

RENEWING PUBLIC HEALTH IN ONTARIO

Last June, the McGuinty government launched Operation Health Protection, a three-year action plan to revitalize the province's public health system. The plan addresses many of the recommendations made in Justice Archie Campbell's first interim report on the 2003 SARS outbreak, as well as the Expert Panel on SARS and Infectious Disease Control (Walker report), and the National Advisory Committee on SARS and Public Health (Naylor report).

Initiatives undertaken as part of Operation Health Protection include:

Renewed Commitment To Public Health

The provincial government has increased its share of provincial/municipal funding to local public health units from 50 per cent to 55 per cent, and will pay for 75 per cent by 2007.

Chief Medical Officer Of Health

Amendments to the Health Protection and Promotion Act were passed to increase the authority and independence of the chief medical officer of health.

Provincial Infectious Disease Advisory Committee (PIDAC)

For the first time, Ontario has a scientific advisory body that brings together expertise from public health, acute care and community-based care. The PIDAC is made up of experts in infectious disease, infection control, epidemiology and public health. The PIDAC advises the Chief Medical Officer of Health on the prevention, surveillance and control of infectious diseases in Ontario. There are three subcommittees of PIDAC – infection control, immunization and surveillance, all of which meet regularly.

One of the first important tasks completed by PIDAC was the development of a best practice manual for the prevention and control of the transmission of clostridium difficile in health care facilities.

Integrated Public Health Information System (iPHIS)

Lack of appropriate computer technology to track province-wide infectious diseases was a common theme during the SARS outbreak. Justice Campbell's first report, as well as the Walker and Naylor reports, recommended implementation of new technology to better respond to outbreaks.

In response to these recommendations, in January 2005, the government announced the launch of iPHIS, a new web-based integrated database for all health units to use for case and outbreak management and for the reporting of communicable and reportable disease information. Information on infectious disease can be analyzed quickly, allowing health units to identify and track unusual and unexpected instances of infectious diseases.

Implementation and training of iPHIS has already begun and all health units will be using the system by the end of 2005.

Agency Implementation Task Force (AITF)

The AITF was launched in January 2005 to advise the government on the development and implementation of a new Ontario Health Protection and Promotion Agency. The agency will be a vital resource to health care providers, researchers, hospitals, community health centres and other non-governmental organizations in the areas of health protection, disease prevention and health promotion. The agency is expected to be established by 2006/07.

The AITF is co-chaired by Dr. Terry Sullivan, President and CEO of Cancer Care Ontario, and Dr. Geoff Dunkley, former associate medical officer of health in Ottawa.

The AITF is expected to present a final report in December 2005.

Capacity Review Committee (CRC)

Several of the recommendations made in Justice Campbell's second report relate to medical officers of health and the operation of local public health units. The CRC was set up in January this year to review health services and programs delivered in all 36 health units across the province, and will examine many of the issue raised by Justice Campbell, such as governance, accountability, structure, and capacity issues. The chair of the CRC is Dr. Susan Tamblyn, former medical officer of health from the Perth District Health Unit. The Vice-Chair is Mr. Brian Hyndman, citizen representative on Toronto's Board of Health.

The CRC is expected to present a final report in December 2005.