BUDGET 201) ttawa



Public Health Draft Operating and Capital Budget

Tax Supported Programs



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Description / Mandate

Ottawa Public Health (OPH) has a legislated responsibility for delivering public health services. OPH provides programs and services – based on the four broad areas of protection, promotion, surveillance and prevention – to individuals and communities while advocating for public policies that make Ottawa and its residents healthier.

This coming year will mark a change in governance structure from City Council acting as the Board of Health to a semi-autonomous Board of Health, which will consist of Councillors and members of the public. The Board of Health is governed by the Ontario Health Protection and Promotion Act (R.S.O 1990, c.H.7,s.2) (HPPA) and is accountable for compliance with the Ontario Public Health Standards (2008), which set outs guidelines for the provision of minimum mandatory health programs and services. The standards reflect duties and responsibilities encompassed in approximately 50 Ontario Acts, and program requirements are organized under three provincial ministries. The Ministry of Health and Long Term Care (MOHLTC) directs the standards for infectious disease, environmental health, emergency preparedness and the foundational standards. The Ministry of Health Promotion and Sport directs the standards for chronic disease, injuries and family health. Finally, the Ministry of Children and Youth Services is responsible for the Healthy Babies, Healthy Children component of the family health standard. In addition to the HPPA and the Ontario Public Health Standards, OPH contributes as a municipal department to the City's Strategic Plan and various corporate initiatives such as Service Excellence.

The current funding arrangement, which is standard for the province, involves the City of Ottawa funding approximately 25% of OPH's programs and services, while the province funds the remaining 75%. In the coming year, financial challenges include responding to emerging health issues, ranging from extreme weather events, infectious disease outbreaks and bed bugs to increasingly complex health problems related to mental health, obesity and sexually transmitted infections. In 2009, OPH proved its ability to adapt and shift resources in response to the H1N1 pandemic. Despite staff pressure from an increased workload, OPH delivered its programs and services within the allotted budget and within acceptable service standards. The current funding profile is:

- Cost Shared at a rate of 75% provincial, 25% municipal funding: The majority of OPH programs and services.
- **100% funded by separate streams of provincial/ federal funding:** Provincial/Federal mandated programs such as Healthy Babies, Healthy Children; SARS Action Plan; Smoke Free Ontario; AIDS Hotline; and SITE Expansion.
- Cost recovery: Programs such as Dental Health and Food Handler training.
- 100% City of Ottawa funding: Other activities identified by City Council

Programs / Services Offered

Clinical programs

- 1. Sexual Health & Risk Reduction
 - Provide clinical services to prevent and treat sexually transmitted infections and blood borne illnesses, provide reproductive health counseling and supplies by working with populations at risk as well as with community partners.
- 2. Dental Health
 - Provide preventive and urgent oral health services at schools and dental clinics across the city.
- 3. Healthy Babies, Healthy Children
 - Provide home visits and telephone contacts to new parents to promote positive parenting skills.

Health promotion and disease prevention

- 4. Family and school health
 - Provide education, counselling, and skill building to parents, children, youth and agencies such as child care providers and schools to promote healthy pregnancies and birth outcomes, foster growth and development, as well as increase access to healthy choices.
- 5. Chronic disease and injury prevention
 - Provide services to reduce preventable chronic diseases related to poor nutrition, obesity, tobacco use, physical inactivity, alcohol misuse and exposure to ultraviolet radiation, as well as preventable injuries and substance misuse for all ages, including seniors.

Environment, health protection and outbreak management

- 6. Outbreak management and communicable disease follow up
 - Respond to enteric and respiratory outbreaks in the community and institutional settings.
 - Promote community and institutional infection control practices as well as case management of reportable diseases such as tuberculosis, meningitis, group A streptococcal infections.
- 7. Food safety and rabies prevention
 - Provide public notifications, training and inspection services for food premises.
 - Prevent the occurrence of rabies in humans.
- 8. Safe water and health hazard prevention and management
 - Provide testing, inspections and education for drinking water and recreational water sources.
 - Provide health protection and prevention activities on health hazards in the physical environment.

