

Peel Public Health



...serving the communities of Brampton, Caledon and Mississauga

2006 SERVICE LEVEL REVIEW PRESENTATION

December 1, 2005

Our Mandate:

“Peel Public Health will strive to make our community the healthiest in Canada by promoting health and preventing illness”

Public Health

Who we are

- Provides programs and services in six (6) key areas:
 - Communicable Disease control & prevention
 - Clinical Services
 - Enforcement
 - Youth & Adult Illness prevention
 - Early Childhood Development
 - Health Surveillance

Public Health

What we do

- ❑ **Clinical services** such as immunization, vaccine distributions and dental (5,400 children served annually).
- ❑ **Communicable disease control and prevention programs** protect communities from communicable and infectious diseases (SARS, Rubella etc)



Public Health

What we do

- ❑ **Enforcement** activities protect communities from environmental health hazards and infectious diseases – over 23,000 inspections per year
- ❑ **Youth & Adult Illness Prevention** programs provide screening for early disease detection and education to promote healthy behaviours and prevent chronic diseases



Public Health

What we do

- **Early childhood development** programs provide parents and caregivers with the information they need to raise healthy children, including counselling, assessment and home visiting for high risk clients (eg. over 15,000 HBHC assessments and visits)
- **Health surveillance** activities ensure that Public Health is aware of emerging health issues and ready to respond to emergencies. (2005 School Health Survey, Neighbourhood Health Profiles)



Public Health

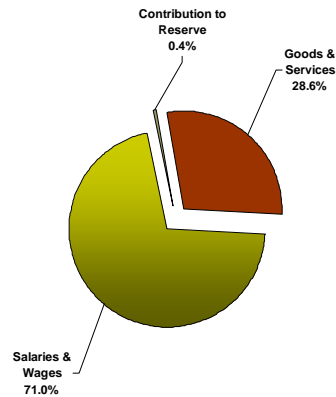
Why we do it

- The Ontario *Health Protection and Promotion Act* sets out minimum standards for Public Health Services
- Peel's current level of service is estimated at 76%, one of the lowest levels in Ontario
- Services are adjusted based on needs in Peel as per *Setting Directions for Public Health in Peel, 2005 - 2007*

Current Budget

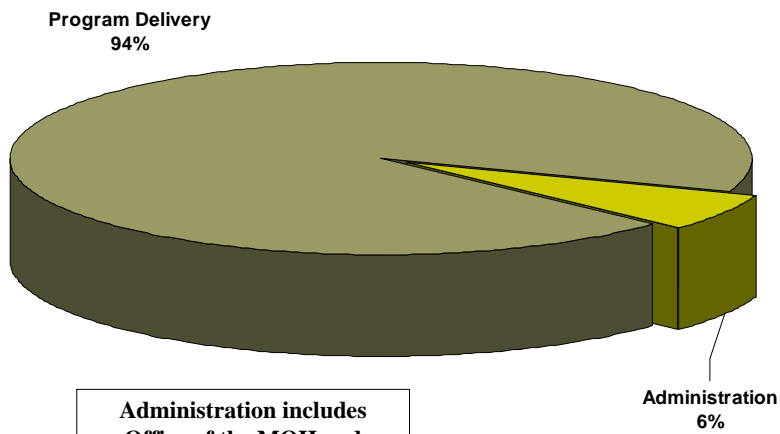
Total Spending - \$61M

- ❑ Wages comprise 71% of total expenditures
- ❑ Wage settlements average 3%
- ❑ OMERS increase 9.9%



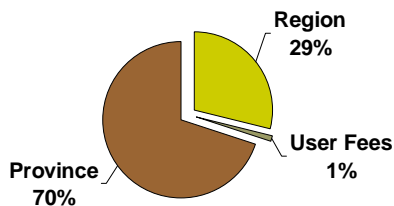
Public Health

Staffing Allocation – 626.8 FTE



Administration includes
Office of the MOH and
Epidemiology staff

Public Health Programs Revenue Sources – \$61M



- Mandatory Programs – cost-shared 65/35
- 100% provincially funded programs such as Healthy Babies - Healthy Children, Case Management
- User fees related to ministry payment for vaccinations

