

## Core Indicators For Public Health In Ontario

### Core Indicators Work Group

<b>Date:</b>	June 14, 2012
<b>Location:</b>	Teleconference
<b>Attendees:</b>	Sherri Deamond, Natalie Greenidge, Shanna Hoetmer, Carma Lynn Koole, Cameron McDermaid, Suzanne Fegan, Gillian Lim, Julie Stratton, Katherine Russell, Lawson Greenberg, Luanne Jamieson, Mary-Anne Pietrusiak,
<b>Regrets:</b>	Ahalya Mahendra, Brenda Guarda
<b>Chair:</b>	Shanna Hoetmer
<b>Recorder:</b>	Gillian Lim

### Minutes

	Item	Action
1.0	<b>Review of Agenda</b>	Approved without amendments
2.0	<b>Review of Minutes March 22, 2012</b>	Approved without amendments.
3.0	<b>Business Arising</b>	
3.1	<b>Website revisions</b> <ul style="list-style-type: none"> <li>Natalie has made changes to the website with respect to the CCHS Environmental Tobacco Smoke issue, as outlined in item 3.1 of the March 22, 2012 minutes.</li> </ul>	<p><b>Sherri</b> will review APHEOlist discussions and update the wiki.</p> <p><b>Natalie</b> will remove the stillbirth issue from the known issue table once the Reproductive Health subgroup indicators/ resources have been finalized.</p>
3.2	<b>Posting of policy on the external review process</b> <ul style="list-style-type: none"> <li>Natalie has posted the policy on the Core Indicators website, as outlined in item 3.2 of the March 22, 2012 minutes.</li> </ul>	
3.3	<b>Availability of ORN, SLRN and RNF data to PHUs</b> <ul style="list-style-type: none"> <li>Natalie reported that ORN data are available to all health units without cost, as long as a data sharing agreement is signed. These data are also available through Statistics Canada. Access to SLRN data varies as this is dependent on local access. RNF data are also available from Statistics Canada without cost.</li> </ul>	
3.4	<b>Alignment of the APHEO Core Indicators with the Ontario Public Health Standards</b> <ul style="list-style-type: none"> <li>Natalie reported that this document has been reviewed and approved by PHO and is ready to be posted on the website. It was affirmed that the posting of this document should not wait until the Data Gaps document is finalized.</li> </ul>	<b>Natalie</b> will post this document to the Core Indicators Resources website and notify APHEO members.

3.5	<b>Gaps in Public Health Indicators and Data in Ontario</b> <ul style="list-style-type: none"> <li>Natalie noted that this document is still undergoing revisions among CIWG members.</li> </ul>	<b>Natalie</b> will update the document
3.6	<b>Calculating rates from the CCHS</b> <ul style="list-style-type: none"> <li>Suzanne conveyed Health Canada's recommendation, which is that they do not recommend deriving rates for the CCHS Injury module due to data quality concerns. Therefore, the Injury subgroup will only include proportions. It was raised for clarification if this response applied to all CCHS indicators, but it was agreed that this just applied to the Injury indicators.</li> </ul>	<b>Suzanne</b> will circulate the email response from Health Canada.
3.7	<b>Consistency across indicators</b> <ul style="list-style-type: none"> <li>Mary-Anne reported that the document was circulated by Natalie after the last week. Several CIWG members provided feedback and the document has since been revised.</li> </ul>	Document considered approved.  <b>Natalie</b> to update the Guide to include this document.
3.8	<b>Thank you letters</b> <ul style="list-style-type: none"> <li>Shanna indicated that she received draft thank you letters from Brenda.</li> </ul>	<b>Shanna</b> hopes to send these letters out before going on maternity leave.
3.9	<b>Staffing position update</b> <ul style="list-style-type: none"> <li>Acting Chair – Shanna noted that she will be departing on maternity leave in 2 months (Aug 2012 to Sep 2013). As such an Acting Chair for CIWG, preferably a current CIWG member, is required. In the absence of any volunteers, Shanna indicated she would approach the APHEO Executive Committee to discuss options. Sherri proposed the idea of rotating meeting chairs as a possibility.</li> <li>Teleconferences – Natalie noted the PHO contact to arrange teleconferences.</li> </ul>	<b>CIWG members</b> to email Shanna if interested/able to act as Chair during her absence.  <b>Natalie</b> will provide the specific spelling of the PHO contact to subgroup leaders to arrange teleconferences.
<b>4.0</b>	<b>New Business</b>	
4.1	<b>Data Source Resources</b> <ul style="list-style-type: none"> <li>Natalie is revising both the Census of Canada (CoC) and Vital Statistics Mortality Data documents. The CoC has been updated to include changes in format and the National Household Survey – it was suggested that since the latter is not a census, that the document should be renamed. Feedback from the committee is sought before sending out for external review.</li> </ul>	<b>CIWG members</b> are requested to review and provide feedback on both documents by June 20.
4.2	<b>Retirement of indicators/Addition of new indicators</b> <ul style="list-style-type: none"> <li>Suzanne reported that the Injury subgroup was seeking to retire the Adolescent Drug Use Indicator, based on the fact that only 6 health units have access to the requisite data (OSDUHS), and that this information would be captured in the Illicit Drug Use indicator (as an alternate data source to the CCHS). This was approved by the Work Group.</li> <li>Cameron sought clarity on the process by which indicators are retired, added, evaluated and updated. It was confirmed that the retirement of indicators requires approval by the CIWG. However the addition of indicators was at the discretion of the subgroup upon the</li> </ul>	<b>Suzanne</b> will update the indicator page to provide the requisite details on the retired indicator.

