

# 2010 - 11 Gap Analysis & Improvement Plan: Healthy Community Environments Core Public Health Program

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**2010-11 Gap Analysis & Improvement Plan:  
Healthy Community Environments  
Core Public Health Program**

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## Introduction

In 2005, the BC Ministry of Health released a policy framework to support the delivery of effective public health services. *The Framework for Core Functions in Public Health* identifies 20 core programs that a renewed and comprehensive public health system must provide. Evidence reviews are conducted for each core program to inform Model Core Program Papers, against which each health authority is responsible to perform a gap analysis and develop an improvement plan.

This document contains a gap analysis and improvement plan for the Healthy Community Environments (HCE) core program. The key objectives of the HCE core program are:

- To prevent ill health, injury and death.
- To increase public awareness and understanding in order to reduce exposure to water contaminants.
- To ensure compliance with provincially legislated standards and/or recognized guidelines.

The program outlines five core components through which health authorities can support the objectives listed above. These are:

- Prevention
- Advocacy
- Public education and involvement
- Regulatory compliance
- Program surveillance and evaluation

The purpose of this document is to present PHSA's gap analysis and multi-year improvement plan in relation to the Healthy Community Environments core program.

## Background

PHSA's Strategic Plan 2010-2013 identifies *Creating Quality Outcomes and Better Value for Patients*, *Promoting Healthier Populations* and *Contributing to a Sustainable Health Care System* as its three key strategic directions. The PHSA's Population & Public Health initiatives support mainly the *Promoting Healthier Populations* strategic direction.

In 2009, the PHSA Centres for Population & Public Health model was launched as a coordinating mechanism to support the commitment made by PHSA's Executive Leaders Council and Board to advance population and public health in BC. The Centres provide a venue to leverage expertise across PHSA agencies and programs, facilitate knowledge exchange and collaboration, and coordinate PHSA's response to the Core Public Health Functions requirements. The Centres provide a mechanism for PHSA to internally coordinate primordial and primary prevention activities and link with external agencies to address issues across the province. The Centres are responsible for:

- Leveraging expertise and knowledge of key agencies.
- Developing gap analyses and performance improvement plans for Core Public Health Programs and report on progress of the plans.
- Collaborating on planning, implementation and evaluation of population and public health primary prevention projects funded by PHSA.

- Being a point of contact with external groups, including health authorities, government, community groups, aboriginal groups and other stakeholders; offer, and provide support to them in addressing province-wide needs through knowledge synthesis, transfer and exchange, coordination/facilitation of surveillance, consistent messaging, supporting healthy public policy and expert advice.
- Being a point of contact with academic institutions and a venue for coordinating and expanding academic initiatives in population and public health.

A sub-group of the PHSA Centre for Environmental Health has undertaken the responsibility for developing the gap analysis and improvement plan for the Healthy Community Environments core program.

## Context

The Provincial Health Services Authority (PHSA) is responsible for ensuring that high-quality specialized services and programs are coordinated and delivered within the regional health authorities. PHSA operates eight provincial agencies including: BC Mental Health & Addiction Services, BC Children's Hospital, BC Women's Hospital, BC Centre for Disease Control, BC Cancer Agency, BC Renal Agency, BC Transplant and Cardiac Services BC.

One of PHSA's four key strategic directions is *Promoting Healthier Populations*, which includes objectives relevant to improving population and public health (PPH), and elements of health promotion and prevention. A steering committee consisting of representation from all PHSA agencies and programs oversees PPH activity across PHSA. Due to the provincial scope of PHSA's mandate, a dual role for PHSA has emerged: improvements aimed at streamlining PPH activities within PHSA agencies and programs, as well as potential provincial coordination in areas such as surveillance, consistent messaging, expert advice, and supporting development of healthy public policy. The role for PHSA could be to: convene and coordinate provincial dialogue; facilitate the identification of common needs and joint problem solving; collaborate with and support regional and provincial partners to meet common needs; and jointly identify available resources for common initiatives.

