

Core Indicators For Public Health In Ontario

Core Indicators Work Group

Date:	October 12, 2012
Location:	Teleconference
Attendees:	Ahalya Mahendra, Suzanne Fegan, Lawson Greenberg, Cameron McDermaid, Brenda Guarda, Luanne Jamieson, Sherri Deamond, Katherine Russell, Mary-Anne Pietrusiak, Natalie Greenidge
Regrets:	Julie Stratton, Sue Bondy, Gillian Lim
Chair:	Brenda Guarda
Recorder:	Cameron McDermaid

Minutes

	Item	Action
1.0	Review of Agenda No additions to the agenda	
2.0	Review of Minutes - June 14, 2012 No additions or amendments. Minutes approved by acclamation	
3.0	Business Arising	
3.1	Gaps in Public Health Indicators and Data in Ontario <ul style="list-style-type: none"> - Posting - Annual review <p>Completed at the end of August and posted on APHEO and PHO website. Talks intended to be living document along with alignment document. Requires plan for updating//discussion of annual review and update accordingly. One issue that's been raised about latent TB infections will require a minor change. Best way to proceed is a systematic annual review/may be useful to have tracking system to keep track of changes that may accrue over the course of the year. BG proposed this be added to the operational plan/approved by consensus</p>	BG/NG to update operational plan to incorporate ongoing review process
3.2	Calculating rates from the CCHS	S. Fegan to resend the email from Statistics Canada
3.3	Consistency across indicators Updated the Guide to Editing/Creating Core Indicators on APHEO website. Through the external review – now using NACRS to calculate hospitalization rates for injury indicators/but the Guide lists DAD. – Guide requires updating. Resource page should be updated as well. Reviewer comment on SMR and standardization rates etc. and made some suggestions. What to do with this feedback? Decision: circulated amongst CIWG and changes to the Guide may arise. Recommended syntax for seatbelt use//discussion followed regarding syntax, whether it would be included and where. Decision: change to Guide to consider adding syntax to be	Suzanne to circulate comments regarding SMR/standardization etc. Natalie to update website to indicate which packages the syntax is for.

	added to the resource section and would be referred to in the indicator. We would rely on members to contribute syntax as it is developed. The website should be updated to reflect the software type for the syntax file.	
3.4	<p>Thank you letters Bring forward//reminder to subgroup lead -> if someone leaves the group, thank them for participation in the group via an email. Mary-Anne would like to send a formal thank you letter to a longstanding member of the repro group.</p>	<p>Brenda to review if letters have been sent</p> <p>Mary-Anne to forward name to Brenda</p>
3.5	<p>Data Source Resources (Census of Canada, Vital Statistics Mortality Data)</p> <p>Taken care of and can be removed from the agenda</p>	
3.6	<p>Establishing a pool of reviewers with content expertise for Core Indicator review Cam provided an update that this under discussion at the APHEO Executive re: membership renewals. Will be developed in the next while.</p>	Cam to provide an update on Executive's action on reviewer pool
4.0	New Business	
4.1	<p>PHO Contract Epidemiologist position for Core Indicators Patrick Seliske and the APHEO Exec is in support of maintaining this position//areas where the CIWG need ongoing assistance from PHO vis a vis Natalie. At this stage looking for ideas for potential projects/areas where we really need assistance.</p> <p>Elements of PHAC funding proposal and other tasks can be rolled up as particular points where support is required. "Orphan" indicators and process documents of how such indicators are developed and Natalie could lead to make those updates.</p> <p>A number of groups of indicators that haven't been reviewed in some time. A number of indicators need an update to new standards even if they don't require a large review or change//inactive links etc. There is a lot of this kind of maintenance that is required.</p> <p>Environmental scan for issues around new indicators, eg. SDOH, environmental health, etc. It may be worthwhile including interest from key groups to align interests eg. Equity index with PHO</p>	Brenda and Patrick to coordinate summary of response to PHO regarding support for Natalie's position
4.2	<p>TOPHC abstract submission Abstract submitted regarding CI development process/highlights of CI alignment and gaps documents. Awaiting response</p>	
4.3	<p>Review of Draft Indicators and Resources by CIWG members Individuals to sign up for review and resources (5 indicators and 3 resources). Some indicators still need reviewers. Really</p>	Deadline for review submissions by October 22 nd .

	<p>helpful if people can sign up/ any feedback would be helpful. Timeline is soon as possible.</p>	<p>Comments directly to Natalie.</p>
4.4	<p>Access to Sharepoint CIWG has sharepoint resource//a few glitches but it should work. Invitations to be sent in the next couple of days//Allows easy sharing of documents etc. Requires brief email of how this system is to be used etc./ trialed to ensure it's working in a way that's helpful.</p> <p>Could be used for a number of reviews, documents etc. Handy for version control and tracking progress on development</p>	<p>Natalie to circulate invites in the next few days</p>
4.5	<p>Updates to Indicators</p> <ol style="list-style-type: none"> 1. Cancer Incidence (see attached email) 2. Cancer Mortality 3. Chronic Disease Mortality (see attached email) 4. Chronic Disease Hospitalization 5. Infectious Disease Incidence 6. Low Risk Drinking Guideline (see attached email) <p>Questions about a few of the indicators (#3,4 particularly) need to be kept in line with online Snapshot tool. John Barbaro had some discussions regarding chronic disease mortality indicator and the way PHO defined chronic disease. BG had forwarded email as above.</p> <p>Require that orphan indicators are reviewed and gather feedback on how or if the tools need to be updated given new knowledge/information.</p> <p>Looking for feedback about what was in email for subsequent discussion.</p> <p>CCO identified issue with age groups for Cancer incidence (related to key informant feedback)</p> <p>Discussion by email regarding whether we should use CCO's age categories other than the age categories provided in the basic category section of the indicator</p> <p>5. Latent TB can be added to the existing TB indicator//to be removed as gap in data gaps document//Not all health units may enter their LTBI's.</p> <p>6. Low risk drinking guidelines//history of development of syntax for the national LRDG. No longer a chair for the HEAL subgroup. Need to bring the group together to look at this indicator. If people are in agreement to revisit this indicator//also have the accountability agreement that is using our existing syntax//requires closer look at how the indicator is analysed.</p> <p>May help solicit information from MOHLTC and maybe Jeremy could chair the subgroup. There is some discussion on the</p>	<p>Group to review background information and provide feedback</p> <p>Tracked as issue</p> <p>Include in proposal for contract extension</p> <p>BG will update gaps document work plan and related documents</p> <p>BG to follow up with Elizabeth Rael and Natalie</p>

