

Ministry of Health | Office of Chief Medical Officer of Health, Public Health

# Strengthening Public Health

August 2023

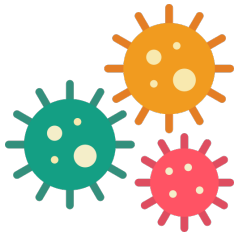


# Context

There are **long-standing challenges** within the public health **sector in Ontario related to capacity, stability and sustainability** (along with implications for **inequitable health outcomes** for Ontarians) that have been identified through **multiple reports over the past 20 years**.



- Since the SARS pandemic in 2003, there have been a series of reports that have consistently called for strengthening public health to address critical challenges such as a **lack of capacity** and **critical mass**, structural **governance challenges** and skills gaps in boards of health, **misalignment of public health** with other health and social services, as well as challenges with the public health **workforce**, including with recruitment, retention and leadership.
- The **COVID-19 pandemic** reinforced the critical importance of a robust public health sector. Key lessons from the pandemic included: the importance of Local Public Health Agencies (LPHAs, often referred to as PHUs) having **sufficient capacity** to respond in a crisis, the **benefit of collaboration** across the health care system, the need for **stability and sustainability** to allow for LPHAs to plan for and be able to respond to ongoing and future crises and challenges.





# What we want to achieve

## Goal

To **optimize capacity, stability and sustainability** in public health and deliver **more equitable health outcomes** for Ontarians:

## Desired Outcomes

1. Clarified and refined **public health roles and responsibilities** that result in:
  - Stronger connections to and relationships with key health system stakeholders (e.g., OHTs, primary care).
  - Core public health functions being performed either locally, regionally, or provincially, informed by a prioritization framework.
  - Reduced variability in prioritization and decision-making and public communications (especially during crises) while remaining responsive to local needs.
2. A system that has **fewer LPHAs but with greater capacity** to deliver **core public health services** and **better alignment** with broader health system structures.
3. Stability for the sector and **sustainability in funding for the longer term** to support program planning and consistent, more equitable program and service delivery.
4. Improved **frontline programs and services** to Ontarians at the local level.

# Strategy

The Ministry of Health is proceeding with a **three-pronged, sector-driven strategy** to optimize **capacity, stability, and sustainability** in public health and deliver **more equitable health outcomes** for Ontarians

## Strengthening Public Health

1. Roles and responsibilities



2. Voluntary mergers



3. Funding



# #1 | Roles and responsibilities

Clarify and strengthen the role of LPHAs by **refining, refocusing and re-leveling roles and responsibilities**



- Conduct a routine, sector-driven review of the **Ontario Public Health Standards (OPHS)**, against a **prioritization framework**.
- Work with partners to identify roles and responsibilities that can be refined or stopped, and/or 're-leveled' to a regional or provincial level.
- Implement the full revised **OPHS beginning in January 1, 2025**.



## #2 | Voluntary Mergers

Optimize capacity by encouraging mergers between LPHAs through a **time-limited voluntary, sector-driven process**



- Re-engage with LPHAs that have **identified interest in mergers** and work with sector partners to identify other merger candidates.
- Leverage sector relationships (e.g., aPHa, AMO) to co-develop a **voluntary merger approach**, including objectives, parameters, and accountability mechanisms with time-limited funding supports to facilitate the merger process.
- Mergers to take effect January 1, 2025.