### **PHSA's Role**

In relation to Healthy Community Environments, PHSA's activities include knowledge synthesis and transfer related to health impacts of the built environment. With respect to environmental contaminants, its role encompasses a wide range of centralized services and supports delivered through the BC Centre for Disease Control (BCCDC) including:

- Conducting surveillance, risk assessment, research and analysis on community environmental health issues;
- Providing technical guidance and advice to the Provincial Health Officer and the Ministry of Health Services;
- Advising health authorities on risk assessment, health protection and harm prevention related to environmental health hazards;
- Conducting epidemiological and other surveys related to health risks from environmental contaminants; and
- Developing public awareness materials on environmental health issues for use by health authorities, other organizations, and the public.

# Gap Analysis and Improvement Plan

## **Strengths Identified for PHSA in the Healthy Community Environments Core Program Include:**

- Provision of expert support to the Ministry and Health Authorities, which both have minimal capacity to do the work
- National recognition and reputation for being a leading organization in climate change (BCCDC), UV radiation (BCCA) and the built environment (Centre for Environmental Health)
- Host to the externally funded National Collaborating Centre for Environmental Health, which provides knowledge generation, translation and exchange support as well as program evaluation support nationally, but also to BC activities
- Provision of leadership and collaboration with Health Authorities on research and evaluation
- Capacity to use surveillance and monitoring evidence
- Newly inaugurated work plan, developed in collaboration between PHSA, Health Authorities and the Ministry, that identifies a plan for evidence reviews, and is flexible enough to accommodate emergency requests and medium-term requests

## **Gaps Identified for PHSA in the Healthy Community Environments Core Program Include:**

- Lack of consistent, high quality, relevant data (especially environmental data); in some areas there is good data, but in other areas it is not collected at all, or it is not collected in a way that is useable; the challenge may be heightened by movement of air and water management activities from the Ministry of Health Services to the Ministry of the Environment
- Uncertainty as to policy and direction from the Ministry in many of the key environmental threats and hazards (e.g., radon, built environment, UV radiation, pesticides, lead, noise), limits development of research and risk assessment
- Lack of skills and resources to assist in assessing environmental risks
- Common risk perception and community pressure around noise and non-ionizing radiation, in the face of inertia around issues with much larger health impacts such as radon, mould, and indoor tobacco smoke

### **Priority Areas for Improvement**

Based on the strengths and gaps articulated, six priority areas of improvement have been identified as follows (see Improvement Plan for more detail re: outcomes, performance targets, timelines and PHSA Lead):

1. Develop and implement a plan to improve access to, storage of and analysis and applicability of large amounts of relevant data (e.g., noise) by:
  - identifying what data we need
  - gaining access
  - developing data handling capacity to better characterize population risk
2. Address the needs of vulnerable populations by completing CPPH projects with respect to Biomarkers and Health 201
3. Continue to lead in the area of temperature change and health
4. Continue to lead in the area of addressing population exposure to radon
5. Develop training modules to assist in assessing environmental risks (priority on air quality)
6. Work through Environmental Health Policy Advisory Committee to support provincial action on environmental threats to health