Challenges Facing Public Health

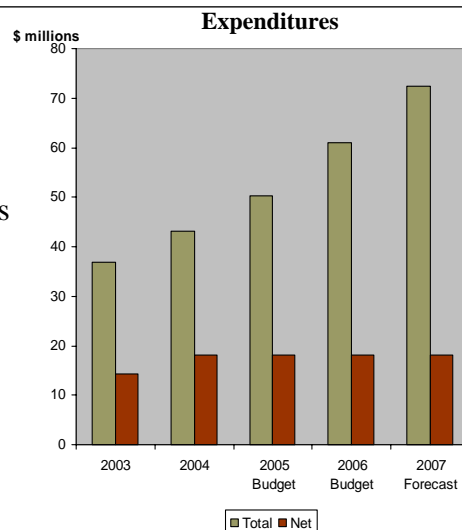
- **Peel's rapid growth:**
 - 21,000 to 25,000 residents annually
 - diversity
 - schools
 - food premises
 - air quality, etc
- **Inflation:** wages comprise 71% of budget, OMERS
- **Legislative requirements:**
 - Water Safety
 - Immunization of School Pupils Act

Challenges Facing Public Health

- When you apply the Public Health Mandatory Program standards to Peel, current service levels are at 76%
- Implementing “*Setting Directions for Public Health in Peel, 2005 - 2007*” will allow Peel’s services to address the health needs of Peel citizens

Growing Provincial Investment in Public Health

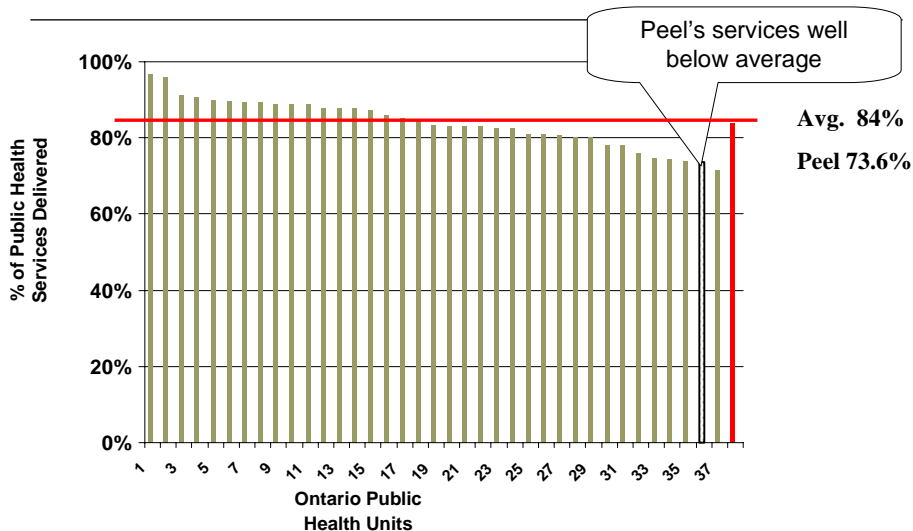
- 2004 funding 50%; by 2007 75%
- “*Setting Directions*”, inflation and growth impacts will be **fully funded by Province**
- **No net increase 2004 to 2007**



Public Health 2006 Budget Pressures

Category	Net \$000s	FTE	Variance Explanation
Non-Controllable	1,768		Wage and benefit increases and inflation on goods & services
Controllable	269	14	Growth – Provide services to +21,000 residents, food premises etc
Non-Controllable	166	9	Legislated – Drinking water safety reg. 170, and School Pupils Act immunization requirements
Controllable	1,941	56	Growth – Implementing year two of <i>Setting Directions for Public Health in Peel – 2005 to 2007</i>
Controllable	197		Growth - Contribution to reserves to fund 10-Year capital plan
Efficiencies	(384)		Introduction of tablet pc's for the inspection program and volunteer program (\$1.1M Total Savings)
Revenue	(3,957)		Provincial funding rate increase from 55% to 65%
Total	0		All budget pressures fully funded by increase in Provincial funding rate

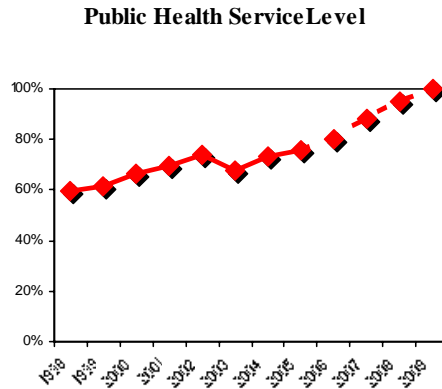
2002 PROVINCIAL SERVICE LEVELS



Public Health Community Impact

Description of Trend:

- Services affected by SARS and WNV in 2003 & 2004
- *Setting Directions for Public Health in Peel, 2005 – 2007*
- Service level improvements tend to show up the year following an initial investment in resources.



