



*Office of the Auditor General / Bureau du vérificateur général*

**FOLLOW-UP TO THE 2007 AUDIT OF THE FOOD SAFETY PROGRAM**

**2010**

**SUIVI DE LA VÉRIFICATION DU PROGRAMME DE SALUBRITÉ**

**DES ALIMENTS DE 2007**



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## EXECUTIVE SUMMARY

### *Introduction*

The Follow-up to the 2007 Audit of the Food Safety Program was included in the Auditor General's Audit Plan.

The key findings of the original 2007 audit included:

- The Program is currently unable to meet the legislative requirements for inspection;
- Although there have not been any outbreaks of illness, the Provincial Mandatory Guidelines for Food Safety are not being met by the City of Ottawa;
- Completion rates of annual inspections are significantly below prescribed levels; and,
- Management has, over the years, endeavoured to improve the performance of the Program. However, despite an increase in the annual budget for Food Safety of approximately 50% from 2004 to 2006, the Program has been unable to meet legislative requirements.

### *Summary of the Level of Completion*

1. The table below outlines our assessment of the level of completion of each recommendation as of Summer 2010.

CATEGORY	% COMPLETE	RECOMMENDATIONS	NUMBER OF RECOMMENDATIONS	PERCENTAGE OF TOTAL RECOMMENDATIONS
LITTLE OR NO ACTION	0 – 24	3d	1	3%
ACTION INITIATED	25 – 49	-	-	-
PARTIALLY COMPLETE	50 – 74	-	-	-
SUBSTANTIALLY COMPLETE	75 – 99	-	-	-
COMPLETE	100	1, 2, 3a, 3b, 3c, 4a, 4b, 4c, 4d, 4e, 4f, 5a, 5b, 5c, 5d, 6a, 6b, 6c, 6d, 6e, 7a, 7b, 8, 9, 10, 11, 12, 13, 14a, 14b, 14c, 14d, 14e, 14f	34	97%
TOTAL			35	100%

2. The table below outlines management's assessment of the level of completion of each recommendation as of Summer 2010 in response to the OAG's assessment. These assessments have not been audited.

CATEGORY	% COMPLETE	RECOMMENDATIONS	NUMBER OF RECOMMENDATIONS	PERCENTAGE OF TOTAL RECOMMENDATIONS
LITTLE OR NO ACTION	0 – 24	-	-	-
ACTION INITIATED	25 – 49	-	-	-
PARTIALLY COMPLETE	50 – 74	-	-	-
SUBSTANTIALLY COMPLETE	75 – 99	-	-	-
COMPLETE	100	1, 2, 3a, 3b, 3c, 3d, 4a, 4b, 4c, 4d, 4e, 4f, 5a, 5b, 5c, 5d, 6a, 6b, 6c, 6d, 6e, 7a, 7b, 8, 9, 10, 11, 12, 13, 14a, 14b, 14c, 14d, 14e, 14f	35	100%
TOTAL			35	100%

## Conclusion

Significant progress has been made on all of the audit's recommendations. With the exception of Mandatory Food Handler Training, which management has determined it will not pursue, all other recommendations can be deemed fully implemented. Of particular note is the solid progress in launching an Environmental Health Information System (EHIS), the Quality Assurance (QA) program and on-line disclosure of inspection results. Most recent statistics provided by management show an encouraging increase in the number of inspections completed. While all premises received at least one inspection in 2009, it should be noted that only 33% of high-risk premises received the required three inspections during the year. Factors identified that contributed to this include:

- Reassignment of staff during the OC Transpo strike to visit vulnerable populations in high-risk buildings;
- Reduction in availability of Public Health Inspectors (PHIs) to conduct routine inspections due to training of the new EHIS system;
- Relocation of staff to Ottawa's west end to perform health hazard assessments in the homes of flood victims;
- Redeployment of nearly 90% of PHIs during the H1N1 pandemic response and mass vaccination campaign; and,
- Participation of staff in five large-scale food recalls to ensure that affected products were removed from retail distribution.

Management indicates that it is on target to meet its 2010 targets, however, has also indicated that additional PHI positions are required to maintain the organization's

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ability to consistently meet these targets in the future, to sustain its achievements and will be requested in the 2011 budget submission.

***Acknowledgement***

We wish to express our appreciation for the cooperation and assistance afforded the audit team by management.

## RÉSUMÉ

### Introduction

Le Suivi de la vérification du programme de salubrité des aliments de 2007 était prévu dans le Plan de vérification du vérificateur général de 2009.

Les principales constatations de la vérification de 2007 sont les suivantes :

- Le programme de salubrité des aliments de la Ville ne satisfait pas aux exigences de la loi en matière d'inspection.
- Bien qu'aucune éclosion de maladie n'ait eu lieu, la Ville d'Ottawa ne respecte pas les lignes directrices obligatoires de la Province en matière de surveillance de la salubrité des aliments.
- Le nombre d'inspections réalisées annuellement est nettement inférieur aux niveaux prescrits.
- Les gestionnaires se sont efforcés d'améliorer le rendement du programme. Cependant, même si le budget consacré à la salubrité des aliments a augmenté d'environ 50 p. 100 entre 2004 et 2006, le programme ne répond toujours pas aux exigences réglementaires.

### Sommaire du degré d'achèvement

1. Le tableau ci-dessous présente notre évaluation du degré d'achèvement de chaque recommandation au mois de juillet 2010 :

CATÉGORIE	POURCENTAGE COMPLÉTÉ	RECOMMANDATIONS	NOMBRE DE RECOMMANDATIONS	POURCENTAGE DU TOTAL DES RECOMMANDATIONS
PEU OU PAS DE MESURES PRISES	0 – 24	3d	1	3 %
ACTION AMORCÉE	25 – 49	-	-	-
COMPLÉTÉE EN PARTIE	50 – 74	-	-	-
PRATIQUEMENT COMPLÉTÉE	75 – 99	-	-	-
COMPLÉTÉE	100	1, 2, 3a, 3b, 3c, 4a, 4b, 4c, 4d, 4e, 4f, 5a, 5b, 5c, 5d, 6a, 6b, 6c, 6d, 6e, 7a, 7b, 8, 9, 10, 11, 12, 13, 14a, 14b, 14c, 14d, 14e, 14f	34	97 %
TOTAL			35	100 %

2. Le tableau ci-dessous présente l'évaluation de la direction concernant le degré de réalisation de chaque recommandation à l'été 2010 en réponse à l'évaluation du Bureau du vérificateur général. Ces évaluations n'ont pas fait l'objet d'une vérification.



