



March 31, 2017

Roselle Martino
Assistant Deputy Minister
Population and Public Health Division
Ministry of Health and Long-Term Care
College Park
19th Floor, Suite 1903
777 Bay St.
Toronto, ON M7A 1S5

Dear Roselle,

Re: ONA Input to Minister's Expert Panel on Public Health

Thank you for the opportunity to provide input from the Ontario Nurses' Association (ONA) to the Expert Panel on Public Health. ONA has consulted, in the time available, with our members working on the frontlines in public health. Please accept our input from that perspective.

In terms of process, our members working in public health are disappointed that the Expert Panel does not have frontline public health staff representation. While we understand that public health units were asked to consult with their frontline staff regarding the new Standards for Public Health Programs and Services, we know that the Standards were not circulated by all health units to all program areas for feedback. We will be providing our input to the Ministry on the Standards under a separate submission.

We also know from talking to our members that any feedback received by the Expert Panel directly from health units may not be reflective of the feedback provided from frontline public health staff. Finally, our public health members note that the Expert Panel appears to have a gap in representation from northern and rural public health units so ask that specific outreach be attempted to those areas, specifically to clients accessing public health services.

We offer our advice related to funding in the context of the Expert Panel's mandate to protect funding for public health programs and services. We also suggest our advice on changes to the current funding model relate to the Expert Panel's mandate to recommend structural and operational changes to better integrate public health. Our feedback stems from our experience in an environment of flatlined funding for many years.

Consolidate Funding and Policy of Public Health Programs

Our first recommendation, therefore, is to consolidate the funding and policy of public health programs under a single Ministry - the Ministry of Health and Long-Term Care. Currently, funding for some public health programs, including the Healthy Babies, Healthy Children (HBHC) program is funded through the Ministry of Children and Youth Services (MCYS).

While we appreciate the opportunity for ONA frontline members to be involved in the development of the HBHC program, we are advocating for the consolidation of public health programming and funding under a sole Ministry. This provides for consistency in policy development, resource allocation and health unit budget approvals.

With public health programs consolidated in a single Ministry, it will also be more efficient to determine the capacity of local health units to deliver public health programs in the local catchment area within the current provincial/municipal funding model. For example, the Prenatal/Postnatal Nurse Practitioner Program (PPNP) is currently funded under MCYS but the MOHLTC also funds a number of Nurse Practitioner programs. One step to achieve integration of public health programs with programs delivered across other health sectors is to consolidate funding and policy under a single Ministry.

Accountability and Transparency

Our second recommendation relates to the theme of accountability and transparency. We acknowledge the movement in the new Standards towards a fuller accountability regime in health units.

At this point, we want to advise the Expert Panel that a similar review of accountability for funding as has recently been undertaken in the home/community care sector through audits by the Auditor General of the Community Care Access Centres (CCACs) should be pursued in the public health sector. We believe it is timely for an audit of public health units to be conducted by the Auditor General. The reason we are advocating for an audit by the Auditor General is that these audits are made public for all to review. The annual audits by the Ministry of Health and Long-Term Care of selected health units are not, to our knowledge, made public. Perhaps this might also be a recommendation of the Expert Panel.

Other health sectors operate under a much more open and transparent accountability framework as funding is provided by way of the Local Health Integration Networks (LHINs). Now that funding and accountability/planning for home/community care is being transitioned to the LHINs, it is likely a perfect opportunity to move the public health sector in the direction of a similar accountability framework that is available for public review. At the current time, information on funding for specific public health programs is not readily available for public review.

Management Structure

Our third recommendation further advances the issue of accountability for funding and for the delivery of mandatory public health programs through a review of the management structure within public health units. Our experience has seen a proliferation of management positions during a time of flatlined funding. While frontline staff have seen cuts to positions and to services, the number of supervisory and management positions have increased, particularly in relation to the size of the public health units.

As well, the importance of the role of public health nurses in the delivery of public health programs is a critical area for the Expert Panel to review. This review also needs to include an investigation into role clarity with respect to the role of health promoters and the role of public health nurses as public health units move forward. This review of the management structure is not dissimilar to what took place in the CCACs, including protecting the role of care coordinators, which has resulted in action by the government as the CCACs transition.

Therefore, we are recommending a review be undertaken of the management structure in public health units. This review will ensure that funding for public health programs reaches the clients that the programs are designed to service and will bring clarity to the important role of public health nurses in the delivery of programs in comparison to other roles.

We appreciate the opportunity for ONA to provide the Expert Panel with the advice of frontline public health nurses and allied staff.

We have made recommendations related to the consolidation of funding in a single Ministry, implementation of a strong accountability framework, including a public audit by the Auditor General, and a review being conducted of the management structure and clarity of staff roles in public health units.

We look forward to providing input to the consultation by the government following the receipt of the recommendations from the Expert Panel.

In the meantime, we would be pleased to provide any additional follow-up the Expert Panel may require.

Thank you.

Sincerely,

ONTARIO NURSES' ASSOCIATION



Linda Haslam-Stroud, RN
President

lhs/lw

C: Marie Kelly, ONA CEO/CAO
Hon. Dr. Eric Hoskins, Minister of Health and Long-Term Care
Dr. Bob Bell, Deputy Minister of Health and Long-Term Care
Derrick Araneda, Health Minister's Chief of Staff