



BOARD OF HEALTH GOVERNANCE COMMITTEE MEETING

Wednesday, October 19, 2022
1:30 to 3:00 p.m.

Virtual

To ensure a quorum we ask that you please
RSVP (Regrets Only) to
clovell@hpeph.ca or 613-966-5500, Ext 231 and
contact your alternate to attend.

Hastings Prince Edward Public Health 2019 - 2023 Strategic Plan

Our Vision

**Healthy Communities,
Healthy People.**

Our Mission

**Together with our communities,
we help people become as
healthy as they can be.**

Our Values Show We CARE



Collaboration



Advocacy



Respect



Excellence

Our Strategic Priorities



**Community
Engagement**



**Staff
Engagement
and Culture**



**Population Health
Assessment and
Surveillance**



**Program
Standards**



**Health
Promotion**



GOVERNANCE COMMITTEE MEETING AGENDA

Wednesday, October 19, 2022

1:30 pm – 3:00 pm

Virtual

If you are unable to attend, and have not already done so, please arrange for your alternate to attend and advise Catherine Lovell at clovell@hpeph.ca Thank you.

- 1. CALL TO ORDER**
- 2. ROLL CALL**
- 3. DISCLOSURE OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF**
- 4. APPROVAL OF AGENDA**
- 5. APPROVAL OF MINUTES OF PREVIOUS MEETING**
 - 5.1 Meeting Minutes of March 30, 2022 [Schedule 5.1](#)
- 6. NEW BUSINESS**
 - 6.1 Risk Management Progress Report [Schedule 6.1](#)
 - 6.2 Self-Evaluation Survey Summary Report [Schedule 6.2](#)
 - 6.3 Strategic Plan Progress Report [Schedule 6.3](#)
 - 6.4 2022-2023 Strategic Plan [Schedule 6.4](#)
- 7. DATE OF NEXT MEETING - Wednesday, February 22, 2023**
- 8. ADJOURNMENT**



GOVERNANCE COMMITTEE MEETING
MINUTES - OPEN SESSION

Wednesday, March 30, 2022
1:30 pm – 3:00 pm
Virtual via ZOOM

Present:

Ms. Jo-Anne Albert, Mayor, Municipality of Tweed, County of Hastings
Dr. Jeffrey Allin, Provincial Appointee
Mr. Andreas Bolik, Councillor, County of Prince Edward
Mr. Sean Kelly, Councillor, City of Belleville
Mr. Michael Kotsovos, Councillor, City of Quinte West
Ms. Jan O'Neill, Mayor, Municipality of Marmora and Lake, County of Hastings (Chair)

Also Present:

Dr. Ethan Toumishey, Acting Medical Officer of Health
Ms. Val Dunham, Director of Corporate Services/Associate CEO
Ms. Catherine Lovell, Executive Assistant

1. CALL TO ORDER

The meeting was called to order at 1:30 p.m.

ROLL CALL

2. DISCLOSURE OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF

3. ELECTION OF THE CHAIR

Jo-Anne called for nominations. Sean nominated Michael. Michael said he would stand. Chair Jo-Anne asked for any other nominations. After some discussion Michael nominated Jan, who said she would stand. It was agreed that Jan would remain as Chair of the Governance Committee for consistency and Michael would stand down. All were in favour.

4. APPROVAL OF AGENDA

THAT the agenda of the October 27, 2021 Governance Committee be approved as circulated.

MOTION:

Moved by: Jo-Anne

Seconded by: Sean

CARRIED

5. CLOSED SESSION

THAT the Governance Committee convene in closed session for the purpose of a discussion of personnel issues in accordance with Section 239 (2) ii personal matters about an identifiable individual, including Board employees.

MOTION:

Moved by: Michael

Seconded by: Sean

CARRIED

6. MOTIONS ARISING FROM CLOSED SESSION

THAT the Governance Committee endorse the actions approved in the Closed Session and direct staff to take appropriate action.

MOTION:

Moved by: Sean

Seconded by: Michael

CARRIED

7. APPROVAL OF MINUTES OF PREVIOUS MEETING**7.1 Meeting Minutes of October 27, 2021**

THAT the minutes of the October 27, 2021 Governance Committee meeting be approved as circulated.

MOTION:

Moved by: Michael

Seconded by: Sean

CARRIED

8. NEW BUSINESS**8.1 *Strategic Priorities for Recovery Planning***

- ♦ Dr. Toumishey discussed the consideration for the standing item for recovery. It was decided that other than the document prepared from the working session in June, there is no need for anything further.

8.2 Updated Board Governance Package

THAT the Governance Committee recommend to the Board of Health approval of the three (3) by-laws, those being 2022-02, banking and financial activities and appointment of an auditor; 2022-03, management and financing of physical properties; and 2022-04, rules governing the proceedings of the Board of Health.

MOTION:

Moved by: Sean

Seconded by: Jeffrey

CARRIED

- ♦ It was noted that this is a key document for the Board of Health.
- ♦ The Municipal Act has been revised to include virtual meetings. It was suggested that meetings of the Board of Health as a whole, would continue to be face-to-face but that Committee meetings would be virtual going forward, unless otherwise decided by each of the committees.
- ♦ There was discussion around the timeframe of the annual election of a chair to each committee. It was suggested it be changed to every two years but due to legislation in the Health Protection and Promotion Act [Sub-section 57(2)], it must remain annually.

7. DATE OF NEXT MEETING - Wednesday, May 18, 2022**8. ADJOURNMENT****MOTION:**

Moved by: Sean

Seconded by: Jo-Anne

CARRIED

THAT the Governance Committee meeting adjourn at 3:02 p.m.

