategic vision and priorities for public health within a transformed health system; and to develop recommendations for implementation of a renewed set of standards that address capacity and infrastructure needs. The Standards Modernization will result in standards being revised, with activities being added and removed. Where recommendations identify that public health units discontinue activities, ESC may recommend who is best placed to provide the activities across the health system.

The ESC will ensure broad engagement with public health stakeholders throughout the Standards Modernization.

The OPHS and Organizational Standards Modernization placemats can be found in Appendix A.

RESPONSIBILITIES

The ESC is charged with the task of providing strategic leadership, oversight and guidance on the review of the OPHS and Organizational Standards. Specifically, the ESC will:

- Make recommendations on the scope of the OPHS and Organizational Standards;
- Make recommendations on how to improve coordination of services across the health continuum;
- Make recommendations on how to ensure accountability and transparency for the modernized OPHS and Organizational Standards;
- Identify how to optimize and best demonstrate value for money in the delivery of public health standards;
- Establish a consultation strategy, and where appropriate, participate in processes for consulting and validating the program and organizational standards with the public health community and others;
- Provide advice regarding the impact of any changes to the OPHS and Organizational Standards and recommendations for system implementation in terms of capacity and infrastructure of a renewed set of program and organizational standards;
- Provide recommendations on a roll-out strategy for the program and organizational standards to support their implementation and uptake, including the development of accompanying tools; and
- Provide direction on a continuous improvement process and structure for ongoing review and refinement of the program and organizational standards.

The ESC will carry out these responsibilities by:

- Providing strategic direction to the sub-committees as established for the governance structure for the Standards Modernization;
- Providing direction to relevant sub-committees on the work required from them to inform recommendations the scope of the OPHS and Organizational Standards;

- Making decisions based on input from relevant sub-committees and expert advice where required;
- Reviewing relevant evidence and input from experts and/or sub-committees to identify how a structure of standards can improve accountability and transparency within the public health system;
- Establishing a framework, based on evidence, to capture public health sector contribution to population health outcomes; and
- Providing advice and guidance on issues identified by the sub-committees.

If necessary, the ESC will commission specific work or research to support its activities.

DELIVERABLES

The ESC will submit a:

- recommended set of renewed program and organizational standards to the MOHLTC for review and decision-making.
- set of recommendations for system implementation of the renewed set of standards that address capacity and infrastructure needs.

The ESC will communicate key messages and process updates with constituent groups and other stakeholders on a regular basis. Key messages will form part of a broader MOHLTC communication strategy.

MEMBERSHIP

The ESC will be chaired by Dr. David Jones, former Chief Public Health Officer of Canada. Membership on the Committee will represent a balance of strategic leaders and government representatives (from MOHLTC, Ministry of Children and Youth Services, and Ministry of Municipal Affairs and Housing). See Appendix B for a list of members.

Members will sign confidentiality agreements due to the sensitive nature of some of the items discussed and brought for the Committee's review and consideration.

In order to sustain the momentum of Committee work, there will be no delegates permitted to attend meetings. Members who miss more than two meetings may be asked to reconsider their commitment to membership on the Committee.

ACCOUNTABILITY

Through the chair, the ESC will be accountable to the MOHLTC. Linkages and strategic direction arising from other concurrent MOHLTC processes which impact the work of the ESC will be brought forward by the Executive Sponsors and/or Secretariat as appropriate.

RELATED WORKING GROUPS

The ESC will be supported by several sub-committees to help inform the overall Standards Modernization. The ESC will ensure appropriate linkages between the sub-committees are provided. The sub-committees that provide support to the Executive Steering Committee include:

- Practice and Evidence Program Standards Advisory Committee
- Organizational Governance Committee
- Intra-ministerial Committee
- Capacity and Public Health Disciplines Committee
- Systems & Infrastructure Committee

There will also be ongoing communication between the ESC, the Inter-ministerial Liaison, and processes for the engagement of Indigenous Communities.

