

## Core Indicators For Public Health In Ontario

### Core Indicators Work Group

<b>Date:</b>	January 25, 2012
<b>Location:</b>	Teleconference
<b>Attendees:</b>	Sherri Deamond, Lawson Greenberg, Natalie Greenidge, Shanna Hoetmer, Luanne Jamieson, Carma Lynn Koole, Cameron McDermaid, Ahalya Mahendra, Mary-Anne Pietrusiak, Suzanne Sinclair and Julie Stratton
<b>Regrets:</b>	Susan Bondy, Brenda Guarda, Gillian Lim, Katherine Russell and Brenda Wannell.
<b>Chair:</b>	Shanna Hoetmer
<b>Recorder:</b>	Luanne Jamieson

### Minutes

	Item	Action
1.0	<b>Review of Agenda</b>	
2.0	<p><b>Review of Minutes - October 24, 2011</b></p> <p><b>Action items brought forward from previous meetings: October 24, 2011</b></p> <ul style="list-style-type: none"> <li>• Presentations and Core Indicators promotional material (pamphlet) have been added to the website. Anne-Marie has additional hard copies of the pamphlet available – <i>complete</i></li> <li>• Child Youth Health Indicators Report Project - project will be launched on February 3, 2012 at Public Health Ontario. Shanna is sitting on the Stakeholder Advisory Committee on behalf of the CIWG – <i>ongoing</i></li> <li>• Core Indicators External Review Process - Natalie has drafted policy for review – <i>on meeting agenda</i></li> </ul> <p><b>June 13, 2011</b></p> <ul style="list-style-type: none"> <li>• Minimal Data Set (MDS) Consultations and Resources</li> <li>• Age ranges for cancer reporting - can be added to new resource on documenting known issues – <i>outstanding</i></li> <li>• Process for revisiting indicators – <i>on meeting agenda</i></li> <li>• Thank you letters – <i>outstanding</i></li> </ul>	<p><b>All</b> - send Shanna any past presentations that need to be uploaded to the website</p> <p><b>Shanna</b> to f/u with <b>Brenda</b> re: adding MDS report reference to smoking indicators</p> <p><b>Brenda/Shanna</b> to f/u on thank you letters</p>
3.0	<b>Business Arising</b>	
3.1	<p><b>Welcome to new and returning members</b></p> <ul style="list-style-type: none"> <li>• Farewell to Jennifer Skinner – Carma-Lynn joining today to provide HEAL Subgroup update. She is an Epidemiologist at Niagara Region Public Health.</li> <li>• Welcome to Lawson Greenberg from Statistics Canada. He is the new unit head for Health Indicators.</li> <li>• Katherine Russell is returning to the CIWG after being on leave.</li> </ul>	