Vaccine preventable diseases

- 9. Provide school and community immunization programs.
- 10. Distribute vaccines to providers as well as conduct immunization surveillance.

Integration, quality and standards

- 11. Planning and decision support
 - Conduct population health assessment, surveillance, continuous improvement activities and performance measurement.
- 12. Enhance Business practices including staff development
- 13. Design and implement health emergency planning and response strategy
- 14. Administer Ottawa Public Health Information Line
 - Telephone health assessment and counselling by public health nurses and inspectors.

Strategic support

- 15. Health Information Coordination
 - Enhance the accessibility and visibility of OPH's services and initiatives in the community through website, health-focused language adaptation, audio visual support, design, event planning and resource management.
- 16. Ottawa Board of Health
 - Implementation and on-going support for the Ottawa Board of Health.
- 17. Improve community and stakeholder engagement.

Performance Measures / Outcomes

OPH conducts performance measurement, such as monitoring compliance with municipal, provincial and federal legislation, regulations and policies, on a routine and ongoing basis. Activities include the preparation of an organizational balanced scorecard, program evaluations, City Quarterly Performance Reports, reports to the Ottawa Board of Health and the annual report.

Highlights from 2010:

The Quarterly Performance Report to Council

OPH tracks all services provided and the table below highlights some programs that are monitored and reported on at the request of Council. Overall trends show an increase in demands in several areas, including the number of client visits to the Sexual Health Centre, the number of health hazards responded to by health inspectors, and the number of food premise inspections completed. The total number of client transactions increased by 15% from 2008 to 2009. OPH performs approximately 85,000 client transactions per year in these six programs alone.

Key Program Areas	2008	2009*	2010 (Q1- Q3)
Visits to the Sexual Health Centre	15,675	16,311	13,342
Visits to Dental Clinics	17,554	15,256	12,559
Visits to young families by a Public Health Nurse or family visitor	11,850	11,785	8,030
Health hazards responded to by Health Inspectors	911	931	690
Calls to the Public Health Information Line	16,866	32,595	12,769
Inspections completed at food premises	11,843	9,083	9,786
Totals	74,699	85,961	57,176

^{*}Disruptions to service delivery occurred in Q4 2009 as a result of OPH's response to the H1N1 pandemic. There was a 200% increase in the number of calls to the Public Health Information Line and a temporary decline in the number of food premise inspections completed.

Ottawa Public Health Balanced Scorecard for Service Excellence

A Baseline Performance Report was completed in 2010 that measured OPH performance in four domains: client satisfaction, staff engagement, operational excellence, and organizational excellence & accountability. Results indicated that clients are generally satisfied with OPH services and programs (73%). In addition, staff feel they make a difference in the community and have good working relationships with their supervisors but are less satisfied with workloads and career development opportunities. OPH meets or partially meets the requirements set out in the Ontario Public Health Standards, however, there are gaps in the ability to meet Foundational Standards. These activities range from early detection of emerging health threats through syndromic surveillance, to continuous improvement activities, to working with community partners on applied public health research, to overall monitoring and reporting on Ottawa's population health status. This will be felt more acutely in 2011 with the loss of provincial PHRED funding. Overall, OPH delivers its programs and services within the allotted budget and is prepared for the new governance structure that will come into effect in 2011.

Management Dashboard

In 2010, OPH implemented a new quarterly management report that tracks progress on key program activities and outcomes.

Program Evaluations & Continual Quality Improvement

In 2010, OPH undertook evaluations to assess the effectiveness and impacts of several programs, including immunization clinics, Sexual Health Clinic, the food safety program, and a five-year physical activity initiative. In addition, through a fulsome staff consultation process a number of Service Excellence initiatives were identified as areas for improvement. As a result, several key business initiatives were selected to improve client satisfaction and access to services, increase operational performance and enhance employee engagement, and these have been reflected in the 2011 OPH budget submission and business plans.

2011 Budget Risks / Other Considerations

Governance – Board of Health – new

The transition to the new Board of Health will require development of related budget line items and internal reallocation of administrative resources.

