**Core Indicators For Public Health In Ontario**

# Core Indicators Work Group

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| **Date:** | May 1, 2014 |
| **Location:** | Teleconference |
| **Attendees:** | Suzanne Fegan, Natalie Greenidge, Brenda Guarda, Shanna Hoetmer, Virginia McFarland, Mary-Anne Pietrusiak, Sue Bondy |
| **Regrets:** | Sherri Deamond, Lawson Greenberg, Ahalya Mahendra, Katherine Russell (on leave) |
| **Chair:** | Suzanne Fegan |
| **Recorder:** | Natalie Greenidge |

**Draft Minutes**

|  | **Item** | **Action** |
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| **1.0** | Review of Agenda Six additions to the agenda (items 4.4 – 4.9) |  |
| **2.0** | **Review of Minutes – October 12, 2012**  No additions or amendments. Minutes approved by acclamation. | Suzanne will post the minutes on the APHEO website. |
| **3.0** | **Business Arising from Last Minutes** |  |
| 3.1 | **Thank-you letters**  Brenda has a list of individuals who should be sent thank-you letters. | Brenda will Liaise with Shanna re: sending thank-you letters to identified recipients. |
| 3.2 | **Establishing a pool of reviewers with content expertise for Core Indicator review**  Still outstanding. | Suzanne will follow up with Cam. |
| 3.3 | **PHO Contract Epidemiologist position for Core Indicators**  In the fall of 2013, APHEO leadership planned to draft a letter in support of an ongoing PHO contract epidemiologist position for Core Indicators. Unsure whether the letter was sent to PHO senior management. Natalie’s position became full-time permanent but her work no longer focusses on Core Indicators. | Discuss the need for this position during operational planning. |
| 3.4 | **APHEO Core Indicators Pamphlet**  Brenda and Cam discussed whether to proceed with producing the pamphlet. The group agreed that it would be useful to have printed pamphlets available at the APHEO conference later this year. Before finalizing, the pamphlet should be reviewed by CIWG members to update it as required and double-check that references any to dates have been removed. | Brenda will circulate the most recent version of the document for the group’s feedback. |
| 3.5 | **Core Indicators Logo**  The term “Core Indicators” will be incorporated into the new APHEO logo. | Suzanne will liaise with APHEO executive re: steps required |
| 3.6 | Reviewer template Suzanne and Natalie completed this item prior to the October 21, 2013 meeting. | Complete |
| 3.7 | Citing Core Indicators pages Natalie added an example of “How to cite Core Indicators/Core Indicator resource webpages” to the Core Indicators home page. | Complete |
| 3.8 | Version control/archiving Suzanne reported on behalf of Sherri: Version controlling can be a consideration in the APHEO website redesign (a request for proposals has gone out for the website redesign). The group suggested that for major revisions to a Core Indicator, the date of the revision be included on the webpage along with a link to the previous version of the Core Indicator (instead of over-riding existing webpage as is the current practice). Minor changes can continue to be captured in the “Changes Made” section of the indicator.  (The group agreed with Brenda’s suggestion to record CIWG decisions such as this on a spreadsheet for ease of reference). | Suzanne will create a ‘Core Indicators Work Group Decisions’ spreadsheet that includes this decision. Suzanne will review the minutes from 2013 CIWG meetings and add decisions made to the spreadsheet. |
| 3.9 | **Cancer Screening data release**  Mary-Anne and Shanna reported that cancer screening information is now available from CCO (number of screens conducted provided by ICES. Current Core Indicators are based on self-reported cancer screening data). Cancer indicators could be updated to reflect the new information available. The “Cancer, Smoking and Sun Safety Sub-Group” is not currently active. Brenda led this group in the past, and would like to remain involved, but may not be able to serve as lead in the future. See if previous member of Cancer group can be reassembled to address this as well as issues identified by Ruth Sanderson (see item 4.4) and previously documented cancer-related “[Identified Indicator/Resources Issues](http://www.apheo.ca/index.php?pid=268)”. | Brenda will contact past members of the “Cancer” subgroup to determine interest in participating going forward. |
| 3.10 | **Updating of the Alignment and gaps documents**  A few points of clarification remain before completing the first drafts of these documents. Completed drafts will be circulated to the group for review. | Brenda, Natalie and Sherri will meet to complete the first drafts of these documents. |
| 3.11 | **Standard way of dealing with Statistics Canada sources**  Virginia noted that Statistics Canada updates its websites frequently, which quickly makes links provided in the Core Indicators obsolete. Shanna noted that a past decision was made to include only stable, high-level Statistic Canada links and provide instructions (not hyperlinked) to direct users to the pages of interest. | Suzanne will add this decision to the ‘Core Indicators Work Group Decisions’ spreadsheet. |