Jan O'Neill, Chair - Governance Committee

Board of Health Briefing Note - Governance Committee

To:	Hastings Prince Edward Board of Health - Governance Committee
Prepared by:	David Johnston, Acting Director of Corporate Services
Reviewed by:	Dr. Ethan Toumishey, Medical Officer of Health and CEO
Date:	Wednesday, October 19, 2022
Subject:	Risk Management Progress Report
Nature of Board Engagement	<input checked="" type="checkbox"/> For Information <input checked="" type="checkbox"/> Strategic Discussion <input checked="" type="checkbox"/> Board approval and motion required <input checked="" type="checkbox"/> Compliance with Accountability Framework <input checked="" type="checkbox"/> Compliance with Program Standards
Action Required:	That the Governance Committee review the current Risk Management Progress Report and make recommendation for approval to the Board of Health at the November meeting.
Background:	<p><i>As per the Public Health Accountability Framework, Boards of Health shall have a formal risk management framework in place that identifies, assesses and addresses risks". The rationale for this requirement "Ensures Boards of Health are aware of and are taking action to mitigate known issues that may be creating a risk to the public's health or to the stability or competency of the organization."</i></p> <p>Hastings Prince Edward Public Health (HPEPH) has a comprehensive risk management policy and procedure, most recently approved by the Board of Health in December 2021.</p> <p>The Risk Management Committee has identified 14 key risks for the organization, all requiring strategic mitigation action plans. The progress report attached reflects our most recent assessment of organizational risks and lists the relevant activities to mitigate. Reports on the progress or resolution for these risks listed will be provided at the next Governance committee meeting.</p>

**HPEPH - RISK MANAGEMENT REPORT
For the Period March 2022 - October 2022**

Item #	Risk	Category	Likelihood	Impact	Risk Rating		Mitigation	Lead	Report Dates
1	Potential increases to wait times for Seniors Dental clients.	Service Delivery, Political	3	3	9	Moderate Risk	1.Additional partnerships with the Dental providers in Belleville 2.Sharing space at Private Dental offices depending on availability of contract /casual dentist(s) 3.Partner/collaborate with CHCs to provide major dental work including emergencies (Gateway) 4.Use/create an index to determine patients in need (in progress) 5.Explore potential partnerships with dental colleges to do externships at the PHU 6.Hire new dentist (dentists working 5 days a week at the Belleville office) 7.Increase advocacy for funding (completed, effective)	Manager, Oral Health and Vision	Progress report to BOH in 2023
2	Difficulty recruiting dentists for program delivery.	Human Resources, Service Delivery	4	4	16	High Risk	1.Explore ways to hire new dentist (Hired) 2.Develop casual pool of available dentists - Offer short term contracts- weekly/bi-weekly 3.Potential partnerships with the Dental providers in Belleville 4.Sharing space at Private Dental offices depending on availability of contract/ casual dentist(s) 5.Partner/collaborate with CHCs to provide major dental work including emergencies	Manager, Oral Health and Vision	Progress report to BOH in 2023

**HPEPH - RISK MANAGEMENT REPORT
For the Period March 2022 - October 2022**

Item #	Risk	Category	Likelihood	Impact	Risk Rating		Mitigation	Lead	Report Dates
3	Loss of Technology because of Man Made or Natural Disaster impacting 179 North Park Computer Server availability (human error, loss of generator, fire, flood, etc.)	Governance, Organizational, Strategic, IT	2	5	10	Moderately-High Risk	1. Technology – DR/BC plan redesigned in 2016 to add 3rd party vendor with IAAS. 2. Workloads can be hosted remotely by IAAS vendor. Daily workload replications achieve established RPO and RTO objectives. Completed 2016. 3. Process – Workload replications tested monthly. IT DR/BC procedures testing biannually. Ongoing. 4. Program services status – Unknown, as no significant technology outage to HPEPH programs has never occurred. Recommend program level operational readiness assessment, plans, & annual tabletop exercise/testing. Ongoing.	IT Manager, Director of Corporate Services	Progress report to BOH in 2023

HPEPH - RISK MANAGEMENT REPORT
For the Period March 2022 - October 2022

Item #	Risk	Category	Likelihood	Impact	Risk Rating		Mitigation	Lead	Report Dates
4	Cyber Incident	Information, Knowledge, Governance, IT	2	5	10	Moderately-High Risk	1. People – Delivery of staff awareness campaigns. Development & delivery of training curriculum. Completed 2. Creation & delivery of targeted phishing campaigns. Completed 3. Process – Administrative safeguards/policies & checks for purchasing. Completed 4. Administrative safeguards/policies for safeguard fair use of signing authorities' digital signatures. Completed. 5. Onboarding & offboarding identity management, collection of assets. Completed 6. Remediation for staff falling below phishing campaign testing baseline (email Class of Service change). Completed 7. Technology – legacy technologies provisioned at relevant layers of stack (Gateway - SPAM, IPS, Web, WAF). Endpoint (client AV). Complete 8. ATP with cloud layer (sandboxing) added 2020. Complete 9. SIEM, machine learning/AI added 2021. Complete 10. Immutable layer for remote BC workload backup/replication added 2021. Completed. 11. New switching topology/w further micro segmentation adding 2022. To be completed early Sept. 2022.	IT Manager, Director of Corporate Services	Progress report to BOH in 2023