3.2	<p><b>Public Health Agency of Canada - Public Health Scholarship and Capacity Building Initiative</b></p> <ul style="list-style-type: none"> <li>• Grant application submitted to PHAC for a two-year project to support the Core Indicators</li> <li>• Approximately \$150,000 in funding was requested.</li> <li>• Project will include support for a project manager, expert panel of three members and an evaluation consultant</li> <li>• Have met the initial screening criteria and provided clarification around work plan and budget</li> <li>• Main part of project is an evaluation. Also included is resource development/revisions and strategic planning.</li> <li>• Proposed resources include: (1) Methods for Combining Cycles of the Canadian Community Health Survey (including syntax files); (2) Privacy and Confidentiality Release Guidelines; (3) Methods for Age Standardizing Survey Estimates; and (4) Life Table Worksheets.</li> </ul>	
3.3	<p><b>Subgroup for Analysis Standards</b></p> <ul style="list-style-type: none"> <li>• Holding off posting a call to APHEO members for a new subgroup until we hear back from PHAC about the funding application (see 3.2)</li> </ul>	
3.4	<p><b>Alignment of the Core Indicators to the Ontario Public Health Standards and Data Gaps resources</b></p> <p><b>Alignment Document</b></p> <ul style="list-style-type: none"> <li>• Question from Sherri – Should we put cancer incidence under radiation exposure in environment? Decision made not to include it as incidence, may refer to acute cancer (Mary-Anne), and does not qualify the type of radiation (Cam)</li> <li>• Question from Julie – Can we use MTO data as a source? Suzanne – contacted MTO <i>*access to these data source is under investigation, as availability of data is in question.</i> They are willing to share data. Passed off to regional planner for what is in the data request</li> <li>• Question from Natalie – Can we use OHISS data as a source? <i>*access to these data source is under investigation, as availability of data is in question</i></li> <li>• Question from Julie – page 7 – Does this refer to human or animal rabies? The indicator covers both.</li> <li>• Question from Julie – on page 11, listing Stats Canada as data source. Are they the provider or the source? Also, on page 13 – is RRFSS or CCHS the source?</li> <li>• Julie – please change ‘Peel health department’ to ‘Peel Public Health’</li> </ul> <p><b>Data Gaps Document</b></p> <ul style="list-style-type: none"> <li>• Question – ‘Meals eaten in home’ vs ‘out of home’ – Is the HEAL subgroup looking to develop an indicator? No</li> <li>• Question on sodium – Are these new modules? Yes</li> <li>• Food skills and density – these are OK under data gap. Not available because data is not robust enough.</li> <li>• There should be more clarity around indicator versus data gaps in the document.</li> </ul>	<p><b>Shanna</b> to follow up with dental program on availability of OHISS data</p> <p><b>All</b> - group to make decision on sources</p> <p><b>Natalie</b> to change Peel reference</p> <p><b>All</b> - send additional feedback to Natalie by end of week</p> <p><b>Natalie</b> to make document revisions and circulate for final approval</p>

3.5	<p><b>Core Indicators External Review Process</b></p> <ul style="list-style-type: none"> <li>• Draft policy and procedure circulated prior to meeting</li> <li>• Natalie and the Subgroup Leads have provided input</li> <li>• Feedback/Questions from CIWG: <ul style="list-style-type: none"> <li>○ Review process question – steps under procedure #3. Is approval required at the subgroup level? Add ‘draft to be reviewed’ for bullet point #2</li> <li>○ Minor versus major review could be put in policy piece of document. If minor falls under policy, then there are 2 options: (1) outlining the procedure for the minor change; (2) one for the major change</li> </ul> </li> </ul>	<p><b>Natalie</b> to make revisions to policy and circulate for final approval</p>
3.6	<p><b>Documenting known issues and dates on the website</b></p> <ul style="list-style-type: none"> <li>• Sherri sent link to CIWG for new page that captures known issues that have not yet been addressed by the group. Page lists dates when indicators were last updated. It will be a living document that captures information that cannot be immediately addressed for everyone’s reference</li> <li>• Feedback/Questions from CIWG: <ul style="list-style-type: none"> <li>○ Can we use the page to record the issues solved on as well? Decision made to have resolved issues reflected in ‘changes made’ section of indicators.</li> <li>○ Should we distinguish between ‘maintenance update’ and ‘full review’? Decision to have only one date posted (the last date of major revision)</li> <li>○ Group decision - remove ‘recently revised’ status from anything with the year 2008/2009, put ‘recently revised’ on anything with 2011 or later.</li> <li>○ Should the 2002 population pyramid be left on the website? Decision to remove this version</li> <li>○ Add discussion from APHEOlist regarding condom use</li> </ul> </li> </ul>	<p><b>Sherri</b> to make webpage revisions based on decisions made</p> <p><b>All</b> to begin documenting known issues on new webpage</p>
<b>4.0 New Business</b>		
4.1	<p><b>Hospital transfers</b></p> <ul style="list-style-type: none"> <li>• Question – Should we exclude transfers from one institution type to an acute care facility? They may not capture total hospital separations, but will decrease double count. This may have a bigger impact for hospitalization</li> </ul>	<p><b>Suzanne</b> to check into the effect of excluding hospital transfers on the hospitalization rate</p>
4.2	<p><b>Chronic disease mortality (ICD-10 codes for stroke)</b></p> <ul style="list-style-type: none"> <li>• One of the ICD codes (I62) is not included in the APHEO indicator definition, but is included in the CIHI definition. There is the potential for misclassification between the codes, particularly in rural hospitals as it is difficult to differentiate from stroke for diagnosis.</li> <li>• Original rationale to exclude this code because it was typically excluded from CIHI. This recently changed.</li> </ul>	<p><b>Shanna</b> to summarize emails to determine decision. Document as known issue on new webpage if required.</p>
4.3	<p><b>Canada’s Low Risk Alcohol Drinking Guidelines</b></p> <ul style="list-style-type: none"> <li>• New national guidelines were released in October prior to the release of the Accountability Agreement (AA) indicators</li> <li>• Ministry called upon select individuals from HEAL to support revisions for the Low Risk Drinking AA Indicator</li> <li>• HEAL may now move forward to update the Core Indicator, but needs to determine buy-in from the subgroup members, as the rest of their work is near completion.</li> </ul>	<p><b>Carma Lynn</b> will provide update to the group once a decision has been made</p>

