# County of Oxford Services that Work

Wave 1 Findings Report January 6, 2015



### **Table of Contents**

Executive Summary	4
Introduction	7
Method and approach	7
Service Inventory	7
Service Financial Allocations	8
Results Based Accountability™ Performance Indicators	9
Service Analysis	10
Service Improvement Opportunities	11
Stakeholder Engagement	11
Services owned by Human Services	10
Service Profiles and Insights	_
Service Profiles	
Service Financial Allocations	
Financial Allocations Insights:	
Results Based Accountability™ Performance Indicators	
Child Care Subsidy KPI Insights	
Community Capacity KPI Insights	
Financial Assistance KPI Highlights	
Shelter (Direct Delivered) and Shelter (Subsidy) KPI Highlights	
Service Improvement Opportunities	
Services owned by Public Health and Emergency Services	
Service Profiles and Insights	
Service Profiles	
Service Financial Allocations	
Financial Allocations Insights	
Results Based Accountability™ Performance Indicators	
Individual Health Assessment and Intervention KPI Insights	
Population Health Services KPI Insights	
Building Health Partnerships KPI Insights	
EMS KPI Insights	
Service Improvement Opportunities	36
Services owned by Oxford County Library	38
Service Profiles and Insights	38
Service Profiles	39
Service Financial Allocations	40
Financial Allocations Insights	40
Results Based Accountability Performance Indicators	43
Library Collections KPI Insights	43
Library Programming KPI Insights	44
Library Public Space Access KPI Insights	45
Library Reference and Information KPI insights	
Library Information Technology Access KPI Insights	45
Service Improvement Opportunities	47

Services owned by Archives (Corporate Services)	48
Service Profiles and Insights	48
Service Profiles	
Service Financial Allocations	50
Financial Allocations Insights	50
Results Based Accountability™ Performance Indicators	
Archives Collections and Resources KPI Insights	53
Service Improvement Opportunities	54
Appendix A: Service Inventory	56
Appendix B: Service Financial Allocations	68
Appendix C – Key Performance Indicators	72
Appendix D: Service Improvement Opportunities	89

# **Executive** Summary

The County of Oxford (the County) issued a Request For Proposals (RFP) requesting consulting support for the Services that Work Project, a service delivery review designed to examine the effectiveness, efficiency and value of each County service. The RFP also requested recommendations or changes in services, programs and resources, including whether specific services should be expanded, reduced, discontinued or delivered in an alternate manner.

Munro Strategic Perspective was initially engaged to provide consulting support to the Services that Work Project [STW] for Wave 1 and extended for Waves 2 and 3 to be conducted in 2015.

This report contains the findings and recommendations from Wave 1 of Services That Work.

The results and recommendations are the product of the combined collaborative effort of the staff and leadership of the County of Oxford, guided by Melinda Munro of Munro Strategic Perspective.

Wave 1 of the Services that Work Project reviewed Public Health and Emergency Services, Human Services, Library and Archives. These departments deliver services that support individuals and vulnerable citizens and which largely, though not entirely operate with shared mandates and funding from the provincial government. The analysis included creating a corporate Service Inventory for the County of Oxford, reviewing financial and performance information for the specific services contained in Wave 1 and review of peer municipalities and government mandates.

The result of the review is that there is a strong commitment to providing valuable outcomes to the citizens. The County works with partners in the community to deliver services effectively and has demonstrated innovation in the models of service delivery offered. The County has also demonstrated strong financial management at the departmental level to maintain expenses at a reasonable rate.

The Services that Work Project object was to apply a service-based lens to the County structure and identify opportunities to improve service delivery and outcomes. This report contains 27 recommendations for Service Improvement Opportunities to improve service outcomes, service delivery or service costs. The recommendations can be captured in the following themes:

✓ Streamline services to families and children: "No wrong

- door" for vulnerable clients whether coming in for financial assistance, child care, housing, or individual health assessment and intervention by intentionally coordinating service delivery.
- ✓ Place community services where people live by co-locating allied services and using Libraries as community service hubs where appropriate.
- ✓ Improve the productivity of services that visit families (and businesses) and provide additional hours of services to support working families.
- Maintain access to Library services in small communities by expanding the use of the facilities.
- ✓ Focus service outcome efforts on shared definition of quality of life using Social Determinants of Health and Canadian Index of Well-being to plan and deliver services.

The overall potential for savings, productivity improvements and reinvestment ranges from \$500,000 to \$1.5M achieved over 3-4 years. The most significant SIO's are in the table below. The full list is contained in Appendix D

Service Improvement Opportunity	Client Service	Efficiency
Transformation to Full Integration of Services Supporting Families, Children and Singles	<b></b> ✓	<b>☑</b>
Process and Productivity Improvements for Public Health	☑	<b>I</b>
Public Health Nurses and Inspectors Scheduling, Process and Decentralization Strategy	<b>☑</b>	<b>☑</b>
After Hours Public Health Services	V	

Reimagine Libraries as Community Hubs	Ø	
Merger of Records Management and Archives		✓

The report also recommends several potential Key Performance Indicators [KPIs] that should be incorporated into business and strategic planning. These KPI's can be found at Appendix C.

Finally the report contains tables of the financial information for the Wave 1 group by service covering the 2011 actuals to the 2017 forecast. Where the growth over that time exceeds 5% per year and \$100,000 in absolute change, it is highlighted. The benefit of this analysis is that it illuminates where services are experiencing impacts from revenue or expense changes that may otherwise be difficult to see using a departmental view. The complete table may be found at Appendix B.

The County of Oxford has much to be proud of in the delivery of the services contained in Wave 1 and this report should not be seen as critical of the service delivery but supportive of improved outcomes for County residents.

The remaining services contained in Waves 2 and 3 will be reviewed throughout 2015 and reports will be provided at appropriate times.

### Introduction

The County of Oxford (the County) issued a Request For Proposals (RFP) requesting consulting support for the Services that Work Project, a service delivery review designed to examine the effectiveness, efficiency and value of each County service. The RFP also requested recommendations or changes in services, programs and resources, including whether specific services should be expanded, reduced, discontinued or delivered in an alternate manner.

The specific deliverables of the RFP were to produce:

- Finalized service profiles
- 2. Recommendations for prioritization of services for review
- 3. A work plan for completion of the project
- 4. Specific recommendations with regards to changes in services, programs and resources, including whether specific services should be expanded, reduced, discontinued or delivered in an alternate manner
- Quantification of financial implications of opportunities identified during the project
- 6. Identification of impacts for operations and service delivery resulting from recommendations, including clearly defined service levels
- 7. A package of service delivery standards and KPI for programs and services

Munro Strategic Perspective was initially engaged to provide consulting support to the Services that Work Project [STW] for Wave 1 and extended for Waves 2 and 3 to be conducted in 2015.

This report contains the findings and recommendations from Wave 10f Services That Work.

The results and recommendations are the product of the combined collaborative effort of the staff and leadership of the County of Oxford, guided by Melinda Munro of Munro Strategic Perspective.

# Method and approach

### **Service Inventory**

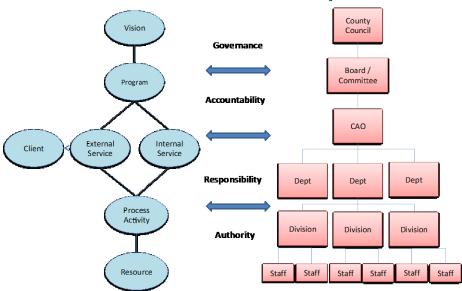
The service inventory for the County of Oxford was created using the Municipal Reference Model (MRM). The MRM is a business reference model that enables public sector organizations to view their service offerings independent of departmental or financial structure. It

<sup>&</sup>lt;sup>1</sup> The MRM is intellectual property owned by the Municipal Information Services Association of Canada and made available for use by the public sector.

enables organizations to see the true cost and resource requirements of services, as well as see where similar clients may be receiving allied services that could be better integrated. It also creates visibility for citizens about the services they pay for and receive. Finally, the service inventory also acts as a form of internal control, ensuring that all activities done and resources deployed in a municipality are directed towards the overall goals defined by Council and the community.

The diagram below illustrates the impact of the MRM in decoupling services from the organizational structure of a municipality.

### Service Inventory Schematic



Using the MRM, staff groups were led through a process of identifying the work they do, organizing that work by service and creating service profiles that contain resource and strategic information about the services delivered by the County.

The result is an inventory of 58 services grouped across five programs that capture the work of the County. The full inventory is set out in Appendix A to this report.

#### Service Financial Allocations

After completion of the service inventory, the existing County financial information from 2011 through 2018 was allocated by service for Wave One services only. This process improves the visibility of the expenses and revenues by service, enabling management to see

where services are growing slower or faster or experiencing shifts in resource deployment that can be masked when financial information is viewed by the department or division. It can enable better decision making with respect to resource deployment, sharing services and setting fees.

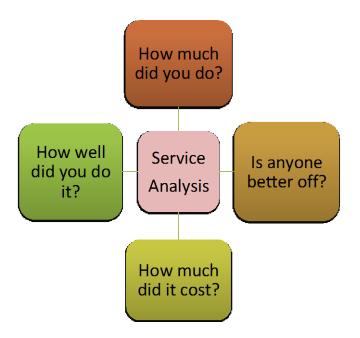
The method used to allocate the financial information by service was to identify the key drivers of expenses and revenues by service (staff, building footprint, physical resources, clients, etc.) and allocate the existing cost accounts by percentage while reconciling to the total existing budget for the group of services being reviewed. Senior management and finance staff members were engaged in this process using a tool developed by Munro Strategic Perspective and adapted for ease of use by staff of the County.<sup>2</sup> The results for Wave 1 can be seen in Appendix B. The insights gleaned from the results will be discussed further below.

### Results Based Accountability™ Performance Indicators

Key Performance Indicators (KPI) were developed for all services in the inventory using the framework of Results Based Accountability™ (RBA). The RBA framework was developed specifically for use in the public and not-for-profit sectors and it focuses on the desired outcomes of services, not just the inputs and outputs of a service. The schematic below illustrates how RBA balances four questions in creating and utilizing KPIs for decision-making:

January 6, 20152015-01-23

<sup>&</sup>lt;sup>2</sup> Matthew Buis and David McRoberts deserve enormous credit for the work they did on the financial allocation tool. The result places the County on the leading edge for service-based financial visibility in Ontario.



Management staff from all Wave 1 services were engaged in identifying KPIs for the services. The KPIs were selected using a process created by Munro Strategic Perspective for identifying useful, relevant and cost effective metrics in each category. Wherever possible, existing metrics were identified and classified using the RBA framework above in order to maximize the cost effectiveness of the process. Additional metrics were identified for services in order to fill out the RBA framework, particularly metrics that answer the question: "Is anyone better off?". Metrics selected were then defined using a Data Dictionary developed by Munro Strategic Perspective to ensure continuity and comparability of data over time. These metrics are both an internal control and a tool for continuous improvement for the County. In July, County Council approved a recommendation from STW that RBA form the basis for metrics to be used in County budget business plans going forward.

The list of metrics identified through STW Wave 1 are attached as Appendix C and listed by service. The KPIs range from low-level process metrics to high-level strategic metrics and will be used for different purposes in ongoing management of the services. The data for the metrics is not reported here except where used to support insights or recommendations. In some cases the KPI has been identified but the data collection methodology and process have yet to be formalized.

### **Service Analysis**

The service analysis phase of Wave One included several steps:

- Appreciative Inquiry Interviews with senior management,
   Project Team and Ad Hoc Committee
- Day in the Life visits in all services including interviews with front line staff and some clients
- Review of all legislation related to Wave 1 services
- Review of key documents provided about Wave 1 services including audits, council reports, service standards, budgets, letters of understanding and best practices reports from other levels of government or peers
- Review of information provided by specific peer municipalities of the County as identified by Senior Management and Munro Strategic Perspective

The insights from this review will be discussed in each service section respectively.

### **Service Improvement Opportunities**

Throughout each stage of the Wave 1 service review, opportunities for improvement were identified for analysis. They may have arisen from staff comments, management insights, data analysis, financial analysis, best practice or peer reviews. Each Service Improvement Opportunity (SIO) was catalogued and key information identified in order to determine the viability of the opportunity and to prioritize the opportunities for implementation based on their complexity, likelihood of support, cost and benefit. The criteria for prioritizing SIOs were chosen and weighted by the Senior Management Team. The criteria are set out below:

- Community Impact
- Cost Impact
- Chance of Success or Failure
- Capacity (Human or Physical Resources)
- Timing
- Strategic Alignment
- Council Priority

The complete list of SIOs is attached as Appendix D to this report. SIOs related to a specific group of services are listed within the corresponding section of this report.

### Stakeholder Engagement

The engagement of community and area municipality stakeholders is

being conducted by the staff of the County of Oxford. Their results will be reported to Council at an appropriate time in future.

The next sections of this report will be organized by the department which is the owner for the delivery of the service. While this somewhat contradicts the effort to create a service inventory that is decoupled from departmental structure, it still acknowledges that each service must have an owner regardless of the fact that it may require the participation of multiple departments to ensure delivery.