	<p>identification of any gaps. The combination of indicators to create a new indicator was also at the discretion of the subgroup.</p>	
4.3	<p><b>Establishing a pool of reviewers with content expertise for Core Indicator review</b></p> <ul style="list-style-type: none"> <li>Shanna noted establishing a pool of experts was identified as a need during the last strategic planning session in 2009. Sherri noted that an attempt to capture this information was incorporated into the registration process for APHEO membership. It was also suggested that based on the number of hits on the Core Indicators website, that a survey could be added to capture expertise.</li> </ul>	<p><b>Shanna</b> will follow-up with the Executive committee to determine if the CIWG can access the information captured through APHEO memberships</p>
4.4	<p><b>Marginalization index</b></p> <ul style="list-style-type: none"> <li>Shanna forwarded an email from Katherine Smith at St. Michael's hospital, soliciting input on whether the tool they developed (ON-Marg, a marginalization index) could be linked in with the work of the Social Determinants of Health subgroup.</li> <li>Julie shared her experience at Peel in using the tool, and noted that a lot of data are required to use it effectively. CCHS data could not be used, and only some of the hospitalization data could be used. Given the limited data that health units typically get access to, it was felt that this tool had limited utility. However, Shanna suggested that the tool could be disseminated to APHEO, and the Social Determinants subgroup could investigate further if there is interest.</li> </ul>	
4.5	<p><b>Public Health Agency of Canada (PHAC) Interview</b></p> <ul style="list-style-type: none"> <li>PHAC requested an interview with an APHEO representative familiar with the Core Indicators Project (funded by PHAC in 2008/09) to help evaluate their public health surveillance function. Mary-Anne Pietrusiak was interviewed on behalf of the Core Indicators on May 3. She was the Chair of the CIWG during the project.</li> <li>The questions were sent beforehand and the interview was conducted over the phone. While some questions were straightforward, others were rather general and challenging to respond to (e.g. What are the most significant health issues and concerns requiring surveillance in your area and what trends that have emerged in the practice of public health surveillance? Do you feel that Canada has adapted to these emerging concerns and trends? Do you see specific gaps in PHAC's current capacity to respond?)</li> <li>Mary-Anne noted that there is occasionally confusion surrounding the roles of local, provincial and federal agencies. She used the Low-Risk Alcohol Drinking Guidelines as an example – while these are federal guidelines, Statistics Canada did not develop indicators on how to measure them, so the Ministry of Health and Long-Term Care asked for support from Core Indicators representatives to develop their own indicators for the Accountability Agreements.</li> </ul>	