**HPEPH - RISK MANAGEMENT REPORT
For the Period March 2022 - October 2022**

Item #	Risk	Category	Likelihood	Impact	Risk Rating		Mitigation	Lead	Report Dates
5	Unexpected staff leave (AA/EA)	Human Resources, Service Delivery	3	4	12	Moderately-High Risk	1. Cross training for all AAs/EA 2. Regular AA/EA meetings; job info sharing 3. Review of tasks/processes to find efficiencies-streamline 4. Job shadowing during slower times 5. Procedural manual for all positions	Director of Corporate Services, AA's & EA	Progress report to BOH in 2023
6	Unplanned staffing changes due to lack of a multi-year forecasted budget	Financial, Human Resources, Information, Political, Public Perception	5	4	20	High Risk	1. Clarify internal budget cycle dates 2. Apply a projected increase to all budget areas 3. Notify executive and management of draft implications and increase education with management	Finance Manager, Director of Corporate Services	Progress report to BOH in 2023
7	Lack of detailed fixed asset register/general asset list	Financial, Governance, Public Perception	5	4	20	High Risk	1.Create easy to follow spreadsheet including asset, location and replacement cost, create procedure to report asset purchase, create videos/photos as back up to spreadsheet.	Finance Manager, Director of Corporate Services	Progress report to BOH in 2023
8	Increase in privacy breaches but lack of reporting due to staff fatigue, gap in training, decrease in staff compliance with PHIPA.	Public Perception, Privacy	4	2	8	Moderate Risk	1.Need to update Privacy related policies and procedures. Fall/Winter 2022. 2.Need updated Privacy Training Platform – Spring 2023	Privacy Officer, MOH, Program Managers, Staff	Progress report to BOH in 2023
9	Increased staff attrition/turnover/contracts will lead to continued program disruption.	Human Resources, Operations, Service Delivery	4	4	16	High Risk	1. Continue to monitor for potential retirements/maternity, personal and STD leaves. 2. Continue to review staff vacancies/ requests for replacing staff and consider skills, priorities and program needs. 3. Monitor for positions that are delivered by a single individual and consider cross training opportunities.	Manager of HR, Director of Corporate Services, Program Managers	Progress report to BOH in 2023

**HPEPH - RISK MANAGEMENT REPORT
For the Period March 2022 - October 2022**

Item #	Risk	Category	Likelihood	Impact	Risk Rating		Mitigation	Lead	Report Dates
10	Staff redeployments to address future Covid surges may negatively impact client services and increase the risk of unintended client outcomes.	Public Perception, Operational, Service Delivery, Human Resources	5	4	20	High Risk	1. Managers to review Business Continuity Plan 2. Director to meet with Managers to determine minimum # of staff required for essential services 3. Director to meet with IMS Lead 4. Wave 7 plan adjusted	IMS Lead, Program Managers	Progress report to BOH in 2023
11	Labour Relations Breakdown (Strike)	Financial, Governance, Public Perception, Legal Compliance, Political, Security	2	5	10	Moderately-High Risk	1. Educate the Board of Health regarding impact of risk when considering the bargaining mandate. 2. Educate managers on the impact of a strike for each union on their programs and service delivery. 3. Work with relevant Union representatives prior to strike to identify opportunities to reduce the likelihood of strike. 4. Identify potential alternate service providers for affected services	Manager of HR, Director of Corporate Services	Progress report to BOH in 2023
12	Insufficient Training and Development	Governance, Organizational, Strategic, Political, Legal Compliance, Security, Public Perception	4	4	16	High Risk	1. Create an organization wide training and development plan that addresses current program needs and operational/ organizational needs. 2. Consider training requirements at the development stage of any new programs/ services. 3. Evaluate organization specific knowledge (e.g. how to use FileHold, OSCAR or Dayforce) and ensure those skills are added to onboarding programs to minimize new employee knowledge gaps.	Manager of HR, Director of Corporate Services	Progress report to BOH in 2023

HPEPH - RISK MANAGEMENT REPORT
For the Period March 2022 - October 2022

Item #	Risk	Category	Likelihood	Impact	Risk Rating		Mitigation	Lead	Report Dates
13	Extraordinary/Unplanned Costs to Maintain Facilities	Financial, Governance, Operational, Service Delivery	4	4	16	High Risk	1. Complete a Two-year Budget Forecast 2. Coordinate completion of a new Facilities assessment (2025) 3. Explore replacement of end of life equipment with "right sized"/smaller equipment 4. Explore opportunities to share space/share facility costs	Finance Manager, Manager of Office Services	Progress report to BOH in 2023
14	Availability of Skilled/Experienced Program Assistants	Human Resources, Knowledge, Service Delivery, Security, Public Perception	5	4	20	High Risk	1. Set internal training standards/minimums (customer service as well as computer) 2. Build training completion into contracts 3. Mentor mandatory/scheduled training 4. Explore local community college placement opportunities 5. Explore separate category for "Receptionist"	Manager of Office Services, Manager of HR	Progress report to BOH in 2023

Board of Health Governance Committee Briefing Note

To:	Hastings Prince Edward Board of Health - Governance Committee
Prepared by:	Catherine Lovell, Executive Assistant
Approved by:	Dr. Ethan Toumishey, Medical Officer of Health and CEO
Date:	Wednesday, October 19, 2022
Subject:	Board of Health Self-Evaluation Survey Summary of Results
Nature of Board Engagement	<input checked="" type="checkbox"/> For Information <input type="checkbox"/> Strategic Discussion <input type="checkbox"/> Board approval and motion required <input checked="" type="checkbox"/> Compliance with Accountability Framework <input type="checkbox"/> Compliance with Program Standards
Action Required:	Review and recommend the Summary Report be taken to the Board for review.
Background:	<p><i>As part of the Board of Health Governance Package 2022, the Board of Health Self-Evaluation Process policy states: that the Board shall complete an internal evaluation of its governance practices every two years; and the evaluation results will be reviewed by the Board and a list of recommendations for improvement in Board effectiveness will be developed as required.</i></p> <p>The survey was emailed out to Board members on June 21, 2022 and were given until August 31, 2022 to complete it. The survey was completed by all 10 members of the Board.</p> <p>Some feedback of note:</p> <ol style="list-style-type: none"> 1. Regular updates on programs and services are important to the Board. 2. Management to continue to share information with the Board in a timely manner. 3. It is important for Board members to attend meetings. 4. Keep the orientation binder as a physical entity rather than electronic. 5. Apply the agency's core values to strategic priorities to enable and sustain consistency across each area. 6. There seems to be continued confusion between what public health does and what other community partners do, such as QHC.



