

Foundational Standard

1. The board of health shall assess current health status, health behaviours, preventive health practices, health care utilization relevant to public health, and demographic indicators in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
3. The board of health shall use population health, determinants of health and health inequities information to assess the needs of the local population, including the identification of populations at risk, to determine those groups that would benefit most from public health programs and services (i.e., priority populations).
4. The board of health shall tailor public health programs and services to meet local population health needs, including those of priority populations to the extent possible based on available resources.
5. The board of health shall provide population health information including determinants of health and health inequities to the public, community partners, and health care providers, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
7. The board of health shall interpret and use surveillance data to communicate information on risks to relevant audiences in accordance with the Identification, Investigation and Management of Health Hazards Protocol, 2008 (or as current); the Infectious Diseases Protocol, 2008 (or as current); the Population Health Assessment and Surveillance Protocol, 2008 (or as current); the Public Health Emergency Preparedness Protocol, 2008 (or as current); and the Risk Assessment and Inspection of Facilities Protocol, 2008 (or as current).
8. The board of health shall engage in knowledge exchange activities with public health practitioners, policy-makers, community partners, health care providers, and the public regarding factors that determine the health of the population and support effective public health practice gained through population health assessment, surveillance, research, and program evaluation.

Chronic Disease Prevention

1. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current), in the areas of:
 - Healthy eating;
 - Healthy weights;
 - Comprehensive tobacco control;
 - Physical activity;
 - Alcohol use; and
 - Exposure to ultraviolet radiation.
3. The board of health shall work with school boards and/or staff of elementary, secondary, and post-secondary educational settings, using a comprehensive health promotion approach, to influence the development and implementation of healthy policies, and the creation or enhancement of supportive environments to address the following topics:
 - Healthy eating;
 - Healthy weights;
 - Comprehensive tobacco control;
 - Physical activity;
 - Alcohol use; and
 - Exposure to ultraviolet radiation.These efforts shall include:
 - a. Assessing the needs of educational settings; and
 - b. Assisting with the development and/or review of curriculum support

7. The board of health shall increase the capacity of community partners to coordinate and develop regional/local programs and services related to:
 - Healthy eating, including community-based food activities;
 - Healthy weights;
 - Comprehensive tobacco control;
 - Physical activity;
 - Alcohol use; and
 - Exposure to ultraviolet radiation.These efforts shall include:
 - a. Mobilizing and promoting access to community resources;
 - b. Providing skill-building opportunities; and
 - c. Sharing best practices and evidence for the prevention of chronic diseases

Prevention of Injury and Substance Misuse

1. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring trends over time, emerging trends, and priority populations, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current), in the areas of:
 - Alcohol and other substances;
 - Falls across the lifespan;
 - Road and off-road safety; and
 - Other areas of public health importance for the prevention of injuries.
2. The board of health shall work with community partners, using a comprehensive health promotion approach, to influence the development and implementation of healthy policies and programs, and the creation or enhancement of safe and supportive environments that address the following:
 - Alcohol and other substances;
 - Falls across the lifespan;
 - Road and off-road safety; and may include
 - Other areas of public health importance for the prevention of injuries as identified by local surveillance in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
3. The board of health shall use a comprehensive health promotion approach to increase the capacity of priority populations to prevent injury and substance misuse by:
 - a. Collaborating with and engaging community partners;
 - b. Mobilizing and promoting access to community resources;
 - c. Providing skill-building opportunities; and
 - d. Sharing best practices and evidence for the prevention of injury and substance misuse.
5. The board of health shall use a comprehensive health promotion approach in collaboration with community partners, including enforcement agencies, to increase public awareness of and adoption of behaviours that are in accordance with current legislation related to the prevention of injury and substance misuse in the following areas:
 - Alcohol and other substances;
 - Falls across the lifespan;
 - Road and off-road safety; and may include
 - Other areas of public health importance for the prevention of injuries as identified by local surveillance in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).

Reproductive Health

1. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current) in the areas of:
 - Preconception health;
 - Healthy pregnancies;
 - Reproductive health outcomes; and
 - Preparation for parenting.

Child Health

1. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current), in the areas of:
 - Positive parenting;
 - Breastfeeding;
 - Healthy family dynamics;
 - Healthy eating, healthy weights, and physical activity;
 - Growth and development; and
 - Oral health.
2. The board of health shall conduct surveillance of children in schools and refer individuals who may be at risk of poor oral health outcomes in accordance with the Oral Health Assessment and Surveillance Protocol, 2008 (or as current), and the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
4. The board of health shall work with community partners, using a comprehensive health promotion approach, to influence the development and implementation of healthy policies and the creation or enhancement of supportive environments to address:
 - Positive parenting;
 - Breastfeeding;
 - Healthy family dynamics;
 - Healthy eating, healthy weights, and physical activity;
 - Growth and development; and
 - Oral health.These efforts shall include:
 - a. Conducting a situational assessment in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current); and
 - b. Reviewing, adapting, and/or providing behaviour change support resources and programs.
8. The board of health shall provide, in collaboration with community partners, outreach to priority populations to link them to information, programs, and services.
10. The board of health shall conduct oral screening in accordance with the Oral Health Assessment and Surveillance Protocol, 2008 (or as current).
12. The board of health shall provide the Children in Need of Treatment (CINOT) Program in accordance with the Children in Need of Treatment (CINOT) Program Protocol, 2008 (or as current). For CINOT-eligible children, the board of health shall provide referrals to oral health care providers and monitor the action taken.
13. The board of health shall provide or ensure the provision of the essential clinical preventive oral health services at least annually in accordance with the Preventive Oral Health Services Protocol, 2008 (or as current).