<b>5.0</b>	<b>Subgroup Reports</b>	
5.1	<b>Reproductive Health</b> <ul style="list-style-type: none"> <li>• Drafts up on website; some indicators being changed</li> <li>• Many different data sources makes this process complicated</li> <li>• Do not yet know how health units will access BORN data</li> <li>• Will be looking for reviewers soon</li> </ul>	
5.2	<b>Social Determinants of Health</b> <ul style="list-style-type: none"> <li>• Setting up meeting schedule</li> <li>• Some attrition</li> <li>• Work flow review – decision to continue with periodic meetings</li> <li>• Currently looking for reviewers</li> </ul>	
5.3	<b>Injury and Substance Misuse</b> <ul style="list-style-type: none"> <li>• Currently making revisions to suicide/self-harm indicators</li> <li>• Question - Is it possible to change term from 'suicide' to 'self-harm' in the definition of non-suicide self-injury (NSSI)? Cannot verify intent in ICD-10. Group has proposed where appropriate to use 'intentional self harm'</li> <li>• Question - is it appropriate to calculate a rate for injuries from the CCHS (specific indicators: rate of injuries that limited activity; and rate of injuries that did not limit activity)?</li> </ul>	Lawson will follow up with CCHS staff re: rate calculation from the survey
5.4	<b>Healthy Eating and Active Living</b> <ul style="list-style-type: none"> <li>• Carma Lynn is Acting Lead</li> <li>• Finishing document on new physical activity guidelines; issues and sources of error using CCHS</li> <li>• Food insecurity indicator – CCHS 2007/08 syntax changes</li> <li>• Adolescent BMI – currently reviewing syntax – written explanation of how WHO guidelines differ from existing guidelines</li> <li>• Subgroup will need to decide how to move forward/whether to end activities</li> </ul>	
5.5	<b>The Built Environment</b> <ul style="list-style-type: none"> <li>• Completed drafts of the first three indicators – two ready to be sent out for external review</li> <li>• Land use indicator – 1-2 weeks until completion</li> <li>• Locally Driven Collaborative Projects – lit review first, key informant indicators, look at document completed by Kim Bergeron</li> <li>• Some attrition in group</li> </ul>	
<b>6.0</b>	<b>Standing Items</b>	
6.1	Operational Plan <ul style="list-style-type: none"> <li>• CIWG is due for some strategic planning, next operational period</li> </ul>	Shanna to review objectives provide update at the next meeting
<b>7.0</b>	<b>Date, Time and Location of Next Meeting</b> <ul style="list-style-type: none"> <li>• Next meeting will be held at the end of March so that we include Natalie before her contract ends</li> </ul>	Shanna to schedule next meeting