### Services owned by Human Services

- Financial Assistance
- Child Care Subsidy
- Community Capacity Subsidy
- Shelter (Direct Delivered)
- Shelter (Subsidy)

The Human Services Department is responsible for the delivery of five services for the County, all of which are mandatory and supported substantially by provincial funding. Some of the mandatory services have discretionary elements in how they are delivered, which creates opportunities for potential efficiencies.

### **Service Profiles and Insights**

Below is a table of the key information captured in the service profiles for this group of services. The complete service profile for a service also contains staff resources, some KPIs, a three year outlook for service pressures and a SWOT Analysis (Strengths, Weaknesses, Opportunities and Threats). The complete service profile is available from Information Services

Human Services as a department is uniquely organized for service delivery compared to many of its peers in Ontario, as all Oxford County Client Support Workers (CSWs) are designated to provide support in all service areas to all clients. This integration supports the client in two important ways: first, the client does not have to interact with more than one County employee to obtain access to services (this is sometimes called the "no wrong door" approach); second, the CSW is able to ensure that the client gets access to the full range of services available rather than have to make referrals to colleagues in the same department (this is sometimes called "wraparound services"). Human Services also deploys a tool for client assessment that asks questions across a variety of quality of life indicators. This quality of life tool is similar to the Social Determinants of Health promulgated by the World Health Organization and used in Canadian public health planning. This also helps the CSW determine how best to support the client to improve their situation. Human Services has also worked to co-locate with allied service providers in the County such as Employment Ontario or Ontario Early Years to extend the reach of the "no wrong door" and "wraparound service" philosophies.

The three-year outlook for the all of the services in this group suggest that the main issues for the future are changes to the local economy and local demographics that will impact the ability to provide appropriate services. The Child Care Subsidy service is already seeing significant changes due to the provincial full-day learning policy. The service profiling exercise highlighted that there are two shelter services, one where the client is a tenant who lives in a unit owned and operated by the County and the other where the County provides a subsidy to a third party in order to make a unit available. There are

important strategic differences between the services because in one case the County takes direct responsibility for the well-being of a tenant, whereas in the other the County deploys financial resources and policy to grow the availability of appropriate housing, leaving the direct tenant relationship with a third party. The desired outcome is the same; to ensure that Core Housing Need is met and a range of appropriate supportive and affordable housing is available in the County. In both the Shelter (Direct Delivered) and Shelter (Subsidy) Services, it is projected that the County will continue to fail to meet the Core Housing Need of the community with the risk that it will get worse due to increased housing costs and increased costs to provide supportive and affordable housing.

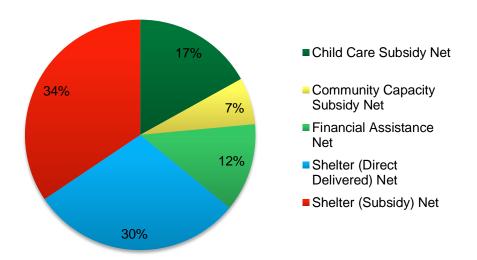
### **Service Profiles**

Service	Client	Output	Net \$	M/D <sup>3</sup>	County Role	Notes
Financial Assistance	Eligible Resident	Financial Assistance Payment	\$988,277	M/M	Direct	Opportunity for improved service through partnering with Public Health
Child Care Subsidy	Eligible Parent/Agency	Subsidy Payment	\$1,351,531	M/D	Subsidy	Recent County changes to funding model.
Shelter (Direct Delivered)	Tenant	Unit of Housing	\$2,368,207	M/D	Direct	County should create a long range capital funding plan which considers whether
Shelter (Subsidy)	Eligible Service Provider	Subsidy Payment	\$2,746,227	M/D	Subsidy	building more units or incentivizing the building of units is more cost and outcome effective.
Community Capacity Subsidy	Eligible Agency	Subsidy Payment	\$525,345	M/D	Subsidy	County should require improved reporting of outcomes per dollar subsidized

<sup>3</sup> The letters M, D, T are used throughout to refer to whether services are Mandatory, Discretionary or Traditional. The first letter refers to the requirement to provide the service and the second letter refers to the method of delivery. For example a service which is M/M has both a mandatory requirement to delivery and a mandatory service method, where M/D means that the method of delivery is in the discretion of the County. D/D/T refers to a service which is fully discretionary but is traditionally provided by municipalities and provided by County peers.

## Service Financial Allocations

#### **Human Services Net**



### **Financial Allocations Insights:**

The Financial Assistance Service impact on the net levy has and will continue to decline due to uploading of costs to the province of Ontario. By contrast, the net increase in the Community Capacity Subsidy service has grown due to declining revenues to this service. The two Shelter services represent the bulk of the impact on the net levy. The allocations table below indicates that there has been a shift of net impact from the Shelter (Direct Delivered) to the Shelter (Subsidy) service with limited net impact on the total Shelter related levy. There has been smaller growth in the Child Care Subsidy service on the net budget. Recent provincial decisions reducing the amount allocated to municipalities for child care has driven the County to change the funding formula to address performance metrics by the providers as approved by County Council in the summer of 2014.

Service improvements recommended in this group of services are focused on improving the outcomes available from the discretionary elements of the generally mandatory services and from looking for process improvements in service delivery.

Yellow highlighting in the table below indicates where a service has had both a net growth or decline of greater than  $5\%^4$  per year and an absolute growth or decline of greater than \$100,000.

Mandatory,					Averege ennuel	
discretionary or traditional	Service name	2011A	<b>2014</b> B	2017F	Average annual growth Rate	Absolute change
M/M	Child Care Subsidy Expenses	\$7,319,694.70	\$6,514,599.74	\$6,587,695.70	-1.67%	-\$731,999.00
M/M	Child Care Subsidy Revenues	-\$6,012,141.00	-\$5,163,069.00	-\$5,200,709.00	2.25%	\$811,432.00
M/M	Child Care Subsidy Net	\$1,307,553.70	\$1,351,530.74	\$1,386,986.70	1.01%	\$79,433.00
M/D	Community Capacity Subsidy Expenses	\$440,288.40	\$525,345.28	\$555,198.40	4.35%	\$114,910.00
M/D	Community Capacity Subsidy Revenues	-\$502,859.00	\$0.00	\$0.00	16.67%	\$502,859.00
M/D	Community Capacity Subsidy Net	-\$62,570.60	\$525,345.28	\$555,198.40	164.55%	\$617,769.00
M/M	Financial Assistance Expenses	\$16,406,109.95	\$17,061,371.09	\$19,395,493.99	3.04%	\$2,989,384.04
M/M	Financial Assistance Revenues	-\$13,692,160.00	-\$16,073,103.80	-\$19,992,467.00	-7.67%	-\$6,300,307.00
M/M	Financial Assistance Net	\$2,713,949.95	\$988,267.29	-\$596,973.01	-20.33%	-\$3,310,922.96
M/D	Shelter (Direct Delivered) Expenses	\$8,487,667.20	\$5,074,307.84	\$5,581,581.20	-5.71%	\$586,331.88
M/D	Shelter (Direct Delivered) Revenues	\$0.00	-\$2,706,100.00	-\$2,863,066.00	FALSE	-\$2,863,066.00
M/D	Shelter (Direct Delivered) Net	\$8,487,667.20	\$2,368,207.84	\$2,718,515.20	-11.33%	-\$5,769,152.00
M/D	Shelter (Subsidy) Expenses	\$1,969,211.15	\$6,146,682.73	\$3,995,144.15	17.15%	\$2,025,933.00
M/D	Shelter (Subsidy) Revenues	-\$5,392,103.00	-\$3,400,456.20	-\$1,466,782.00	12.13%	\$3,925,321.00
M/D	Shelter (Subsidy) Net	-\$3,422,891.85	\$2,746,226.53	\$2,528,362.15	28.98%	\$5,951,254.00

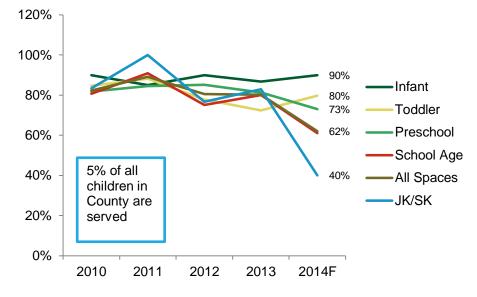
<sup>&</sup>lt;sup>4</sup> 5% was chosen as an extreme limit for growth. Any growth over CPI (generally 2%) is high.

Results Based Accountability™ Performance Indicators The KPIs for all services can be found in Appendix C.

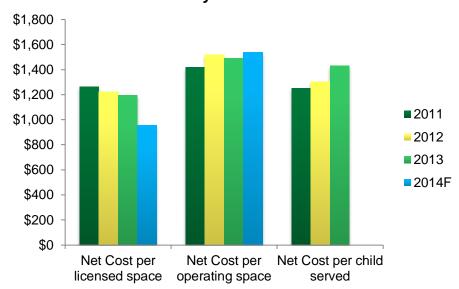
### **Child Care Subsidy KPI Insights**

Insights from the KPIs related to the Child Care Subsidy service indicate that there has been a significant change in the children served since the institution of full day learning in schools. The percentage of operating spaces per licensed space has seen a sharp drop in all categories other than infant and toddler, which have remained stable. The County has already taken action to address both this shift and changing provincial priorities by changing the funding model for agencies and emphasizing efficiency (operating spaces) and innovation. No Service Improvement Opportunities are therefore proposed for this service.

## Percentage of operating childcare spaces per licensed space



### Net cost per space by type and by child served



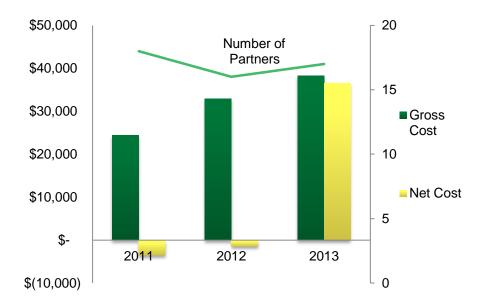
### **Community Capacity KPI Insights**

The Community Capacity Subsidy Service provides support to community agencies that support low income individuals and families with counselling, employment advice, domestic violence support and other critical services. The Subsidy ensures that the agencies are able to be viable in the County of Oxford for both clients of the Financial Assistance or Shelter Services or for other residents for whom the County does not provide direct service.

Currently the KPIs consist of raw numbers of people who have been referred to agencies which are supported by the service. The KPIs would be more helpful if they included information about the outcomes achieved by the referrals, including how many clients completed programs or obtained employment as a result of an intervention.

Therefore there is an SIO recommendation for this service that all agencies that receive a Community Capacity Subsidy must enter an RBA data agreement that provides regular updates on all of the RBA categories: Quantity, Quality, Result and Cost. This SIO is similar to an SIO being recommended for the Building Community Partnerships Service delivered by Public Health. There should be synergies between the contracts created and the management of the data generated by the two Services.

### Cost per partner funded



#### **Financial Assistance KPI Highlights**

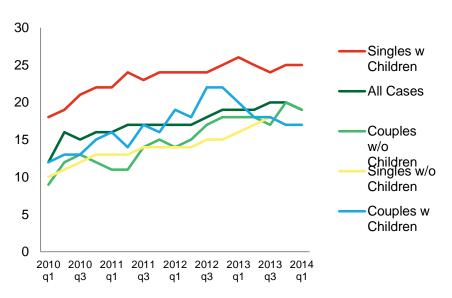
There was some difficulty in reviewing the KPIs for Financial Assistance as the regular local monthly reports did not reconcile with the provincially generated Consolidated Municipal Service Manager (CMSM) reports. The chart below for average time on assistance is generated from the CMSM report. What the review of data shows for this service is that while the number of cases is steadily declining, the average number of months on assistance is growing, particularly for lone parent families. This likely reflects policy changes that have enabled more people to exit to employment, resulting in a higher percentage of more difficult cases. In addition, there have been policy changes that enable people to keep more earned income while still collecting some financial assistance or benefits. However, it does indicate that the average case now requires more intervention.

The other KPI of note is that the net cost per case and per beneficiary (family member of the case holder) is dropping, reflecting provincial uploading of costs.

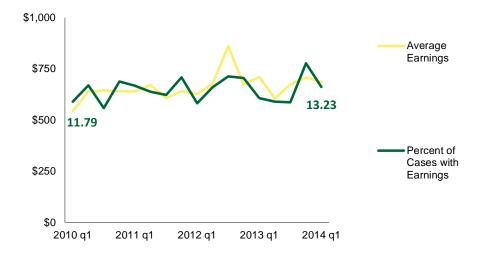
These factors as well as reviewing the provincial Poverty Reduction Strategy and the adoption of the Social Determinants of Health across provincial ministries lead to the recommendation that all services to vulnerable families, children and singles provided by the County be integrated. This SIO is discussed in more detail in the

section on the Individual Health Assessment and Intervention KPI Insights.