## Healthy Community Environments Improvement Plan:

Component	Priority Areas for Improvement	Outcomes/Objectives	Performance Targets (Indicators)	Timeline	PHSA Lead
Environmental Surveillance & Monitoring	Improve access to, storage of and analysis and applicability of large amounts of relevant data	Develop and implement a plan to improve access to, storage of and analysis and applicability of large amounts of relevant data related to noise	<ul style="list-style-type: none"> <li>Plan developed: <ul style="list-style-type: none"> <li>Required data identified</li> </ul> </li> <li>Plan implemented <ul style="list-style-type: none"> <li>Data access gained</li> <li>Education provided on tools for the development and interpretation of community noise maps</li> <li>Data handling capacity to better characterize population risk developed</li> </ul> </li> </ul>	<p>Sept 2011</p> <p>Dec 2011 onwards</p>	BCCDC/EHSD
<p>Environmental Surveillance &amp; Monitoring</p> <p>Collaboration for Healthy Community Environments</p>	Address the needs of vulnerable populations	Complete CPPH projects with respect to biomarkers and Health 201 in response to conducting surveillance, risk assessment, research and analysis on community environmental health issues	<ul style="list-style-type: none"> <li>Draft regulations complete</li> <li>Procedures for the receipt, triage and investigation of elevated biomarkers results identified</li> <li>Impediments to system implementation identified</li> <li>Materials to train and support EHOs developed</li> <li>Assessment of comparable Quebec programs</li> </ul>	<p>March 31/11</p> <p>March 31/11</p> <p>March 31/11</p> <p>Dec 31/11</p> <p>Dec 31, 2011</p>	BCCDC/EHSD

Component	Priority Areas for Improvement	Outcomes/Objectives	Performance Targets (Indicators)	Timeline	PHSA Lead
			<ul style="list-style-type: none"> <li>Estimates made of potential benefits and costs through review of BC lab records</li> </ul>	Dec 31, 2011	
Environmental Health Risk Assessment/Risk Management	Continue to provide leadership on key issues in the absence of policy direction	<ul style="list-style-type: none"> <li>Continue to lead in the area of temperature change and health</li> <li>Continue to lead in the area of addressing population exposure to radon</li> </ul>	<ul style="list-style-type: none"> <li>Joint PHSA, HA working groups on temperature change and health and radon propose regulatory changes, public education strategies</li> </ul>	June 30/11	BCCDC/EHSD
Environmental Health Risk Assessment/Risk Management  Investigation & Enforcement	Improve knowledge exchange efforts to support the assessment of environmental risks	Develop training modules to assist in assessing environmental risks (priority on air quality)	<ul style="list-style-type: none"> <li>Local air quality assessment tools and courses completed</li> </ul>	March 30/11	BCCDC/EHSD



Component	Priority Areas for Improvement	Outcomes/Objectives	Performance Targets (Indicators)	Timeline	PHSA Lead
<p>All 5 Components:</p> <ol style="list-style-type: none"> <li>1. Environmental Surveillance &amp; Monitoring</li> <li>2. Environmental Health Risk Assessment</li> <li>3. Collaboration for Healthy Community Environments</li> <li>4. Investigation &amp; Enforcement</li> <li>5. Research &amp; Program Evaluation</li> </ol>	<p>Improve collaboration with respect to provincial action on environmental threats to health</p>	<p>Work through Environmental Health Policy Advisory Committee to support provincial action on environmental threats to health</p>	<ul style="list-style-type: none"> <li>• EH Policy Advisory committee goals completed as per workplan</li> </ul>	<p>Aug/11 and possibly beyond (TBD)</p>	<p>BCCDC (as the PHSA partner on the Advisory Committee)</p>

## **Appendix A – PHSA CENTRE FOR ENVIRONMENTAL HEALTH MEMBERSHIP**

<b>HEALTHY COMMUNITY ENVIRONMENTS CORE PROGRAM (Centre for Environmental Health)</b>	
Tom Kosatsky	BC Centre for Disease Control (BCCDC)
Judy Isaac-Renton	BC Centre for Disease Control (BCCDC)
Bob Brunham	BC Centre for Disease Control (BCCDC)
Eleni Galanis	BC Centre for Disease Control (BCCDC)
Natalie Prystajacky	BC Centre for Disease Control (BCCDC)
Prabjit Barn	BC Centre for Disease Control (BCCDC)
Sonia Lamont	BC Cancer Agency (BCCA)
Ruth Abramson	Facilities & Planning
Leslie Varley	Aboriginal Health
Tannis Cheadle	Population & Public Health (PPH)
Lydia Drasic	Population & Public Health (PPH)