Infectious Diseases Prevention and Control

2. The board of health shall conduct surveillance of:
 - Infectious diseases of public health importance, their associated risk factors, and emerging trends; and
 - Infection prevention and control practices of inspected premises associated with risk of infectious diseases of public health importancein accordance with the Infectious Diseases Protocol, 2008 (or as current) and the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
3. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).

Ontario Public Health Standards: Requirements related to Elementary Schools

4. The board of health shall work with community partners to improve public knowledge of infectious diseases of public health importance and infection prevention and control practices in the following areas:
 - Epidemiology of infectious diseases of public health importance that are locally relevant;
 - Respiratory etiquette;
 - Hand hygiene;
 - Vaccinations and medications to prevent or treat infectious diseases of public health importance;
 - Infection prevention and control core competencies, incorporating both Routine Practices (including personal protective equipment) and Additional Precautions (transmission-based precautions); and
 - Other measures, as new interventions and/or diseases arise.These efforts shall include:
 - a. Adapting and/or supplementing national and provincial health communications strategies; and/or
 - b. Developing and implementing regional/local communications strategies.

Rabies Prevention and Control

4. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
5. The board of health shall work with community partners to improve public knowledge of rabies and its prevention in the community by supplementing national/provincial education/communications strategies and/or developing and implementing regional/local communications strategies based on local epidemiology.

Tuberculosis Prevention and Control

3. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
4. The board of health shall engage in health promotion and policy development activities with community partners, policy-makers, and health care providers that have clients/contacts from priority populations based on local epidemiology.

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

3. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
4. The board of health shall increase public awareness of the epidemiology, associated risk behaviours, risk factors, and risk reduction strategies related to healthy sexuality, sexually transmitted infections, and blood-borne infections by:
 - a. Adapting and/or supplementing national and provincial health communications strategies; and/or
 - b. Developing and implementing regional/local communications strategies.
5. The board of health shall use a comprehensive health promotion approach to increase the community capacity regarding the promotion of healthy sexuality, including the prevention of adolescent pregnancies, sexually transmitted infections, and blood-borne infections, by:
 - a. Collaborating with and engaging community partners and priority populations;
 - b. Mobilizing and promoting access to community resources;
 - c. Providing skill-building opportunities; and
 - d. Sharing best practices and evidence.
6. The board of health shall collaborate with community partners, including school boards, to create supportive environments to promote healthy sexuality and access to sexual health services.
11. The board of health shall engage community partners and priority populations in the planning, development, and implementation of harm reduction programming.

Vaccine Preventable Diseases

1. The board of health shall assess, maintain records and report, where applicable, on:
 - The immunization status of children enrolled in licensed child care programs as defined in the Day Nurseries Act;
 - The immunization status of children attending schools in accordance with the Immunization of School Pupils Act; and
 - Immunizations administered at board of health-based clinics as required in accordance with the Immunization Management Protocol, 2008 (or as current) and the Infectious Diseases Protocol, 2008 (or as current).
2. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations, in accordance with the Infectious Diseases Protocol, 2008 (or as current) and the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
3. The board of health shall work with community partners to improve public knowledge and confidence in immunization programs by:
 - a. Supplementing national and provincial health communications strategies; and/or
 - b. Developing and implementing regional/local communications strategies.Topics to be addressed shall include:
 - The importance of immunization;
 - Diseases that vaccines prevent;
 - Recommended immunization schedules for children and adults and the importance of adhering to the schedules;
 - Introduction of new provincially funded vaccines;
 - Promotion of childhood and adult immunization, including high-risk programs;
 - The importance of maintaining a personal immunization record for all family members;
 - The importance of reporting adverse events following immunization;
 - Reporting immunization information to the board of health as required;
 - Vaccine safety; and
 - Legislation related to immunizations.
7. The board of health shall promote and provide provincially funded immunization programs to any eligible person in the health unit, including:
 - Board of health-based clinics;
 - School-based clinics (including but not limited to hepatitis B and meningococcal immunization);
 - Community-based clinics; and
 - Outreach clinics to priority populations.
13. The board of health shall comply with the Immunization Management Protocol, 2008 (or as current), that specifies the process for the assessment of the immunization status of children in licensed day nurseries as defined in the Day Nurseries Act and the enforcement of the Immunization of School Pupils Act.

Food Safety

2. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
4. The board of health shall ensure food handlers in food premises have access to training in safe food-handling practices and principles in accordance with the Food Safety Protocol, 2008 (or as current).

Safe Water

4. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
11. The board of health shall provide all the components of the Safe Water Program in accordance with all applicable statutes and regulations, and the Drinking Water Protocol, 2008 (or as current) to protect the public from exposure to unsafe drinking water.

Health Hazard Prevention and Management

2. The board of health shall conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
4. The board of health shall assist community partners to develop healthy policies related to reducing exposure to health hazards. Topics may include but are not limited to:
 - Indoor air quality;
 - Outdoor air quality;
 - Extreme weather; and
 - Built environments.
6. The board of health shall inspect and assess facilities where there is an elevated risk of illness associated with exposures that are known or suspected to be associated with health hazards in accordance with the Risk Assessment and Inspection of Facilities Protocol, 2008 (or as current).