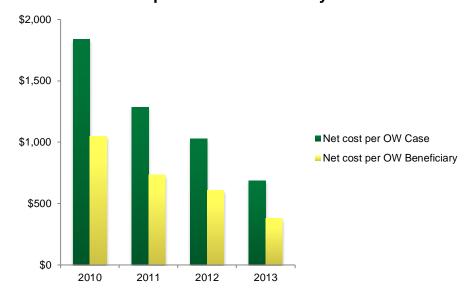
### Average months on assistance



## Percent of cases with earnings and average earnings



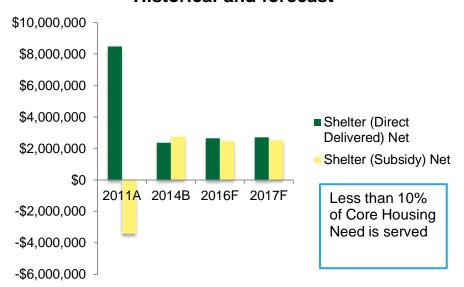
### Net costs for Financial Assistance per case or beneficiary



### Shelter (Direct Delivered) and Shelter (Subsidy) KPI Highlights

As noted above, there are two Shelter services. The Director of Human Services reports that the County is serving 10% or less of people who meet the provincial test for Core Housing Need. In order to increase the ability to support people in need, it will be an important exercise to be able to review the overall cost effectiveness of direct delivery over subsidy support. There are limits on the amount of funding that municipalities can provide in this area, so it is therefore important to know whether direct delivery or incentivized third party delivery provides the best client outcomes. The review of the financial KPIs indicates that the burden on the net levy is not currently growing, though the split between the direct and subsidized service has changed. However, in order to meet the growing need some investment will be necessary. A long-term capital plan creates the opportunity to avoid unplanned additional expenses through a regular build-up of reserves and partnerships with private and not-forprofit sector operators. Additionally, the long term strategy should consider the option of shifting the direct delivered service to a lower cost external provider as has happened in other communities.

### Net shelter costs -Historical and forecast



### **Service Improvement Opportunities**

Opportunity	Risks and Implications	Potential Savings / Productivity	Timeframe	Barriers
Adopt Social Determinants of Health	Improved County-wide planning	Nominal	Less than one year	Low
Transformation to Full Integration of Services Supporting Families, Children and Singles	Improved client service, combining multiple unions and staff	\$100 – 500K	More than one year	Medium
Long Term Housing and Homelessness Capital Plan	Improved planning, increased County expense	Net expense	One year to develop, more than one year to implement	Medium to high
Housing / Shelter First Strategy	Improved client outcomes, intense staff and financial requirements	>\$500k in Social Return on Investment	One year to review, more than one year to implement	Medium to high
Community Capacity Subsidy Review	Improved visibility of agency service delivery, resistance by providers	Nominal	Less than one year	Low to medium
Case Conferencing for HS Staff	Improved learning and client support	Nominal	Less than one year	Low
Integrated Program Benefits Evaluation	Determination of whether integrated service delivery has greater client impact	Nominal	Less than one year	Medium – baseline data may be unavailable
Digital Signatures for Human Services Clients	Improved paper and data management; client resistance	Nominal	Less than one year	Low

### Services owned by Public Health and Emergency Services

The Public Health and Emergency Services (PHES) Department is responsible for the delivery of 11 services for the County, all of which are mandatory and supported substantially by provincial funding. Some of the mandatory services have discretionary elements in how they are delivered which creates opportunities for potential efficiencies.

- Building Health
   Partnerships
- Case and Outbreak Management
- Health Advocacy and Promotion
- Health Monitoring and Surveillance
- Health Resource
   Distribution
- Health Protection Certification
- Individual Health Assessment and Intervention
- Inspections, Investigations and Enforcement
- Emergency
   Management
- EMS
- 911 Call Taking

### **Service Profiles and Insights**

Below is a table of the key information captured in the service profiles for this group of services. In addition, the complete profile contains staff resources, some KPIs, a three year outlook for service pressures and a SWOT Analysis. The complete service profile is available from Information Services.

Public Health and Emergency Services is a somewhat unique combination of services in that both the typical public health services focused on population health management are combined with the first responders and community emergency planning. While all staff are health providers, the focus of the activity is mixed between direct client interventions (Individual Health Assessment and Intervention and EMS) and population level interventions such as Case and Outbreak Management and Inspections and Enforcement. Review of the service profiles indicated that there is some overlap of clients between PHES and Human Services, mainly where clients are low income families and individuals, particularly children.

Recent provincial policy in both public health and poverty reduction has directed public health departments to focus efforts on people "with risk," as the greatest overall population benefit can be obtained from providing targeted support to those groups. Additionally, the continued provincial and federal emphasis on the Social Determinants of Health suggests that when attention is paid to the causes of poverty, some of the poor health behaviours naturally mitigate, such as smoking and substance abuse. In other words, providing better housing, education and community connection opportunities can have a natural impact on obesity and smoking rates, thus improving the population health outcomes that are the focus of this group of services.

The three year outlook for the population health related services suggests that changes in demographics, as well as emerging disease profiles and policy shifts, will have an impact on the capacity and resources to respond. There is some anticipation of additional

expectations being put onto municipalities in relation to the Inspections and Enforcement Service. Oxford County has particular challenges in relation to immunization, and the ability of PHES to creatively work with the community has been seen in its ability to respond to and limit outbreaks. Additionally, the change in focus to the Social Determinants of Health will have an impact on the way the Public Health Advocacy and Promotion and Building Health Partnerships focus efforts on improving population health as the focus moves from changing health behaviours to changing the environmental conditions leading to poor health. The changes in the way Canadian census data is collected and reported will also continue to be a challenge for the population based services in being able to observe and report fluctuations in health outcomes.

For the services directed to individual health interventions, the most significant change is the alteration in provincial policy from universal service delivery to "targeted universality," where "with risk" families are provided more intensive support. The current percentage of families with children that consent to more support is only 52% with a provincial goal of 100%. This change in practice will require both a different philosophy of service and different deployment of resources in the field.

For the Emergency Medical Service, the three year outlook raises concerns about significantly increasing hospital turnaround times and response times, as well as the potential for a provincial mandate of a Community Paramedicine Program that could, if not planned with foresight, add significant cost.

#### **Service Profiles**

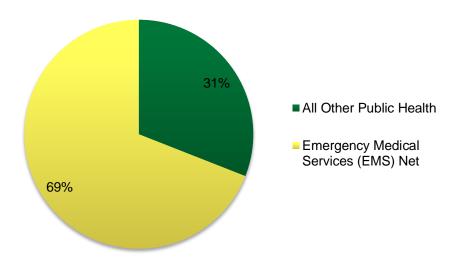
Service	Client	Output	Net \$	M/D	County role	Notes
Building Health Partnerships	Community partner	Partnership	\$988,277	M/D	Direct	Opportunity to improve outcomes through governance and monitoring

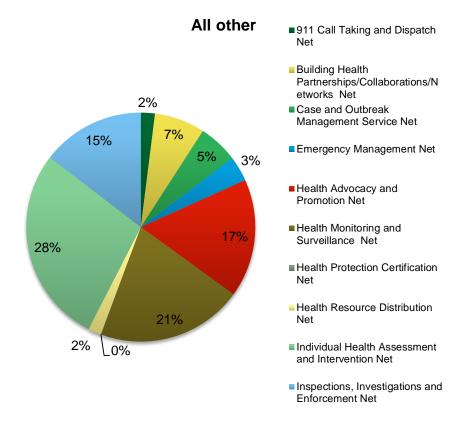
Service	Client	Output	Net \$	M/D	County role	Notes
Case and Outbreak Management	Individual or institution exposed to a disease of public importance	Managed case	\$131,509	M/M	Direct	Potential to improve service with after-hours service
Health Advocacy and Promotions	Target audience	Campaign	\$394,281	M/D	Direct	Opportunity to improve outcomes through governance and monitoring
Health Monitoring and Surveillance	Persons interested in health data	Health Information Report	\$487,182	M/M	Direct	
Health Protection Certification	Person requiring certification	Certificate	\$1,154	M/D	Direct	
Health Resource Distribution	Health care provider	Resource (vaccine, condoms, etc)	\$43,109	M/M	Direct	
Individual Health Assessment and Intervention	Persons eligible for individual care	Care encounter	\$657,452	M/D	Direct	Opportunity to improve outcomes by intentional coordination with Human Services
Inspections, Investigation and Enforcement	Owner of inspected premise	Incidence of non-compliance	\$344,102	M/M	Direct	Opportunity to improve productivity through process review
Emergency Management	County of Oxford	Emergency Response Plan	\$83,937	M/M	Direct	Opportunity to reduce service after all plans developed in 2017

Service	Client	Output	Net \$	M/D	County role	Notes
Emergency Medical Service	Ill or injured person	Care and rehabilitation encounter	\$5,257,635	M/M	Direct	Opportunity to improve productivity by addressing hospital wait times
911 Call Taking	911 caller	Call taken and dispatched	\$48,937	M/M	Contract-ed	Opportunities to review new technology

## Service Financial Allocations

### **Public Health and Emergency Services net**





**Financial Allocations Insights** 

The services which show some risk of growth significantly above CPI<sup>5</sup> are the Health Advocacy and Promotion Service, the Health Monitoring and Surveillance Service and the Individual Health Assessment and Intervention Service. While the total dollar increase between the 2011 actuals and the 2017 forecast is small (only \$530,000 for the three combined over 6 years), the rate of growth is worthy of note.

Also worthy of note is the growth in the expenses for Emergency Management. While the dollars are lower than the cut-off for this analysis of \$100,000, this is a new service. The current delivery model uses contract employees, which is wise given that when all the plans are finally in place, the monitoring activity may not require as many full-time staff.

The largest cost service in this group by a significant margin is the EMS service. Its overall growth in cost from 2011 to the 2017 forecast is less than 3% per year, but that growth represents over \$800,000. This service has recently seen revenue reductions in the elimination of the patient transfer service, however that decision was taken to reduce expenses and improve response times.

<sup>&</sup>lt;sup>5</sup> Consumer Price Index. This was chosen because it roughly reflects the expectation of the public for growth in expenses, including public services.

Yellow highlighting indicates where a service has had both a net growth or decline of greater than 5% per year and an absolute growth or decline of greater than \$100,000.

Mandatory, discretionary or traditional	Service name	2011A	2014B	2017F	Average annual growth Rate	Absolute change
M/M	911 Call Taking and Dispatch Expenses	\$28,285.00	\$46,937.00	\$51,350.00	13.59%	\$23,065.00
M/M	911 Call Taking and Dispatch Revenue	\$0.00	\$0.00	\$0.00		\$0.00
M/M	911 Call Taking and Dispatch Net	\$28,285.00	\$46,937.00	\$51,350.00	13.59%	\$23,065.00
M/D	Building Health Partnerships/Collaborations/Networks Expenses	\$679,889.37	\$843,077.05	\$754,140.88	1.82%	\$74,251.51
M/D	Building Health Partnerships/Collaborations/Networks Revenues	-\$536,082.91	-\$674,667.92	-\$572,982.20	-1.15%	-\$36,899.29
M/D	Building Health Partnerships/Collaborations/NetworksNet	\$143,806.46	\$168,409.13	\$181,158.68	4.33%	\$37,352.22
M/M	Case and Outbreak Management Service Expenses	\$528,054.05	\$615,188.09	\$640,451.55	3.55%	\$112,397.50
M/M	Case and Outbreak Management Service Revenues	-\$416,038.32	-\$483,679.02	-\$498,782.12	-3.31%	-\$82,743.80
M/M	Case and Outbreak Management Service Net	\$112,015.73	\$131,509.07	\$141,669.43	4.41%	\$29,653.70
M/M	Emergency Management Expenses	\$143,780.26	\$214,990.38	\$225,474.56	9.47%	\$81,694.30
M/M	Emergency Management Revenues	-\$77,582.16	-\$131,053.70	-\$136,977.30	-12.76%	-\$59,395.14
M/M	Emergency Management Net	\$66,198.10	\$83,936.68	\$88,497.26	5.61%	\$22,299.16
M/M	Emergency Medical Services (EMS) Expenses	\$9,741,093.07	\$10,438,857.15	\$10,845,684.88	1.89%	\$1,104,591.81
M/M	Emergency Medical Services (EMS) Revenues	-\$4,991,746.00	-\$5,181,222.00	-\$5,268,975.00	-0.93%	-\$277,229.00
M/M	Emergency Medical Services (EMS) Net	\$4,749,347.07	\$5,257,635.15	\$5,576,709.88	2.90%	\$827,362.81
M/D	Health Advocacy and Promotion Expenses	\$1,853,176.98	\$2,036,282.85	\$2,004,260.09	1.36%	\$151,083.11
M/D	Health Advocacy and Promotion Revenues	-\$1,559,565.29	-\$1,642,001.77	-\$1,582,611.32	-0.25%	-\$23,046.03
M/D	Health Advocacy and Promotion Net	\$293,611.69	\$394,281.08	\$421,648.77	7.27%	\$128,037.08

