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March 1, 2006

To: Ontario Board of Health

Re: Response to Ontario Medical Association Health Policy
Report Guarding the Health of Citizens: The Crucial Role of the
Medical Officer of Health (Ontario Medical Reviews-December, 2005)

At the regular Board of Health Meeting of February 8, 2006, the Peterborough County-City Board of Health passed the above-noted resolution, and respectfully requests your support of, and action on this resolution.

Whereas the Ministry of Health and Long-Term Care has initiated and received the interim report of the Capacity Review Committee; and

whereas the Capacity Review Committee Recommendations will address core capacities, financial and program accountability, geographic alignments, primary care, and municipal functions; and

whereas the Capacity Review Committee has recognized the need for continuing local governance regardless of the amount of provincial funding; and

whereas 36 Boards of Health in Ontario are currently working with three distinct board governance structures including the model that works very well for Peterborough County and City; and

whereas the established partnerships on the Board of Health for the Peterborough County-City Health Unit have pioneered creative solutions for meeting the health care needs of the residents of the County of Peterborough, the City of Peterborough, and Curve Lake First Nation; and

whereas the Board of Health for the Peterborough County-City Health is in full support of the majority of the recommendations contained in the Ontario Medical Association's Health Policy report published in the December, 2005 issue of the Ontario Medical Review, the Board of Health has fundamental concerns with the two recommendations that propose that municipalities be removed from a role in governing and funding public health; and

whereas the Board of Health for the Peterborough County-City Health Unit strongly supports Recommendations 1 through 9 that call for Medical Officer of Health positions to be properly staffed, for the Medical Officer of Health to be given full chief executive officer authority, and for adequate provision be made for Medical Officer of Health training and development incentives; and

whereas the Board of Health for the Peterborough County-City Health Unit strongly disagrees with Recommendations 10 and 11 that call for funding and control of public health to be uploaded to the Province and that municipalities be removed from the business of governing public health. The Board of Health believes that the effective delivery of public health programs and services requires direct support and involvement at the local level. To remove municipalities from a role in "governing the business of public health" is to walk away from huge sources of local "know how" and tangible and intangible support in the delivery of programs. There are countless examples throughout Ontario of value added contributions to public health programs as a direct result of local municipal involvement. For example, in Peterborough during 1995 and 1996, the Chairperson of the Board of Health, City Councillor George Mitchell, played a leadership role in the community and at Peterborough City Council leading to City Council passing a Smoking By-law, the second City in Ontario to have such a By-law. Without a direct financial stake in public health programs and services, municipal interest in the business of health units will diminish and their attention will be focused on the community issues for which they have responsibility. The result will be a marginalization and lack of local support for health unit programs and services. the Board of Health for the Peterborough County-City Health Unit supports a 75% provincial/25% local municipal public health funding formula instead of "uploading the funding and control of public health to the province". In Peterborough the delivery of public health programs and services has, and continues to be negatively affected by the serious shortage of family physicians. To help resolve this problem, local municipalities provided funding through the Board of Health to establish centres to provide access to health care in rural areas of Peterborough County (Havelock, Keene, Apsley) and within the City of Peterborough for persons without family physicians. Local municipalities also

provided 100% funding to support the preparation of a plan to establish Family Health Teams in Peterborough. With the help of this funding support, five Family Health Teams were approved for Peterborough County and City by the Province.

And whereas it is understood that without strong provincial direction, the benefits of maintaining strong local responsibility for program delivery can be lost, potentially resulting in inappropriate program delivery or uneven program delivery on a provincial basis. To that end, the Board of Health for the Peterborough County-City Health Unit supports and encourages the development of a well defined provincial program standards and the introduction of a comprehensive provincial program audit process.

And whereas it is also understood that some rationalization of the current 36 health units may be an effective way to deal with some program delivery issues, to achieve economies of scale, and to help alleviate the current shortage of Medical Officers of Health. We encourage that any restructuring be done in a way to preserve strong program delivery provided by involvement at the municipal level.

Therefore be it resolved that the Ministry of Health and Long-Term Care take **no immediate** action on the report and recommendations contained in the *Ontario Medical Association Health Policy Report Guarding the Health of Citizens: The Crucial Role of the Medical Officer of Health (Ontario Medical Review - December, 2005)*; and

be it further resolved that members of Boards of Health be kept well informed and a party to the Capacity Review Committee's findings and recommendations; and

be it further resolved that the Ministry of Health and Long-Term Care ensure that all public health units are staffed with full-time Medical Officers of Health with full chief executive officer authority, with provision for Medical Officer of Health training and development incentives; and

be it further resolved that a role for local municipalities in public health governance be continued through a funding formula for public health programs and services that includes a 25% contribution from local municipalities; and

be it further resolved that provincial standards for public health programs and services be well defined and include the introduction of a comprehensive provincial audit process.

be it finally resolved that copies of this resolution be sent to the Minister of Health and Long-Term Care; the Minister of Health Promotion, the Chief Medical Officer of Health and Assistant Deputy Minister, Public Health Division, Ministry of Health and Long-Term Care; local Members of Provincial Parliament; Councils for the County of Peterborough, City of Peterborough, and Curve Lake First Nation; all Ontario Boards of Health; the Ontario Medical Association (OMA), the Association of Local Public Health Agencies (alPHA), the Ontario Public Health Association (OPHA); and the Association of Municipalities of Ontario (AMO).

Yours truly,

[Signature]

Paul Jobe
Chair, Board of Health

Copies to:
Honourable George Smitherman, Minister of Health
Honourable Jim Watson, Minister of Health Promotion
Dr. Sheela Basrur, Chief Medical Officer of Health and Deputy Minister of Health
Mr. Jeff Leal, MPP Peterborough
Ms. Laurie Scott, MPP, Haliburton, Victoria, Brock
Warden Neal Cathcart and Members of County of Peterborough Council
Mayor Sylvia Sutherland and Members of City of Peterborough Council
Chief Keith Knott, Curve Lake First Nation
Ontario Boards of Health
Association of Local Public Health Agencies (alPHA)
Ontario Medical Association
Ontario Public Health Association
Association of Municipalities of Ontario