Board of Health

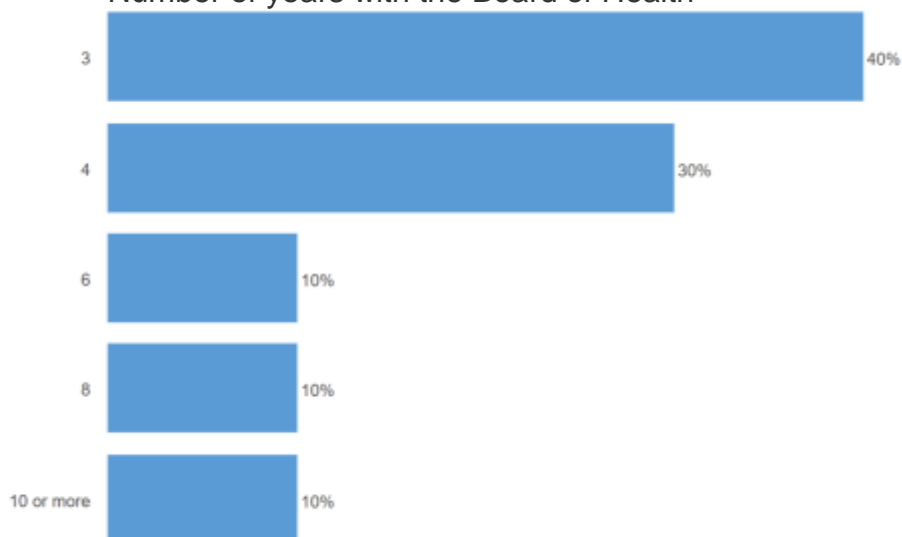
2022 Self-Evaluation Survey

Summary of Results

Respondents



Number of years with the Board of Health



1. BOARD OF HEALTH ROLES AND RESPONSIBILITIES

Schedule 6.2



N 8

What suggestions would you make to clarify the roles and responsibilities of BOH members?

What suggestions would you make to clarify the roles and responsibilities of BOH members?

No suggestions at this time.

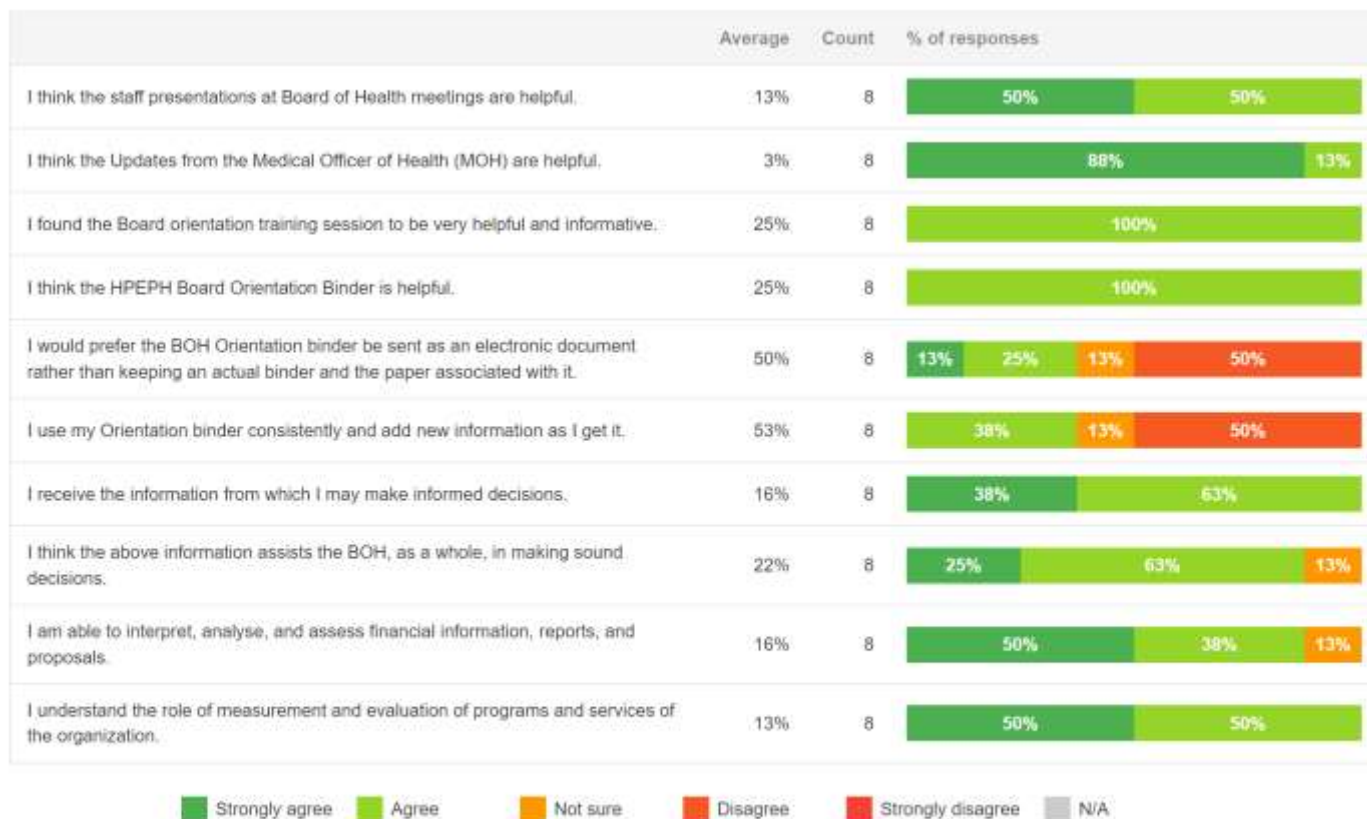
None

Regular updates on programs and services especially in schools

Re: budget, there appears to be a disconnect between timely communication from the Province, and what HPEPH has to work with.

N 4

2. BOARD OF HEALTH INFORMATION SHARING AND RESOURCES



N 8

What suggestions might you have to improve the process of information sharing?