Mandatory, discretionary or traditional	Service name	2011A	2014B	2017F	Average annual growth Rate	Absolute change
M/M	Health Monitoring and Surveillance Expenses	\$1,890,101.46	\$2,100,034.36	\$2,130,358.88	2.12%	\$240,257.42
M/M	Health Monitoring and Surveillance Revenues	-\$1,560,847.01	-\$1,612,852.48	-\$1,613,786.92	-0.57%	-\$52,939.91
M/D	Health Monitoring and Surveillance Net	\$329,254.45	\$487,181.88	\$516,571.96	9.48%	\$187,317.51
M/D	Health Protection Certification Expenses	\$25,120.25	\$19,752.37	\$20,293.34	-3.20%	-\$4,826.91
M/D	Health Protection Certification Revenues	-\$25,189.52	-\$18,597.54	-\$19,062.41	4.05%	\$6,127.11
M/D	Health Protection Certification Net	-\$69.27	\$1,154.83	\$1,230.93	312.83%	\$1,300.20
M/D	Health Resource Distribution Expenses	\$108,355.57	\$122,714.96	\$129,215.75	3.21%	\$20,860.18
M/D	Health Resource Distribution Revenues	-\$85,932.15	-\$79,606.42	-\$82,008.81	0.76%	\$3,923.34
M/D	Health Resource Distribution Net	\$22,423.42	\$43,108.54	\$47,206.94	18.42%	\$24,783.52
M/D	Individual Health Assessment and Intervention Expenses	\$2,393,757.12	\$2,815,276.98	\$2,767,229.52	2.60%	\$373,472.40
M/D	Individual Health Assessment and Intervention Revenues	-\$1,905,441.49	-\$2,157,824.50	-\$2,063,503.25	-1.38%	-\$158,061.76
M/D	Individual Health Assessment and Intervention Net	\$488,315.63	\$657,452.48	\$703,726.27	7.35%	\$215,410.64
M/M	Inspections, Investigations and Enforcement Expenses	\$1,297,643.38	\$1,263,039.68	\$1,321,859.07	0.31%	\$24,215.69
M/M	Inspections, Investigations and Enforcement Revenues	-\$965,674.15	-\$918,937.65	-\$951,142.67	0.25%	\$14,531.48
M/M	Inspections, Investigations and Enforcement Net	\$331,969.23	\$344,102.03	\$370,716.40	1.95%	\$38,747.17

Results Based Accountability™ Performance Indicators

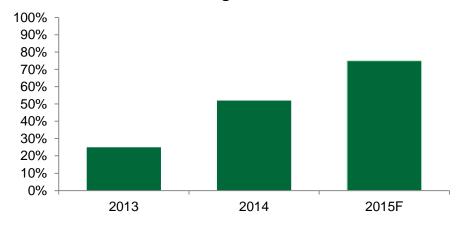
The KPIs for all services can be found in Appendix C.

### **Individual Health Assessment and Intervention KPI Insights**

Individual Health Assessment and Intervention includes several specifically funded sub-services: Healthy Baby Healthy Children; Children in Need of Treatment (dental); Healthy Smiles (dental); Immunization of School Children; Sexual Health and Needle Exchange. The overall goal of this service is to provide specific client interventions that target populations "with risk" to improve their individual health outcomes and the overall population health of the community. The immunization and sexual health services are still provided as universal services, while the other are moving to targeted universality.

Of note, the change in 2012 to target the Healthy Baby, Healthy Children sub-service to families "with risk" has been a challenge for the County. The challenge arises both from obtaining consent from families and providing the more intensive level of service necessary for this client type. The rates of families providing consent to be visited have grown but are not as high as the provincial mandate. Public Health reports that this has been a challenge for the nurses. In addition to having more families consent to be visited, business practices within this service have also hampered productivity. Due to a number of factors, including use of a provincial database for record management, staff who visit families on the road are required to attend at Woodstock headquarters to pick up paper medical files, carry them in secure bags, and return them to Woodstock at the end of the work day. This results in both a substantial loss in productive time taken up by travelling and a data insecurity risk if paper files are lost. Using the staff who work around Tillsonburg as an example, the loss in productive time is one hour per day multiplied by three staff. Extended to the other staff engaged in this work, the loss of productivity is significant.

## Percentage of with-risk families consenting to PH visits



There are three SIOs recommended that specifically respond to this need: Transformation to Full Integration of Services Supporting Families, Children and Singles; Public Health Inspectors and Nurses Scheduling, Process and Decentralization Strategy and After Hours Services.

The integration of the Individual Health Assessment and Intervention Services with Financial Assistance, Shelter and Child Care Subsidy support the philosophies of "no wrong door" and "wraparound services" for vulnerable clients. Using linked caseloads, colocation and case conferencing, the public health nurses and client support workers will be able to address the needs of the client and support each other in enabling more with-risk families to access available services. The intentional cooperation of Public Health services and Financial Assistance services is not unknown in Ontario. It is a recommended strategy flowing from the Ontario Poverty Reduction Strategy and is contemplated in the Ontario Public Health Standards for the Healthy Babies, Healthy Children program. It is also a model used in Haldimand-Norfolk where Public Health and Social Services are combined in a single department. For two years, two public health nurses were embedded in the Financial Assistance service to identify clients who could benefit from intensive supports. While this approach was changed in 2014, Haldimand continues to recognize the need for shared client supports between health and social services. The County of Simcoe is also moving to a stronger recognition of social impacts on health outcomes as it adopts the Social Determinants of Health as a policy driver. Sudbury Public Health Unit has also moved in this direction after identifying that the majority of users of its well-baby clinics were families with high incomes, rather

than families with risk indicators. Rather than add staff to either Human Services or Public Health to address the need for a wider range of supports, the integration of services leverages the existing professional skills among County staff to achieve the same outcome.

After Hours Services are recommended as an additional strategy for supporting vulnerable clients as well as working families. Currently if a child misses a school immunization or if a person requires sexual health services or needle exchange support, they are required to attend during business hours. This obliges working people to take time away from work. A review of the need and the resources to provide after-hours services is warranted.

The Service Improvement Opportunity related to Reimagining the Libraries as Community Hubs (see below) could provide additional support through making a wider range of satellite offices available through library buildings and building the Library Programming Service into the additional supports to vulnerable families.

### **Population Health Services KPI Insights**

This group of services are focussed on improving the overall health outcomes of the community at large, including reducing the burden of diseases related to smoking, substance abuse and obesity, falls and injuries, and food and water borne illnesses and rabies, among others. The services range from promotion and advocacy to training and certification and inspections and enforcement. Overall the number of activities has grown, however a method of tying the activity metrics to the outcome metrics is difficult and has not yet been fully developed. This makes it difficult to know what activities create the greatest impact on helping people become better off. Below are some examples of the population health services metrics.

### Public Health Promotion and Advocacy

- 2% reduction in % of population (19+) exceeding low risk alcohol drinking guidelines between 2011 and 2014
- 7% reduction in fall related emergency visits in older adults (65+) between 2011 and 2014

#### Case and Outbreak Management

- 25% reduction in length of respiratory outbreaks between 2011 and 2014
- 8% reduction in Chlamydia cases per 1000 between 2011 and 2014

#### Health Protection Certification

• 70% increase in number of food handlers certified per year between 2011 and 2014

#### Health Resource Distribution

• 71% increase in number of vaccine doses distributed between 2011 and 2014

### Inspections and Enforcement

- 79% increase in number of fixed premises inspections completed between 2012 and 2014
- 52% increase in the number of complaints, service requests, and referrals for inspection between 2011 and 2014

There is only one Service Improvement Opportunity recommended in this group of services; Public Health Inspectors and Nurses Scheduling, Process and Decentralization Strategy. This SIO is directed at ensuring that the services are being provided in the most productive and effective way and has the potential to identify efficiencies that can be taken as savings or reinvested into the anticipated downloading of more inspections responsibilities.

### **Building Health Partnerships KPI Insights**

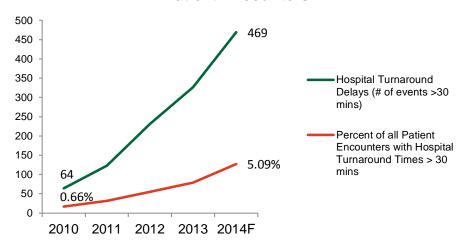
Currently there is no data for the quantity, quality or results of the Building Health Partnerships Service, however the annual rate of increase in the service cost is about 4%, and the gross cost was budgeted in 2014 as \$843,077. Some KPIs are currently being studied by the province to evaluate effective partnerships. These KPIs while useful, are currently focused on the quality of the meetings and engagement rather than the outcomes targeted by the partnerships. Given the substantial commitment of funds and resources, this service should develop outcomes based KPIs and the partnership groups should be held to account for achieving the outcomes.

There is one SIO recommended for this service which is similar to an SIO recommended for the Community Capacity Building Service; Building Health Partnerships Governance and Results Management Policy. As noted above there is opportunity for synergy in the development and monitoring of data for these two services using compatible tools and the same staff.

### **EMS KPI Insights**

EMS is a very strong collector and user of performance data. Some improvement could be gained in identifying "is anyone better off?" measures related to patient outcomes. The issue of greatest concern for EMS is the substantial increase in wait times that can be observed in the tables below. The percentage of all cases that wait longer than 30 minutes at the hospital has risen from 0.66% to 5.09% in four years.

### Hospital Delay Events and Percentage of All Patient Encounters



There are three SIOs recommended for EMS: Review of Response Time Standard and Deployment, Review of Hospital Wait Times and EMS Fleet Review. The third SIO will be conducted in collaboration with the review of the entire Corporate Fleet.

### **Service Improvement Opportunities**

Opportunity	Risks and Implications	Potential Savings / Productivity	Timeframe	Barriers
Adopt Social Determinants of Health	Improved county-wide planning	Nominal	Less than one year	Low
Provide County-wide Staff Training on Social Determinants of Health	Improved county-wide planning	Nominal	Less than one year	Low
Transformation to Full Integration of Services Supporting Families,	Improved client service, combining multiple unions and staff.	\$100 – 500K	More than one year	Medium

Opportunity	Risks and Implications	Potential Savings / Productivity	Timeframe	Barriers
Children and Singles				
Public Health Nurse and Inspectors Scheduling, Process and Decentralization Strategy	Improved planning and productivity, reduced travel time and expense	\$100 – 500K	One year to develop, more than one year to implement	Medium
After Hours Services	Improved client service, potential for staff resistance	Nominal	Less than one year	Low to medium
Building Health Partnerships Governance and Management	Improved accountability for partnership outcomes, potential for partner resistance.	Nominal	Less than one year	Low to medium
Community Paramedicine Planning	Improved planning for potential future download	Net expense	More than one year	Low (for planning)
PHES Records Management	Improved use of digital resources and reduced cost and risk of paper storage	Nominal	Less than one year	Low to medium
Review EMS Response Time Standard and Deployment	Improved productivity and service response	Unknown	More than one year	Medium
EMS Hospital Wait Times Review	Improved productivity with shortened and reduced number of turn around delays, may be hospital resistance to change	Nominal	Less than one year	Medium to high
EMS Fleet Review	Potential for improved shared service with PW	Unknown	Within Wave 2	Low
911 Call Taking and Dispatch Review	Planning for improved or changed technology or single source dispatch	Net expense	More than one year	Low

## Services owned by Oxford County Library

# (Corporate Services)

- Library Collections
- Library Programming
- Library Public Space Access
- Library
   Information
   Technology
   Access
- Library Reference and Information

Oxford County Library (Library) provides five services for the County, all of which are discretionary. The *Ontario Public Libraries Act*, RSO 1990, c. P.44 provides that where a County library system is established, there are requirements for the operation of the library board. However, the Act does contemplate the cessation of a library system and there is nothing that mandates a County create a library system. Libraries are a traditional municipal service and often cited as an important element of quality of life and economic development for communities. All of Oxford's peer municipalities have libraries.

## **Service Profiles and Insights**

Below is a table of the key information captured in the service profiles for this group of services. The complete service profile for a service also contains staff resources, some KPIs, a three year outlook for service pressures and a SWOT Analysis. The complete service profile is available from Information Services.

While libraries are often discussed as single services, it is important to differentiate the different services they provide to different clients. Some services, such as Library Collections, are typically only available to card holders (borrowing), while others like Reference and Information or Programming are available to anyone. Also some services, like Public Space Access, are not about the collection or information but rather the physical space which people or groups may make use of independently. Access to public space for meetings or independent programs is an important municipal service. The other important insight to be gleaned from identifying the different services is that not all branches can or do provide the entire suite of services. Some are too small to provide Programming or Public Space Access and some are served by branch supervisors who, while very skilled, are not professional librarians able to provide the complete Reference and Information Service.

The three year outlook for the Library services suggests that increasing demand for electronic resources both in the library itself and available for use and download from remote locations will grow and change the culture of library use. The traditional notion of a library as a quiet place of individual reading and study is evolving to a learning space for teams and groups, with emphasis on access to electronic tools such as computers with Internet access. The skills of librarians are also evolving to recognize the increased public familiarity with electronic searching. The change in demographics as the number of children declines and seniors increases will also have

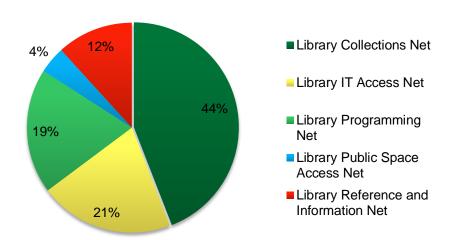
an impact on library collections and programming.