CATÉGORIE	POURCENTAGE COMPLÉTÉ	RECOMMANDATIONS	NOMBRE DE RECOMMANDATIONS	POURCENTAGE DU TOTAL DES RECOMMANDATIONS
PEU OU PAS DE MESURES PRISES	0 – 24	-	-	-
ACTION AMORCÉE	25 – 49	-	-	-
COMPLÉTÉE EN PARTIE	50 – 74	-	-	-
PRATIQUEMENT COMPLÉTÉE	75 – 99	-	-	-
COMPLÉTÉE	100	1, 2, 3a, 3b, 3c, 3d, 4a, 4b, 4c, 4d, 4e, 4f, 5a, 5b, 5c, 5d, 6a, 6b, 6c, 6d, 6e, 7a, 7b, 8, 9, 10, 11, 12, 13, 14a, 14b, 14c, 14d, 14e, 14f	35	100 %
TOTAL				100 %

## Conclusion

Des progrès importants ont été réalisés concernant toutes les recommandations de la vérification. À l'exception de la formation obligatoire des préposés à la manipulation des aliments, que la direction a décidé de ne pas poursuivre, toutes les autres recommandations peuvent être jugées mises en œuvre. Les progrès notables dans le lancement du Système d'information sur la santé environnementale (SISE), le programme d'assurance de la qualité et la divulgation en ligne des résultats des inspections sont à noter plus particulièrement. Les plus récentes statistiques fournies par la direction indiquent une augmentation encourageante du nombre d'inspections réalisées. Bien que tous les établissements aient été inspectés au moins une fois en 2009, il devrait être noté que seulement 33 % des établissements à haut risque ont été inspectés trois fois, comme il est requis, pendant l'année. Les facteurs qui ont contribué à cet état de fait ont été déterminés et sont :

- La réaffectation du personnel durant la grève d'OC Transpo pour qu'il rende visite aux populations vulnérables dans les immeubles à haut risque;
- La disponibilité réduite des inspecteurs en santé publique pour mener des inspections de routine en raison de la formation au nouveau Système d'information sur la santé environnementale;
- Le déplacement du personnel dans l'ouest d'Ottawa afin qu'il effectue des évaluations des risques sanitaires dans les résidences des victimes d'inondations;
- Le redéploiement de presque 90 % des inspecteurs en santé publique pendant l'intervention liée à la pandémie de H1N1 et la campagne de vaccination de masse;

- La participation du personnel à cinq rappels d'aliments à grande échelle afin de veiller à ce que les produits touchés soient retirés de la distribution au détail.

La direction indique qu'elle est dans les temps pour atteindre ses objectifs de 2010; toutefois, elle a également précisé que des postes d'inspecteurs en santé publique supplémentaires sont nécessaires afin de maintenir la capacité de l'administration municipale à satisfaire ces objectifs de façon constante à l'avenir et à poursuivre ses accomplissements, postes qui seront requis dans les soumissions budgétaires de 2011.

### ***Remerciements***

Nous tenons à remercier la direction pour la coopération et l'assistance accordées à l'équipe de vérification.

## 1 INTRODUCTION

The Follow-up to the 2007 Audit of the Food Safety Program was included in the Auditor General's Audit Plan.

The key findings of the original 2007 audit included:

- The Program is currently unable to meet the legislative requirements for inspection;
- Although there have not been any outbreaks of illness, the Provincial Mandatory Guidelines for Food Safety are not being met by the City of Ottawa;
- Completion rates of annual inspections are significantly below prescribed levels; and,
- Management has, over the years, endeavoured to improve the performance of the Program. However, despite an increase in the annual budget for Food Safety of approximately 50% from 2004 to 2006, the Program has been unable to meet legislative requirements.

## 2 KEY FINDINGS OF THE ORIGINAL 2007 AUDIT

The Health Protection and Promotion Act (HPPA), 1990, defines the role and responsibility of all Boards of Health in Ontario. Ottawa's Board of Health is City Council. Under the Act, the Executive Director of the Board of Health is the Medical Officer of Health (MOH). The MOH has legislated responsibility for community health protection and the control of communicable diseases in the City. Food premises are inspected under the HPPA and the Food Premises Regulation 562.

The Provincial Mandatory Guidelines for Food Safety are not being met by the City of Ottawa. Completion rates of annual inspections are significantly below prescribed levels. In a random file audit sample of 100 premises, in 2006:

- 63% of high-risk establishments were inspected at the prescribed frequency or higher (i.e., three inspections per year);
- 87% of medium-risk establishments were inspected at the prescribed frequency or higher (i.e., two inspections per year); and,
- 79% of low-risk establishments were inspected at the prescribed frequency or higher (i.e., one inspection per year).

EHP management closely monitors compliance rates on an ongoing basis and maintains statistical reports. Concerns regarding compliance have been previously reported by management to City Council during budget deliberations in previous years and to the Province via annual reporting to the Ministry.

From the outset of this audit, management expressed concern that the group was not able to meet Provincial Food Safety requirements. Management has, over the years, endeavoured to improve the performance of the Program. In recent years, steps have been taken to begin to address systems problems and management has brought attention to the shortage of qualified PHIs. However, despite an increase in the annual budget for Food Safety of approximately 50% from 2004 to 2006, the program has been unable to meet legislative requirements while the budgets over these three years was under spent by a total of \$894,000.

There is a need to consider the performance and needs of this Division more comprehensively and proactively. That has been difficult to do without an information system that facilitates this sort of analysis. The analysis of in-field results and compliance trends has been limited by an antiquated system and tools. Disclosure of inspection results through manual means has caused delays for the public and media, and further inefficiencies for EHP staff.

A recent market survey by Employee Services has concluded that PHI salaries in Ottawa are in the 23rd percentile compared to other Health Departments. Recruitment efforts have been met with frustration given non-competitive salaries and out-of-date equipment.

Despite these challenges, overall, staff interviewed during the audit demonstrated that they are dedicated to promoting safe food handling practices and protecting the public from food-borne illness. There is at this time a need for a more in-depth discussion with Council, as the Board of Health, regarding the current situation and the implications on compliance to legislation. There is a need to develop and propose to Council a comprehensive proactive strategy to address current limitations and better utilize available resources.

Based on industry practices research undertaken as part of this audit as well as consultation with the Ministry of Health & Long-Term Care (MOHLTC), five key components are required for the City to more effectively and efficiently deliver the Food Safety Program:

- An Environmental Health Information System (EHIS) with a module designed specifically for Food Safety inspections is a fundamental tool for management and Public Health Inspectors to enhance efficiency and effectiveness. Better management information will help drive decision-making and is essential to managing resources effectively and efficiently. An EHIS will also act as an enabler for other key components such as quality assurance. Enhanced information technology geared specifically to the needs of municipal environmental health programs has become far more readily available and affordable in the last few years. Other Ontario cities have forged the way and have developed a new industry standard in this regard. Environmental Health Information Systems now used in many other jurisdictions in Ontario include

modules to support various programs including food safety, rabies, drinking water, swimming pools, etc.

- Online Disclosure of inspection results, via an EHIS, provides a much more responsive, user-friendly, and efficient approach to providing public access to information. It also has been found to act as an effective enforcement tool in that operators tend to correct any reported deficiencies quickly in order to ensure positive reports are posted on the system.
- Mandatory Food Handler Training and Certification is a proactive strategy for promoting effective food handling practices; it has been shown to increase compliance rates and reduces the need for re-inspections. The City of Toronto created a by-law in 2006 and many other cities in Ontario are in the process of doing the same.
- Quality Assurance (QA) strategies are critical given the dangers posed by food-borne illness and the fact that PHIs work so independently in the field. Inspection information management systems such as those implemented in Peel, York, Niagara, and Toronto have QA features built into the system. Other important QA measures include file audits, accompanied in-field visits, periodic training on policies, procedures and consistency issues, and PHI rotation.
- A comprehensive human resource strategy to implement a more competitive salary level for PHIs, improve recruitment of new PHIs and ensure retention of existing resources.