What suggestions might you have to improve the process of information sharing?

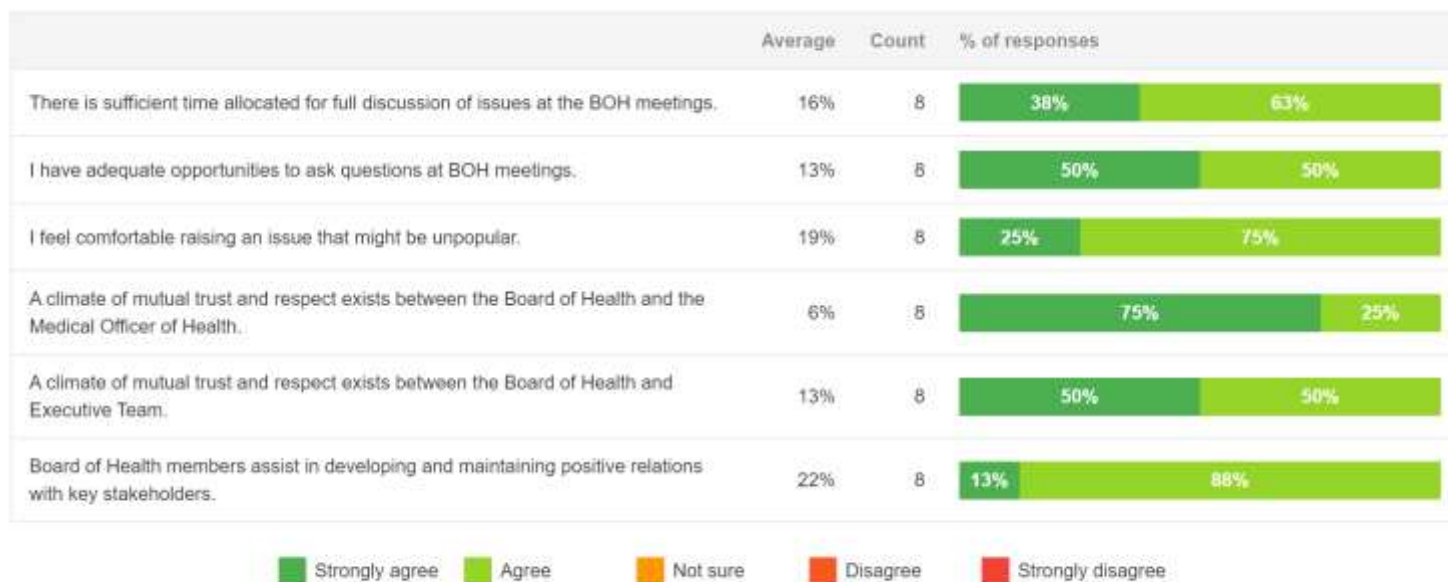
Accessing a Board portal for documents and information is desirable.

None

The information sharing is good. As vice chair we meet with MOH prior to meetings. Very helpful.

N 3

3. BOARD RELATIONS



N 8

Are there any areas for improvement in Board of Health relations?

Are there any areas for improvement in Board of Health relations?

Are there any areas for improvement in Board of Health relations?
No suggestions at this time.
No
Members need to advise of attendance at meetings to ensure quorum.

N 3



N 8

Do you have any other comments or suggestions that will help the Board of Health increase its effectiveness?

Do you have any other comments or suggestions that will help the Board of Health increase its effectiveness?

Do you have any other comments or suggestions that will help the Board of Health increase its effectiveness?

No suggestions at this time.

No

Possibly shared services re modernization

N 3

5. ORGANIZATION MISSION, VALUES AND STRATEGIC PLAN

Schedule 6.2

	Average	Count	% of responses	
I know the organization's vision and understand my role in ensuring this vision is realized.	19%	8	25%	75%
I know the organization's mission and understand my role in ensuring this mission is realized.	19%	8	25%	75%
I know the four values of the organization.	25%	8	25%	63% 13%
I feel the Board of Health exemplifies the four values of the organization.	16%	8	38%	63%
I know the organization's five strategic priorities.	22%	8	13%	88%
I have a clear understanding of how the organization is going to achieve the five strategic priorities.	22%	8	13%	88%
I have a clear understanding of how the organization measures success.	25%	8	100%	
I am confident the organization identifies areas of improvement and continually works to make improvements.	19%	8	25%	75%
I enjoy being on the Board of Health, and feel I have had the opportunity and skills to contribute to the success of the organization.	13%	8	50%	50%

Strongly agree
Agree
Not sure
Disagree
Strongly disagree

N 8

Achieving our Strategic Plan is vitally important to the organization. How can we improve this process?

Achieving our Strategic Plan is vitally important to the organization. How can we improve this process?
Continue to apply the CARE values to the strategic priorities to enable and sustain consistency across each area.
I think that it functions very well as it is currently.
Retaining qualified staff

N 3

6. COMMUNITY ENGAGEMENT

Schedule 6.2



N 8

Are there any areas of improvement for the organization to engage with our communities and key stakeholders?

Are there any areas of improvement for the organization to engage with our communities and key stakeholders?

Nothing specific comes to mind.

No

Resources are limited both human and financial. Physical presence if more resources were available.

Re: first question. There is confusion within the community between this board and the hospital board. Community engagement was great during the vaccine roll-out.

N 4

Throughout the COVID-19 pandemic the organization worked well with community partners to protect the residents in our communities.



Is there anything you think the organization could do better if there is another pandemic?

Is there anything you think the organization could do better if there is another pandemic?
Integrate the lessons learned into new or existing policies and procedures.
There should be a robust and frequently updated supply of PPE and other necessary supplies. These were woefully and incredibly unavailable at the onset of the SARS-CoV-2 pandemic.
Lessons learned Implemented.

