

The mission of OPHA is to provide leadership on issues affecting the public's health and to strengthen the impact of people who are active in public and community health throughout Ontario.

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Ontario Society of Nutrition Professionals in Public Health

Public Health Research, Education and Development (PHRED) Program

Charitable Registration Number 11924 8771 RR0001 July 7, 2004

Dr. Sheela V. Basrur Chief Medical Officer of Health and Assistant Deputy Minister Public Health Division, Ministry of Health and Long-Term Care Hepburn Block, 11th Floor 80 Grosvenor St Toronto, ON M7A 1R3

Dear Dr. Basrur:

The OPHA Board of Directors has reviewed the 60-day action plan announced by Minister Smitherman on June 22nd. As stated in our press release, we commend the development of an action plan to rebuild public health. Like you, we are committed to a strong public health system in Ontario and to making Ontarians the healthiest Canadians. As the voice for public health, we believe OPHA is strategically placed to play an integral role in the renewal of the public health system. The purpose of this letter is to outline our initial response to the announced plan of action and to suggest potential roles for OPHA over the next three years. Over the coming months, we will share a more comprehensive response to <u>Operation Health Protection</u>, with broader input from our membership.

Many aspects of the plan offer hope that some longstanding critical issues of public health will be positively addressed. We commend the move to strengthen local capabilities by supporting and increasing provincial funding for local public health units. Strengthening our ability to respond effectively to crisis situations, including infectious disease outbreaks, will clearly be vastly improved with this plan. The implementation of an annual Public Health Performance Report is another critical step and will ensure greater accountability and evaluation in public health. The review and strengthening of PHRED programs will further our goal of having a growing body of knowledge upon which to base the science and art of public health. The establishment of new infectious disease committees/networks combined with technological advancements will allow for a more effective communicable disease response. And an in-depth examination of human resource strengths and weaknesses with a plan to capitalize and build on these resources is also well articulated in the paper.

OPHA is already active in some of these areas and is prepared to assist in the implementation of this plan. For example, the OPHA Core Competencies Task Group has been actively working on developing core competencies for the public health workforce in Ontario, and is offering to share this work to expedite the implementation of the human resources review. We are ready to participate in the development of the Public Health Performance Report, as suggested by the Institute for Clinical and Evaluative Sciences in their recent report <u>Developing a Balanced Scorecard for Public Health</u>. The OPHA is also prepared to engage in the immediate and long-delayed review of the <u>Mandatory Health</u> <u>Programs and Services Guidelines</u>. We look forward to being an active partner in moving forward these and other important steps to secure the health of the public.

The Ministry's press release mentions that the recommended changes are the first comprehensive changes since the 1980's. We would like to respectfully suggest that in order to be truly comprehensive, there is one critical yet missing component that needs to be explored. We recognize the action plan was written predominantly in response to reports that focused on the SARS crisis. However, there is a strong sense that focusing on this one area detracts from the complete picture of public health. The Ontario public health system needs to be rebuilt using an approach that fully recognizes all of the major pillars of public health. Although there are variations on the language used to describe these pillars, we are referring specifically to health promotion which includes, among other things, family health, chronic disease, violence and injury prevention, equal access, early detection and infectious diseases.

The vision (Operation Health Protection, 2004, page 10) of the revitalized system speaks only of protection and disease prevention. Public health is broad in scope and far reaching in its impact on the health of our communities. The stated vision does not recognize public health outcomes achieved by comprehensive health promotion strategies that ensure long term, positive, fundamental health changes. These strategies (from the Ottawa Charter) include creating supportive environments, building community capacity, developing healthy public policy, reorienting health services and developing personal skills. These can be achieved at the individual level through one-on-one counselling (e.g. breastfeeding, dental care, sexual health advice, nutrition counselling, parenting), group-based education and support (well baby clinics, prenatal education, school-based initiatives, parenting groups), and actions at the school workplace and community level and provincially and nationally through public policy. These could be broader-based initiatives (comprehensive school health, environmental health, food security, urban health, workplace wellness, wellness campaigns, healthy public policy development). Although prevention of communicable disease is a critical priority, a balanced approach, including health promotion is needed for a truly effective public health system.

We recognize that the plan mentions health promotion as one of the targets and the name of the new Ontario agency includes "promotion". There is also mention of addressing health promotion at a later date. Mr. Smitherman, in his announcement, stated that we need to put prevention and health promotion back at the centre. It is our hope that health promotion will have a prominent place in the new public health system and that future announcements and actions will ensure this key component is not only maintained, but revitalized. We would encourage more dialogue on this approach and would welcome an opportunity to meet with you.

Again, we want to acknowledge the important work that has been accomplished in taking action to remedy the decade of decline in public health. The actions outlined in the plan will have far reaching impacts on the health of this and future generations. The OPHA Board and membership look forward to working with you to create the best public health system possible.

Sincerely,

Peter Wiebe, President, OPHA Garry Aslanyan, Vice-President, OPHA