

APHEO 2016-2019 Strategic Plan

Prepared by the 2017 APHEO Executive



Introduction

The 2016-2019 Strategic Plan of the Association of Public Health Epidemiologists in Ontario (APHEO) builds on the 2013-2015 Strategic Plan, which focused on the areas of knowledge exchange, networking, partnership development, professional development, scientific leadership, strategic growth, and strong governance and operations, and incorporates future priorities of APHEO based on the evolving public health and health care landscape in Ontario. The proposed 2016-2019 Strategic Plan will support APHEO in meeting its vision and mission in a time of health system transformation.

Strategic Planning Process

A work group was struck within the APHEO Executive committee to develop a new strategic plan. This included a review of the past strategic plan, a pre-strategic planning survey (administered on July 4, 2016), a presentation of these findings to attendees of the APHEO workshop in November of 2016 and a final reach out to members during a general meeting in April of 2017. Using the past plan, the results of the survey and further feedback provided during the workshop and the general meeting, the strategic plan work group has:

1. reaffirmed APHEO's vision/mission/value statements
2. determined APHEO's strategic directions for 2016-2019

Vision, Mission and Value Statements

Current Vision, Mission, and Value Statements

Vision	The excellent leadership and professional expertise of APHEO advances public health in Ontario.
Mission	To advance and promote the discipline and professional practice of epidemiology in Ontario Public Health Units.
Value Statements	<ul style="list-style-type: none">● Improving the health of the population● A public health system in which epidemiologists are integral● supporting a participatory network of people with an interest in public health epidemiology● high standards for practice of public health epidemiologist demonstrating leadership● innovation

The 2017 Strategic Planning Committee (“the Committee”) of the Executive reviewed the responses received on the survey. Overall, the APHEO membership were satisfied with the current vision, mission, and value statements; however, the membership suggested changing the mission to be more inclusive of public health agencies and organizations outside of public health units. Furthermore, the membership stated that the mission should be more specific with respect to using the term “public health epidemiology”. Future discussions led by the Executive will be held to discuss the implications for changing APHEO’s mission.

2016 – 2019 Strategic Plan

The 2016-2019 Strategic Plan highlights six strategic areas of focus. A description of each area of focus is described below along with the high level actions.



Shaping System-Level Change for Public Health

The health system is currently undergoing transformation in Ontario and this is inclusive of the public health sector. The Ministry of Health and Long-Term Care had set out three major components to inform public health transformation, which include Standards Modernization, Public Health Work Stream, and the Expert Panel on Public Health. All three components have a direct impact to the practice of public health epidemiology in Ontario in terms of what we do and how we do it. APHEO is a key partner in public health transformation and will continue to advocate on how public health epidemiology can be best positioned to improve population health outcomes and reduce health inequities.

The high level actions proposed for this strategic area are:

1. Coordinate membership consultation of modernized standards for public health programs and services (SPHPS) and provide a response letter to the Ministry of Health and Long-Term Care.
2. Provide opportunities and a central platform for the membership to discuss the role of public health epidemiology (including new indicators, strategies, and tools) in the context of the new SPHPS.
3. Represent public health epidemiologists at various planning table (e.g., Practice and Evidence Program Standards Advisory Committee, Population Health Assessment and Surveillance Protocol Working Group) and provide feedback on the content and implementation of the SPHPS and associated guidelines and protocols.
4. Collaborate with the Ministry of Health and Long-Term Care and provincial agencies (e.g., Public Health Ontario, Local Health Integration Networks, and Cancer Care Ontario) as required, in shaping system-level changes in public health in response to the Patient's first report and the modernized SPHPS.