N 3

7. PERSONAL COMPETENCIES

	Average	Count	% of responses	
I know why I am investing my time on the Board of Health.	6%	8	75%	25%
I am aware of what skills I bring to the Board of Health and utilize them effectively.	9%	8	63%	38%
I feel the Board of Health works as a team.	16%	8	38%	63%
I feel comfortable asking questions when I don't fully understand an issue.	13%	8	50%	50%
I am able to identify my personal training needs for the role of a Board of Health member.	22%	8	25%	63% 13%
I support the programs and services of the organization in a meaningful way.	9%	8	63%	38%

■ Strongly agree
 ■ Agree
 ■ Not sure
 ■ Disagree
 ■ Strongly disagree

N 8

Keeping in mind your answer to the above question, how do you provide this support to the programs and services?

Keeping in mind your answer to the above question, how do you provide this support to the programs and services?
By sharing information about the programs and services in the community.
No change.
Human Resources experience and municipal leadership
Communicating with stakeholders and getting feedback

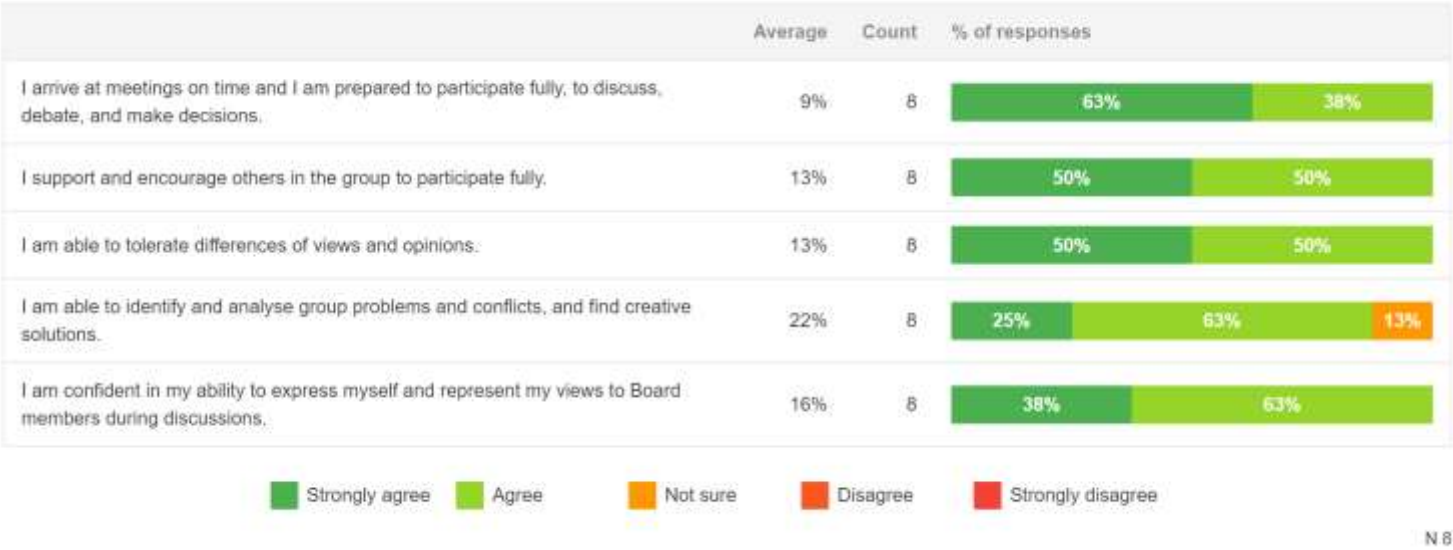
N 4

I enjoy being on the Board of Health, and feel I have had the opportunity and skills to contribute to the success of the organization.



■ Strongly agree
 ■ Agree
 ■ Not sure
 ■ Disagree
 ■ Strongly disagree

N 8



Improvements I would like to suggest for the Board of Health.



Improvements I would like to suggest for the organization.



Board of Health Governance Committee Briefing Note

To:	Hastings Prince Edward Board of Health - Governance Committee
Prepared by:	Dr. Ethan Toumishey, Medical Officer of Health and CEO
Approved by:	NA
Date:	Wednesday, October 19, 2022
Subject:	2021-2022 Strategic Plan Progress Report and 2022-2023 Strategic Plan
Nature of Board Engagement	<input checked="" type="checkbox"/> For Information <input checked="" type="checkbox"/> Strategic Discussion <input type="checkbox"/> Board approval and motion required <input checked="" type="checkbox"/> Compliance with Accountability Framework <input type="checkbox"/> Compliance with Program Standards
Action Required:	That the Governance committee review and recommend to the Board receipt and approval of each of the 2021-2022 Strategic Plan Progress Report and updated 2022-2023 Strategic Plan.
Background:	<p>In preparation of the Strategic Plan Progress Report and updated 2022-23 Strategic Plan Hastings Prince Edward Public Health (HPEPH) Champions group was reconvened.</p> <p>The Strategic priorities for recovery were considered in the preparation of the progress report and updated plan. It is recommended by the group to consider the strategic priorities reported and completed with the prepared documents.</p> <p>The decision was made to maintain the initial term for the current strategic plan (2019-2023). With the impending completion of the term of the current strategic plan, HPEPH will begin planning the next strategic plan in 2023 with planned completion in 2024.</p>

STRATEGIC PLANNING PROGRESS REPORT

MAY 2021 TO MAY 2022

Community Engagement

Schools

- ♦ Liaised with school board partners to ensure smooth transition to in-person learning in September 2021 and provided support for COVID-19 response including school-based COVID-19 immunization throughout the school year.

Municipalities

- ♦ Provided support for development of community safety and well-being plans in Quinte West and Prince Edward County.
- ♦ Liaised with municipalities, and other community partners including, Hastings Quinte Paramedic Services, local police services, and by-law enforcement related to COVID-19 response throughout the course of the pandemic.