Provincial Requirements - Ontario Public Health Organizational Standards - new

The Ministry of Health and Long Term Care is expected to release new Ontario Public Health Organizational Standards with performance measures, increased reporting requirements and formal accountability agreements by the end of 2010. The implications and full scope of this activity are uncertain, however, similar to the 2008 Ontario Public Health Standards, these new requirements are not formally supported with additional resources and are intended by the province to be cost neutral.

Emerging Health Issues

Public health may be challenged with emerging and urgent health issues, as evidenced over the last few years with the emergence of pH1N1 Influenza Pandemic, listeriosis, SARS, West Nile virus, and increased extreme weather events. These can create significant burden and drain on both human and financial resources. In 2011, we can anticipate a continued need to identify and respond to extraordinary situations that range from the unanticipated to increasingly complex population health problems.

Org Chart

Ottawa Public Health (493.91 FTEs, Dec. 2010)

Medical Officer of Health FTEs = 2.00

Strategic Support FTEs = 5.00 Foundational Standard

Vaccine Preventable Diseases FTEs = 30.20 Infectious Diseases Program

Environment, Health Protection & Outbreak Mgmt FTEs = 82.51 Environmental Health Program Infectious Diseases Program

Integration, Quality & Standards FTEs = 54.50 Foundational Standard Emergency Preparedness Program

Health Promotion &
Disease Prevention FTEs =145.70
Family Health Program
Chronic Diseases & Injury Program

Clinical Programs
FTEs = 174.00
Family Health Program
Infectious Diseases Program

Re-Organizations

Health Promotion and Disease Prevention Branch - Re-alignment of existing school age and early years programs to better serve residents and maximize community partner relationships (e.g. School Boards.)

City of Ottawa Ottawa Public Health - Operating Resource Requirement In Thousands (\$000)

Operating Resource Requirement	2009	201	0	2011	\$ Change Over		
Operating Resource Requirement	Actual	Forecast	Budget	Estimate	2010 Budget	2009 Actual	
xpenditures by Program							
Ontario Public Health Standards							
Family Health	8,931	9,946	9,913	10,342	429	1,41	
Chronic Diseases & Injuries	7,824	9,233	9,157	9,954	797	2,13	
Infectious Disease	8,264	8,939	8,930	9,988	1,058	1,72	
Foundational Standards	5,645	6,690	6,704	6,688	(16)	1,04	
Environmental Health	4,424	4,978	5,070	5,936	866	1,5	
Emergency Preparedness	507	564	472	472	-	()	
Public Health City Funded Programs	-	424	350	350	-	3!	
Prov. / Fed. Funded Programs	7,551	7,959	7,959	9,147	1,188	1,59	
Other Prov. Programs	1,302	1,420	1,514	424	(1,090)	(8)	
Other Misc. Programs (H1N1)	10,314	410	-	-	-	(10,3	
Service Innovation & Efficiency Prog	-	-	(12)	(473)	(461)	(4	
Gross Expenditure	54,762	50,563	50,057	52,828	2,771	(1,93	
Recoveries & Allocations	(3,979)	(3,320)	(3,224)	(3,224)	-	7.	
Revenue	(40,481)	(35,525)	(35,115)	(36,510)	(1,395)	3,9	
Net Requirement	10,302	11,718	11,718	13,094	1,376	2,79	
penditures by Type							
Salaries, Wages & Benefits	40,733	40,923	40,392	43,448	3,056	2,7	
Overtime	1,401	263	263	263	-	(1,1	
Material & Services	7,447	6,281	6,083	6,231	148	(1,2	
Transfers/Grants/Financial Charges	560	403	317	317	=	(2	
Fleet Costs	32	29	29	29	-		
Program Facility Costs	562	577	577	633	56		
Other Internal Costs	4,027	2,087	2,408	2,380	(28)	(1,6	
Service Innovation & Efficiency Prog	-		(12)	(473)	(461)	(4	
Gross Expenditures	54,762	50,563	50,057	52,828	2,771	(1,93	
Recoveries & Allocations	(3,979)	(3,320)	(3,224)	(3,224)	-	7!	
Net Expenditure	50,783	47,243	46,833	49,604	2,771	(1,17	
evenues By Type Federal	(25)	(75)	(75)	(05)	(10)		
	(35)	(75)	(75)	(85)	(10)	(
Provincial Out Funds	(39,646)	(35,450)	(35,040)	(36,425)	(1,385)	3,2	
Own Funds	(50)	=	- 1	=	-	7	
Fees and Services	(750)	(2E E2E)	- (25 115)	(26 510)	(1.205)		
Total Revenue	(40,481)	(35,525)	(35,115)	(36,510)	(1,395)	3,97	
<u>et Requirement</u>	10,302	11,718	11,718	13,094	1,376	2,79	
ıll Time Equivalents	475.70	493.91	493.91	504.91	11.00	29.	