### **3 STATUS OF IMPLEMENTATION OF 2007 AUDIT RECOMMENDATIONS**

#### ***Compliance***

##### **2007 Recommendation 1**

**That management formally report to Council outside of the budget process on the various factors effecting non-compliance with Provincial requirements and reduced food safety standards and present to Council a comprehensive strategy to achieve compliance, incorporating the key components outlined under Recommendation 3 below.**

##### **2007 Management Response**

Management agrees with the Auditor's recommendation.

The Environment and Health Protection (E&HP) division will report annually, starting in Q3 2008, to the CPS Committee and Council (as the Board of Health) on food safety statistics and issues including but not limited to: numbers of inspections and re-inspections; closures; Provincial Offence Notices issued; food handlers certified; staffing levels; progress on the Environmental Health Information System

(EHIS); food borne illness reports and disclosure requests. This process will ensure that when staffing or resource issues are identified they are raised with Council. This was the case in 2004, 2005 and 2006 when the food safety budget was under spent due to the inability to staff and fill Public Health Inspector (PHI) positions. Recruitment and retention of PHI are the primary issues, which affect the ability of the E&HP division to attain compliance with Provincial requirements.

The E&HP division will also be presenting a comprehensive Strategic Food Safety Report to Council at the end Q2 2008, following the release of the audit. This report will include long term strategies to be undertaken by management in order to address staffing needs, technology enhancements and a Quality Assurance Program.

**Management Representation of the Status of Implementation of Recommendation 1 as of December 31, 2008**

The report is scheduled to go forward to CPSC on March 5 and Council on April 8, 2009. It will contain a section whereby management will report to Council on any factors that may affect compliance with Provincial requirements and reduced food safety standards.

Quality Assurance program research and development is 100% complete. Quality Assurance program implementation is 50% complete. Implementation of the Quality Assurance program will be completed in Q1 2009. Currently, supervisors with the Food Safety Program are undertaking a comprehensive review of policies and procedures to ensure that they reflect standards of the legislation, best practices and fieldwork. Solidifying and systematically updating policies and procedures ensures consistency in food safety programming and inspections.

The pilot phase of the Environmental Health Information System is 100% complete. The new EHIS technology is being used by a selected group of Public Health Inspectors. Full rollout to all staff will occur in Q1 2009. Online disclosure of food inspections will be launched in 2009 and is based on Niagara Region's online disclosure system. Website usability focus testing will occur with potential web users and consultations will take place with restaurant owners.

*Management: Response % complete* **50%**

**OAG's Follow-up Audit Findings regarding Recommendation 1**

The Strategic Food Safety Report was presented to Council on 13 May 2009 and a Food Safety Program Update was presented on 14 July 2010.

*OAG: Response % complete* **100%**

**2007 Recommendation 2**

**That management inform the Province of non-compliance concerns and planned corrective action.**

## **2007 Management Response**

Management disagrees with the Auditor's recommendation.

The Ministry of Health and Long Term Care (MOHLTC) determines the reporting requirements of health units across the Province through the Provincial Mandatory Core Service guidelines. The E&HP division has been reporting to the MOHLTC annually (as mandated through the Provincial Mandatory Core Services Guidelines) regarding compliance in the Food Safety Program, and has done so diligently since the reporting requirement came into effect over 15 years ago. This is not a new requirement from the Province and the E&HP division is already meeting this requirement.

Included in the annual report are compliance factors indicating number of premises and number of inspections and re-inspections, Hazard Analysis and Critical Control Points audits completed at high risk premises, number of food handlers trained and on duty at time of inspection, and number of inspections resulting from investigation of food borne illness, food outbreaks, consumer complaints and food recalls. Of the 36 health departments across Ontario only three are meeting 100% of the mandatory core requirements for high-risk premises.

Management does not agree with the auditor's recommendation to report on planned corrective action, as the MOHLTC does not require health departments to describe planned corrective action, under the local authority, and the information would not be utilized by the Ministry. The MOHLTC is aware that all health departments are managing with the resources available to them at the present time. Consequently, it is not necessary, nor is it mandated, to report to the MOHLTC any actions being taken by individual health departments regarding corrective actions.

In the 2005 MOHLTC Food Safety Audit, the conclusions indicate the following: "Several operational factors will continue to affect the percentage completion rate and reported food safety data at the local health unit level." A few of the factors are:

- Number of FTEs (PHIs) assigned to the Food Safety Program
- Number of re-inspections performed
- Number of inspections performed for investigation of food borne illnesses and food borne outbreaks, consumer complaints and food recalls
- Time required for seasonal, new and closed premises

A significant challenge affecting Ottawa Public Health (OPH) is the number of inspections required for special events (i.e., Winterlude, Ottawa Ex, Tulip Festival, Hope Volleyball, FIFA games) where the food premises inspections completed are not factored into the Ministry's statistics as the food vendors are not considered to be "fixed" premises. OPH still completes inspection of these premises as a means of ensuring the safety of residents, even though it puts a greater strain on already limited resources.

Since 2005, with the addition of eight PHI positions, the E&HP division has increased productivity by 34% (3900 inspections) with a staffing increase of only 26%. This increase in inspection rate can be attributed not only to the additional FTEs, but also to more efficient work practices in the Food Safety Program, which allowed the average number of inspections completed per inspector to increase. In order to be able to ensure 100% compliance, OPH requires seven additional/new FTEs to be assigned to the Food Safety Program. The utilization of these new resources, if they are obtained, will be part of the comprehensive Strategic Food Safety report to be presented to Council at the end of Q2 2008.

**Management Representation of the Status of Implementation of Recommendation 2 as of December 31, 2008**

Implementation of this recommendation has not yet begun. This item is on the agenda for discussion at the February 19, 2009 CAWG meeting.

*Management: Response % complete* *0%*

**OAG's Follow-up Audit Findings regarding Recommendation 2**

Per the recommendations in the Food Safety Strategic Report, Council directed that staff provide the report to the Ministry of Health and Long-term Care.

*OAG: Response % complete* *100%*

***Performance***

**2007 Recommendation 3**

That management develop a comprehensive strategy to improve the performance of the Food Safety Program and achieve Provincial requirements, including the following components:

- a) An Environmental Health Information System, beginning with a Food Safety Module designed and geared specifically for public health inspections;
- b) Online Disclosure;
- c) Quality Assurance; including:
  - EHIS management reports,
  - Sample file audits,
  - Accompanied in-field visits,
  - Periodic re- training for PHIs on policies, procedures and consistency issues, and,
  - PHI rotation; and,
- d) Mandatory Food Handler Training.

**2007 Management Response**

Management agrees with the Auditor's recommendations.



a & b) Management had been notified by the MOHLTC (Food Safety Audit 2005) that the Ministry was in the process of developing a food safety Environmental Health Information System (EHIS) for all of Ontario. In early 2007 the Ministry elected not to commit to developing and supporting a province-wide system. Consequently, the E&HP division began an exploration into a new EHIS system. The development of an EHIS that will allow online disclosure and real time reporting will require a number of supporting factors including new hardware and software.