Population Health Assessment and Surveillance

Improve data access, organization, management and storage

- ♦ Completed standard procedures and schedules for data collection and organization for numerous topic areas. Data collection, cleaning and analysis schedules for local opioid surveillance and mental health reporting are currently in development.
- ♦ Continuing data migration into the organizational data warehouse. Application of the internal framework for evaluating and improving the Hastings Prince Edward Public Health (HPEPH) COVID-19 emergency response system is ongoing. Evaluation of enforcement activities, assessment of partnerships with municipal decision makers, and evaluation of the Healthy Schools Program related to COVID-19 are complete. Surveying primary care practitioners regarding COVID-19 vaccine administration is underway using the planning cycle toolkit to improve on both efficiency and effectiveness in program delivery.
- ♦ Development of an organizational data source inventory is underway to reduce barriers associated with accessing and leveraging data for program planning and delivery.



Incorporate a health equity approach in the collection and analysis of data

- ♦ Implemented collection of sociodemographic data from COVID-19 vaccine recipients to facilitate health equity action as a foundational component of the vaccination strategy. Preliminary data analysis from Fall 2021 confirmed that targeted vaccination efforts to reach priority populations, including people experiencing homelessness, people living with serious mental illnesses, temporary foreign workers, and people living on a low income were effective. This affirmed our early action to support an equity approach to COVID-19 immunizations.
- ♦ Organizational guidelines for identifying priority populations with population health assessment and surveillance data is underway for consistent use of health equity data.

Focus on assessing, interpreting and using data products

- ♦ Development, application, and continual revision of surveillance of COVID-19. Created three (3) COVID-19 dashboards based on sensitivity of data and audience.

Enhance population health assessment and surveillance knowledge exchange.

- ♦ Continued participation in Community Data Consortium with key community partners.

- ♦ Public dashboards for diseases of public health significance and COVID-19 continue to be updated regularly with high-quality data.
- ♦ Began work with community partners to share opioid-related data and collaboratively develop an Opioid Monitoring Dashboard.
- ♦ Development of an information products catalogue is in progress to list existing and planned data products including a description, audience, vehicle of delivery, frequency of updates and relevant privacy information.

Program Standards

- Public health operational plans were refreshed for 2022 based on staffing capacity and with a focus on priority areas for recovery, catch up and ensuring capacity to meet essential programs and services.



Schools

- ♦ Created permanent public health nurse positions for school health to provide stability for program area.
- ♦ Launched public health clinics in Algonquin Lakeshore Catholic District School Board secondary schools with emphasis on vaping cessation.
- ♦ Updated Mental Health and Substance Use procedure in school clinics to include universal screening for substance use.
- ♦ Developed and promoted video resource to support parent engagement in child transition to kindergarten with a focus on child mental health in partnership with school boards and KFL&A Public Health.

Health Equity and Quality Assurance

- ♦ The Planning Cycle supports a health equity approach in operational planning. Use of the Planning Cycle also ensures quality assurance within programs and services.
- ♦ Continued collaboration with external partners to support health equity among priority populations in our community through organizations such as Bridge Street United Church and through municipal community safety and well-being plans.

Policy Advocacy Framework

- ♦ Developed and promoted inaugural municipal election primer for HPE with focus on priority topics of mental health, opioids, alcohol and poverty.

Healthy Environments

- ♦ Virtual rabies investigations, isolations and releases implemented resulting in efficiencies in financial savings, decreased safety concerns, increased client satisfaction, and use of staff time.
- ♦ Continuation of phone support for smoking cessation clinics.

Clinical Services

- ♦ Review and reorientation of Sexual Health programs and services.
- ♦ Ongoing COVID -19 response with dedicated CCM manager extended until December 2023.
- ♦ Finalized the Immunization Manager as a permanent position and recruited a dedicated Oral Health Manager.

Health Promotion

- Finalized indicators for health protection standards review to assist with prioritization.
- Held joint operational planning workshops with Healthy Families and Healthy Communities for 2022 and 2023 operational plan development.





**Strategic Priorities for Recovery Planning
OCTOBER, 2021- DECEMBER, 2023**

PRIORITY ONE

To identify a framework and implementation plan for the prioritization and recovery of programs and services throughout Hastings & Prince Edward Counties.

Objectives:

- Continue with critical service delivery and COVID-19 activities as required
- Clearly identify program priorities for recovery and reopening of services with focus on flexibility and responsiveness and prioritization of Ministry of Health program standards
- Begin transition of immunization efforts to community channels (primary health care, pharmacies, etc.)
- Ensure effective planning and change management in opening of all programs and services
- Ensure health inequities and hard to reach populations are considered in all aspects of recovery planning
- Continue to develop strong community partnerships to leverage and improve public health outcomes; explore opportunities for system integration

PRIORITY TWO

To develop a comprehensive human resources strategy that focuses on the optimal use of resources and staff development and training.

Objectives:

Talent Management

- Create a succession plan with emphasis on senior level roles to address retirements and ensure smooth transitions
- Review compensation package for non-union staff to ensure an appropriate and competitive financial package
- Appoint HR staff to be trained and implement plans for Diversity, Equity and Inclusion

Training and Development

- Identify and implement leadership development training needs
- Identify and implement program specific training to address recovery priorities and community needs
- Ensure human resources related policies and procedures reflect current and optimal practices

- Review organizational training needs with focus on compliance, risk management and information technology
- Continue to invest in staff development and training with a focus on evidence-based practices and outcome measurement

Performance Management

- Review and assess current performance management system with goal of moving to an improved contemporary performance management system

PRIORITY THREE

To continue to review allocation of organizational resources to optimize financial and human resources.