City of Ottawa Ottawa Public Health - Operating Resource Requirement Analysis In Thousands (\$000)

	20	10 Baselin	ie			201:	1 Adjustm	ents			2011	¢ Change
Operating Resource Requirement Analysis	Forecast	Budget	Adj. to Base Budget	Maintain Services	Provincial Legislated	Growth	New Services / Needs	Efficien- cies	User Fees & Charges	Proposed Budget Changes	Estimate	\$ Change Over '10 Budget
Expenditures by Program												
Ontario Public Health Standards												
Family Health	9,946	9,913	i	304	25	1	100	-	-	1	10,342	429
Chronic Diseases & Injuries	9,233	9,157	-	347	-	-	450	-	-	-	9,954	797
Infectious Disease	8,939	8,930	-	327	175	556	-	-	-	-	9,988	1,058
Foundational Standards	6,690	6,704	(38)	22	-	1	-	-	-	-	6,688	(16)
Environmental Health	4,978	5,070	(7)	274	360	239	-	-	-	-	5,936	866
Emergency Preparedness	564	472	-	-	-	-	-	-	-	-	472	-
Public Health City Funded Programs	424	350	-	-	-	-	-	-	-	-	350	-
Prov. / Fed. Funded Programs (100%)	7,959	7,959	1,178	-	10	-	-	-	-	-	9,147	1,188
Other Prov. Programs	1,420	1,514	i	-	(1,090)	1	-	-	-	-	424	(1,090)
Other Misc. Programs (H1N1)	410	-	-	-	-	-	-	-	-	-	-	-
Service Innovation & Efficiency Prog	-	(12)	i	-	-	-	-	(461)	-	-	(473)	(461)
Gross Expenditure	50,563	50,057	1,133	1,274	(520)	795	550	(461)	-	-	52,828	2,771
Recoveries & Allocations	(3,320)	(3,224)	-	-	-	-	-	-	-	-	(3,224)	-
Revenue	(35,525)	(35,115)	(1,180)	-	(115)	-	(100)	-	-	-	(36,510)	(1,395)
Net Requirement	11,718	11,718	(47)	1,274	(635)	795	450	(461)	-	-	13,094	1,376
Expenditures by Type												
Salaries, Wages & Benefits	40,923	40.392	748	1,310	338	470	190	_	_	_	43,448	3,056
Overtime	263	263	7 40	1,510	330	470	170				263	3,030
Material & Services	6,281	6,083	300	_	(837)	325	360		_	_	6,231	148
Transfers/Grants/Financial Charges	403	317	300		(037)	323	300	_	-	_	317	- 140
Fleet Costs	29	29			_			-	_	_	29	-
Program Facility Costs	577	577	77		(21)	_	_	-	_	_	633	56
Other Internal Costs	2,087	2,408	8	(36)	(21)	-		-	-	_	2,380	(28)
Service Innovation & Efficiency Prog	2,007	(12)	0	(30)		_	_	(461)	_	_	(473)	(461)
Gross Expenditures	50,563	50,057	1,133	1,274	(520)	795	550	(461)	-	_	52,828	2,771
Recoveries & Allocations	(3,320)	(3,224)	1,133	1,2/4	(320)	793	330	(401)	_	_	(3,224)	2,771
Net Expenditure	47,243	46,833	1,133	1,274	(520)	795	550	(461)	_	_	49,604	2,771
Percent of 2010 Net Expenditure Budget		40,633	2.4%	2.7%	, ,	1.7%		-1.0%	0.0%	0.0%	5.9%	2,771
Percent of 2010 Net Expenditure Budget			2.4%	2.7 70	-1.170	1.7%	1.270	-1.0%	0.0%	0.0%	3.970	
Revenues By Type												
Federal	(75)	(75)	-	-	(10)	-	-	-	-	-	(85)	(10)
Provincial	(35,450)	(35,040)	(1,180)	-	(105)	-	(100)	-	-	-	(36,425)	(1,385)
Municipal	-	-	-	-	-	-	-	-	-	-	-	-
Own Funds	-	-	-	-	-	-	-	-	-	-	-	-
Fees and Services	-	-	-	-	-	-	-	-	-	-	-	-
Fines	-	-	-	-	-	-	-	-	-	-	-	-
Other	-	-	-	-	-	-	-	-	-	-	-	-
Total Revenue	(35,525)	(35,115)	(1,180)	-	(115)	-	(100)	-	-	-	(36,510)	(1,395)
Percent of 2010 Revenue Budget			3.4%	0.0%		0.0%			0.0%	0.0%	4.0%	
Net Requirement	11,718	11,718	(47)	1,274	(635)	795	450	(461)	-	-	13,094	1,376
Percent of 2010 Net Requirement Budge			-0.4%	10.9%	-5.4%	6.8%	3.8%	-3.9%	0.0%	0.0%	11.7%	
Full Time Equivalents (FTE's)	493.91	493.91	-	-	4.00	5.00	2.00	-	-	-	504.91	11.00
Percent of 2010 FTE's			0.0%	0.0%	0.8%	1.0%	0.4%	0.0%	0.0%	0.0%	2.2%	

