Ministry of Health and Long-Term Care

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To: Boards of Health and Medical Officers of Health

Ontario is committed to developing a health-care system that puts patients first. This includes keeping people healthy and reducing inequities in health.

As Minister of Health and Long-Term Care and as a public health doctor, I know the integral role that public health units (PHUs) play in protecting and promoting the health of Ontarians. My priority is to elevate this role and ensure that your expertise in population health and prevention is incorporated into planning across our health-care system, end-to-end.

Over the past decade, Ontario's health-care system has improved significantly. We have reduced wait times for surgery, increased the number of Ontarians who have a primary health-care provider and expanded services for Ontarians at home and in their communities. But we can do more to put patients first.

When we established our Local Health Integration Networks (LHINs) a decade ago, they brought planning and decision-making to the local community moving these functions which had been centralized in the ministry for years. But primary care and public health, two parts of the system most critical to keeping people healthy, were left out. Accordingly, in December I introduced proposals to truly integrate the health-care system, using a population health and health equity approach to health system planning and service delivery across the continuum of care so that Ontarians have access to the services they need, no matter where they live.

This integration can facilitate and support better health and wellness outcomes for all Ontarians and thereby improve the quality and sustainability of the health-care system. However, to achieve the full potential of the integration it will require the expertise of the public health sector.

The formal linkages we propose between PHUs and LHINs will ensure that Medical Officers of Health (MOHs) and other public health professionals are part of planning and decision making at the local level and that local population and public health priorities inform health-care system planning, funding and delivery. My intent and focus of establishing formal linkages between our LHINs and PHUs is this: to further empower and engage our public health professionals - our experts in the social determinants of health, in health equity and in population health - to positively influence and help guide our planning and delivery of services across the health care system. We need this expertise and influence to build a better health care system.

The Discussion Paper has generated significant commentary and feedback. I have also heard the concerns raised that emphasize the importance that funds for public health be protected and dedicated exclusively for use by our public health units. I want to assure you that my ministry and I fully agree on this point.

I am pleased that the Association of Local Public Health Agencies (aIPHa) has recognized the opportunity presented by our proposals as indicated in its press release of December 17, 2015. There is a strong role for local public health included in our proposals, and the essential leadership provided by you with regards to population health and health equity will be an important element in supporting the extension of this approach across the rest of the health system.

I look forward to the continued participation of the public health sector in our exciting system transformation.

Yours sincerely,

Original signed by

Dr. Eric Hoskins Minister