



TO: Chair and Members of the Board of Health

FROM: Graham L. Pollett, MD, FRCPC
Medical Officer of Health

DATE: 2012 June 21

COMMUNITY HEALTH STATUS RESOURCE: PROJECT STATUS UPDATE

Recommendation

It is recommended that Report No. 088-12 re Community Health Status Resource: Project Status Update be received for information.

Introduction

An important Board of Health obligation under the Ontario Public Health Standards is to ensure ongoing health status monitoring for its catchment area. Also, it is important for public health professionals to have an understanding of the overall health of the population to effectively plan and to assess gains in health status. Led by the Health Unit's Epidemiologists (Ms. Sarah Maaten, Ms. Evelyn Crosse and Ms. Alison Locker) and Data Analyst (Mr. Bernie Lueske), staff members have been working to complete a Community Health Status Resource.

The Resource will present health trends in the Middlesex-London population including social, economic, physical, and behavioural factors. This online Resource is also referred to as the Middlesex-London Health Unit (MLHU) "Population Check Up". Using the most current local data available and well-developed public health indicators, it will provide a comprehensive picture of the status of population health in Middlesex-London. It will be of use to health unit staff to inform policy and program decisions. It will also be of interest to local health professionals, policy and decision-makers, community partners, service providers and the general public.

Content of the Community Health Status Resource

This Community Health Status Resource will provide information about the following topics:

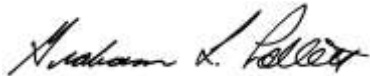
- Demographics – characteristics of the population
- Social Determinants of Health – social and economic factors that contribute to health
- Deaths – leading causes of death in the population
- Hospitalizations – leading reasons for being admitted to hospital
- Lifestyle Behaviours – behaviours associated with chronic illnesses and injuries
- Injuries – causes of unintentional and intentional injuries
- Chronic Diseases – common chronic illnesses and cancer prevention by screening
- Communicable Diseases – illnesses that spread from person to person
- Reproductive Health – pregnancies, births and associated behaviours
- Child Health and Development – health and behaviours of children up to age 19
- Environment – health protection from the physical environment

The data will be presented a number of ways. First, to give the reader a sense of how common health events (e.g., deaths, births) are in the community, numbers of events and rates of events (i.e., how often the event occurred given the number of people in a specified population) will be used. Comparisons will help identify priority groups which may require special attention. Age, sex, geography and time are the four main comparison categories. In some cases, where the population size is large enough, comparisons will be made between the City of London and Middlesex County. Where possible, rates will be compared between MLHU, the province and with the average of other Ontario health unit areas similar to Middlesex-London. Time trends will be used to help determine whether this community is improving or getting worse in a health outcome.

It should be noted that population health data do not exist, or cannot be reported, for all public health topics or sub-populations in Middlesex-London. This Community Health Status Resource will be updated and expanded as appropriate data become available and will serve as a baseline comparison for future assessments of local health status.

The Community Health Status Resource will be presented at the September Board of Health meeting. This will be followed by a launch for public viewing.

This report was prepared by Ms. Sarah Maaten, Ms. Evelyn Crosse and Ms. Alison Locker, Epidemiologists.



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This report addresses the following requirement(s) of the Ontario Public Health Standards:

Foundational Standard:

- #1: The board of health shall assess current health status, health behaviours, preventive health practices, health care utilization relevant to public health, and demographic indicators in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
- #2: The board of health shall assess trends and changes in local population health in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).
- #3: The board of health shall use population health, determinants of health and health inequities information to assess the needs of the local population, including the identification of populations at risk, to determine those groups that would benefit most from public health programs and services (i.e., priority populations).
- #5: The board of health shall provide population health information, including determinants of health and health inequities to the public, community partners, and health care providers, in accordance with the Population Health Assessment and Surveillance Protocol, 2008 (or as current).