In Q2 2008 Ottawa Public Health will develop a business case in accordance with the corporate information technology value assessment process to develop an RFP to secure a company to provide the hardware and software required to facilitate an EHIS system installation. A budget will then be determined and monies requested in order to proceed with this recommendation. The costs will include such expenses as hardware, software, annual licensing, repair and updating/upkeep of technology. E&HP has estimated that the annual ongoing maintenance cost of such a program would be \$250,000.00. This does not include the initial costs associated with hardware and technology, which cannot be determined until a provider is chosen. The capital and operating costs will be identified as part of the 2009 budget process.

In order to ensure the effectiveness of the system a pilot project would be undertaken (10 users to start) at a cost of approximately \$150,000.00.

c) Three (3) PHI Supervisory positions were created and staffed in the summer of 2007 to facilitate and ensure Quality Assurance within the Food Safety Program. The supervisors are solely dedicated to overseeing PHIs in the Food Safety Program and monitoring their reports and inspection forms for accuracy and consistency; accompanying staff on inspections in the field when required; trouble shooting and liaising with staff for consistent information sharing and distribution of new policies and procedures. An Educational Committee was also established (August 2007) to ensure semi-annual training sessions are offered to staff to keep them updated on new relevant information and policies. Finally, PHI rotation will be formally initiated by Q2 2008 to allow staff opportunities to work in different areas of the City, in both rural and urban settings. It is the intent of OPH to rotate staff in the Food Safety Program every 18-24 months.

d) Currently the provincial mandate is limited to providing or making available food handler training. The initiation and implementation of a mandatory food handler-training bylaw will require an additional three FTEs for the E&HP division for the management and delivery of the training, and the creation of a City bylaw by City Council.

Management will support the establishment of a City of Ottawa bylaw and E&HP will bring forward a proposed bylaw in Q3 2009 to Committee and Council. At this time there is only one Health department in the province that has successfully

initiated a bylaw for mandatory food handler training and that is the City of Toronto.

It should be noted that in the MOHLTC 2005 Food Safety Audit report released in June 2007, identified that Ottawa Public Health has trained the second highest number of food handlers (1848) in the province, after the City of Toronto.

**Management Representation of the Status of Implementation of Recommendation 3a as of December 31, 2008**

3a) Completion of the Strategic Food Safety Report is 50% complete. The report is scheduled to go forward to CPSC on March 5 and Council on April 8, 2009.

*Management: Response % complete* **50%**

**OAG's Follow-up Audit Findings regarding Recommendation 3a**

3a) PHIs have been assigned computer tablets, allowing them to use hand held technology while away from the office, provide on-site printed reports and provide immediate feedback to food premises operators. The new system allows for uploading of inspection results to a centralized database which has improved the speed and ease at which staff can access food inspection reports. PHIs have been trained on the Municipal Application Partnership (MAP) which enables staff to record and track requests for service on a central electronic database. MAP also allows for the transfer and delegation of work amongst PHIs, ensuring that all calls are responded to in a timely and efficient manner.

*OAG: Response % complete* **100%**

**Management Representation of the Status of Implementation of Recommendation 3b as of December 31, 2008**

3b) The EHIS pilot phase is 100% complete, online disclosure is 75% complete. The IT business case is complete and a pilot project involving "hedgehog" is in effect. Online disclosure will be a feature of this technology but will not be implemented until all glitches and possible problems have been resolved.

*Management: Response % complete* **100%**

**OAG's Follow-up Audit Findings regarding Recommendation 3b**

3b) The "EatSafe Ottawa" website was launched in 2009 which posts food premises inspection reports online and identifies any deficiencies found at the establishment during the time of inspection.

*OAG: Response % complete* **100%**

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**Management Representation of the Status of Implementation of Recommendation 3c as of December 31, 2008**

3c) Quality Assurance program research and development is 100% complete. Quality Assurance program implementation is 50% complete and will be completed in Q1 2009. Currently, supervisors with the Food Safety Program are undertaking a comprehensive review of policies and procedures to ensure that they reflect standards of the legislation, best practices and fieldwork. Solidifying and systematically updating policies and procedures ensures consistency in food safety programming and inspections.

*Management: Response % complete* 50%

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**OAG's Follow-up Audit Findings regarding Recommendation 3c**

3c) A quality assurance (QA) process within the Food Safety program was initiated in 2009. Every month, each PHI performs a food safety inspection under the review of a supervisor, resulting in every PHI being evaluated approximately 12 times per year. The outcome of each QA visit is documented and assessed to ensure that policies are applied appropriately and consistently. Following the inspection, the supervisor can share immediate feedback on results.

*OAG: Response % complete* 100%

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**Management Representation of the Status of Implementation of Recommendation 3d as of December 31, 2008**

3d) Mandatory Food Handler Training is 25% complete. Comparator municipalities will be surveyed for analysis of food handler training certification course and exam fees. Input from Toronto Public Health is being sought to gain information on its mandatory food handler training by-law and the resulting effects on resources, staffing and uptake in food handler training. Food Handler Training will be included in the Strategic Food Safety Report, which is scheduled to go forward to CPSC on March 5 and Council on April 8, 2009.

*Management: Response % complete* 25%

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**OAG's Follow-up Audit Findings regarding Recommendation 3d**

3d) Mandatory Food Handler Training has not been implemented; however, management indicates that Ottawa has the second highest voluntary food handler course enrolment in Ontario. Classes are also available in institutional settings such as long-term care facilities and retirement homes. Enrollment in 2009 was 13% greater than 2008.

*OAG: Response % complete* 0%

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**Management Representation of Status of Implementation of Recommendation 3d as of Summer 2010**

3d) Management disagrees with the OAG's follow-up audit finding that there has been little or no action taken to implement this recommendation.

The 2009 Strategic Food Safety Report cited this recommendation as well as other changes to the food handling training program that Council directed OPH to explore.

The report concluded that "Given that mandatory food handler certification is not mandated in the 2008 Ontario Public Health Standards, that OPH does not have the staffing resources to implement mandatory food handler certification, and that the comprehensive QA program will solidify the significance of multiple educational approaches during inspections, OPH will not pursue the development of a mandatory food handler certification by-law at present."

However, the issue of mandatory food handling courses remains under active consideration and OPH will continue to review how this option can be implemented in the context of other developments in the food safety program.

The 2009 Strategic Food Safety Report was approved by Council on May 13, 2009.

Management considers implementation of this recommendation to be complete.

*Management: % complete* *100%*

**2007 Recommendation 4**

**That management assess funding requirements to implement this strategy, both for the short and long-term, including:**

- a) Phasing in key components, beginning with new information technology as the first step;**
- b) Implementing the new information system on a pilot basis (i.e., starting with one district in the City in year one) to phase in design and equipment costs as well as staff training and associated operational adjustments;**
- c) Technical/systems and other specialist position requirements (e.g., QA, training, administration) to support implementation and ongoing maintenance stages;**
- d) Projecting PHI staff numbers required, drawing on industry research (conducted as part of this audit) to develop PHI staff-to-premise ratios for high, medium and low-risk premises and factoring in other workload;**
- e) Contingency plans to provide surge capacity to deal with a large-scale outbreak or other emergency; and,**
- f) Investigating cost-sharing arrangements with the Province regarding improved Environmental Health information technology.**

**2007 Management Response**

Management agrees with the Auditor's recommendations.