City of Ottawa Ottawa Public Health - Operating Resource Requirement Explanatory Notes In Thousands (\$000)

	Surplus / (Deficit)				
2010 Forecast vs. Budget Variance Explanation	Exp.	Rev.	Net		
Forecast vs. Budget Variance Explanation As a result of continued emergency related activities in Q1 & Q2, (e.g., H1N1, increased burden related to TB contact tracing, heat warning response and outbreaks) Ottawa Public Health (OPH) incurred higher than expected spending on Emergency Preparedness, however these costs will be offset by one-time provincial funding for H1N1 associated cost and savings effected in other programs.	(410)	410			
Total Surplus / (Deficit)	(410)	410	-		

2010 Baseline Adjustments / Explanations	Exp.	Rev.	Net 2011 Changes	FTE Impact
Adjustments to Base Budget				
Removal of one-time Management Professional Exempt performance pay.	(19)	-	(19)	-
Adjustment for implementation of Harmonized Sales Tax.	(28)	-	(28)	-
Healthy Smiles Ontario 100% Provincial funded dental program.	1,180	(1,180)	-	
Total Adjustments to Base Budget	1,133	(1,180)	(47)	-

		Increase / ((Decrease)	
2011 Pressure Category / Explanation	Exp.	Rev.	Net 2011 Changes	FTE Impact
Maintain Services All programs include an adjustment for contract settlement, increments and benefit adjustments.	1,310	-	1,310	
Reduction of facility lease costs.	(36)	-	(36)	-
Total Maintain Services	1,274	-	1,274	-

City of Ottawa Ottawa Public Health - Operating Resource Requirement Explanatory Notes In Thousands (\$000)