Objectives:

Innovative Service Delivery

- Embrace changes from COVID experience to offer innovative service offerings
- Continue to strengthen relationships with partners, school boards, municipalities and businesses to leverage resources
- Explore increased collaboration with other public health units and Ontario Health Team to eliminate duplications and maximize service delivery
- Identify and implement process improvements

Financial Sustainability

- Review HPEPH budget approval process and reserve policy and procedures
- Advocate for increased investment in public health
- Continue to evaluate branch office/service hub models
- Ensure finance related policies and procedures reflect current and optimal practices
- Develop and implement internal audit process for increased financial oversight and accountability

PRIORITY FOUR

To develop a comprehensive information technology strategy to ensure that the IT infrastructure meets program delivery needs and work demands.

Objectives:

Infrastructure Sustainability

- Continue to provide industry leading infrastructure for server and virtual desktop infrastructure (VDI)
- Develop equipment replacement policy to address implications of potential post-pandemic “remote work” requests

- Explore increased use of cloud infrastructure, Microsoft email and collaboration products and virtual platforms to meet post-pandemic organizational needs
- Review financing options for future acquisitions (leasing vs purchase) to ensure sustainable long-term asset model

Computer/Cyber Security

- Enhance cyber security with industry leading technical safeguards
- Review and enhance data management and patching strategies
- Implement third party security audit process to meet cyber insurance requirements
- Enhance orientation and training for staff

Computer applications

- Continue to evaluate application portfolio to align with staff requirements and security provisions
- Consolidate clinical applications where practical
- Replace paper driven workflows to electronic based on organizational priorities
- Ensure information technology related policies and procedures reflect current and optimal practices

PRIORITY FIVE

To review internal and external communication needs and foundational standards considerations to meet staff and community priorities.

Objectives:

Internal Communications

- Enhance internal communication tools to support employee engagement including implementation of organizational intranet
- Ensure communication related policies and procedures reflect current and optimal practices

External Communications

- Capitalize on the increased digital engagement during the pandemic by reviewing achievements and analytics and updating the website and social media strategy
- Develop a communications plan to guide stakeholder and public relations throughout the reopening and recovery of programs and services in HPEPH
- Reorient stakeholder bulletins to support program and recovery needs and increase

Recovery Planning

- Coordinate the development of a comprehensive contact management system
- Prioritize the advancement of the Population Health and Surveillance Strategy and updated population health assessment to support recovery planning
- Encourage staff to complete the online Planning Cycle training modules
- Continue to enhance knowledge and awareness of health equity and health equity assessment tools and related local health inequities and opportunities; revise Health Equity Strategy as required
- Continue to increase awareness of the role of public health; revise HPEPH Community Engagement Action Plan as required

Healthy Communities, Healthy People.

2022 - 2023 Strategic Plan

2022-2023 Strategic Plan

Our Vision

Healthy Communities,
Healthy People.

Our Mission

Together with our communities,
we help people become as healthy
as they can be.

Our Values Show We CARE



Collaboration

We work together as a team with our communities, colleagues and clients to build effective partnerships.



Advocacy

We are a voice to influence public policy and take action to improve health.



Respect

We treat others with dignity, respect and integrity.



Excellence

We strive for excellence through effective public health practice and promote a culture of innovation and learning.

Our Strategic Priorities



COMMUNITY ENGAGEMENT

We will be a collaborative partner within our communities to protect and optimize the health of our citizens.

TO ACHIEVE THIS WE WILL

- Facilitate community involvement.
- Nurture meaningful relationships that lead to successful partnerships and outcomes.
- Increase awareness of the role of public health and our programs and services.
- Be a resource and partner to our local health care providers.
- Serve as a voice of advocacy to champion the best possible health for all.



STAFF ENGAGEMENT AND CULTURE

We will build a culture of engagement, inclusiveness and open communications.

TO ACHIEVE THIS WE WILL

- Invest in the training and development of our staff to cultivate a skilled, diverse and responsive workforce.
- Foster an engaging work environment of collaboration, respect and accountability.
- Enhance our internal communications strategy and increase opportunities for employee feedback.
- Identify and adopt initiatives to improve physical and mental well-being in the workplace.
- Consider opportunities to increase diversity across our workforce.



PROGRAM STANDARDS

We will implement the new program and organizational standards using a coordinated and accountable approach.

TO ACHIEVE THIS WE WILL

- Focus on continuous quality improvement for our programs and services.
- Establish processes to improve efficiencies and long-term sustainability.
- Optimize the allocation of resources.



Our Strategic Priorities



POPULATION HEALTH ASSESSMENT AND SURVEILLANCE

We will develop the organizational capacity needed for population health assessment, surveillance and evaluation.

TO ACHIEVE THIS WE WILL

- Ensure population health issues are identified, reported and addressed.
- Continually review and evaluate our programs and services.
- Make evidence-informed decisions to ensure effective public health practice.



HEALTH PROMOTION






We will develop a comprehensive health promotion approach to address local health issues.

TO ACHIEVE THIS WE WILL

- Continue to identify local health and well-being priorities.
- Focus our health promotion efforts to ensure the greatest impact in our communities.



hpePublicHealth.ca

 Hastings Prince Edward Public Health
 @hpePublicHealth
 @hpePublicHealth
 613-966-5500 | 1-800-267-2803
 info@hpeph.ca

Main Office - Belleville

179 North Park St., Belleville, ON K8P 4P1

North Hastings

1P Manor Lane,
Professional Services Building, L1-024
Brancroft, ON K0L 1C0

Prince Edward County

Suite 1, 35 Bridge St., Picton, ON K0K 2T0

Quinte West

West End Plaza
499 Dundas St. West, Trenton, ON K8V 6C4

We are committed to providing accessible publications, programs and services to all. For assistance, please call **613-966-5500 TTY: 711** or email accessibility@hpeph.ca





HASTINGS PRINCE EDWARD Public Health

hpePublicHealth.ca | 613-966-5500 | 1-800-267-2803
BELLEVILLE | NORTH HASTINGS | PRINCE EDWARD COUNTY | QUINTE WEST

Hastings Prince Edward Public Health is situated and provides services on the traditional territory of the Anishinaabe, Huron-Wendat and Haudenosaunee people.