New funding requirements will be identified as part of the 2009 budget process for both short and long term solutions.

a) Management will continue to explore funding requirements and conduct feasibility studies in relation to initiating and implementing an EHIS to determine short and long-term costs as identified in the management response to Recommendation 3 a & b.

b) Management will continue to engage the IT Services for assistance in the establishment of an EHIS work plan in 2008 and to create an RFP.

c) Management will determine the requirements of a specialist/QA support position, seek funding and create a job description by Q3 2008.

d) Management will continue to work with Employee Services to assess staffing levels and to determine comparators across the province by Q2 2008. The best practice determinant is the number of PHIs per 100,000 residents. OPH is currently staffed below the Provincial average. (Provincial average is 6.14 PHIs per 100,000 and Ottawa has 4.29 PHIs per 100,000.)

e) Management will explore options and possibilities to be included in the establishment of a contingency plan that would address surge capacity in the event of a large-scale emergency or outbreak. This may include Memorandums of Understanding with adjacent health departments to provide support if required.

It should be noted that currently there is a shortage of certified PHIs across the country, which is problematic in establishing a surge capacity contingency plan, but management will make a best effort to complete contingency planning by 2009.

f) Management will continue to liaise with the MOHLTC to explore cost sharing opportunities for an EHIS. Currently the Ministry is NOT cost sharing with any of the Ontario health departments that have an EHIS in place. The Ministry committed (2005 Food Safety Audit) to producing an EHIS for all Provincial Health departments, but that commitment was withdrawn in early 2007. Consequently health departments are individually establishing and funding EHIS systems.

### **Management Representation of the Status of Implementation of Recommendation 4a and 4b as of December 31, 2008**

4a and 4b) The EHIS workplan and pilot phase is 100% complete.

*Management: Response % complete* *100%*

### **OAG's Follow-up Audit Findings regarding Recommendation 4a and 4b**

4a) and 4b) With the implementation of the EHIS these two recommendations can be deemed fully implemented.

*OAG: Response % complete* *100%*

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**Management Representation of the Status of Implementation of Recommendation 4c as of December 31, 2008**

4c) The establishment of a Quality Assurance support position is 75% complete. A Quality Assurance support position has been created and will be posted in early 2009.

*Management: Response % complete* *75%*

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**OAG's Follow-up Audit Findings regarding Recommendation 4c**

4c) The QA program has now been implemented.

*OAG: Response % complete* *100%*

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**Management Representation of the Status of Implementation of Recommendation 4d as of December 31, 2008**

4d) Province-wide comparators, recruitment visits and market rate salary adjustments are 100% complete. Development of a PHI internship program is 60% complete. Recruitment visits are complete for 2008 and will continue in 2009. Market value adjustments of PHI salaries are complete, which will aid in attracting PHIs to Ottawa Public Health. PHI Workload assessment and reorganization is complete. The aim of this reorganization was to distribute inspections more equally among staff to ensure that provincial inspection requirements are met. Implementation will occur Q1 2009 alongside implementation of the quality assurance program. A PHI Trainee/Internship Program is under development. OPH is in discussions with universities to ensure trainee/intern candidates have requirements to enter university programs.

*Management: Response % complete* *60%*

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**OAG's Follow-up Audit Findings regarding Recommendation 4d**

4d) As a result of the 2007 audit, it was determined that OPH required an additional seven full time equivalent positions to meet the minimum goals and food premises inspection requirements of the Food Safety Program. As of March 2010, OPH has achieved a full staff complement for the Food Safety Program. The Environment, Health Protection and Outbreak Management (EHPOM) Branch now employs 45 Public Health Inspectors (PHIs), 35 of whom conduct routine food premises inspections as well as other required duties such as rabies prevention, infection control and public pool inspections. The remaining 10 PHIs are responsible for food handler education, health hazard and water safety investigations, as well as environmental health advocacy and discarded needle retrieval.

*OAG: Response % complete* *100%*

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### **Management Representation of the Status of Implementation of Recommendation 4e as of December 31, 2008**

4e) Work on a contingency plan is 50% complete. Contingency plan information will be included in the Strategic Food Safety Report, which is scheduled to go forward to CPSC on March 5 and Council on April 8, 2009.

*Management: Response % complete* *50%*

### **OAG's Follow-up Audit Findings regarding Recommendation 4e**

4e) The Strategic Food Safety Report was presented to Council on 13 May 2009.

*OAG: Response % complete* *100%*

### **Management Representation of the Status of Implementation of Recommendation 4f as of December 31, 2008**

4f) Liaison with the Ministry of Health and Long Term Care (MOHLTC) on EHS cost sharing is 100% complete. The MOHLTC has decided against the implementation of a province-wide system, and has instead, contributed \$116,000 to OPH.

*Management: Response % complete* *100%*

### **OAG's Follow-up Audit Findings regarding Recommendation 4f**

4f) Ministry funding received.

*OAG: Response % complete* *100%*

### **2007 Recommendation 5**

That management liaise with By-Law Services to ensure adequate coordination of the business licensing process for Food Premises with EHP as follows:

- a) Include EHP in the distribution of all food premise license applications;
- b) Consider the feasibility of on-line access by EHP to the status of food premise applications to facilitate tracking and follow-through;
- c) Ensure that all parties responsible for sign-off prior to licensing have a coordinated response with operators (i.e., Zoning, Building Services, Licensing, EHP); and,
- d) Do not issue business licenses for food premises without EHP approval.

### **2007 Management Response**

Management agrees with this recommendation.

a) Schedule 7 to Licensing By-law 2002-189 requires approval from E&HP as a condition for the issuance of a food premise license. E&HP is therefore included in the distribution of all food premise license applications as part of a standard approval process. By-law and Regulatory Services branch staff will continue this practice.

b) E&HP staff is currently working with Information Technology Services to determine the required and appropriate level of access to MAP given the needs of the business unit and other relevant considerations, which would provide for on-line access to food premise license applications.

c) Schedule 7 to Licensing By-law 2002-189 requires that a food premise license shall not be issued until the conditions for issuance have been met; that is, all required approvals, including that of E&HP, have been obtained accordingly. A process is currently in place to ensure that all relevant parties provide to By-law and Regulatory Services said approval either electronically or manually. Staff of the various approval branches will continue to work cooperatively to provide a coordinated response to operators.

d) Schedule 7 to Licensing By-law 2002-189 requires that a food premise license shall not be issued until approval from E&HP has been obtained. By-law and Regulatory Services staff has, in conjunction with E&HP, developed a process to facilitate approval. Staff of both branches will work cooperatively to continue this practice.

**Management Representation of the Status of Implementation of Recommendation 5a to 5d as of December 31, 2008**

5a), c) and d) Coordination of the business licensing process / MAP business case is 100% complete. Schedule 7 to Licensing By-law 2002-189 requires that a food premise license shall not be issued until approval by E&HP has been obtained. Strategies have been implemented to improve business practices and increase communication between By-Law Services and E&HP to ensure compliance with the existing by-law. These strategies include: distributing all food premise license applications to E&HP, and manually or electronically sharing approval documents to provide a coordinated response to operators. E&HP and By-Law staff continue to work cooperatively to ensure that an operator receives a coordinated response and a license is not issued until E&HP has provided approval.

5b) EHP implementation of MAP is 50% complete. An electronic system (MAP), to increase the efficiency and coordination of the business licensing process has been developed, the business case has been approved and implementation of the system will occur by Q2 2009.