## **Service Profiles**

Service	Client	Output	Net \$	M/D	County role	Notes
Library Collections	Card holder	Item for borrowing (print, electronic)	\$1,306,826	D/D/T	Direct	Some branches under-performing – opportunity to expand services through creating community hubs
Library IT Access	Technology user	Wired or wireless session	\$612,822	D/D/T	Direct	Service is growing overall, but slow in some branches,
Library Programming	Program attendant	Program	\$517,401	D/D/T	Direct	
Library Public Space Access	Tenant / renter	Square foot of space for independent use	\$123,335	D/D/T	Direct	This service is not available at small branches
Library Reference and Information	Information seeker	Question answered	\$348,401	D/D/T	Direct	This service is limited at small branches

# Service Financial Allocations

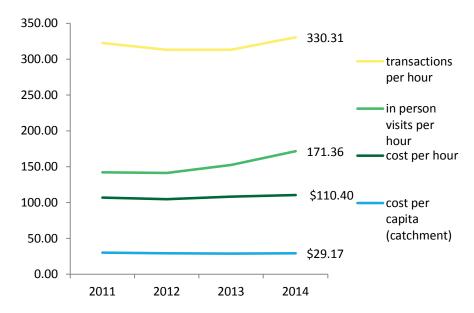
## Library net



## **Financial Allocations Insights**

The largest expense for the Library is the Collections Service. This makes sense as it is the largest driver of all library services, except Public Space Access. The Library services have seen some significant year over year growth, as indicated by the yellow highlighted lines in the table below. However, the addition of the Tillsonburg Library is largely responsible for the additional costs. What is important to analyze is whether the ratio of cost to outcomes has remained stable or improved which the table below confirms. Nevertheless, it is important when considering the ongoing use of the libraries that not all branches are seeing improvements, or they are seeing declining or flat usage with increasing costs. Libraries are largely a net expense to the County with revenues coming from small provincial grants, late and user fees and some private donations. Changing the revenue options for libraries would mean increasing the options for private donations or sponsorships or using the space differently to create opportunities for leases. The SIO for Re-imagining Libraries as Community Hubs includes the option of providing lease space to allied services.

## Traffic, all branches



Branch name	Y/Y % change in visits per hour (2010 – 2014)	Year over year % change in transactions per hour (2010 – 2014)	Y/Y % change in cost per hour open (2010 – 2014)
Brownsville	8%	-1%	4%
Burgessville	-18%	-18%	-3%
Embro	-2%	-12%	-2%
Harrington	o%	-14%	9%
Ingersoll	5%	1%	7%
Innerkip	-3%	4%	7%
Mt Elgin	-9%	o%	3%
Norwich	-11%	-3%	0%
Otterville	3%	-7%	-1%
Plattsville	3%	6%	-13%
Princeton	-18%	-7%	3%
Tavistock	2%	-4%	3%
Thamesford	-1%	-5%	-9%
Tillsonburg	Excluded due to only two years of data		
All Branches*	7%	1%	-1%

<sup>\*</sup>does not include headquarters or central administration

Yellow highlighting indicates where a service has had both a net growth or decline of greater than 5% per year and an absolute growth or decline of greater than \$100,000.

Mandatory, discretionary or traditional	Service name	2011A	2014B	2017F	Average annual growth rate	Absolute change
D/D/T	Library Collections Expenses	\$1,368,583.75	\$1,672,606.76	\$1,726,882.12	4.36%	\$358,298.38
D/D/T	Library Collections Revenues	-\$209,559.07	-\$365,780.89	-\$156,850.00	4.19%	\$52,709.07
D/D/T	Library Collections Net	\$1,159,024.68	\$1,306,825.87	\$1,570,032.12	5.91%	\$411,007.44
D/D/T	Library Information Technology Access Expenses	\$567,963.02	\$661,152.82	\$682,422.69	3.36%	\$114,459.67
D/D/T	Library Information Technology Access Revenues	-\$108,397.56	-\$48,330.53	-\$33,244.00	11.56%	\$75,153.56
D/D/T	Library Information Technology Access Net	\$459,565.46	\$612,822.29	\$649,178.69	6.88%	\$189,613.23
D/D/T	Library Programming Expenses	\$554,262.84	\$721,362.47	\$750,779.34	5.91%	\$196,516.50
D/D/T	Library Programming Revenues	-\$126,625.88	-\$149,961.29	-\$67,037.50	7.84%	\$59,588.38
D/D/T	Library Programming Net	\$427,636.96	\$571,401.18	\$683,741.84	9.98%	\$256,104.88
D/D/T	Library Public Space Access Expenses	\$128,184.89	\$177,833.97	\$184,344.94	7.30%	\$56,160.05
D/D/T	Library Public Space Access Revenues	-\$43,581.68	-\$54,498.76	-\$25,717.50	6.83%	\$17,864.18
D/D/T	Library Public Space Access Net	\$84,603.21	\$123,335.21	\$158,627.44	14.58%	\$74,024.23
D/D/T	Library Reference and Information Expenses	\$284,212.50	\$375,688.98	\$389,586.91	6.18%	\$105,374.41
D/D/T	Library Reference and Information Revenues	-\$18,289.81	-\$27,287.53	-\$11,435.00	6.25%	\$6,854.81
D/D/T	Library Reference and Information Net	\$265,922.69	\$348,401.45	\$378,151.91	7.03%	\$112,229.22

Results Based Accountability Performance Indicators The KPIs for all services can be found in Appendix C.

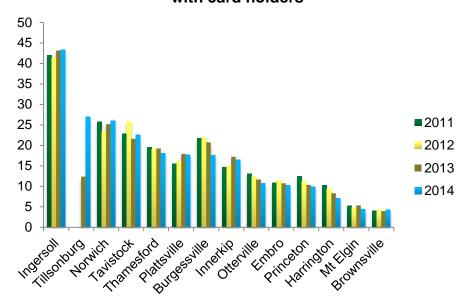
Overall, the data management in the Oxford County Library is more mature than some other services in Wave 1. There is good data on most of the library services with the exception of metrics for Library Public Space Access and Library Reference and Information. As a result the metrics analysis yielded useful information about the system.

## **Library Collections KPI Insights**

The circulation of items in the library has seen a year over year growth of 5%, since 2010, with a large jump in 2013 after the Tillsonburg branch opened. This suggests that the library is still a popular service in the community. The growth is not steady across all branches, as seen above. This is interesting given that the collection size has remained roughly the same through the same time period. Of course, the collection is culled and updated regularly to remain relevant to the community. The cost of maintaining the collection, though stable in size, has also grown by over 5% year over year since 2011, reflecting the growing expense of print and electronic materials.

The number of active cards has grown just under 1% per year with new cards showing a large jump after Tillsonburg opened. Together with the growing circulation, this suggests card holders are becoming more active. It is important to note that the catchment areas of some branches have very low percentages of card holders. This trend suggests there is room to grow participation in library services.

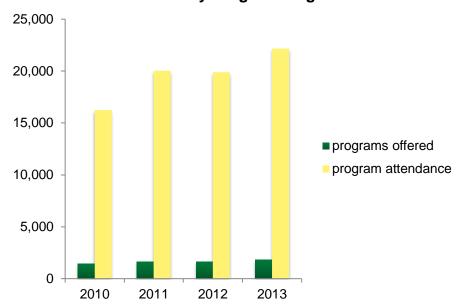
# Percentage of catchment area with card holders



## **Library Programming KPI Insights**

The data provided demonstrates that the number of programs is growing about 9% year over year and the attendance by about 12% year over year. This service is not available to the same degree at all branches, since some do not have sufficient space to provide separate program areas and therefore the options are limited.

## **Library Programming**



#### **Library Public Space Access KPI Insights**

As noted, this service is not about providing general access to space during open hours, but providing space to groups for independent use such as meetings or programming. This service is not available at all branches as there are some with no separate space for independent meetings. There were no KPIs provided for this service.

As noted above in the financial allocations table, the cost of this service has grown substantially by over 14% year over year since 2011, however that reflects the addition of Tillsonburg. The value of the increase over that time is less than \$100,000 and therefore not of significant concern.

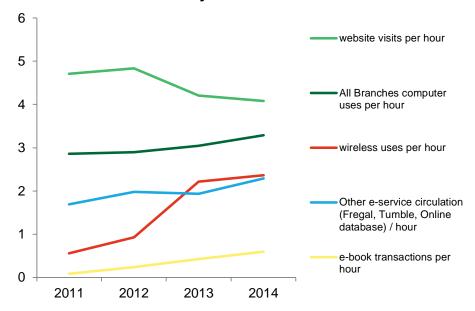
#### **Library Reference and Information KPI insights**

This service provides answers to reference questions from the public whether present in the library or over the phone or internet. Between 13,000 and 14,000 questions were asked of librarians in 2011 and 2012 respectively. The cost of providing this service, as seen above, has been growing faster than 7% year over year with an absolute growth value of over \$100,000.

#### **Library Information Technology Access KPI Insights**

This service is not about providing access to e-books or other electronic materials, but about access to information technology services like computers, Wi-Fi or Internet access, and education on technology. It is an important public service to provide access to information and electronic services to people without private access.

#### **Library IT Access data**



The main service improvement opportunity recommended for all the Library Services is to Re-imagine the Libraries as Community Hubs. This SIO is focused on expanding the role that libraries and library buildings play in the communities where they are housed. Libraries have always been places for community to gather and connect, but with the advent of increased technological access and changing demographics, they are no longer the quiet domain of books but rather they are interactive and vibrant spaces.

It is recommended that the library space become open to uses by other County services, particularly the Financial Assistance, Child Care Subsidy and Shelter Services as well as the Individual Health Assessment and Intervention Service and County-wide Customer Service. The space could also become available to other allied services. In some respects the model would operate like the Livingston Centre in Tillsonburg but would include the library.

The SIO may require some renovations to some branches and changes in the way other services are delivered (decentralized). This model is used in other library services such as Middlesex. There are also library systems who have recognized the needs of vulnerable members of the community by adding specialized social work staff (Edmonton and Brantford). In this case rather than add staff to the Library complement, the SIO suggests leveraging the existing Public Health Nurses and Client Support Workers by co-locating them in the

library branches.

In support of this SIO are some additional opportunities aimed at finding improvements in efficiencies, management and space which would all be necessary steps in the larger SIO.

## **Service Improvement Opportunities**

Opportunity	Risks and implications	Potential savings / productivity	Timeframe	Barriers
Reimagine Libraries as County Multi-Service Hubs	Improved services to clients, improved library services, improved library traffic	\$100 – 500K	More than one year	Medium to high
Library Resource Review	Improved client service, efficiencies in service delivery	Less than \$100K	More than one year	Medium
Library Space Needs Review	Reduced costs and efficiencies, improved client service.	\$100 – 500K	One year to develop, more than one year to implement	Medium
Library Governance Review	Potential efficiencies in staff time usage.	Nominal	Less than one year	Low

## Services owned by Archives (Corporate Services)

- Archives
   Collections and
   Resource
   Management
- Archives Outreach and Programming
- Archives
   Reference and
   Information

Oxford County Archives (Archives) provides three services for the County, all of which are discretionary. Archives services are ones that are traditionally provided by municipalities, and all of Oxford's peers have similar services. Also, the Archives Collections and Resource Management Service is also similar to the Records Management Service, with the exception that archives are designed to preserve original records in perpetuity using specialized techniques.

## **Service Profiles and Insights**

Below is a table of the key information captured in the service profiles for this group of services. The complete service profile for a service also contains staff resources, some KPIs, a three year outlook for service pressures and a SWOT Analysis. The complete service profile is available from Information Services.

Similar to the library, archives are often considered as single services, however the profiling of the work done by the Archives department illuminated three unique services: Archives Collections and Resource Management; Archives Outreach and Programming; and Archives Reference and Information. The Archives Collections and Resource Management service is the traditional work of collecting and preserving documents and records. The client is the County of Oxford. The Archives Outreach and Programming Service provides educational opportunities to members of the public and children in schools, and the Archives Reference and Information Service answers questions and provides support to professional researchers.

The three year outlook for the Archives suggests that the drivers of change are the number of records managed, especially unique collections and changes in both the available technology and technology expectations of users. Some of Oxford's peers provide online databases of existing records for easy search and access.

The Archives does not manage records, outreach or information requests for the other area municipalities. This is in contrast to the peer counties that were reviewed in the STW project (Stratford-Perth, Wellington and Elgin).

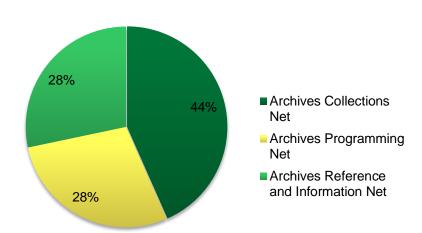
#### **Service Profiles**

Service	Client	Output	Net \$	M/D	County	Notes
					role	

Service	Client	Output	Net \$	M/D	County role	Notes
Archives Collections and Management	County of Oxford	Record managed	\$121,644	D/D/T	Direct	Service has seen increased cost without increased productivity
Archives Outreach and Programming	Program attendee	Programmed activity	\$79,319	D/D/T	Direct	Service has seen a stagnant number of presentations with increased cost.
Archives Reference and Information	Researcher	Information request	\$79,319	D/D/T	Direct	Service has seen increased cost without increased productivity

# Service Financial Allocations

### **Archives net**

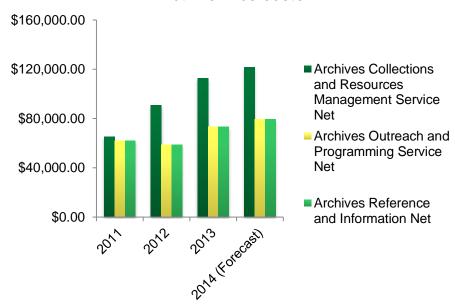


## **Financial Allocations Insights**

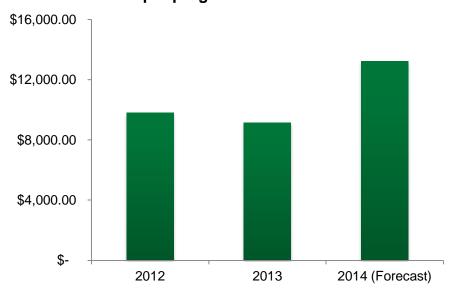
Relative to many other services provided by the County of Oxford, the three Archives services are not very expensive. Their total net cost is \$280,282, though due to some recent resource changes, they have shown a 30% increase in cost without a corresponding increase in productivity. The drivers of cost for the Archives services are personnel and specialized storage space to safely preserve the official records of the County.

