

Foundational Standard

1. Public health programs and services are planned and implemented to address local population health needs.
2. The public, community partners, and health care providers are aware of relevant and current population health information.
3. The board of health identifies public health priorities, including identification of emerging public health issues.
4. The board of health allocates resources to reflect public health priorities and reallocates resources, as feasible, to reflect emergent public health priorities.
5. Relevant audiences have available information that is necessary for taking appropriate action.
6. Public health practitioners, policy-makers, community partners, health care providers, and the public are aware of the best available research regarding the factors that determine the health of the population and support effective public health practice.
7. The board of health has effective partnerships with community researchers, academic partners, and other appropriate organizations to support public health research and knowledge exchange.
8. The board of health identifies program implementation issues in a timely and effective manner.
9. Public health practitioners and policy-makers are aware of the effectiveness of existing programs and services, as well as factors contributing to their outcomes.

Chronic Disease Prevention

1. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services for chronic disease prevention.
2. There is increased awareness among community partners about the factors associated with chronic diseases that are required to inform program planning and policy development, including the following:
 - Community health status;
 - Risk, protective, and resiliency factors; and
 - The importance of creating healthy environments.
3. Policy-makers have the information required to enable them to amend current policies or develop new policies that would have an impact on the prevention of chronic diseases.
4. The public is aware of the importance of healthy eating, healthy weights, comprehensive tobacco control, physical activity, reduced alcohol use, and reduced exposure to ultraviolet radiation.
5. The public is aware of the benefits of screening for early detection of cancers and other chronic diseases of public health importance.
6. Priority populations have food skills and adopt healthy eating behaviours.
7. Priority populations adopt tobacco-free living.
8. Tobacco vendors are in compliance with the Smoke-Free Ontario Act.
9. Youth have reduced access to tobacco products.

Prevention of Injury and Substance Misuse

1. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services for the prevention of injury and substance misuse.

2. There is increased awareness of community partners about the factors associated with injury and substance misuse required to inform program planning and policy development, including the following:
 - Community health status;
 - Risk, protective, and resiliency factors; and
 - Impact.
3. Policy-makers have the information required to enable them to amend current policies or develop new policies that would have an impact on the prevention of injury and substance misuse.
4. Community partners are engaged in the prevention of injury and substance misuse.
5. The public is aware that the majority of injuries are predictable and preventable.
6. The public is aware of the risk, protective, and resiliency factors associated with injury and substance misuse.
7. The public is aware of the impact associated with injury and substance misuse.
8. Priority populations have the capacity to prevent injury, substance misuse, and associated harms.
9. The public is aware of current legislation related to the prevention of injury and substance misuse.

Reproductive Health

1. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services for the promotion of reproductive health.
2. The public is aware of the importance of creating safe and supportive environments that promote healthy pregnancies, healthy birth outcomes, and preparation for parenthood.
3. Community partners are aware of the importance of creating safe and supportive environments that promote healthy pregnancies, healthy birth outcomes, and preparation for parenthood.
4. Policy-makers have the information required to enable them to amend current policies or develop new policies that would have an impact on the promotion of reproductive health.
5. Individuals in their reproductive years, including pregnant women and their families, have the information, skills, and supports necessary to adopt health-promoting practices.
6. Expectant parents are aware of the benefits of breastfeeding, the mechanics of breastfeeding, and where to obtain assistance with breastfeeding.
7. Priority populations are linked to reproductive health information, programs, and services.
8. Pregnant women and their families at risk of poor birth outcomes are supported and referred to services in the prenatal period.

Child Health

1. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services for the promotion of healthy child development.
2. The board of health achieves timely and effective detection and identification of children at risk of poor oral health outcomes, their associated risk factors, and emerging trends.
3. The public is aware of the importance of creating safe and supportive environments that promote healthy child development.
4. The public is aware of the factors associated with positive parenting.
5. Community partners are aware of the importance of creating safe and supportive environments that promote healthy child development.

6. Policy-makers have the information required to enable them to amend current policies or develop new policies that would have an impact on the promotion of healthy child development.
7. Breastfeeding women have improved knowledge and skills.
8. Priority populations are linked to child/family health information, programs, and services.
9. Children at risk of poor health and developmental outcomes are supported and referred to services prior to school entry.
10. Children urgently in need of oral health care have access to such care.
11. Children in need of preventive oral health services receive essential clinical preventive oral health services.
12. The board of health achieves timely and effective detection and identification of communities with levels of fluoride outside the therapeutic range.

Infectious Diseases Prevention and Control

1. The board of health achieves timely and effective detection and identification of cases/outbreaks of infectious diseases of public health importance, their associated risk factors and emerging trends.
2. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services to prevent or reduce the burden of infectious diseases of public health importance.
3. There is increased public awareness of infection prevention and control practices.
4. Community partners and health care providers are aware of the local epidemiology of infectious diseases of public health importance.
5. Community partners and health care providers are aware of infection prevention and control practices.
6. Settings that are required to be inspected are aware of appropriate infection prevention and control practices.
7. The board of health has effective partnerships with committees, advisory bodies, and networks that address infection prevention and control practices.
8. Hospitals, LTCHs, and other settings with risk of infections are able to prevent nosocomial infections and control the spread of outbreaks of infectious diseases of public health importance.
9. The board of health manages outbreaks and other sporadic cases of infectious diseases of public health importance resulting in limited secondary cases.
10. The board of health manages reported cases of infectious diseases of public health importance and their contacts.
11. The board of health manages infection prevention and control practice complaints.
12. Settings that are required to be inspected use appropriate infection prevention and control practices.

