Nobody Owns Health
Teamwork leads to results
Paul Hasselback MD MSc FRCP
Medical Health Officer – Central Island

What’s Old is New Again
The greatest improvements over the last century in the public’s health have been achieved, not through hospitals, Physicians or medications, but through the actions of local government.
Original quote from England 1950’s

What’s Old is New Again
Local government activity that have led to huge improvements in the public’s health:
– Provision of safer drinking water
– Sewage disposal
– Safer roads
– Building a supportive social environment
– Supporting physical activity
– Limiting tobacco use in places public attend

Life Expectancy by LHA

EDI Vulnerability by LHA

Life Expectancy by EDI
Health vs. Health Services

The focus on health services is a relatively recent phenomenon.
- Health Authorities were formed just a dozen years ago.
- Prior structures involved local governments in a meaningful way.
- "Health" used to be a department of municipal government.

- BC Health Act was written in 1893 to address public health issues.
- A rewritten Public Health Act was adopted in 2008.
- Clear roles for local government.
  - Health hazard identification, reporting and mitigation.
  - Public health planning.

Role of Local Government

- A local government must do all of the following:
  - if the local government becomes aware of a health hazard or health impediment within its jurisdiction, take an action required by a regulation made under section 120(1)(a) [regulations respecting local governments], or, if no regulation applies, either 
    - (i) report the health hazard or health impediment to a health officer, or
    - (ii) take an action the local government has authority to take ... or another enactment to respond to the health hazard or health impediment;
  - provide health officers with information the health officers require to exercise their powers and perform their duties under this Act;
  - consider advice or other information provided to the local government by a health officer.

- A local government must designate one of its members, or an officer or employee of the local government, as the local government liaison for the purposes of this section, and notify the regional health board having authority over the geographic area in which the local government is located.

- A local government may request a medical health officer to issue an order, under this Act, in respect of a health hazard, and if the medical health officer refuses to issue the order or to issue the order as requested, request the provincial health officer to review the decision of the medical health officer.
The “Rediscovery” is not just by the Health Authorities
• Expectation writing into Health Authority requirements.
• Provocative support through BC Healthy Families Healthy Communities.
• BC Healthy Communities reinvigorated.
• “Plan H”

Healthy Communities Initiative
Partnership & collaboration between Health Authorities and Local Governments around health promotion objectives:
• Healthy Eating
• Physical Activity
• Tobacco Reduction
• Healthy Built Environment
• Vulnerable Populations (equity)

“Make the healthy choice, the easy choice”

What we Know About Poor Health
• Hence 20% of all deaths are premature, avoidable and preventable.
• Another 10% are avoidable and treatable.
• Only 10% of deaths are premature and not avoidable.

Besides
It’s the right thing to do.
There is no One Single Contact, or One Right Person

- But, it's okay to ask for one.
- Do not expect that the right hand has spoken to the left hand.
- It is fair to state that as an expectation.

In Short - Island Health is Reaching Out (again)

- 2018 Strategic Plan
- Community Leader’s Forums
Reporting by Health Authority

- Reporting on health status
  - Local Health Area profiles
  - MHO reports – motor vehicle crashes, drinking water
- Increased public communications

Existing Interfaces Between Local Government and Health Authorities

- Regional Hospital Boards
- Collaborative Services Committees
- Community Health Networks
  - 3 established
  - Several networks with similar functions
- Innumerable working groups, committees

Existing Interfaces Between First Nation Government and Island Health

- The Aboriginal Health Council (Collaboration and Consultation)
  - Provides strategic guidance to the relationship between the Aboriginal people on Vancouver Island served by their governments and health organizations and Island Health.
- Aboriginal Health Plan
  - Collaborative process – chaired by Chief David Bob of the Nations First Nation.
- Aboriginal Working Groups
  - Regional Tables (south, central, north, west coast) for networking and collaborative problem solving.