The Archives services are largely a net expense for the County: they do not have revenue except from some specialized document preservation. It is possible to create a revenue model for allowing professional researchers to have access to the Archives or charging for programming as is done in some peer municipalities.

## **Net Archives costs**



# Net Outreach and Programming cost per program delivered



Yellow highlighting indicates where a service has had both a net growth or decline of greater than 5% per year and an absolute growth or decline of greater than \$100,000.

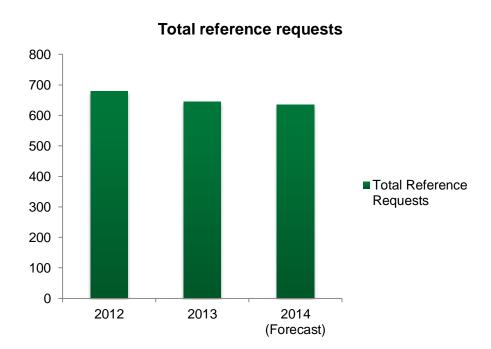
Mandatory, discretionary or traditional	Service name	2011A	2014B	2017F	Average annual growth rate	Absolute change
D/D/T	Archives Collections and Resources Management Service Expenses	\$97,653.16	\$124,644.08	\$131,842.48	5.84%	\$34,189.32
D/D/T	Archives Collections and Resources Management Service Revenues	-\$32,156.00	-\$3,000.00	\$0.00	16.67%	\$32,156.00
D/D/T	Archives Collections and Resources Management Service Net	\$65,497.16	\$121,644.08	\$131,842.48	16.88%	\$66,345.32
D/D/T	Archives Outreach and Programming Service Expenses	\$62,142.92	\$79,318.96	\$83,899.76	5.84%	\$21,756.84
D/D/T	Archives Outreach and Programming Service Revenues	\$0.00	\$0.00	\$0.00	FALSE	\$0.00
D/D/T	Archives Outreach and Programming Service Net	\$62,142.92	\$79,318.96	\$83,899.76	5.84%	\$21,756.84
D/D/T	Archives Reference and Information Expenses	\$62,142.92	\$79,318.96	\$83,899.76	5.84%	\$21,756.84
D/D/T	Archives Reference and Information Revenues	\$0.00	\$0.00	\$0.00		\$0.00
D/D/T	Archives Reference and Information Net	\$62,142.92	\$79,318.96	\$83,899.76	5.84%	\$21,756.84

Results Based Accountability™ Performance Indicators

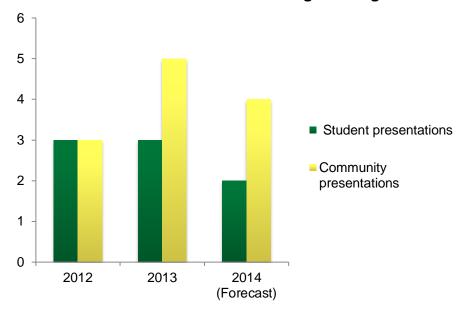
The KPIs for all services can be found in Appendix C.

## **Archives Collections and Resources KPI Insights**

There was relatively little KPI information provided for the Archives services except for what was in the 2014 Budget and Business Plans. This made it somewhat difficult to do any outcomes analysis. However, using that information as a measure of quantity, some insights were possible. The total of reference requests is falling slightly as is the number of student presentations. Compared to some of the peer municipalities, Oxford's number of research requests seems low (Elgin – 2000 per year; Stratford-Perth – 4000 per year), however these are larger archives, which may account for some of the difference.



## **Archives Outreach and Programming**



Service Improvement Opportunities

There are four proposed service improvement opportunities which range from expanding the Archives services to include all area municipalities to merging the Archives Collections and Resources service with the Records Management service. The SIOs are focused on trying to expand productivity and potential revenue sources or lower costs by reducing services. The Library Programming Service could address the loss of the Archives Outreach and Programming Service through expanding its Local History Programming.

All the SIOs are listed below.

Opportunity	Risks and implications	Potential savings / productivity	Timeframe	Barriers
Archives and Records Management Process and Policy	Reduced duplication and improved management of records collected	Nominal	Less than one year	Low (in process)

Archives Outreach and Programming Service Volunteer Service Delivery or Merger with Public Library History Programming	Reduction in costs, reduced duplication	>\$100k	Less than one year	Medium
Expand Archives to all Area Municipalities	Increased costs and responsibilities.	Unknown	More than one year	Medium
Merge Archives and Records Management	Reduction in cost, reduction in service levels (elimination of service), centralized management of all records.	\$100k - \$500k	More than one year	Medium

## Appendix A: Service Inventory

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Community	Child Care Subsidy	An external service that provides funding to Child Care service providers in support of affordable child care in Oxford County	Subsidy payment	Child care provider	To ensure a range of affordable child care options for parents in Oxford County.
Community	Community Capacity Subsidy	An external service that provides subsidies to support human services Community Partners in Oxford County.	Dollar of community capacity subsidy	Community partner	To support Oxford County support residents by increasing the availability and reducing the duplication of services to individual and families in need.
Community	Financial Assistance	An external service that provides financial assistance to eligible residents of Oxford County	Payment (\$ of financial assistance)	Eligible resident	To marginally improve the quality of life of eligible Oxford Residents by providing financial assistance.
Community	Library Public Space Access	An external service providing welcoming and accessible meeting places.	Library room for public use	Tenant	To provide low or no-cost public space for independent use by the public to hold meetings, programs, classes or other community events.
Community	Library Technology Access	An external service providing public access to technology and the internet.	Wired or wireless session	Technology user	Equality of access to online information and resources through high quality workstations and new technologies.
Community	Shelter (Direct Delivered)	An external service that provides units of shelter to eligible residents of Oxford County	Housing unit	Tenant	To improve quality of life by reducing the incidence of homelessness and ensuring housing affordability for residents of Oxford County.

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Community	Shelter (Subsidy)	An external service that provides subsidies to community partners delivering shelter to residents of Oxford County	Subsidy payment	Housing provider	To improve quality of life by reducing the incidence of homelessness and ensuring housing affordability for residents of Oxford County.
Community	Strategic Planning and Policy	An internal service responsible for researching, developing, reviewing and maintaining local land use planning documents (OP and Zoning), undertaking special planning related projects and providing recommendations and advice to the County and eight Area Municipalities land use planning related matters of a policy or strategic nature and/or with a high level of complexity or potential corporate impact.	Plan	Local Government	Ensure County and Area Municipal land use policies (OP), documents (Zoning, Site Plan guidelines) decisions, processes and initiatives protect the environment, support long term sustainability, support County and Area Municipality goals and objectives and are compliant with the law.
Community	Tourism Industry Support	An external service that develops and coordinates strategies and marketing to support the growth of the tourism industry in Oxford County.	Partnership / agreement	Tourism operator (government, for profit, not-for-profit)	Promoting Tourism as a source of economic growth potential for Oxford County. Promoting local tourism offerings.
Community	Tourism Visitor Support	An external service that provides information to tourists.	Number of visitor interactions	Visitors	Promotion of Oxford County as a tourist destination, improved communication with visitors and potential visitors, improved quality of life for residents through awareness of local activities and events.

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Drinking Water Supply	Drinking Water Supply	An external service that supplies drinking water from source to tap to water customers.	Megalitres of drinking water delivered	Water customer	To directly impact the quality of life of customers by reducing the potential for water-borne disease, allowing for economic development and fire protection, and providing opportunities for recreational activities.
Environmental	Curbside Waste Collection	An external service that provides curbside garbage and recycling collection to residents living in the County of Oxford (includes residential, industrial, commercial, and institutional properties) who meet the curbside collection requirements.	Tonne of waste and recycling material collected	Generator of waste material (garbage and Blue Box materials)	The provision of curbside garbage and recycling collection in a manner that is efficient and cost effective, responsive to customer needs, protective of the natural environment, and considerate of public safety.
Environmental	Waste Diversion and Disposal	An external service that diverts and disposes of waste for Oxford County.	Tonne of waste processed (disposed plus diverted)	Landfill customer (garbage hauler, resident)	The provision of waste management in a manner that protects the natural environment, public health, and water sources and provides beneficial reuse of resources.
Environmental	Wastewater Treatment	An external service that collects and treats a cubic metre of wastewater from a wastewater customer.	Megalitre of wastewater treated	Wastewater customer	Ensure protection of the environment and public health of residents and visitors to Oxford County and partners in the watershed.
Environmental	Woodlands Conservation	An external service which protects County woodlands through by-law enforcement.	(TBD)	Owner or operator of inspected premises	The management of the lands and forests in Oxford County manner to allow for the protection of the natural environment, public health, water sources, and natural resources of the County.

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Information	Archives Outreach and Programming	An external service that provides education opportunities to interested persons about the archives of the County of Oxford	Programmed activity	Program attendee	The provision of information to interested program attendees about available historical information
Information	Archives Reference and Information	An external service that provides access to the inactive historical records of the County of Oxford.	Information request	Researcher (Institutional or individual)	To provide access to researchers including institutions to the inactive historical records of the county.
Information	Library Collections	An external service offering loans of print, audiovisual and electronic materials to the public	Library material accessed	Library card holder	To provide access to a collection of materials responsive to community needs for entertainment, education, and informational needs of all ages.
Information	Library Programming	An external service offering programming and events that respond to the literacy needs of the community.	Library program	Program participant	To provide programming that animates the literacy opportunities provided by the public library.
Information	Library Reference and Information	An external service offering answers to reference questions in person or via other channels (email, web, phone)	Reference transaction	Reference information seeker	To ensure equality of access to high quality and trustworthy information.
Public Health & Safety	911 Call Taking and Dispatch	An external service that provides 911 answering services to people reporting emergencies and directs calls to appropriate emergency service dispatch centres according to the callers request.	Call taken and dispatched	911 caller	Provides a single universal number for citizens to access help regardless of the nature of the emergency improving the response time for assistance.

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Public Health & Safety	Building Health Partnerships/Collaborat ions/Networks	An external service that initiates the bringing together of community health agencies/services/residents who may not have worked together before to address new and emerging issues through the provision of the expertise and operational support required to develop and sustain Partnerships/Collaborations/Networks.	Number of partnerships/networks	Community partner	Bringing people and services together to promote a more integrated /connected service delivery across Oxford.
Public Health & Safety	Case and Outbreak Management	An external service that responds to cases and outbreaks of infectious disease of public health importance in Oxford County	Case managed	Individual or institution exposed to an infectious disease of public health importance	To prevent or reduce the burden of infectious diseases of public health importance
Public Health & Safety	Emergency Medical Service (EMS)	An external service that provides emergency care to stabilize a patient's condition, initiates rapid transport to hospitals, and facilitates both emergency and nonemergency transfers between medical facilities.	Care and rehabilitation encounter	Ill or injured person	To provide reliable pre-hospital emergency medical care and transportation of the medically ill and injured.
Public Health & Safety	Health Advocacy and Promotion	An external offering comprehensive health promotion approaches to improve the health behaviours and outcomes of people in Oxford County.	Advocacy or promotional encounter	Eligible resident	To promote healthy people, healthy places in Oxford County.

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Public Health & Safety	Health Protection Certification	An external service offering formal lessons on safe food handling practices and principles, and education and training of owners/operators of small drinking water systems and recreational water facilities, including public pools and spas.	Certificate or license issued for training	Persons or agencies requiring public health training to work or operate equipment	To prevent or reduce the burden of food-borne illness, drinking water illness and recreational water illness.
Public Health & Safety	Health Resource Distribution	An external service offering publicly funded vaccines and antibiotics for treatment of sexually transmitted infections to health service providers.	Health supply (vaccine, anti-biotic or condom)	Health care provider	Reduce or eliminate the burden of sexually transmitted, blood-borne infections and vaccine preventable disease.
Public Health & Safety	Individual Health Assessment and Intervention	An external service providing health assessment, care, treatment and referrals for individuals and families.	Care encounter	Client in need of public health intervention	To prevent or reduce or eliminate the burden of illness
Public Health & Safety	Inspections, Investigations and Enforcement	An external service providing investigation, inspection and enforcement for compliance under the Health Protection and Promotion Act and other prescribed legislation	Incident of non- compliance	Owner or operator of inspected premises	To prevent or reduce the burden of food-borne illness, water-borne illness related to drinking water, water-borne illness and injury related to recreational water use, illness related to tobacco use, vaccine preventable diseases and infectious diseases of public health importance
Public Health & Safety	Long Term Care	An external service that provides resident centred care bed for an eligible Long Term Care Resident.	Long term care bed	Long term care resident	To provide community-focused, consistently high quality of long term care for residents of Oxford County and set the benchmark for other long term care in the County.