Data Advocacy

The modernized SPHPS and the role of public health within an integrated health system calls for greater demands on providing and using epidemiological data to inform public health programs and services and health system planning. This requires a concerted effort by the health system as well as non-health sector partnerships to provide the best available data for decision-making, priority setting, and resource allocation. We are aware that data gaps exist, especially for lower-resourced public health units. APHEO has a significant role in advocating to the Ministry of Health and Long-Term Care for quality data in order to address these gaps. This would allow Boards of Health to understand the health status of their communities, including vulnerable populations, in order to improve population health outcomes and reduce health inequities. APHEO is also considered as a prominent voice in Ontario when it comes to public health epidemiological data. The APHEO Core Indicators Work Group had undertaken a strategic planning process in early 2017 and identified key areas APHEO can take to address data needs; these include: 1) data alignment/gaps with modernized SPHPS, 2) data quality (accuracy, appropriateness, timeliness and collection cycles; 3) data access; 4) funding and costs; and 5) standardization and centralization.

The high level actions proposed in this strategic area are:

1. Advocate for new and/or enhanced provincial surveillance systems to meet the requirements of the modernized SPHPS.
2. Act on issues identified by the APHEO Core Indicators Work Group.

Partnership Development and Enhancement

The modernized SPHPS emphasizes the need to develop partnerships with other governmental, non-governmental, and community organizations in order to improve the health status of communities. This includes partners within and outside of the broader health care system (e.g., health care, education, housing, environment, academia, etc.). Overtime, APHEO has developed strong partnerships with specific agencies and organizations and will continue to strengthen these relationships in the future; however, there is immense opportunity for APHEO to partner and engage with other agencies, organizations and governmental entities. This will positively impact the practice of public health epidemiology in Ontario.

The high level action proposed in this strategic area is:

1. Collaborate and partner with organizations and agencies (e.g., Local Health Integration Networks, Public Health Ontario, Ministry of Health and Long-Term Care) and other health and non-health sector partners to shape the practice of public health epidemiology.

Knowledge Exchange and Professional Development

One of the central benefits of being a member of APHEO is the opportunity to engage in knowledge exchange and professional development. APHEO facilitates interactions with experts in the field of public health epidemiology within Ontario and across Canada through our various platforms such as the forum/listservs, work groups, conferences and workshops, and key events. In addition, members have the opportunity to influence the direction and practice of public health epidemiology in Ontario by being involved with working groups (e.g., core indicators, social media, and analytic strategies) and work through the Executive Committee. Lastly, members are able to participate in professional development opportunities to enhance their own epidemiological knowledge and skills to inform policy, programs, and services.

The high level actions proposed in this strategic area are:

1. Promote and embed professional development opportunities during general meetings
2. Develop and facilitate a mentorship program.
3. Actively engage the membership to be involved with the Executive Committee, conference/workshop events, and the Core Indicator/Subgroups work.

Facilitating Networking Opportunities

Another significant benefit of being a member of APHEO is having the opportunity to network with colleagues who have an interest in public health epidemiology. This enables members to connect with others working in diverse health sectors at the local, provincial, federal, and international levels to support their personal and professional development.

The high level actions proposed in this strategic area are:

1. Identify structural and process mechanisms to facilitate and improve networking opportunities.
2. Identify membership needs with respect to the types of networking opportunities APHEO could be offering.

Improving and Strengthening Governance

Governance is defined as the set of policies, institutions, mechanisms and practices by which an association is directed and controlled and which ensures accountability, fairness, and transparency. Good governance is a robust and reliable system for making confident and timely decisions. This system determines who has a voice within APHEO for making decisions, how those decisions are made, and who is accountable. APHEO is governed by an Executive Committee who at all times, should act honestly and in good faith and makes decisions that align with the best interests of APHEO. The organization is bound by several existing policies and procedures. Improving upon existing governance systems and practices will enable APHEO to better meet its mission and strategic areas, grow its membership base, be fiscally responsible, and effectively represent and advocate on behalf of its membership in a time of health system transformation.

The high level actions proposed in this strategic area are:

1. Review and update the Constitution to better reflect the changing landscape of public health epidemiology in Ontario.
2. Review APHEO's structures, policies, and processes and update/revise as necessary in order to promote good governance.