Rabies Prevention and Control

1. The board of health achieves timely and effective detection and identification of positive reports of rabies in animal species and other emerging risks and trends associated with rabies in humans.
2. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services to prevent the occurrence of rabies in humans.
3. The public is aware of rabies and its prevention.
4. The public, community partners, and health care providers report all suspected rabies exposures in the health unit to the board of health.

5. The board of health manages reports of suspected rabies exposures.
6. The public, community partners, and health care providers are prepared for rabies threats.

Tuberculosis Prevention and Control

1. The board of health achieves timely and effective detection and identification of TB trends, emerging risks, and associated risk factors.
2. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services to prevent and reduce the burden of TB.
3. The board of health has effective partnerships with committees, advisory bodies, networks, and community organizations to address the prevention and control of TB.
4. Public health risks associated with active TB are mitigated.
5. Individuals with infectious TB are isolated.
6. Individuals with active TB (cases) receive the appropriate medication.
7. Individuals with active TB or LTBI are identified.
8. Individuals with LTBI are offered appropriate treatment.

Sexual Health, Sexually Transmitted Infections, and Blood-borne Infections (including HIV)

1. The board of health achieves timely and effective detection and identification of cases of sexually transmitted infections and blood-borne infections, and their associated risk factors and emerging trends.
2. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services to promote healthy sexuality and to prevent or reduce the burden of sexually transmitted infections and blood-borne infections.
3. The public is aware of risk, protective, and resiliency factors related to healthy sexuality and the prevention of sexually transmitted infections and blood-borne infections.
4. Community partners are aware of the importance of having supportive environments to promote healthy sexuality and prevent sexually transmitted infections and blood-borne infections.
5. Priority populations have the capacity to adopt behaviours related to healthy sexuality and the prevention of sexually transmitted infections and blood-borne infections.
6. The board of health manages reported cases and contacts of sexually transmitted infections and blood-borne infections.
7. Health care providers have the capacity to manage cases and contacts of sexually transmitted infections and blood-borne infections.
8. Priority populations have access to sexual health services, including contraception and comprehensive pregnancy counselling.
9. Priority populations have access to harm reduction services to reduce the transmission of sexually transmitted infections and blood-borne infections.

Vaccine Preventable Diseases

1. The board of health achieves timely and effective detection and identification of children susceptible to vaccine preventable diseases, their associated risk factors, and emerging trends.
2. The board of health achieves timely and effective detection and identification of priority populations facing barriers to immunization, their associated risk factors, and emerging trends.

Ontario Public Health Standards: Board of Health Outcomes

3. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services to reduce or eliminate the burden of vaccine preventable diseases.
4. The public is aware of the importance of immunization across the lifespan.
5. Health care providers report adverse events following immunization to the board of health.
6. Health care providers are knowledgeable of improved practices related to proper vaccine management, including storage and handling.
7. Target coverage rates for provincially funded immunizations are achieved.
8. The board of health effectively responds to vaccine preventable disease outbreaks.
9. The public is aware of the availability of travel health services, including immunizations for travellers.
10. Health care providers adhere to proper vaccine management, including storage and handling practices and inventory management.
11. Vaccines are distributed in an equitable and timely manner that adheres to proper vaccine management, including storage and handling practices.
12. The board of health achieves timely and effective detection and identification of adverse events following immunization.
13. Children have up-to-date immunizations according to the current Publicly Funded Immunization Schedules for Ontario and in accordance with the Immunization of School Pupils Act and the Day Nurseries Act.

Food Safety

1. The board of health achieves timely and effective detection and identification of:
 - Food-borne illnesses;
 - Their associated risk factors and emerging trends; and
 - Unsafe food in food premises.
2. The board of health mitigates food-borne illness risks
3. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services to reduce the burden of food-borne illness of public health importance.
4. Food handlers in food premises handle and manage food in a safe and sanitary manner.
5. Community partners are aware of safe food-handling practices and food safety issues.
6. The public is aware of safe food-handling practices and food safety issues.

Safe Water

1. The board of health achieves timely and effective detection and identification of water contaminants and illnesses, their associated risk factors, and emerging trends.
2. The board of health mitigates water-borne illness.
3. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services to reduce the burden of water-borne illnesses of public health importance.
4. Members of the public who use private wells, cisterns, rain or lake water are aware of how to safely manage their own drinking-water systems.
5. The public is aware of drinking water safety.
6. Owners/operators of recreational water facilities operate in a safe and sanitary manner.

7. Owners/operators of drinking-water systems operate in a safe and sanitary manner.
8. The public is aware of potential risk of illness and injury related to public beach use.

Health Hazard Prevention and Management

1. The board of health achieves timely and effective detection and identification of exposures of human health concern and associated public health risks, trends and illnesses.
2. The board of health is aware of and uses epidemiology to influence the development of healthy public policy and its programs and services to reduce or eliminate the burden of illness from health hazards in the environment.
3. The public is aware of health protection and prevention activities related to health hazards and conditions that create healthy environments.
4. Community partners have the information necessary to create healthy public policies related to reducing exposure to health hazards.
5. The public and community partners are aware of health hazard incidents and risks in a timely manner.

Public Health Emergency Preparedness

1. There is enhanced public health emergency preparedness, response, and recovery behaviours.
2. The board of health is aware of the hazards in the health unit that are relevant to the board of health.
3. The board of health has enhanced risk-based emergency planning and programming to guide ongoing board of health preparedness efforts.
4. The board of health has current and relevant mechanisms in place to support the continuation and restoration of time-critical board of health services in the event of disruption.
5. The board of health has effective risk-based emergency response capability and clearly defined public health roles and responsibilities in an emergency.
6. The board of health communicates with community partners in order to share information required to take action in advance of, during, and after a public health emergency or an emergency with public health impacts.
7. The public is aware of health risks and emergency preparedness.
8. The board of health is aware of emergency preparedness and response roles and responsibilities.