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Public Health & Safety	Roads	An External Service that provides a Km of Roadway to a Road User	Centre-line kilometre of roadway	Road user	People are able to move safely and efficiently throughout the County.
Supporting	Accounting	An Internal service that provides accounts receivable, accounts payable and payroll services for the County of Oxford.	Transaction processed	County of Oxford	To provide accurately and timely invoicing, collection and payment to those working with or employed by the County of Oxford.
Supporting	Administrative Support	An internal service which provides administrative support to all County departments and services.	Service encounter	County of Oxford	To provide essential support to all County departments; to be the face of the County to the public (telephone, walk-in, email, etc.); to facilitate excellent service delivery both internally and externally.
Supporting	Archives Collections and Resource Management	An internal service that acquires and conserves the inactive historical records of the County of Oxford, its agencies, boards and commissions.	Record managed	County of Oxford	The preservation of the vital and valuable reords of the County of Oxford.
Supporting	Business Applications	An internal service that provides business applications for the County of Oxford and Area Municipalities	Business application	Local Government	To ensure an efficient, cost effective and coordinated suite of business applications that support service delivery by the County of Oxford and area municipalities to their clients.
Supporting	Communications	An internal service that provides professional consultation and guidelines to promote and protect corporate identity and reputation	Communications advisory or promotional encounter	County of Oxford	To promote and protect brand recognition and reputation to instill public confidence and support a positive organizational culture.

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Supporting	Compensation and Benefits	An internal service that provides compensation and benefits to County of Oxford employees	Total compensation package	County of Oxford Employee	To contribute expertise that supports our partners' work in advancing the collective interests of our community.
Supporting	Corporate Leadership	An internal service which oversees the implementation of Council decisions and provides direction to the organization and employees of the organization	Gross annual expenditures	County of Oxford	The County of Oxford being viewed as an effective, efficient and well managed organization who delivers valued services to a public confident that they receive value for money.
Supporting	Council Support	An internal service that supports County Council's lawful decision making for the County of Oxford.	Lawful decision of Council / Board of Health	County of Oxford	County of Oxford and its officers are protected from legal consequences by acting lawfully. Public transparency and confidence in democratic government in the County of Oxford.
Supporting	County of Oxford Integrated Network (COIN)	An internal service that provides connectivity to all municipalities of Oxford County.	Number of connected locations	Local government and community partners	To provide connectivity to County of Oxford departments and staff, and to Area Municipalities and community partners.
Supporting	Development Application	An internal service providing professional recommendations and advice to the County and eight Area Municipalities regarding development applications and other day to day land use planning related matters.	Development application processed	Local Government (County of Oxford and Area Municipalities)	Ensure County and Area Municipal land use policies (OP), documents (Zoning, Site Plan guidelines) decisions, processes and initiatives protect the environment, support long term sustainability, support County and Area Municipality goals and objectives and are compliant with the law.

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Supporting	Emergency Management	A service that develops and coordinates all appropriate event response activities, with clarity of roles and accountability, across all departments and relevant organizations during an emergency and ensures the continuity of essential municipal services.	Emergency response plan	County of Oxford	To detail a plan of action for the efficient deployment and coordination of the County of Oxford services, resources, agencies and personnel to provide the earliest possible response
Supporting	Engineering Design and Construction	An internal service which provides engineering design and construction project services to the County of Oxford and Area Municipalities, as well as to some boundary municipalities.	Capital project	Project sponsor	To provide the local governments with sustainable capital infrastructure projects
Supporting	Fiscal Management	An internal service that provides financial reporting for the County of Oxford.	Financial report	County of Oxford	To facilitate good financial stewardship of County financial assets and liabilities on behalf of Oxford County taxpayers.
Supporting	Fleet and Equipment	An Internal service that supplies vehicles and equipment to the County of Oxford to support service delivery.	Vehicle or piece of equipment	County of Oxford	To efficiently provide safe and environmentally appropriate vehicles and equipment to the County of Oxford.
Supporting	IT Infrastructure	An internal service that provides and maintains technology and infrastructure management for the County of Oxford and local Area Municipalities.	Managed device	Local government	To provide technical service to County of Oxford departments and staff, and to Area municipality departments and staff.
Supporting	Labour Relations	An internal service that manages labour relations on behalf of the County of Oxford	Collective agreement	County of Oxford	To ensure that the County of Oxford is able to deliver excellent services to the public through management of Union relationships.

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Supporting	Occupational Health and Safety	An Internal service that provides safe workplaces for employees	Safe work site	County of Oxford	Ensure that the County of Oxford provides a safe environment to reduce the risk of harm and loss to employees and other occupants of County workplaces.
Supporting	Project Management	An internal service that provides professional project management services for projects of corporate importance.	Project managed	County of Oxford	To ensure large and important corporate projects are managed in a consistent and professional manner
Supporting	Property Management	An Internal Service that manages a Square Metre of Property for the County of Oxford.	Square metre of property managed	County of Oxford (and Province of Ontario)	To provide Well maintained buildings and property appropriate to the services delivered.
Supporting	Provincial Offences Adminstration	The Provincial Offences is a procedural law for administering and prosecuting provincial offences including those committed under the Highway Traffic Act, the Compulsory Automobile Insurance Act, the Trespass to Property Act, the Liquor Licence Act, and other provincial legislation, municipal bylaws and minor federal offences. The POA governs all aspects of the legal prosecution process, from serving an offence notice to an accused person to conducting trials including sentencing and appeals.	Charges received	Ministry of the Attorney General	To facilitate the administration of justice for the protection of public safety.

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Supporting	Public Works Administration	An internal service to provide administrative support to all divisions of Public Works and; Provides external customer service to the general public	Service encounter	County of Oxford	To provide essential administration and support services to all Public Works divisions in order to maintain satisfied and informed customers (both external and internal).
Supporting	Records Management	An internal service that provides for the safekeeping of the County's official records, both paper and electronic, and facilitates compliance with applicable access and privacy laws.	Record managed	County of Oxford	To retain and preserve the County's official records in a secure and accessible manner. To facilitate compliance with the privacy provisions of the Municipal Freedom of Information and Protection of Privacy Act, 2001 ("MFIPPA"), the Personal Health Information Protection Act, 2004 ("PHIPA") and all other applicable privacy legislation.
Supporting	Recruitment and Retention	An internal service that provides the County of Oxford with qualified employees through the life cycle of their employment.	Qualified employee	County of Oxford	To ensure that the County of Oxford is able to deliver excellent services to the public through qualified employees.
Supporting	Risk Management	An internal service which exists to protect the municipality and its officers, employees, volunteers and Councillors against risks that may involve pecuniary loss or liability, property damage or injury.	Claim resolved	County of Oxford	To protect the County's assets (property and people) from pecuniary loss, liability, damage or injury. To provide an efficient, cost effective and coordinated risk management and insurance program. To instill risk awareness into the corporate culture.

Service program grouping	Service name	Service description	Output	Direct client	Value proposition
Supporting	Staff Development	An internal service that manages learning and development opportunities on behalf of the County of Oxford	Development session	Learning/development recipient	To ensure that the County of Oxford is able to deliver excellent services to the public through qualified employees.
Supporting	Treasury	An internal service that provides cash flow, investment, and debt management for the County of Oxford.	Account managed	County of Oxford	To facilitate good financial stewardship of County and municipal financial assets and liabilities on behalf of Oxford County taxpayers.

## Appendix B: Service Financial Allocations

Mandatory, discretionary or traditional	Service name	2011A	2014B	2017F	Average annual growth Rate	Absolute change
М/М	Child Care Subsidy Expenses	\$7,319,694.70	\$6,514,599.74	\$6,587,695.70	-1.67%	-\$731,999.00
М/М	Child Care Subsidy Revenues	-\$6,012,141.00	-\$5,163,069.00	-\$5,200,709.00	2.25%	\$811,432.00
M/M	Child Care Subsidy Net	\$1,307,553.70	\$1,351,530.74	\$1,386,986.70	1.01%	\$79,433.00
M/D	Community Capacity Subsidy Expenses	\$440,288.40	\$525,345.28	\$555,198.40	4.35%	\$114,910.00
M/D	Community Capacity Subsidy Revenues	-\$502,859.00	\$0.00	\$0.00	16.67%	\$502,859.00
M/D	Community Capacity Subsidy Net	-\$62,570.60	\$525,345.28	\$555,198.40	164.55%	\$617,769.00
M/M	Financial Assistance Expenses	\$16,406,109.95	\$17,061,371.09	\$19,395,493.99	3.04%	\$2,989,384.04
М/М	Financial Assistance Revenues	-\$13,692,160.00	-\$16,073,103.80	-\$19,992,467.00	-7.67%	-\$6,300,307.00
М/М	Financial Assistance Net	\$2,713,949.95	\$988,267.29	-\$596,973.01	-20.33%	-\$3,310,922.96
M/D	Shelter (Direct Delivered) Expenses	\$8,487,667.20	\$5,074,307.84	\$5,581,581.20	-5.71%	\$586,331.88
M/D	Shelter (Direct Delivered) Revenues	\$0.00	-\$2,706,100.00	-\$2,863,066.00	FALSE	-\$2,863,066.00
M/D	Shelter (Direct Delivered) Net	\$8,487,667.20	\$2,368,207.84	\$2,718,515.20	-11.33%	-\$5,769,152.00
M/D	Shelter (Subsidy) Expenses	\$1,969,211.15	\$6,146,682.73	\$3,995,144.15	17.15%	\$2,025,933.00
M/D	Shelter (Subsidy) Revenues	-\$5,392,103.00	-\$3,400,456.20	-\$1,466,782.00	12.13%	\$3,925,321.00
M/D	Shelter (Subsidy) Net	-\$3,422,891.85	\$2,746,226.53	\$2,528,362.15	28.98%	\$5,951,254.00
М/М	911 Call Taking and Dispatch Expenses	\$28,285.00	\$46,937.00	\$51,350.00	13.59%	\$23,065.00
M/M	g11 Call Taking and Dispatch Revenue	\$0.00	\$0.00	\$0.00	FALSE	\$0.00
М/М	911 Call Taking and Dispatch Net	\$28,285.00	\$46,937.00	\$51,350.00	13.59%	\$23,065.00
M/D	Building Health Partnerships/Collaborations/Networks Expenses	\$679,889.37	\$843,077.05	\$754,140.88	1.82%	\$74,251.51
M/D	Building Health Partnerships/Collaborations/Networks Revenues	-\$536,082.91	-\$674,667.92	-\$572,982.20	-1.15%	-\$36,899.29
M/D	Building Health Partnerships/Collaborations/Networks Net	\$143,806.46	\$168,409.13	\$181,158.68	4-33%	\$37,352.22
М/М	Case and Outbreak Management Service Expenses	\$528,054.05	\$615,188.09	\$640,451.55	3.55%	\$112,397.50