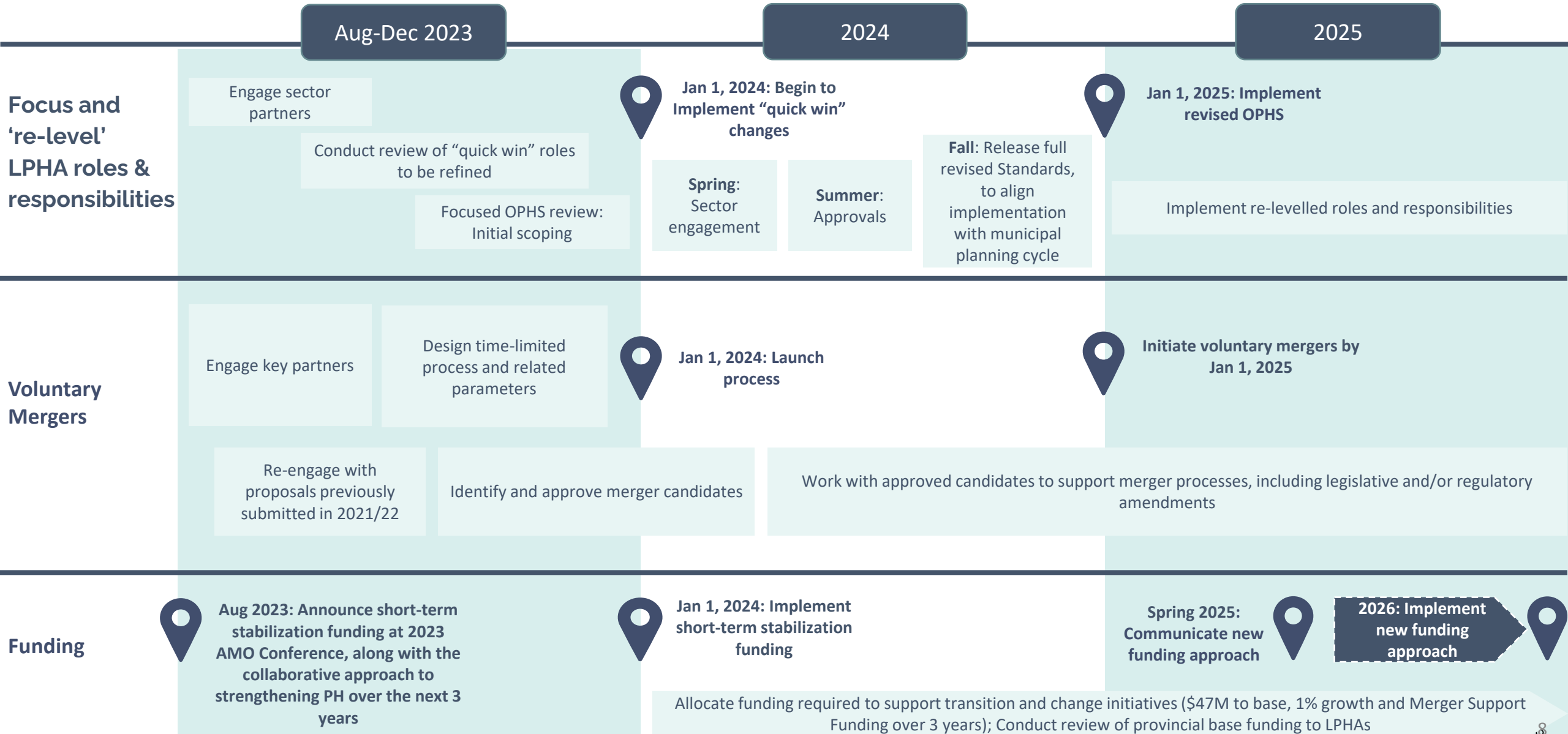
## #3 | Funding

Provide **3-year funding** to LPHAs that addresses the urgent need for stabilization while change processes are underway, support voluntary mergers by providing one-time transition and stabilization costs; and review longer-term base funding needs



- **Restore provincial base funding** to the level provided under the 2020 cost-share formula (\$46.81M), effective January 1, 2024.
- Provide **growth base funding** of 1% for each of the next 3 calendar years (2024 – 2026).
- Establish a dedicated, three-year Merger Support Fund to **support change**.
- Undertake a review of the ministry's **funding methodology** for public health.

# Implementation Timeline







## Working together on next steps

We are committed to working in partnership to **maximize opportunities for local improvement and system impact**

- We will be working closely with our partners to support design and implementation of this strategy. Your expertise and insights will be invaluable as we move through this process.
- Initial ministry engagement with sector partners, including AMO, alPHa, MOHs & CEOs, Business Administrators, etc., will occur in late August / early September.
- We will follow up on next steps regarding how we will collectively work together in the coming months once we have finished these consultations.