

Aligning the APHEO Core Indicators for Public Health with the Ontario Public Health Standards

Data Sources and Data Gaps

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Indicators Working Group

Background

- **APHEO Core Indicators for Public Health**
 - Measures of the health of individuals and their communities
 - Standardized definitions for over 120 public health indicators to enhance accurate and standardised reporting of information across health units
 - Criteria for selection
 - Applicable to outcomes and requirements from the Ontario Public Health Standards (OPHS)
 - Data generally available and accessible to all or most public health units
 - Useful and meaningful
 - Relevant to health
 - Referenced in the Population Health Assessment and Surveillance Protocol of the OPHS

To advance and promote the discipline and professional practice of epidemiology in Ontario public health units



APHEO

Association of Public Health Epidemiologists in Ontario

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5D Vegetable and Fruit Consumption

[Description](#) | [Specific Indicators](#) | [Ontario Public Health Standards \(OPHS\)](#) | [Corresponding Health Indicator from Statistics Canada and CIHI](#) | [Data Sources](#) | [Survey Questions](#) | [Alternative Data Source](#) | [Analysis Check List](#) | [Method of Calculation](#) | [Basic Categories](#) | [Indicator Comments](#) | [Cross-References to Other Indicators](#) | [Cited References](#) | [Other References](#) | [Changes Made](#) | [Acknowledgements](#)

Description

- Proportion of the population, aged 12 and over, that have consumed vegetables and fruits five or more times daily.

Specific Indicators

- Proportion of population consuming vegetables and fruits five or more times per day

Ontario Public Health Standards (OPHS)

The Ontario Public Health Standards (OPHS) establish requirements for the fundamental public health programs and services carried out by boards of health, which include assessment and surveillance, health promotion and policy development, disease and injury prevention, and health protection. The OPHS consist of one Foundational Standard and 13 Program Standards that articulate broad societal goals that result from the activities undertaken by boards of health and many others, including community partners, non-governmental organizations, and governmental bodies. These results have been expressed in terms of two levels of outcomes: societal outcomes and board of health outcomes. Societal outcomes entail changes in health status, organizations, systems, norms, policies, environments, and practices and result from the work of many sectors of society, including boards of health, for the improvement of the overall health of the population. Board of health outcomes are the results of endeavours by boards of health and often focus on changes in awareness, knowledge, attitudes, skills, practices, environments, and policies. Boards of health are accountable for these outcomes. The standards also outline the requirements that boards of health must implement to achieve the stated results.

Outcomes Related to this Indicator

- Societal Outcome (Chronic Disease Prevention): An increased proportion of the population lives, works, plays, and learns in healthy environments that contribute to chronic disease prevention.
- Societal Outcome (Chronic Disease Prevention): There is increased adoption of behaviours and skills associated with reducing the risk of chronic diseases of public health

<http://www.apheo.ca/index.php?pid=55>

Background

- **Ontario Public Health Standards**
 - Purpose: to establish guidelines for fundamental public health programs and services
- **Core Indicators Working Group**
 - Ensure the core indicators are accurate, current and reflect the OPHS
 - 6 current subgroups
- **The Documents:**
 - Alignment of the Ontario Public Health Standards and Core Indicators
 - Data Gaps in Public Health Indicators in Ontario

Purpose:

- Update two important core indicator resources:
 - Alignment of the Ontario Public Health Standards and Core Indicators
 - Data Gaps in Public Health Indicators in Ontario

Methods:

- Steps taken in updating the documents
 - Environmental scan through APHEOlist
 - First draft developed with guidance from the CIWG
 - Individual meetings scheduled with the individual CIWG subgroups
 - 2nd draft developed based on feedback from the CIWG
 - Final draft will be reviewed by volunteer APHEO members

Results:

- Alignment of the Ontario Public Health Standards and Core Indicators
 - General format
 - Screen shot example
- Data Gaps in Public Health Indicators in Ontario
 - General format
 - Example

APHEO Core Indicators	Chronic Diseases and Injuries Program Standards			
	Chronic Disease Prevention Standards			
	Healthy Eating	Healthy Weights	Comprehensive Tobacco Control	Physical Activity
Vegetable and Fruit Consumption	CCHS, RRFSS*			
Adult BMI		CCHS, RRFSS*		
Adolescent BMI		CCHS		
Smoking status			CCHS, RRFSS*	
Smoke-free homes			CCHS, RRFSS*	
Non-smoker second-hand smoke exposure			CCHS, RRFSS*	
Minors' access to Tobacco			PHU, RRFSS*	
Smoking Cessation			CCHS, RRFSS*	
Smoking Attributable Mortality			CCHS, RRFSS*, VS-deaths	
Smoking during pregnancy			CCHS, RRFSS*	
Leisure-time physical activity				CCHS
Screen time				CCHS
Population Density				Census
Core indicator in development / future development				Sidewalk and Bike Lane Availability
Data Sources CCHS- Canadian Community Health Survey Census- Canadian Census PHU- Public Health Unit RRFSS- Rapid Risk Factor Surveillance System VS- Vital Statistics				
* Secondary data source (may not be available for all health units)				

Data Gaps in Public Health Indicators in Ontario

Types of Data Gaps: *Example: Healthy Eating*

		Data Available	
		Yes	No
Indicator Proposed	Yes	In-home meals	Food skills
	No	Fast food outlet density	Fruit and vegetable consumption in children 11 years and under

Final Remarks and Next Steps:

- Living document
 - grow and change over time with the changing needs, requirements, core indicators and data availability
- Draft document finalisation
- APHEO member review
 - Request to be sent through APHEOlist

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Questions?