

Examiner Column from Dr. Rosana Salvaterra, Medical Officer of Health Peterborough County-City Health Unit

Tuesday, April 12, 2016

Public Health Puts Healthy People First

Last December, Minister of Health Eric Hoskins released a discussion paper entitled “Patients First” to signal his intent to “transform” the health care system to address the gaps and inequities that currently exist. “Patients First” also speaks to a desire to strengthen the links between Local Health Integration Networks (LHINs) and Public Health for the purpose of improving health system planning and performance. While this is a welcomed role, there is a strong and puzzling disconnect with this intention and the proposed changes contained in the paper.

For one, the jurisdictions of Public Health and the LHINs do not align which complicates population level health analysis and service delivery. Public Health is a distant cousin to the rest of the health care system and is independent of LHINs. Yes, we do provide vaccines to health care providers, and we collaborate on cancer prevention, the healthy growth and development of babies and children, and infectious diseases. But our roots are in the municipal system, in health departments that focused on clean water, sanitation, the prevention of epidemics, the pasteurization of milk, and the eradication of poverty and slum housing.

Public Health’s mandate is to keep people healthy, long before they become patients in the health care system. We focus on primary prevention and probably spend as much time working with schools and boards of education, as we do with hospitals. As the smaller and poorer cousins to the health care system (Canada spends only about 5% of its health care dollars on public health) we enjoy the independence and responsibility granted to us by the Health Protection and Promotion Act, which also mandates that boards be composed of both municipal and provincial appointees, and that local governments fund 25% of our budgets.

As advocates for healthy public policy, Public Health can speak with an independent voice to all three levels of government on diverse issues like smoking bylaws or provincial poverty reduction efforts or the need for federal regulation of sodium in processed foods. We don’t always win popularity contests, but we take to heart our duty to both protect and promote the health of our communities.

“Patients First”, as currently written, has the potential to undermine our independence and erode our capacity by pulling Public Health more directly into the LHIN orbit. What is curious is the complete absence of any rationale for diverting our funding and accountability away from the province to LHINs. Evidence from other jurisdictions shows that Public Health does not fare very well when it is incorporated into regional health authorities like LHINs that also deal with the health care system. What tends to happen is that Public Health’s time and energy gets diverted into health care system planning, and our budgets wither. The truth is that an ounce of prevention, believed by all to worth more than a pound of cure, does not compete well with the compelling demands of the acute care system. Or even the long term care system. Enforcing tobacco legislation, inspecting restaurants or drinking water systems, delivering prenatal or parenting classes, promoting physical activity, and reducing food insecurity tend to get eclipsed by more pressing matters.

For these reasons, Peterborough's board of health is urging Minister Hoskins to reconsider. Stronger links with LHINs can be developed without changing the funding and accountability of Public Health. Peterborough County, both Hiawatha and Curve Lake First Nations, and most of our local municipal councils all agree, and to that end, MPP Laurie Scott has already been briefed and I will be meeting with Minister Leal soon to share our concerns.

I encourage you to learn more about "Patients First" and educate yourself about what it means to Public Health, and your community, in the long term.

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