	APHEOlist regarding this topic. Issue is number of drinks on 1 occasion.	to approach Jeremy about chairing the HEAL subgroup
4.6	<p>Income categories – standards?</p> <p>-CMA National Report Card on Health Care -PHAC Tracking Heart Disease and Stroke in Canada report (pg. 112)</p> <p>Whether standard income categories for indicators//number of ways this can be looked at. Some groups use income categories (reference 2 above). Other use different categories. Should recommended standards (e.g. a new resource// not necessarily one standard)</p>	<p>Cam- SDOH to review this as part of their workplan</p> <p>Natalie – to be added to Guide for indicators</p>
4.7	<p>Core Indicators Logo</p> <p>Came up with website redesign//APHEO logo has been revised//brought forward to group//</p> <p>Perhaps a variation of the logo so it's easily recognizable as APHEO-related</p>	Cam to follow up with exec for feedback on existing look with addition of “Core Indicators” element
4.8	<p>APHEO Website Redesign</p> <p>Website redesign// currently developing the 'look' and the bulletin board forum/ mailing list</p> <p>Now's the time to provide feedback on the desired format for the core indicators section of the website. A deal of discussion followed to discuss the kind of feedback to send to Sherri</p>	All to provide feedback to Sherri with regards to format of website by end of October
4.9	<p>Broken links</p> <p>There's a broken link to Statistics Canada that requires updating in all measures. Subgroup leads to ensure their indicators have corrected links. Can designate one individual to make these changes.</p> <p>To be added to work proposal and added to the Guide</p>	<p>Natalie to make changes to the Guide to include the new link.</p> <p>BG/Sherri and others volunteered to update</p>
5.0	Subgroup Reports	
5.1	<p>Reproductive Health</p> <p>Group is nearing completion on the review and updating of existing indicators. Following this, the development of new indicators based on the BORN data will commence.</p>	
5.2	<p>Social Determinants of Health</p> <p>We're moving along with the indicators. There are a few out for external review - crime rate and labour force <- combined 2 indicators based on the overlap. Posting home language. Discussion re: authorship and contribution//recognizing contribution for those who are on for information updates. In acknowledgements section, keep acknowledgements fairly general, there is no need to add dates but previous groups can be referenced</p>	

5.3	<p>Injury and Substance Misuse Placement of suicide/self-harm indicators was discussed, currently housed under the mental health category. Given that self-harm is within the injury indicators, it was agreed to move them under the Injury section.</p> <p>Wording re: using respondent or population with survey data. Decision: The description should reference population (since we're making inferences about the population) but the calculation should reference respondents.</p> <p>Recommendation to group to use a particular reference style. Group agrees that Vancouver style will be adopted.</p> <p>Natalie has crafted reviewer template. Suzanne volunteered to assist Natalie with further development.</p> <p>Decision from group was to highlight areas where particular biases may be at play (e.g. age related bias in reporting self harm). Decision: Rather than to add a blanket statement to the Data Source pages, add to the individual indicator pages, as appropriate</p>	<p>Subgroup leads to verify that survey-based indicators use 'population' and 'respondent' appropriately</p> <p>Natalie to add Vancouver style to the Guide</p> <p>Suzanne volunteered to help Natalie with reviewer template</p>
5.4	<p>Healthy Eating and Active Living Haven't met in a while. Solicitation is ongoing for a chair. Failing that, solicitation for chair from general membership.</p>	<p>Brenda Guarda to follow up with Natalie after Natalie's had a chance to talk to Jeremy.</p>
5.5	<p>The Built Environment Reviews back and some indicators require review and one has challenges to face validity. On track to have 2 indicators done by the end of the month with 3 more indicators in development.</p>	
6.0	Standing Items	
6.1	<p>Update on the PHAC Public Health Scholarship and Capacity Building Initiative</p>	<p>BG to follow up with PHAC re: status of application</p>
6.2	<p>Child Youth Health Indicator Report Project Big meeting planned on Monday (Oct 15th) to review a list of ready child indicators, review gaps, recommendations to address gaps, approaches for ongoing population evaluation of child health. Big gaps in some of the core indicators. To be completed by the end of December.</p> <p>Report and recommendations to be produced from the meeting.</p>	
6.3	<p>Operational Plan Defer because updates are pending</p>	<p>Brenda Guarda to update at next meeting</p>
7.0	<p>Date, Time and Location of Next Meeting To be scheduled for February with request for meeting dates. Depending on what happens with Natalie's contract extension,</p>	

	an ad hoc meeting may be called to deal with Natalie's work going forward.	
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