	Increase / (Decrease)					
2011 Pressure Category / Explanation	Exp.	Rev.	Net 2011 Changes	FTE Impact		
Provincial Legislated Estimated increase (2.5%) to grant funding from Province of Ontario for Mandated Programs.	-	(650)	(650)	-		
New safety syringes and increased cost of other medical supplies and equipment used in Clinical Service programs.	200	-	200			
Infectious Diseases prevention and management in Long Term Care facilities and Retirement Homes.	360	-	360	4.00		
Adjustment of the Surveillance for Blood Borne Pathogen project to reflect Federal funding level.	60	(60)	-			
Adjustment of Air Quality Index program to reflect Provincial funding level.	(50)	50	-			
Completion of the Public Health Research and Development program (PHRED)	(1,090)	545	(545)	-		
Total Provincial Legislated	(520)	(115)	(635)	4.00		
Infectious Diseases Prevention and Control: Many infectious diseases that are curable and even preventable continue to circulate in our community. Ottawa has an average of 45 new cases of tuberculosis per year and sexually transmitted diseases are at the highest levels seen since 1990 with trends predicting increased cases that will exceed the rate where sexual health clinics can respond effectively. Increases in wait times and refusals would contravene the City's Service Excellence and accessibility plans. Inadequate vaccination coverage still allows preventable diseases such as measles, mumps and meningococcal disease to cause illness and death in our residents, including children. Health promotion and access to services could prevent these situations. Funding that improves the Ottawa Public Health capacity to reach vulnerable populations and strengthens individual case management will reduce the burden that infectious diseases are currently causing. The costs involved would fund satellite clinics, case management by health inspectors and nurses as well as outreach to physicians and youth.	795		795	5.00		
Total Growth	795	-	795	5.00		

City of Ottawa Ottawa Public Health - Operating Resource Requirement Explanatory Notes In Thousands (\$000)

	Increase / (Decrease)					
2011 Pressure Category / Explanation	Exp.	Rev.	Net 2011 Changes	FTE Impact		
New Services / Needs Brain Injury Prevention Strategy for Youth: To promote the use of helmets in recreational activities at City facilities. Recreational activities represent the second leading cause of head injuries for young people and wearing a helmet can help to avoid/lessen the impact. In 2010, Council directed Ottawa Public Health, in partnership with Parks, Recreation and Cultural Services, to deliver a comprehensive brain injury prevention program which includes implementing a mandatory helmet policy for children at Ottawa indoor arenas, raising awareness about the importance of wearing helmets and ensuring helmets are available to children who cannot afford them.	150	-	150	1.00		
Youth suicide is an urgent issue in our community where 8% of Ottawa youth have seriously considered attempting suicide. In addition, Ottawa youth experience self-harm at significantly higher rates in Ottawa compared to Ontario. This funding would be used for programming for parents to assist them in preventing risk taking behaviours and to help them identify suicide risk in their children. As well, funding will be used to enhance services at the Youth Service Bureau's mental health walk-in clinic. Together and in collaboration with other community agencies such as Community Health and Resource Centres, CHEO, and the Royal Ottawa Hospital, this programming and enhanced services will contribute to the de-escalation of suicidal risk in Ottawa youth.	300	-	300	1.00		
Children in need of Dental Treatment (CINOT) program expansion 100% funded by the Province.	100	(100)	-			
Total New Services / Needs	550	(100)	450	2.00		
Efficiencies Allocation of Service Innovation & Efficiency Initiative. Total Efficiencies	(461) (461)	- -	(461) (461)	-		
User Fees & Charges						
See following user fee schedule for details on the specific rates. Total User Fees & Charges	-	-	-	-		
Total Budget Changes	2,771	(1,395)	1,376	11.00		

City of Ottawa Ottawa Public Health - User Fees

User Fees	2009 Rate	2010 Rate	2011 Rate	% Chan	ge Over	Effective Date	2011 Revenue
	\$	\$	\$	2010	2009	DD-MMM-YY	(\$000)
Prenatal classes	15.00 - 40.00	15.00 - 40.00	15.00 - 40.00	0.0%	0.0%	01-Jan-11	-
Health Inspection Searches	52.50	56.50	56.50	0.0%	7.6%	01-Jan-11	-
Radon Kits	45.00 - 61.00	45.00 - 61.00	45.00 - 61.00	0.0%	0.0%	01-Jan-11	-
Thermometers	50.53	51.61	51.61	0.0%	2.1%	01-Jan-11	-
Food Handler Course	11.50 - 56.50	11.50 - 56.50	11.50 - 56.50	0.0%	0.0%	01-Jan-11	-
Sale of contraceptives - various prices	0 - 135.00	0 - 135.00	0 - 135.00	0.0%	0.0%	01-Jan-11	-
Total Department							-