| 3.12 | **Ontario Public Health Standards blurb**  At the October 21, 2013 a suggestion was made to provide a link to the standard blurb instead of including the text on each indicator page. However, it was decided to defer this in light of the amount of work that the change would require and the upcoming website redesign. | Suzanne will add this decision to the ‘Core Indicators Work Group Decisions’ spreadsheet. |
| 3.13 | **Data availability and access**  Virginia noted that APHEO executive will be putting forward a position paper this summer to address access to data needed for decision-making. The position paper will be used to advocate for access to more data, specifically through Statistics Canada and will be shared with alPHa in attempts to garner their support. | Defer this item pending the outcome of APHEO executive’s efforts. |
| 3.14 | **Denominator issues for infectious disease indicators**  PHO has made some recommendations on how the issue of population denominators will be handled for PHO reports going forward (i.e., reports published in 2015 and beyond). Because of the issue of up-to-date data, especially in the case of infectious disease, PHO is moving toward using population projections rather than population estimates. The limitations of use population projections were noted (e.g., population projections are provided by county and not health unit and for several health units county and health unit boundaries do not align. The MOHLTC has a suggested approach to calculate projected populations by health unit). Ruth Sanderson suggested that this might be useful to include this topic at APHEO conference in September. | Natalie will follow-up with Ruth. |
| 4.0 | **New Business arising** |  |
| **4.1** | New Indicators   * Preventable Mortality indicator (The “Preventable Mortality” subgroup was assembled to work address this – see item 5.6 below) * LRADGs – Youth and Child indicators (To be determined if these will be developed under the HEAL or Injury and substance misuse prevention or Child Youth Indicator subgroups). * Alcohol Attributable fraction indicator (will be developed by the Injury and substance misuse prevention subgroup – see item 5.3 below) |  |
| **4.2** | APHEO Workshop 2014:  Brenda reported: The planning committee consists of Brenda, Ahalya, Suzanne, Cam and Chuck. Chuck and Ahalya conducted a site visit of the Eaton Chelsea and found it to be appropriate. The hotel has agreed with changes suggested by the planning committee and the contract should be finalized this week:   * Venue: Eaton Chelsea, 33 Gerrard St. W., Toronto, M5G 1Z4 * Date: September 15 and 16, 2014 (Monday & Tuesday) * An APHEO general meeting is tentatively scheduled for the afternoon of September 16th, 2014 * Rate: $149 per night (single/double occupancy).   The planning committee will meet on May 6th.  The planning committee is proposing that each subgroup conduct a session. Examples of topics (Mary-Anne):   * a new indicator (reproductive health group with discuss maternal weight gain, maternal obesity indicators); * an issue that would benefit from feedback; * overview of a perspective   Other ideas proposed by the planning committee (Brenda):   * BORN data and geography; * Injury and extracting data from IntelliHEALTH (focusing on NACRS for emergency department and hospitalization indicators); * Community data program. CPHI initiative: a SDOH project which uses CCHS data for longitudinal analysis; * Solicit ideas from subgroups that are not currently active (e.g., infectious disease).   A call for abstracts will also be sent out. | Brenda will send out notification of the Conference via APHEO listserve (once the contract for the venue has been finalized and after the planning committee meeting on May 6th). Details about abstract submission will be included.  Each lead will discuss potential topics within their subgroup and submit topic ideas to Brenda by May 30th, 2014.  Brenda will share minutes from planning committee meeting(s) with the CIWG |
| **4.3** | Membership list updates:  Subgroup leads and the Core Indicator subgroup chair are responsible for ensuring membership lists posted on the website are current. | Subgroup leads and the CIWG chair will update their membership lists by May 30th, 2014. |
|  | **Additions to the Agenda:** |  |
| **4.4** | Cancer Indicators:  Ruth Sanderson identified some areas in which APHEO cancer indicator definitions did not align with Seerstat. Ruth suggested that these issues be added to the APHEO “[Identified Indicator/Resources Issues](http://www.apheo.ca/index.php?pid=268)” table, to be addressed at a later date. (Note: an issue related to cancer indicators was added to the table in February 2012). | Natalie will follow-up with Ruth re: the specific issues to be added to the known issues table and report back to the group. |
| **4.5** | Review of indicators  The SDOH subgroup noted that it is difficult to ensure formatting consistency among indicators and suggested it would be helpful to have one person, perhaps a contracted student, methodically review all indicators. The group agreed that this would be helpful and suggested suggested approaching PHO for funding. | Leads will discuss needs within their subgroups and submit ideas to Suzanne.  The group will draft a proposal to be submitted to PHO (Ruth) for consideration |
