Ontario Risk and Behaviour Surveillance System (ORBSS) Project

General Stakeholder Consultation
March 2011
Ian Johnson, Chairperson, ORBSS Advisory Committee

orbss@oahpp.ca

Draft for discussion- not for further circulation or citation
Outline

- Brief history and current status of ORBSS planning project
- Overview of draft recommendations
- Feedback and questions
What is risk factor surveillance?

- Risk factors — factors associated with chronic diseases and other conditions (factors go beyond personal behaviour and include community, environmental and cultural factors)

- Surveillance — collection, analysis, interpretation and dissemination of information so as to take action

Background on ORBSS planning project

- Review of current risk factor surveillance landscape (environmental scan)
- Develop a blueprint for a province-wide risk factor surveillance
- Support the Ontario Public Health Standards (OPHS)
Current status in Ontario

- Patch work
  - Incomplete coverage of topics
  - Incomplete coverage over time (for trend analysis)
  - Incomplete geographic coverage
  - Incomplete attention to continuum of surveillance model (data to information to intelligence)
Role for new Ontario Agency for Health Protection and Promotion (OAHPP)

- OAHPP Act (2007) identifies a role for OAHPP in surveillance
  - To develop, collect, use, analyse and disclose data, including population health, surveillance and epidemiological data, across sectors, including human health, environmental, animal, agricultural, education, community and social services and housing sectors, in a manner that informs and enhances healthy public policy and public health planning, evaluation and action

Draft for discussion - not for further circulation or citation
Underlying assumptions

- Key ORBSS value is collaboration
- A comprehensive risk factor surveillance should support both provincial and local level planning and delivery
- All health units are not created equally, some may need more help than others to meet the Foundational Standard of the Ontario Public Health Standards
Initial Consultation

- Completed an initial online consultation with health units and others in August 2010
  - gauged support for the vision, mission, values and goals of the ORBSS as well as health unit priorities for risk and behaviour surveillance

- Conducted additional focused discussions with:
  - public health epidemiologists at September 2010 Association of Public Health Epidemiologists in Ontario (APHEO) workshop
  - government stakeholders

- General agreement with the discussion paper

*Draft for discussion - not for further circulation or citation*
Major developments along the way...

- Recognition of the provincial budget limitations
- Rapid Risk Factor Surveillance System (RRFSS) decided to proceed with a pilot study independent of the ORBSS process
Decision of the ORBSS Committee

- Not the time to start a new system (no revolution)

- Work on integrating and improving existing systems (evolution)
Overview of three recommendation groupings

1. Coordination
   - Including accessing new datasets
2. Central analytics
3. Funding

*Draft for discussion - not for further circulation or citation*
Recommendation 1: Coordination

a) OAHPP establish and provide secretariat support for an Ontario risk and behaviour partnership, to facilitate relationships among the existing data users, suppliers and funders.

b) OAHPP establish and support the creation of an Ontario risk and behaviour coordinating committee, to facilitate joint planning and integration.
Organizational overview of Ontario Risk and Behaviour Surveillance (ORBS)
Recommendation 1: Coordination (accessing new data)

c) ORBS partnership identifies existing datasets pertinent to the OPHS

d) ORBS partnership identifies opportunities to gain access to these datasets or tabulated results

e) ORBS partnership investigates the potential to develop new datasets or expand the use of existing ones

Draft for discussion- not for further circulation or citation
Recommendation 1: Coordination

f) OAHPP and relevant ministries within the Ontario government consult with the ORBS coordinating committee/partnership for their collective advice on areas where:

- collaboration across existing surveillance systems is possible and beneficial
- new investments in risk factor surveillance would be most efficient
Recommendation 2: Central analytics

a) OAHPP assume the role of developing a central analytics program including an electronic platform for risk factor and behavioural surveillance in Ontario

b) OAHPP establish and support a central analytics advisory committee (including members from health units, government, resource centres, and APHEO)

c) OAHPP support the APHEO core indicators for public health in Ontario work group to define the core indicators for central analytics
Recommendation 2: Central analytics

d) OAHPP assume the role of producing the results for a key set of indicators (a population health assessment “bridge”)

Draft for discussion- not for further circulation or citation
Recommendation 3: Funding

a) OAHPP seek support from Ontario Ministry of Health and Long-Term Care, Ministry of Health Promotion and Sport, and Ministry of Children and Youth Services for the development of the central analytics program, key indicators and ORBS Coordinating Committee *

b) OAHPP continue their current support of RRFSS including the provision of scientific and technical advice for the development of modules of mutual interest

* not supported by all committee members due to conflict of interest

Draft for discussion- not for further circulation or citation
Recommendation 3: Funding

c) OAHPP work with ORBS Partnership to enhance funding to expand data collection in order to answer provincial time sensitive/ emerging questions
Consultation questions:

1. Which recommendations do you most agree with?

2. Are there areas that need more attention?

3. Recognizing the role you or your organization plays in population health assessment and surveillance activities, what is your role in helping move ORBS forward?
Please send your comments or feedback to:
orbss@oahpp.ca

Thank you

Draft for discussion- not for further circulation or citation
### Appendix A: ORBSS advisory committee members

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ian Johnson (Chair)</strong></td>
<td>Scientific Advisor, OAHPP</td>
<td></td>
</tr>
<tr>
<td><strong>Natasha Crowcroft</strong></td>
<td>Director, Surveillance and Epidemiology, OAHPP</td>
<td></td>
</tr>
<tr>
<td><strong>Paul Fleiszer</strong></td>
<td>Manager, Surveillance &amp; Epidemiology, Toronto Public Health</td>
<td></td>
</tr>
<tr>
<td><strong>Liz Haugh</strong></td>
<td>Director, Health Promotion, Windsor-Essex County Health Unit</td>
<td></td>
</tr>
<tr>
<td><strong>Michael King</strong></td>
<td>Epidemiologist, Sudbury &amp; District Health Unit</td>
<td></td>
</tr>
<tr>
<td><strong>Robert Kyle</strong></td>
<td>Medical Officer of Health, Durham Region Health Department</td>
<td></td>
</tr>
<tr>
<td><strong>Carol Paul</strong></td>
<td>Senior Health Analyst, Ministry of Health and Long-Term Care</td>
<td></td>
</tr>
<tr>
<td><strong>Rosana Pellizzari</strong></td>
<td>Medical Officer of Health, Peterborough County-City Health Unit</td>
<td></td>
</tr>
<tr>
<td><strong>Elizabeth Rael</strong></td>
<td>Senior Epidemiologist, Ministry of Health Promotion</td>
<td></td>
</tr>
<tr>
<td><strong>Ruth Sanderson</strong></td>
<td>Chronic Disease Epidemiologist, OAHPP</td>
<td></td>
</tr>
<tr>
<td><strong>Linda Stewart</strong></td>
<td>Executive Director, Association of Local Public Health Agencies</td>
<td></td>
</tr>
<tr>
<td><strong>Paula Stewart</strong></td>
<td>Medical Officer of Health, Leeds, Grenville &amp; Lanark District Health Unit (as of May 25, 2010)</td>
<td></td>
</tr>
<tr>
<td><strong>Joanne Thanos</strong></td>
<td>Senior Epidemiologist, Ministry of Health and Long-Term Care</td>
<td></td>
</tr>
<tr>
<td><strong>Carol Woods</strong></td>
<td>Program Director with the Sexual Health and STI program, Algoma Public Health</td>
<td></td>
</tr>
</tbody>
</table>
Appendix B: Addition selected history of risk factor surveillance

- US Behavioral Risk Factor Surveillance Study (BRFSS)
  - Started in 1984 in 15 states, by 1994 in all states
  - Sampling allows for state and national estimates

- Canadian Community Health Survey (CCHS)
  - Started in 2000/01
  - Preceded by Canada Health Survey (1978/79), Health Promotion Survey (1985), Ontario Health Survey (1990) and National Population Health Survey (1994, 96)
  - Sampled by health region (health units in Ontario)
  - Additional sample for Toronto (to accommodate LHINs)
  - Operated by Statistics Canada
History (cont.)

- Rapid Risk Factor Surveillance System (Ontario)
  - Started in 1999
  - Allows for flexibility in selection of topics/ addition of questions
  - Initially started to increase response time (CCHS was considered too slow)
  - Sampling by health units, all areas in province not covered
  - 20 of 36 health units are members (as of 2010)
  - Piloting additional “provincial” sample in 2011
  - Individual health units do analysis
  - System managed by health units, data collected by ISR, York University

*Draft for discussion- not for further circulation or citation*
History (cont.)

- Other systems
  - School Health Environment Survey (SHES)
  - School Health Action Planning and Evaluation System Ontario (SHAPES-Ontario).
  - Ontario Student Drug Use and Health Survey (OSDUHS)
  - Infant Feeding Survey(s)
  - First Nations Regional Longitudinal Health Survey (RHS)
  - Canadian Health Measures Survey (CHMS)
  - Better Outcomes Registry and Network Ontario (BORN-Ontario)
  - Aboriginal Peoples Survey (APS)
  - Aboriginal Children’s Survey (ACS)

*Draft for discussion- not for further circulation or citation*
History (cont.)

- Other emerging players in risk factor surveillance networks
  - Canadian Alliance for Regional Risk Factor Surveillance (CARRFS)
  - World Alliance for Risk Factor Surveillance (WARFS)

- Other Ontario players in data to intelligence model
  - Cancer Care Ontario (also an Agency of government)
  - Resource centres (e.g. Ontario Tobacco Research Unit, Ontario Injury Prevention Resource Centre)
  - Etc.

*Draft for discussion - not for further circulation or citation*