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New agency leads the way

on public health protection and promotion



The Ontario government has created the province's first-ever, arms-length public health agency: The Ontario Agency for Health Protection and Promotion. This agency will bring academic, clinical, public health and government experts together to focus on the areas of infectious disease, infection prevention and control, health promotion, chronic disease, injury prevention, and environmental health.

Modeled on successful centres in Europe, British Columbia and Quebec, the agency will be a centre of public health excellence. It will serve as a hub, linking researchers, practitioners and frontline health care workers to the best scientific intelligence from around the world.

This public health agency is a result of the three-year action plan Operation Health Protection which was launched to kick-start the renewal of public health in Ontario. The agency will be an important resource for the ministry and support its role as steward in governing the public health system. For an overview of the transformation of the public health system and the realignment of the Public Health division see the Nov. 9, 2007 issue of [NEW Directions](#).

"When called on, during critical situations ranging from localized outbreaks to provincial emergencies such as pandemic flu, the agency staff will provide specialized scientific and technical advice and on-the-ground support to frontline health care workers, public health units, the chief medical officer of health and the government," said Phil Jackson, director of strategic planning, Strategic Planning and Implementation Branch, Public Health. "Staff will also provide hands-on expertise and support operating within the Ministry of Health and Long-Term Care's overall emergency chain of command."

Dr. David Walker, dean of the Faculty of Health Sciences at Queen's University, has been appointed as the agency's inaugural chair. Walker also chaired the province's Expert Panel on SARS and Infectious Disease Control.

"I am honoured to accept this important appointment and humbled by the caliber of individuals that have agreed to serve on the founding board with me," Walker said. "The launch of this agency is one of many examples of the government's commitment to improve the public health system post-SARS and to act on recommendations in my report and those of my colleagues. It is truly inspiring," he said.

...continued on page 2



...continued from cover

In addition to Walker, six founding board members for the Ontario Agency for Health Protection and Promotion have also been named. They are:

- Dr. Richard Massé, president and CEO of the Institut national de santé publique du Québec
- Dr. Michael D. Christian, a physician in critical care and infectious diseases at the Mount Sinai Hospital/University Health Network
- Judith Tompkins, chief of nursing and professional practice, and executive vice president at the Centre for Addiction and Mental Health (CAMH)
- Dr. Vivek Goel, provost and vice president of the University of Toronto
- Dr. Terrance Sullivan, president and chief executive officer of Cancer Care Ontario
- Dr. Liana Nolan, commissioner and medical officer of health for the Region of Waterloo

A maximum of 13 members will sit on the agency's board at any one time. A search for the remaining board members is underway. In November, the new board members hosted a gathering attended by about 70 health system stakeholders. Health Minister George Smitherman, as well as his colleagues Margaret Best, Minister of Health Promotion, and Ontario's former chief medical officer of health Dr. Sheela Basrur, were in attendance to mark the significance of the new agency's launch.

An international search for the agency's first chief executive officer is well underway and the position is expected to be filled in spring 2008. In the meantime, the board has held its first strategic planning session to begin charting the pivotal role it will play within the health system.

"This is the most exciting time for public health in my lifetime," said Dr. Don Low, chief microbiologist Mount Sinai Hospital/University Health Network. "With the



promise of world-class facilities and strong linkages with academic partners and health care providers, the agency will be able to recruit top-level scientists to the benefit and protection of all Ontarians," Low said. Six scientists and medical microbiologists already have been recruited from England, Australia, United States and France as well as elsewhere in Canada.

It is important that Ontario has the capacity to manage and respond effectively to outbreaks and public health emergencies within the province, Jackson said. The agency will give Ontario this capability, as well it will work closely with other centres of disease control in the country and the Public Health Agency of Canada, which liaises with international bodies.

"Ontario is home to some of the best researchers, clinicians and experts in a wide range of areas important for understanding and responding to threats to health. The

agency will make accessing that expertise clearer, easier and faster for all involved," commented acting chief medical officer of health, Dr. David Williams. "It has only been through the hard work, dedication and co-operation of staff from across the ministry, partner ministries and central agencies that this vision is being brought to reality." ■

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Elaine Lurie, *editor* | 416-327-4363
Maureen Murray, *writer* | 416-212-1884

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LIIST winds down after a task well-done

The ministry's Local Information Incident Support Team (LIIST) has been in place since April 2007 to assure a smooth transition as Local Health Integration Networks (LHINs) assumed their full responsibilities for health care services at the local level. By providing transitional support to the LHINs as well as the ministry's LHIN Liaison Branch, the LIIST staff has been there to successfully bridge the gap as health system partners built capacity in their new roles.

Under the leadership of former Regional Office director Michael Klejman, LIIST staff over the past months has been engaged in carrying out communication functions,

information gathering, as well as incident and emergency management, to support the LHINs and other areas of the ministry where the need existed during the transition.

"I would like to commend the LIIST staff for all their hard work and commitment. The team has been effective and essential to the success of the introduction of LHINs in the health system," said Deputy Minister Ron Sapsford.

With much of its work accomplished, LIIST was decommissioned on Dec, 31, 2007. However, Klejman, along with a few staff members will remain in place for two to three months to assist with the remaining ministry-managed programs, as well as ongoing incident management. ■