Public Health

*“Setting Directions for Public Health in Peel,
2005 – 2007”*

Year 2 Service Improvements

Our Mandate:

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the healthiest in Canada by promoting health and
preventing illness”*

Setting Directions...

Food Safety & Enforcement

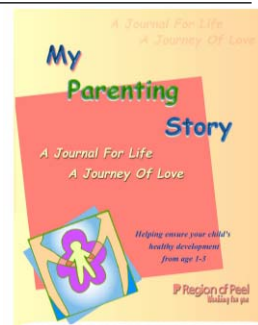
- ❑ Improve timeliness of scheduled inspections to:
 - 100% for high risk
 - 70% for medium risk
 - 60% for low risk establishments
- ❑ Service demands related to ***“Peel Food Check”*** program
- ❑ Tobacco Control



Setting Directions...

Reproductive Health and Parenting Programs

- ❑ Provide nursing services to homeless and marginalized youth
- ❑ Additional 600 hours of service and 2,500 client contacts at Healthy Start for disadvantaged pregnant women
- ❑ Increase breastfeeding services by 3,500 client visits
- ❑ Increase PHN led parenting consultations by 5,100



Setting Directions...

Dental

- ❑ 20% of young Peel children in urgent need of dental care
- ❑ Increase preventive clinic hours in 2006 to serve 1,500 more clients



- ❑ Follow up children in urgent need of dental care

Setting Directions...

Youth and Adult Illness Prevention

- ❑ Expand work to promote healthy nutrition and exercise
- ❑ Implement phase three of the Childhood obesity prevention strategy
- ❑ Expand work to assist community agencies and workplaces with their programs and policies



Setting Directions... Substance Abuse

- Implement marijuana harm reduction campaign
- Inform parents and community groups of host liability
- Implement a campaign to address the risks of binge drinking and alcohol abuse in youth



Setting Directions... School Health



- 20 new schools are planned for 2006 in Peel
- Target for 2007 for effective service is one Nurse per 16 schools.
- Implement Council direction to develop a secondary school strategy to address needs identified in Student Health Survey

Year	Nurse	Schools
2002	1	: 36
2004	1	: 29
2005	1	: 25
2006	1	: 20
GOAL	1	: 16

Setting Directions...

Disease Investigation & Prevention Services

- ❑ Implement HIV Program Review for HIV partner notifications due to life-time risk to sexual partners posed by HIV infection.
- ❑ Implement a health promotion and education campaign to reach youth aged 18-24 years where incidence rates of sexually transmitted diseases are the highest.
- ❑ Manage Tuberculosis cases and contacts efficiently.



Public Health

User Fees

- ❑ Recommendation to reduce user fees
- ❑ No net impact to the Region

User Fee	2005 Rate	2006 Rate	\$ Change	% Change	Rationale
Heartmobile (within Peel)	10	0	(10)	-100%	Removal of all fees associated with Heartmobile to promote more usage within the community – net revenue \$13K
Heartmobile (Cancellation)	100	0	(100)	-100%	Same as above.

Public Health – Why No Service Reduction Options for Consideration

- In 2004 Council approved *Setting Directions for Public Health in Peel – 2005 to 2007* to achieve required service levels in Peel
- 2006 budget is assisted by a \$4M increase in provincial funding as a result shifting from 55% to 65%
- 2006 budget includes efficiencies of \$1.1M (\$384K net)
- 2006 budget includes a recommendation to eliminate the Heartmobile user fee
- Peel continues to play catch-up on public health service levels – no service reductions are recommended

Public Health Conclusion – A Good News Story!!

- No net increase
- Year 2 of “*Setting Directions for Public Health in Peel, 2005 – 2007*” including:
 - Food Safety
 - Immunization
 - Clinical including dental services
 - School Health services
 - Prenatal and breastfeeding support programs
- On track to meet the communities Public Health needs