***Management: Response % complete*** ***100%***

**OAG's Follow-up Audit Findings regarding Recommendation 5a to 5d**

5a) to 5d) - See response to recommendation 3a.

***OAG: Response % complete*** ***100%***



## **2007 Recommendation 6**

That management review and realign the respective roles and responsibilities of the Program Manager and Supervisor positions within the broader context of strategic plans for the Food Safety Program as well as other Environmental Health programs, including:

- a) Creating and staffing any new positions only after the rationale has been completely formulated and incorporated into the EHP Division's comprehensive strategy;
- b) The introduction of new technology;
- c) The implications of any other planned changes (i.e., on-line Disclosure and Mandatory Food Handler Training);
- d) Implementing a Quality Assurance Program; and,
- e) Revising and clarifying policies and procedures.

## **2007 Management Response**

Management agrees with the Auditor's recommendation.

The comprehensive Strategic Food Safety Report to be delivered annually to Council described in recommendation 1 will include a discussion of the respective roles and responsibilities of the program manager and supervisor positions within the unit where new positions are identified.

The need for supervisory positions was identified and evaluated in mid 2006, and in early 2007 the positions were posted and filled. Management believes that the benefits of staffing the positions immediately were the start of a rigorous QA Food Safety Program as well as continuing to increase efficiencies made over the previous two years.

In addition, it is essential to have a supervisory level in place prior to the introduction of new technology and on-line disclosure, as the Supervisors will be instrumental in ensuring consistency in data collected and downloaded into the new EHIS system.

Supervisors are currently revising and clarifying policies and procedures with input from management and staff, which will result in increased and facilitated communication between staff and management, and clear direction to enable the QA Program. The results of this discussion and any changes or realignment of the existing Supervisor positions will be addressed in the 2008 comprehensive Strategic Food Safety Report.

## **Management Representation of the Status of Implementation of Recommendation 6a to 6e as of December 31, 2008**

6a) A re-alignment of Program Managers and Supervisors within the broader context of strategic plans for the Food Safety Program is 100% complete. Implementation of the re-alignment will take place in conjunction with the

introduction of the Quality Assurance program and PHI workload distribution at the end of Q1 2009, following phase III of the City's corporate realignment.

***Management: Response % complete*** **100%**

6b) The Environmental Health Information System (EHIS) pilot phase is currently underway and online disclosure is 75% complete. Full implementation is expected by April 2009, as glitches in the system and potential problems are resolved.

***Management: Response % complete*** **75%**

6c) Mandatory Food Handler Training is 25% complete. Comparator municipalities will be surveyed for analysis of food handler training fees. Input from Toronto Public Health is being sought to gain information on its mandatory food handler training by-law and the resulting effects on resources, staffing and uptake in food handler training. Food Handler Training will be included in the Strategic Food Safety Report, which is scheduled to go forward to CPSC on March 5 and Council on April 8, 2009.

***Management: Response % complete*** **25%**

6d) Quality Assurance program research and development is 100% complete and Quality Assurance program implementation is 50% complete. The Quality Assurance program will be implemented in Q1 2009.

***Management: Response % complete*** **50%**

6e) Policy review and clarification is 75% complete.

***Management: % complete*** **75%**

**OAG's Follow-up Audit Findings regarding Recommendation 6a to 6e**

6a) to 6e) - With the presentation of the Strategic Report in 2009 and the implementation of the EHIS and QA programs, all parts of this recommendation can be deemed fully implemented.

***OAG: Response % complete*** **100%**

**2007 Recommendation 7**

That management implement a comprehensive recruitment strategy to attract and retain qualified PHIs, including:

- a) Requesting that Employee Services proceed with market value research on PHI salary levels; and,
- b) Resurrecting the Trainee program to assist in recruiting students, offering tuition and certification in exchange for a job term commitment.

## **2007 Management Response**

Management agrees with the Auditor's recommendation.

Meetings with the Employee Services were held in October 2007 to address recruitment and retention issues. Management will continue to attend career fairs at the four universities across the Country in an attempt to recruit new graduates to OPH. Employee Services will work with E&HP to develop promotional materials and;

a) Employee Services will be conducting market value research pending current data collection at the end of October 2007. Eight comparator municipalities will be polled by Employee Services and the results of this research will inform the recruitment strategy for PHIs.

b) Costs associated with the resurrection of a Trainee Program are being investigated and will be compiled by January 2008 in conjunction with Employee Services. These will include the costs of books and tuition for the four-year Environmental Health Degree Program. The strategy of a Trainee Program is to encourage local high school students to pursue a career in Public Health Inspection with the expectation that they will return to Ottawa once they have completed their training and schooling. The original Trainee Program was discontinued in 1996 due to budgetary pressures. It should be noted that many of the current PHIs employed by Ottawa Public Health were graduates of the Trainee Program. Management will present a report to Council in Q3 2008 outlining the business case for the reinstatement of the Trainee Program.

## **Management Representation of the Status of Implementation of Recommendation 7 as of December 31, 2008**

A Market Value Assessment is 100% complete. Allocation of funds was approved in the 2009 budget. HR has completed paperwork and all parties (CUPE, HR, Labour Relations and the Deputy City Manager's Office) endorse the Market Value Assessment.

Development of a PHI internship program is 60% complete. A job posting will be completed in January 2009 and it is expected that an intern will be hired by end of Q1 2009.

***Management: Response % complete*** ***100%***

## **OAG's Follow-up Audit Findings regarding Recommendation 7**

7a) and 7b) - A market rate adjustment for PHI salaries has made PHI salaries more competitive when compared to salaries offered by other municipalities. OPH has also implemented an internship program to improve staff capacity. The internship program was approved by Council in 2009 and provides students currently enrolled in an Environmental Health Degree Program with the opportunity to earn practical field training and guarantees them employment upon successful

completion of their studies. As a further recruitment incentive, OPH provides the intern with a tuition grant up to a maximum of \$8,000. The City of Ottawa and the Canadian Union of Public Employees Local 503 have approved both the incentive payment and guarantee of employment as part of the collective agreement. It should be mentioned that since the staffing objective has been achieved to its current capacity, the internship program will be suspended until further staffing is required.

*OAG: Response % complete* **100%**

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## ***Financial Management***

### **2007 Recommendation 8**

**That management prepare annual budgets for the Environmental & Health Protection Division based on clear strategic objectives and priorities for the Food Safety Program and other Environmental Health programs (i.e., develop the comprehensive strategy for the Food Safety Program as a first step).**

### **2007 Management Response**

Management agrees with the Auditor's recommendations.

The comprehensive Strategic Food Safety Report discussed in recommendation 1 will be a fundamental first step. The E&HP Management team does prepare annual budgets for the division, including strategic objectives and priorities for the Food Safety Program and all other E&HP programs. In 2004, 2005 and 2006 the food safety budget was under spent due to the inability to staff and fill Public Health Inspector (PHI) positions. Recruitment and retention of Public Health Inspectors are the primary issues, which affect the ability of the E&HP division to attain compliance with provincial requirements. With an aggressive recruitment program the expectation is that all existing PHI positions will be filled by 2009.