TIME FRAME

The ESC will be convened for a specific period of time, which is expected to be from December, 2015 – June, 2017.

Meetings may occur as frequently as every 3-4 weeks. Meetings will occur in-person in Toronto, with potential for teleconference. The MOHLTC will cover eligible travel expenses to Toronto when accompanied by receipts.

SECRETARIAT

Population and Public Health Division, MOHLTC.

APPENDIX A: STANDARDS MODERNIZATION (OPHS)

Goals of Review	 To develop programmatic standards that are responsive to emerging evidence and priority issues in public health and are aligned with the government's strategic vision and priorities for public health within a transformed health system. To develop recommendations that address capacity and infrastructure needs for implementation of modernized standards. 				
Drivers for Change	System Integration Accountability Transparency	Organizational Capacity Efficiency/Value for Money	Expert Advice Evidence based	Service gaps (First Nations, Mental Health etc.)	
Objectives	Identify what public health should deliver	Identify how public health should deliver services	Identify capacity to deliver public health services	Identify the systems and structures required to deliver effective and efficient public health services	
Activities	 Identify evidence to support requirements for public health programs and services based on core public health functions. Reduce variation in service delivery through increased standardization, taking into consideration the parallel need to foster flexibility to respond to local needs and priorities. Identify service gaps and areas of duplication to improve coordination of services across the continuum of care and other sectors. Enhance the role of public health in addressing determinants of health and decreasing health inequities. Identify opportunities for public health to increase its role in addressing the needs of priority populations. 	 Strengthening and enhancing accountability and transparency. Improving efficiency of public health program & services. Establishing collaborative partnerships to support system efficiency across the continuum of care. Establishing a performance measurement and management framework to capture public health sector contribution to population health outcomes (value for money). 	 Identify public health capacity needs to ensure the effective and efficient delivery of public health services. Identify roles and responsibilities for public health disciplines that improve efficiency and effectiveness of public health service delivery. Identify processes to ensure a sector with qualified professionals to provide required services. 	 Identify required IM & IT and infrastructure to support effective and efficient delivery of public health programs and services. Identify opportunities for integration of public health IM & IT systems with EMRs and the broader system, where appropriate. Identify how current systems support transparency across the public health sector. Identify current and required systems to support performance measurement across the public health sector. 	
Inputs	Jurisdictional Scans Literature Rev	iews Technical Reviews (PHO and others)	Expert Advice Stakeho	older Consultation and Engagement	
Outputs	 A recommended set of evidence based program standards reflective of current accepted practice in the areas of health protection and health promotion that support key government priorities, address service gaps, and the needs of priority populations. A recommended approach to performance measurement at all system levels to ensure accountability, support transparency, and demonstrate value for money. Recommendations to address capacity requirements for the effective and efficient de of public health services. Recommendations for systems and structures which support the effective and efficient de of public health services. 				
Timelines	PHASE 1: Development of modernized program standards for public health (Fall 2015 to December 2016)				
	PHASE 2: Recommendations for system implementation in terms of capacity and infrastructure to support modernized standards (January 2016 to June 2017				
Result	Recommendations for modernized standards and practice guidant delivery of public health programs and services across the full con	ce, in alignment with the vision and principles of Health System Tra tinuum of health.	nsformation, that facilitate optimal delivery of public	health functions and support co-ordinated	

APPENDIX A: STANDARDS MODERNIZATION (Organizational Standards)