<b>5.0</b>	<b>Subgroup Reports</b>	
5.1	<b>Reproductive Health</b> <ul style="list-style-type: none"> <li>Mary-Anne noted that just a few more issues remain before the final review. A meeting has been scheduled for next Friday. While many issues have been resolved, others have not. For example, one issue concerning congenital infections has developed. There are several diseases that may apply and due to their rarity, a combined indicator is being considered. Sherri has been communicating with PHO on some of the issues identified.</li> </ul>	
5.2	<b>Social Determinants of Health</b> <ul style="list-style-type: none"> <li>Cameron noted that several indicators have been posted for review, and good response has been received in the past month (perhaps due in part to the link that was provided in the email). A new member from North Bay (Dinna Lozano) joined the team. The subgroup is currently aiming towards finishing the review of existing indicators by November. Based on feedback received to date, the subgroup will also be considering retiring/reorganizing various indicators.</li> </ul>	<b>Luanne</b> to provide Shanna with updated member list.
5.3	<b>Injury and Substance Misuse</b> <ul style="list-style-type: none"> <li>Suzanne reported that the subgroup will be sending out indicators for review very soon. Feedback from the committee concerning the use of NACRS versus DAD was received, and the subgroup has elected to use NACRS. However, the group also did include the direction that if the DAD were used, that the transfer from type should be specified as not acute, to reduce double counting separations. The external review for the Ministry of Transportation-related indicators is currently on hold.</li> </ul>	
5.4	<b>Healthy Eating and Active Living</b> <ul style="list-style-type: none"> <li>Carma Lynn reported that the Adolescent BMI indicator will be circulated for review soon. The subgroup is beginning work on the latest drinking guideline indicator, and a call for new members may be made soon.</li> </ul>	
5.5	<b>The Built Environment</b> <ul style="list-style-type: none"> <li>Natalie reported that the external review will take place within the next couple of weeks. Subgroup is currently looking to develop new indicators related to street connectivity and traffic measures.</li> </ul>	
5.6	<b>New Subgroups?</b> <ul style="list-style-type: none"> <li>Shanna raised the question as to when new subgroups should be created, since the Infectious Disease subgroup completed its work last year and several subgroups are in the process of finalizing their indicators.</li> <li>Two priority areas are Environmental Health and Child Health. There is strong interest within PHO to assist APHEO with indicator revision/development in the area of Environmental Health and this aligns with a resource that Natalie has been developing looking at environmental health indicators. A Child Health subgroup was listed on</li> </ul>	<b>CIWG</b> will strike an Environmental Health subgroup in the near future, and a Child Health subgroup should also be noted as a priority area.

	<p>the Operational Plan; however, this could be postponed until PHO has completed the Child and Youth Health Indicators Report. Mary Anne noted that the Reproductive Health subgroup will be developing more new indicators after the current review process is completed, some of which may overlap with Child Health.</p>	
<b>6.0</b>	<b>Standing Items</b>	
6.1	<p><b>Update on the PHAC Public Health Scholarship and Capacity Building Initiative</b></p> <ul style="list-style-type: none"> <li>Shanna is currently waiting for a response, and will update the contact details to ensure APHEO is appropriately informed while she is away on maternity leave.</li> </ul>	
6.2	<p><b>Child Youth Health Indicator Report Project</b></p> <ul style="list-style-type: none"> <li>Shanna sits on a couple of the committees related to this project, including a Stakeholder Advisory Committee. An in person meeting being held at PHO in early July, with another in the fall. Shanna will attend the July meeting but it was noted that the new Chair should attend the fall meeting if possible.</li> </ul>	
6.3	<p><b>Operational Plan</b></p> <ul style="list-style-type: none"> <li>Shanna has been reviewing the Operational Plan and has noted where there are blanks in terms of updates. Emails will be sent to various leads to request status updates.</li> </ul>	<p><b>Shanna</b> will be sending out emails to various leads to request status updates.</p>
<b>7.0</b>	<p><b>Date, Time and Location of Next Meeting</b></p> <ul style="list-style-type: none"> <li>The next meeting will be held in September.</li> </ul>	