### **Management Representation of the Status of Implementation of Recommendation 8 as of December 31, 2008**

*Management: Response % complete* **100%**

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### **OAG's Follow-up Audit Findings regarding Recommendation 8**

With the presentation of the Strategic Report in 2009 this recommendation can be deemed fully implemented.

*OAG: Response % complete* **100%**

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### **2007 Recommendation 9**

That management, before requesting any additional resources as part of the 2009 budget submissions, explore options for funding from any surplus Food Safety budget, from within the Public Health Branch budget and from within the Community & Protective Services Department budget.

### **2007 Management Response**

Management agrees to the Auditor's recommendations.

Management will explore all funding opportunities within their authority as part of the 2009 budget submission.

### **Management Representation of the Status of Implementation of Recommendation 9 as of December 31, 2008**

*Management: Response % complete* *100%*

### **OAG's Follow-up Audit Findings regarding Recommendation 9**

*OAG: Response % complete* *100%*

### **2007 Recommendation 10**

That management, once a more strategic approach to managing the Food Safety Program has been established, pursue the feasibility of inspection fees or especially a surcharge for repeat offenders (i.e., charge for extra visits required to ensure compliance, beyond the Provincially-mandated annual inspection frequency).

### **2007 Management Response**

Management does not agree with the Auditor's recommendation regarding inspection fees, as it is not industry best practice.

Of the 36 health departments in Ontario, only one charges a fee for inspection (Hamilton) and they are in the midst of repealing their bylaw. Under the HPPA, OPH is required to inspect and investigate all reports of food borne illness and cannot refuse to perform an inspection, because the premise will not pay an inspection fee.

Management agrees with the Auditor's recommendation regarding repeat offenders.

Historically it has been demonstrated that there are identified food premises operators that repeatedly fail to comply with the Food Premises Regulation. These operators consume an inordinate amount of a PHI's time with re-inspections and complaint investigations. A surcharge fee structure would have to be incorporated into a bylaw and passed by Council. Management will present a draft bylaw to Council in Q1 2009.

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**Management Representation of the Status of Implementation of Recommendation 10 as of December 31, 2008**

Implementation of the first part of this recommendation regarding inspection fees has not yet begun. This item is on the agenda for discussion at the February 19, 2009 CAWG meeting.

Implementation of the second part of this recommendation regarding repeat offenders is 20% complete. OPH is investigating options related to repeat offenders, in addition to a By-law. The feasibility of a surcharge fee structure is also being explored. The timeline for presenting a draft bylaw to Council is Q1 2009.

***Management: Response % complete*** ***50%***

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**OAG's Follow-up Audit Findings regarding Recommendation 10**

Following legal consultation, it was deemed that re-inspection fees are not a viable option. According to legal analysis, the City of Ottawa has broad powers to impose fees for services such as re-inspections pursuant to section 391 of the Municipal Act, 2001. Council could impose a surcharge fee by enacting a by-law that specifies the nature of the charge and the amount payable. Although Council does possess such legislative authority, the charge would be very difficult if not impossible to enforce. As stated in the management response to the audit's recommendation, "Under the Health Protection and Promotion Act (HPPA), OPH is required to inspect and investigate all reports of food-borne illness and cannot refuse to perform an inspection, because the premises will not pay an inspection fee." Currently of the 36 public health units in Ontario, there are no municipalities that impose re-inspection fees for food safety inspections. Since the original recommendation was to investigate the feasibility of such fees, it can be deemed fully implemented.

***OAG: Response % complete*** ***100%***

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**2007 Recommendation 11**

**That management examine the potential cost/benefits of increasing fees for the delivery of Food Handler Training, comparing Ottawa rates to other cities in Ontario.**

**2007 Management Response**

Management agrees with the Auditor's recommendation.

A comparator survey of all Ontario Health Department's training fees will be conducted in January 2008 and at that time the fee structure will be reviewed and revamped if necessary. It should be noted that with the possible advent of mandatory food handler training the fees will have to be 'reasonable' reflecting a cost recovery structure.

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**Management Representation of the Status of Implementation of Recommendation 11 as of December 31, 2008**

Implementation of this recommendation is 25% complete. Comparator municipalities will be surveyed for analysis of food handler training certification course and exam fees. Input from Toronto Public Health is being sought to gain information on its mandatory food handler training by-law and the resulting effects on resources, staffing and uptake in food handler training. Food Handler Training will be included in the Strategic Food Safety Report, which is scheduled to go forward to CPSC on March 5 and Council on April 8, 2009.

*Management: Response % complete* *25%*

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**OAG's Follow-up Audit Findings regarding Recommendation 11**

With Council's approval, OPH has increased the per person registration fee from \$25 to \$40 (plus taxes) in 2009, and instituted a new fee of \$10 (plus taxes) for certificate re-issue. Beginning in July 2010, the food handler course will also be subject to Ontario's new Harmonized Sales Tax. The fee structure change aligns more closely with fees charged by other health units in Ontario and has also improved cost recovery efforts. Despite changes to course and certificate re-issue fees, in certain circumstances, charges can be reduced or waived. For example, food handlers on financial assistance can apply for a 75% reduction in course fees, while Ottawa Food Bank employees and volunteers are exempt from any costs.

*OAG: Response % complete* *100%*

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**2007 Recommendation 12**

**That management ensure the appropriate segregation of duties associated with the collection and processing of all revenues.**

**2007 Management Response**

Management agrees with the Auditor's recommendation.

As of June 2007 the food handler training course registration is done via the City's "CLASS" system, which facilitates on line registration and eliminates the need to directly handle cash or cheques. The E&HP division ensures appropriate processing of all revenues through consultation with the Financial Support Unit (FSU) as per current practice.

**Management Representation of the Status of Implementation of Recommendation 12 as of December 31, 2008**

Implementation of this recommendation is 100% complete. As of June 2007 the food handler training course registration is done via the City's "CLASS" system, which facilitates on line registration and eliminates the need to directly handle cash or cheques.

*Management: Response % complete* *100%*

**OAG's Follow-up Audit Findings regarding Recommendation 12**

*OAG: Response % complete* *100%*

**2007 Recommendation 13**

That management request that Financial Services review revenue collection procedures within the EHP Division.

**2007 Management Response**

Management agrees with the Auditor's recommendation.

E&HP management currently consults on an ad hoc basis with the FSU, and will establish a regular meeting schedule to review collection procedures in Q1 2008.

**Management Representation of the Status of Implementation of Recommendation 13 as of December 31, 2008**

*Management: Response % complete* *100%*

**OAG's Follow-up Audit Findings regarding Recommendation 13**

*OAG: Response % complete* *100%*

***Progress Since 1992***

**2007 Recommendation 14**

That management improve communications within and between districts by:

- a) Clarifying expectations/standards and priorities regarding inspection frequencies for the interim until Provincial requirements can be met;
- b) Establishing consistent practices between districts;
- c) Establishing regular section meetings for each working group (i.e., west, central and east districts) to review plans, standards and guidelines, work progress, strategies, access to information, tools/materials, and in-field security measures;
- d) Refocusing Division-wide meetings to deal with broader educational issues of legislation, professional practice and legal considerations;
- e) Restructuring 'Info-Share' sessions to ensure they provide a productive opportunity for the exchange of ideas; and,
- f) Addressing any individual performance issues with staff members one-on-one as required.