Goals of Review	 To establish the ministry's expectations for effective governance which are reflective of emerging evidence on public sector governance and administration practices. To strengthen effective governance by boards of health by developing recommendations that address the governance and administrative capacity and infrastructure needs of boards of health. Drivers for Change: Accountability Transparency Due Diligence Efficiency/Value for Money Organizational Capacity 			
Objectives	Integrate best practices in standards for effective governance and administration of boards of health in Ontario Strengthen and enhance accountability and transparency of boards of health for governance and administrative practices Identify the capacity and infrastructure needed to support effective and efficient governance and transparency			
Activities	 Review evidence and best practices in public sector governance and administration. Determine areas where increased standardization can enhance effective governance and administrative practices of boards of health. Identify accountability mechanisms related to governance and administrative practices. Identify the organizational capacity required within boards of health to provide effective leadership. Identify the range of expertise, skills and advice required to support effective governance. Identify the range of expertise, skills and advice required to support effective governance. Identify required IM & IT and infrastructure for effective and efficient governance and transparency across the public health sector. 			
Inputs	Jurisdictional Scans Literature Reviews Expert Advice Stakeholder Consultation and Engagement			
Outputs	A set of evidence based organizational standards grounded in current accepted best practices in public sector governance and administration. An approach to performance measurement of governance measurement of accountability, support transparency, and demonstrate due diligence. Recommendations to address capacity requirements and systems and infrastructural needs which support effective governance of boards of health			
Timelines	PHASE 1: Development of renewed organizational standards for public health (Fall 2015 to December 2016)			
	PHASE 2: Recommendations for implementation supports (January 2016 to June 2017)			
Result	Recommendations for modernized organizational standards and infrastructure supports that facilitate effective governance and administration of boards of health, in alignment with government's Transfer Payment Accountability Directive, and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and the vision and principles of the countability Directive and Direc			

Health System Transformation.

APPENDIX B

Membership of the Executive Steering Committee

Chair

Dr. David Jones Former Chief Public Health Officer of Canada

Executive Sponsors

Ms. Roselle Martino Assistant Deputy Minister, Population and Public Health Division, MOHLTC

Dr. David Williams Chief Medical Officer of Health of Ontario

Members from Health Units and Other Organizations

Mr. Michael Barrett Chief Executive Officer, South West Local Health Integration Network (LHIN

nominee)

Mr. Bjorn Christensen Director, Environmental Health, Niagara Regional Public Health Department

(alPHa nominee)

Dr. Robert Cushman Former City of Ottawa Medical Officer of Health and Chief Executive Officer,

Champlain Local Health Integration Network

Dr. Peter Donnelly President and Chief Executive Officer, Public Health Ontario

Ms. Jessica Hill Chief Executive Officer, Ontario College of Family Physicians

Mr. Michael Jacek Senior Advisor, Association of Municipalities of Ontario

Dr. Robert Kyle Commissioner and Medical Officer of Health, Regional Municipality of Durham

(COMOH nominee)

Dr. David McKeown Medical Officer of Health, Toronto Public Health (City of Toronto nominee)

Dr. Ruta Valaitis Associate Professor, School of Nursing, McMaster University

Members from the Ontario Government (MOHLTC, MCYS, MMAH)

Ms. Kaiyan Fu Provincial Chief Nursing Officer, MOHLTC

Ms. Kate Manson-Smith Assistant Deputy Minister, Local Government and Planning Policy Division, MMAH

Mr. Darryl Sturtevant Assistant Deputy Minister, Strategic Policy and Planning Division, MCYS

Executive Steering Committee Support (MOHLTC, MCYS)

Ms. Nina Arron Director, Public Health Policy and Programs Branch, Population and Public Health

Division, MOHLTC

Mr. Clint Shingler A/Director, Emergency Management Branch, Population and Public Health

Division, MOHLTC

Ms. Stacey Weber A/Director, Early Child Development Branch, MCYS

Ms. Laura Pisko Director, Health Promotion Implementation Branch, Population and Public Health

Division, MOHLTC

Ms. Paulina Salamo A/Director, Public Health Standards, Practice and Accountability Branch,

Population and Public Health Division, MOHLTC

Ms. Elizabeth Walker Director, Public Health Planning and Liaison Branch, Population and Public Health

Division, MOHLTC

Ms. Jackie Wood A/Director, Strategic Initiatives Branch, Population and Public Health Division,

MOHLTC