The Burden of Inequity Carried by Aboriginal Peoples


Local Governments are Individual and Unique

Hierarchy of Resident Needs

He finally Did It

More Great Examples of Working Together

- Health sections in regional sustainability strategies
- Health referrals and input into OCPs
- Municipal Alcohol Action Plans
- Food Security Hubs
- Early Years Tables
- Dental services for street oriented persons

Some Great Examples of Working Together

- Health sections in regional sustainability strategies
- Health referrals and input into OCPs
- Municipal Alcohol Action Plans
- Food Security Hubs
- Early Years Tables
- Dental services for street oriented persons

More Great Examples of Working Together

- Comox Valley transportation planning
- CRD – regional sustainability strategy
- Nanaimo – community food strategy
- CRD Traffic Safety Commission
- Cowichan Valley community assessment
- …
Local Health Policy
• Social Planning Councils
• Seniors health activities
• Tobacco control by-laws
• Tanning Bed by-laws
• FASD prevention by-laws
• Transportation planning
• Homelessness initiatives
• Safe communities activities

Collaboration
Collaboration is a mutually beneficial relationship between two or more individuals in organizations who work toward common goals by sharing responsibility, authority and accountability for achieving results.

Successful Collaboration
• Shared vision
• Mutually agreed mission and objectives
• High level leadership support
• Mutually agreed goals
• Clear decision making processes
• Mutually agreed accountability arrangements
• Effective and ethical leadership
• Trustworthy and functional processes
• Objective approach to problem solving
• Shared celebration

Collaboration Check-list
• Is there a clearly defined purpose and deliverable?
• Are all the right people at the table?
• Is there transparency?
• Is there trust?
• Does everyone involved "win"?
• Can success be shared?
• Can the team "roll with the punches"?

Physicians
• You can’t live with them, but you can’t seem to live without them.
• Almost all are not under direct influence of health authority.
• Private businesses.
• Payment directly through Medical Services Plan/Ministry of Health.
  – A small proportion are innovative funding arrangements.

Physician Recruitment
• Recruitment for most Physician services is something the Physicians mostly do, communities sometimes do, universities sometimes do, Health Authorities rarely.
• Health Authority has some knowledge support it will share.
  – Lake Cowichan
• For locations where Physicians are a scarce resource, consider working group.

Self-reported Health by Household Income

<table>
<thead>
<tr>
<th>Total Household Income</th>
<th>Very Good or Excellent Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;$30,000</td>
<td>46%</td>
</tr>
<tr>
<td>$30,000-$49,999</td>
<td>62%</td>
</tr>
<tr>
<td>$50,000-$79,999</td>
<td>69%</td>
</tr>
<tr>
<td>$80,000+</td>
<td>72%</td>
</tr>
</tbody>
</table>

Canadian Community Health Survey
Physician Recruitment – Who Does What Currently

- Family Physicians – GP for Me initiative. Divisions of Family Practice, Collaborative Services Committees.
- Specialists – often recruited through local Physician groups with involvement of hospital – Physician human resource planning.
- Tertiary Specialists more involvement of University and Health Authority.

Nurse Practitioners

- Sometimes a solution when a failure to recruit Physicians.
- Funded by resources directed from province through Health Authorities.
- Limited number, was annual competition.
- Currently mostly dependent on salary dollars.

Negotiating with Island Health

- Identify a local “inside champion”.
  - Board Member
  - Community Manager
  - Hospital lead
  - Community Physician or Medical Director
  - Medical Health Officer
- Develop a relationship.
- Nurture their involvement as your wayfinder within the Island Health system.

Looking to the Future

- More expectations on Health Authority boards to provide local accountability.
- More local decision making within Island Health.
- Greater interaction with decision makers in other governance structures (e.g. local government).

A journey of a thousand miles... begins with a single step.

And when you get there you will be in great shape.

Paul Hasselback  MD MSc FRCPC
250.739.6304
paul.hasselback@viha.ca