**2007 Management Response**

Management agrees with the Auditor's recommendations.



a, b & c) Consistent practices and sharing of standardized information between areas and districts is being facilitated by the implementation of the supervisory positions, additional PHI meetings and continued info-share meetings. In 2005, a sub-office was established in Orleans at the Centrum location where 10 PHIs were relocated to facilitate customer service to residents in the east end of Ottawa. The transition to the sub-office initially led to a few communication challenges, but over time the transition smoothed and the flow of information between the two offices increased substantially.

d & e) Monthly PHI meetings will continue to facilitate sharing of educational issues, professional practice and legal considerations. "Info-share" meetings will be reinstated on a quarterly basis to ensure productive opportunities for the exchange of ideas commencing in Q1 2008.

f) All CUPE staff and their program managers have participated in the PDP pilot project. Individual performance issues have been addressed through this process, which will continue to be utilized after 2007 on an annual basis.

### **Management Representation of the Status of Implementation of Recommendation 14a to 14f as of December 31, 2008**

*Management: Response % complete* *100%*

### **OAG's Follow-up Audit Findings regarding Recommendation 14a to 14f**

14a) to 14f) - Based on a review of documentation provided by management, all parts of this recommendation can be deemed fully implemented.

*OAG: Response % complete* *100%*

### **2007 Recommendation 15**

**That management monitor and report regularly to the Council on:**

- a) Proposed strategies to improve Program performance (now and in the future);
- b) Progress in implementing improvements; and,
- c) Meaningful trends or indicators of the Program's success and the results achieved, working toward reporting on the evolution of community compliance rates (i.e., with legislated safe Food Handling practices).

### **2007 Management Response**

Management agrees with the Auditor's recommendation (as agreed to in recommendation #1).

The E&HP division will report annually to CPS Committee and Council starting in Q2 in 2008. Included in the annual Strategic Food Safety Report will be statistics as well as proposed strategies to improve performance and progress to date.

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**Management Representation of the Status of Implementation of Recommendation 15a to 15c as of December 31, 2008**

Completion of the Strategic Food Safety Report is 50% complete. The report is scheduled to go forward to CPSC on March 5 and Council on April 8, 2009.

*Management: Response % complete* **50%**

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**OAG's Follow-up Audit Findings regarding Recommendation 15a to 15c**

15a) to 15c) - With the presentation of the Strategic Food Safety Report and the more recent update report, this recommendation can be deemed fully implemented

*OAG: Response % complete* **100%**

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**2007 Recommendation 16**

That management implement procedural enhancements and ensure consistent practices across the Division as appropriate on an ongoing basis, including:

- a) The application of enforcement policies and procedures;
- b) Documentation of HACCP assessments; and,
- c) Updates/upgrades to the inspection form.

**2007 Management Response**

Management agrees with the Auditor's recommendations.

An educational committee has been established in the E&HP division to address issues of updating staff on new procedures, policies, Ministry protocols and orientation. This committee will also address procedural challenges including any changes to existing inspection forms and documentation (including HACCP assessments). The Committee meets every 2 months and information is shared with staff during regularly scheduled PHI meetings.

**Management Representation of the Status of Implementation of Recommendation 16a to 16c as of December 31, 2008**

*Management: Response % complete* **100%**

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**OAG's Follow-up Audit Findings regarding Recommendation 16a to 16c**

With the implementation of the QA program this recommendation can be deemed fully implemented.

*OAG: Response % complete* **100%**

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**2007 Recommendation 17**

That management establish a formal Orientation Program for new and rotating inspection staff.

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**2007 Management Response**

Management agrees with the Auditor's recommendation.

A newly established education committee (August 2007) will ensure a formal orientation program for new staff, and will develop semi-annual training sessions for all PHIs. Staff training will be held in Q1 and Q3 of 2008.

**Management Representation of the Status of Implementation of Recommendation 17 as of December 31, 2008**

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*Management: Response % complete* *100%*

**OAG's Follow-up Audit Findings regarding Recommendation 17**

Based on a review of documentation provided by management, this recommendation can be deemed fully implemented.

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*OAG: Response % complete* *100%*

## 4 SUMMARY OF THE LEVEL OF COMPLETION

1. The following table outlines our assessment of the level of completion of each recommendation as of Summer 2010.

CATEGORY	% COMPLETE	RECOMMENDATIONS	NUMBER OF RECOMMENDATIONS	PERCENTAGE OF TOTAL RECOMMENDATIONS
LITTLE OR NO ACTION	0 – 24	3d	1	3%
ACTION INITIATED	25 – 49	-	-	-
PARTIALLY COMPLETE	50 – 74	-	-	-
SUBSTANTIALLY COMPLETE	75 – 99	-	-	-
COMPLETE	100	1, 2, 3a, 3b, 3c, 4a, 4b, 4c, 4d, 4e, 4f, 5a, 5b, 5c, 5d, 6a, 6b, 6c, 6d, 6e, 7a, 7b, 8, 9, 10, 11, 12, 13, 14a, 14b, 14c, 14d, 14e, 14f	34	97%
TOTAL			35	100%

2. The table below outlines management's assessment of the level of completion of each recommendation as of Summer 2010 in response to the OAG's assessment. Those assessments have not been audited.

CATEGORY	% COMPLETE	RECOMMENDATIONS	NUMBER OF RECOMMENDATIONS	PERCENTAGE OF TOTAL RECOMMENDATIONS
LITTLE OR NO ACTION	0 – 24	-	-	-
ACTION INITIATED	25 – 49	-	-	-
PARTIALLY COMPLETE	50 – 74	-	-	-
SUBSTANTIALLY COMPLETE	75 – 99	-	-	-
COMPLETE	100	1, 2, 3a, 3b, 3c, 3d, 4a, 4b, 4c, 4d, 4e, 4f, 5a, 5b, 5c, 5d, 6a, 6b, 6c, 6d, 6e, 7a, 7b, 8, 9, 10, 11, 12, 13, 14a, 14b, 14c, 14d, 14e, 14f	35	100%
TOTAL			35	100%

## 5 CONCLUSION

Significant progress has been made on all of the audit's recommendations. With the exception of Mandatory Food Handler Training, which management has determined it will not pursue, all other recommendations can be deemed fully implemented. Of particular note is the solid progress in launching an EHIS, the QA program and on-line disclosure of inspection results. Most recent statistics provided by management show an encouraging increase in the number of inspections completed. While all premises received at least one inspection in 2009, it should be noted that only 33% of high-risk premises received the required three inspections during the year. Factors identified that contributed to this include:

- Reassignment of staff during the OC Transpo strike to visit vulnerable populations in high-risk buildings;
- Reduction in availability of PHI's to conduct routine inspections due to training of the new EHIS system;
- Relocation of staff to Ottawa's west end to perform health hazard assessments in the homes of flood victims;
- Redeployment of nearly 90% of PHIs during the H1N1 pandemic response and mass vaccination campaign; and,
- Participation of staff in five large-scale food recalls to ensure that affected products were removed from retail distribution.

Management indicates that it is on target to meet its 2010 targets, however, has also indicated that additional PHI positions are required to maintain the organization's ability to consistently meet these targets in the future, to sustain its achievements and will be requested in 2011 budget submission.

## **6 ACKNOWLEDGEMENT**

We wish to express our appreciation for the cooperation and assistance afforded the audit team by management.