| **4.6** | Adding SDOH indicators  Cam identified and the SDOH subgroup reviewed gaps in the APHEO SDOH Core Indicators compared to those covered in [Social Determinants of Health: The Canadian Facts](http://www.thecanadianfacts.org/The_Canadian_Facts.pdf). The SDOH subgroup is considering developing:   1. Social exclusion/inclusion (sense of belonging data are available from CCHS) 2. Use of health services (data are available in CCHS)   The group agreed that it would be worthwhile to develop these indicators. Mary-Anne suggested that voter participation could also be considered. Brenda suggested that summary measures included in the PHO report [Summary Measures of Socioeconomic Inequalities in Health](http://www.publichealthontario.ca/en/eRepository/Summary_Measures_Socioeconomic_Inequalities_Health_2013.pdf) also be reviewed as a potential source of indicators. | Virginia will discuss the idea of creating a “voter participation” indicator and the development of summary measure indicators with the SDOH subgroup. |
| **4.7** | Child Youth subgroup  Brenda has not been able to secure a chair for this subgroup. Becky Blair (from Simcoe Muskoka District Health Unit and a member of the Reproductive Health Work Group) may be interested in co-chairing. Brenda suggested including this in the proposal for PHO Core Indicators support. | Brenda will discuss this issue with Suzanne |
| **4.8** | Determining areas for Core Indicator review  Virginia inquired about the criteria for prioritizing areas for indicator updates, as the SDOH subgroup is recommending that the Mental Health indicators be reviewed. Order of review is based on decisions made during operational planning. (Child Health was identified as a priority in a previous operational plan). The group agreed that it would be useful to revisit the strategic planning and operational planning processes to note our accomplishments, issues that are outstanding and determine the direction for Core Indicators. Perhaps include this in the proposal for PHO Core Indicators support. | Review the most recent strategic plan (2008) at the next CIWG meeting (Brenda will circulate the strategic plan to the group). |
| **5.0** | **Subgroup Reports** |  |
| 5.1 | **Reproductive Health**  Mary-Anne reported: The group continues to work on five new indicators based on BORN data (maternal weight gain; maternal obesity; maternal smoking; maternal alcohol and substance use; maternal mental health). BORN is conducting a webinar today on the BORN Information System (BIS). Data cube training is proceeding for those PHUs that have completed appropriate data sharing agreements. |  |
| 5.2 | **Social Determinants of Health**  Virginia reported: Meetings will be held monthly for the next few months. The group has lost some members. Four indicators have been completed. Three indicators (urban and rural population; immigrant population; and percent who can’t speak English or French) are outstanding. The group hopes to complete work on these indicators by the end of the summer. |  |
| 5.3 | **Injury and Substance Misuse**  Suzanne reported: The group is currently on hiatus, but will reconvene to work on alcohol-attributable indicators. |  |
| 5.4 | **Healthy Eating and Active Living**  Suzanne reported: Drinking in excess of the LRADG indicator has undergone external review and has been finalized. The subgroup has been adjourned.  Brenda reported that the CMOH executive has proposed drafting a letter to the province outlining their concern that provincial policy under consideration that will increase access to alcohol is not in alignment with the MOHLTC Accountability Agreement LRADG indicator. |  |
| 5.5 | **The Built Environment**  Brenda reported: Ahalya had a student working with her who did an environmental scan for a ‘food desert’ indicator currently under development |  |
| 5.6 | **Preventable Mortality**  Suzanne reported on behalf of Sherri: The preventable mortality indicator will be expanded to include:   1. Potentially Avoidable Mortality 2. Treatable Mortality, and 3. Preventable Mortality   Also suggested that the existing PYLL indicator be updated to include these groupings as well. The group then decided to review various methodologies for producing the indicator including SPSS, STATA and SAS syntax and existing IntelliHEALTH reports. These tasks were divided among group members and other tasks assigned included beginning to draft indicator comments and references and adapting other sections of the indicator template using the All-Cause Mortality indicator as a starting point. A follow up meeting will be called in the near future by the group chair. |  |
| **6.0** | **Standing Items** |  |
| 6.1 | **Operational Plan**  The operational plan was last updated in June 2013. The CIWG should revisit it: determine status of each item, make additions and continue discussion about strategic plan for Core Indicators. | Brenda will circulate the current operational plan to the group  To be reviewed at the next meeting. |
| **7.0** | **Date, Time and Location of Next Meeting**  TDB June 2014 (in light of upcoming APHEO workshop) | Suzanne will send out a meeting request for a June meeting. |