M/M         Case and Outbreak Management Service Revenues         -\$416,038.32         -\$483,679.02         -\$498,782.12         -3.31%           M/M         Case and Outbreak Management Service Net         \$112,015.73         \$131,509.07         \$141,669.43         4.41%           M/M         Emergency Management Expenses         \$143,780.26         \$214,990.38         \$225,474.56         9.47%           M/M         Emergency Management Revenues         -\$77,582.16         -\$131,053.70         -\$136,977.30         -12.76%           M/M         Emergency Management Net         \$66,198.10         \$83,936.68         \$88,497.26         5.61%           M/M         Emergency Medical Services (EMS) Expenses         \$9,741,093.07         \$10,438,857.15         \$10,845,684.88         1.89%           M/M         Emergency Medical Services (EMS) Revenues         -\$4,991,746.00         -\$5,181,222.00         -\$5,268,975.00         -0.93%           M/M         Emergency Medical Services (EMS) Net         \$4,749,347.07         \$5,257,635.15         \$5,576,709.88         2.90%           M/D         Health Advocacy and Promotion Expenses         \$1,853,176.98         \$2,036,282.85         \$2,004,260.09         1.36%           M/D         Health Advocacy and Promotion Revenues         -\$1,559,565.29         -\$1,642,001.77         -\$1,582,611.	-\$82,743.80 \$29,653.70 \$81,694.30 -\$59,395.14 \$22,299.16
M/M         Emergency Management Expenses         \$143,780.26         \$214,990.38         \$225,474.56         9.47%           M/M         Emergency Management Revenues         -\$77,582.16         -\$131,053.70         -\$136,977.30         -12.76%           M/M         Emergency Management Net         \$66,198.10         \$83,936.68         \$88,497.26         5.61%           M/M         Emergency Medical Services (EMS) Expenses         \$9,741,093.07         \$10,438,857.15         \$10,845,684.88         1.89%           M/M         Emergency Medical Services (EMS) Revenues         -\$4,991,746.00         -\$5,181,222.00         -\$5,268,975.00         -0.93%           M/M         Emergency Medical Services (EMS) Net         \$4,749,347.07         \$5,257,635.15         \$5,576,709.88         2.90%           M/D         Health Advocacy and Promotion Expenses         \$1,853,176.98         \$2,036,282.85         \$2,004,260.09         1.36%	\$81,694.30 -\$59,395.14
M/M         Emergency Management Revenues         -\$77,582.16         -\$131,053.70         -\$136,977.30         -12.76%           M/M         Emergency Management Net         \$66,198.10         \$83,936.68         \$88,497.26         5.61%           M/M         Emergency Medical Services (EMS) Expenses         \$9,741,093.07         \$10,438,857.15         \$10,845,684.88         1.89%           M/M         Emergency Medical Services (EMS) Revenues         -\$4,991,746.00         -\$5,181,222.00         -\$5,268,975.00         -0.93%           M/M         Emergency Medical Services (EMS) Net         \$4,749,347.07         \$5,257,635.15         \$5,576,709.88         2.90%           M/D         Health Advocacy and Promotion Expenses         \$1,853,176.98         \$2,036,282.85         \$2,004,260.09         1.36%	-\$59,395.14
M/M         Emergency Management Net         \$66,198.10         \$83,936.68         \$88,497.26         5.61%           M/M         Emergency Medical Services (EMS) Expenses         \$9,741,093.07         \$10,438,857.15         \$10,845,684.88         1.89%           M/M         Emergency Medical Services (EMS) Revenues         -\$4,991,746.00         -\$5,181,222.00         -\$5,268,975.00         -0.93%           M/M         Emergency Medical Services (EMS) Net         \$4,749,347.07         \$5,257,635.15         \$5,576,709.88         2.90%           M/D         Health Advocacy and Promotion Expenses         \$1,853,176.98         \$2,036,282.85         \$2,004,260.09         1.36%	
M/M         Emergency Medical Services (EMS) Expenses         \$9,741,093.07         \$10,438,857.15         \$10,845,684.88         1.89%           M/M         Emergency Medical Services (EMS) Revenues         -\$4,991,746.00         -\$5,181,222.00         -\$5,268,975.00         -0.93%           M/M         Emergency Medical Services (EMS) Net         \$4,749,347.07         \$5,257,635.15         \$5,576,709.88         2.90%           M/D         Health Advocacy and Promotion Expenses         \$1,853,176.98         \$2,036,282.85         \$2,004,260.09         1.36%	\$22,299.16
M/M         Emergency Medical Services (EMS) Revenues         -\$4,991,746.00         -\$5,181,222.00         -\$5,268,975.00         -0.93%           M/M         Emergency Medical Services (EMS) Net         \$4,749,347.07         \$5,257,635.15         \$5,576,709.88         2.90%           M/D         Health Advocacy and Promotion Expenses         \$1,853,176.98         \$2,036,282.85         \$2,004,260.09         1.36%	
M/M         Emergency Medical Services (EMS) Net         \$4,749,347.07         \$5,257,635.15         \$5,576,709.88         2.90%           M/D         Health Advocacy and Promotion Expenses         \$1,853,176.98         \$2,036,282.85         \$2,004,260.09         1.36%	\$1,104,591.81
M/D       Health Advocacy and Promotion Expenses       \$1,853,176.98       \$2,036,282.85       \$2,004,260.09       1.36%	-\$277,229.00
	\$827,362.81
M/D Health Advocacy and Promotion Revenues -\$1,559,565.29 -\$1,642,001.77 -\$1,582,611.32 -0.25%	\$151,083.11
	-\$23,046.03
M/D Health Advocacy and Promotion Net \$293,611.69 \$394,281.08 \$421,648.77 7.27%	\$128,037.08
M/M Health Monitoring and Surveillance Expenses \$1,890,101.46 \$2,100,034.36 \$2,130,358.88 2.12%	\$240,257.42
M/M Health Monitoring and Surveillance Revenues -\$1,560,847.01 -\$1,612,852.48 -\$1,613,786.92 -0.57%	-\$52,939.91
M/D Health Monitoring and Surveillance Net \$329,254.45 \$487,181.88 \$516,571.96 9.48%	\$187,317.51
M/D Health Protection Certification Expenses \$25,120.25 \$19,752.37 \$20,293.34 -3.20%	-\$4,826.91
M/D Health Protection Certification Revenues -\$25,189.52 -\$18,597.54 -\$19,062.41 4.05%	\$6,127.11
M/D Health Protection Certification Net -\$69.27 \$1,154.83 \$1,230.93 312.83%	\$1,300.20
M/D Health Resource Distribution Expenses \$108,355.57 \$122,714.96 \$129,215.75 3.21%	\$20,860.18
M/D Health Resource Distribution Revenues -\$85,932.15 -\$79,606.42 -\$82,008.81 0.76%	\$3,923.34
M/D Health Resource Distribution Net \$22,423.42 \$43,108.54 \$47,206.94 18.42%	\$24,783.52
M/D Individual Health Assessment and Intervention Expenses \$2,393,757.12 \$2,815,276.98 \$2,767,229.52 2.60%	\$373,472.40
M/D Individual Health Assessment and Intervention Revenues -\$1,905,441.49 -\$2,157,824.50 -\$2,063,503.25 -1.38%	-\$158,061.76
M/D Individual Health Assessment and Intervention Net \$488,315.63 \$657,452.48 \$703,726.27 7.35%	
M/M Inspections, Investigations and Enforcement Expenses \$1,297,643.38 \$1,263,039.68 \$1,321,859.07 0.31%	\$215,410.64

Mandatory, discretionary or traditional	Service name	2011A	2014B	2017F	Average annual growth Rate	Absolute change
M/M	Inspections, Investigations and Enforcement Revenues	-\$965,674.15	-\$918,937.65	-\$951,142.67	0.25%	\$14,531.48
M/M	Inspections, Investigations and Enforcement Net	\$331,969.23	\$344,102.03	\$370,716.40	1.95%	\$38,747.17
D/D/T	Library Collections Expenses	\$1,368,583.75	\$1,672,606.76	\$1,726,882.12	4.36%	\$358,298.38
D/D/T	Library Collections Revenues	-\$209,559.07	-\$365,780.89	-\$156,850.00	4.19%	\$52,709.07
D/D/T	Library Collections Net	\$1,159,024.68	\$1,306,825.87	\$1,570,032.12	5.91%	\$411,007.44
D/D/T	Library Information Technology Access Expenses	\$567,963.02	\$661,152.82	\$682,422.69	3.36%	\$114,459.67
D/D/T	Library Information Technology Access Revenues	-\$108,397.56	-\$48,330.53	-\$33,244.00	11.56%	\$75,153.56
D/D/T	Library Information Technology Access Net	\$459,565.46	\$612,822.29	\$649,178.69	6.88%	\$189,613.23
D/D/T	Library Programming Expenses	\$554,262.84	\$721,362.47	\$750,779.34	5.91%	\$196,516.50
D/D/T	Library Programming Revenues	-\$126,625.88	-\$149,961.29	-\$67,037.50	7.84%	\$59,588.38
D/D/T	Library Programming Net	\$427,636.96	\$571,401.18	\$683,741.84	9.98%	\$256 <b>,</b> 104.88
D/D/T	Library Public Space Access Expenses	\$128,184.89	\$177,833.97	\$184,344.94	7.30%	\$56,160.05
D/D/T	Library Public Space Access Revenues	-\$43,581.68	-\$54,498.76	-\$25,717.50	6.83%	\$17,864.18
D/D/T	Library Public Space Access Net	\$84,603.21	\$123,335.21	\$158,627.44	14.58%	\$74,024.23
D/D/T	Library Reference and Information Expenses	\$284,212.50	\$375,688.98	\$389,586.91	6.18%	\$105,374.41
D/D/T	Library Reference and Information Revenues	-\$18,289.81	-\$27,287.53	-\$11,435.00	6.25%	\$6,854.81
D/D/T	Library Reference and Information Net	\$265,922.69	\$348,401.45	\$378,151.91	7.03%	\$112,229.22
D/D/T	Archives Collections and Resources Management Service Expenses	\$97,653.16	\$124,644.08	\$131,842.48	5.84%	\$34,189.32
D/D/T	Archives Collections and Resources Management Service Revenues	-\$32,156.00	-\$3,000.00	\$0.00	16.67%	\$32,156.00
D/D/T	Archives Collections and Resources Management Service Net	\$65,497.16	\$121,644.08	\$131,842.48	16.88%	\$66,345.32
D/D/T	Archives Outreach and Programming Service Expenses	\$62,142.92	\$79,318.96	\$83,899.76	5.84%	\$21,756.84
D/D/T	Archives Outreach and Programming Service Net	\$62,142.92	\$79,318.96	\$83,899.76	5.84%	\$21,756.84
D/D/T	Archives Reference and Information Expenses	\$62,142.92	\$79,318.96	\$83,899.76	5.84%	\$21,756.84
D/D/T	Archives Reference and Information Revenues	\$0.00	\$0.00	\$0.00		\$0.00
D/D/T	Archives Reference and Information Net	\$62,142.92	\$79,318.96	\$83,899.76	5.84%	\$21,756.84

## Appendix C – Key Performance Indicators

Division	Service	Metric name	Metric type
Archives	Archives Collections and Resources Management	Internal collection	Quantity
Archives	Archives Collections and Resources Management	External collection	Quantity
Archives	Archives Collections and Resources Management	Transcription	Quantity
Archives	Archives Collections and Resources Management	Number out of 50 of Archeion descriptions submitted	Quantity
Archives	Archives Collections and Resources Management	Archives Collections and Resources Management service expenses	Cost
Archives	Archives Collections and Resources Management	Archives Collections and Resources Management service revenues	Cost
Archives	Archives Collections and Resources Management	Archives Collections and Resources Management service net	Cost
Archives	Archives Collections and Resources Management	Net cost per fond	Cost
Archives	Archives Outreach and Programming	Student presentations	Quantity
Archives	Archives Outreach and Programming	Community presentations	Quantity
Archives	Archives Outreach and Programming	Displays	Quantity
Archives	Archives Outreach and Programming	Joint venture requests	Quantity
Archives	Archives Outreach and Programming	Tours	Quantity
Archives	Archives Outreach and Programming	Joint projects	Quantity
Archives	Archives Outreach and Programming	Archives Outreach and Programming service expenses	Cost
Archives	Archives Outreach and Programming	Archives Outreach and Programming service revenues	Cost
Archives	Archives Outreach and Programming	Archives Outreach and Programming service net	Cost
Archives	Archives Outreach and Programming	Net Outreach and Programming cost per program delivered	Cost
Archives	Archives Reference and Information	Number of internal reference requests	Quantity
Archives	Archives Reference and Information	Number of external reference requests	Quantity
Archives	Archives Reference and Information	Number of general reference requests	Quantity

Division	Service	Metric name	Metric type
Archives	Archives Reference and Information	Total requests	Quantity
Archives	Archives Reference and Information	Percentage of internal reference requests	Quality
Archives	Archives Reference and Information	Percentage of external reference requests	Quality
Archives	Archives Reference and Information	Percentage of general reference requests	Quality
Archives	Archives Reference and Information	Number of Archeion hits	Quality
Archives	Archives Reference and Information	Number of Archeion requests	Quality
Archives	Archives Reference and Information	Percentage of Archeion requests of total requests	Quality
Archives	Archives Reference and Information	Archives Reference and Information Expenses	Cost
Archives	Archives Reference and Information	Archives Reference and Information Revenues	Cost
Archives	Archives Reference and Information	Archives Reference and Information Net	Cost
Archives	Archives Reference and Information	Net Reference and Information Cost per Request Received	Cost
Emergency Medical Services	Emergency Management	BIAs Completed/Reviewed (Number completed/Number of divisions)	Quantity
Emergency Medical Services	Emergency Management	Number of Emergency Management Exercises / Number of Plans	Quantity
Emergency Medical Services	Emergency Management	Number of identified staff trained in Emergency Management (IMS/BEM)	Quantity
Emergency Medical Services	Emergency Management	Number of individuals who received information on emergency preparedness	Quantity
Emergency Medical Services	Emergency Management	Number of community safety / awareness campaigns delivered (presentations/trade fairs/etc.)	Quantity
Emergency Medical Services	Emergency Management	Number of media safety / awareness campaigns delivered	Quantity
Emergency Medical Services	Emergency Management	Percentage of households with 72 hour kits	Quantity
Emergency Medical Services	Emergency Management	Number of Populations that may need assistance with evacuation/shelter-in-place have been identified	Quantity
Emergency Medical Services	Emergency Management	Percentage of EMCPA essential level requirements met	Quality
Emergency Medical Services	Emergency Management	Percentage of ECG participated in annual exercise	Quality
Emergency Medical Services	Emergency Management	Participant satisfaction with exercise	Quality
Emergency Medical Services	Emergency Management	Percentage of emergency plans reviewed within required time frames. (Number of reviews/Number of plans)	Quality

Division	Service	Metric name	Metric type
Emergency Medical Services	Emergency Management	Hazard identification and risk assessment process in place and updated annually (Yes/No)	Quality
Emergency Medical Services	Emergency Management	Percentage of identified hazards / risks with mitigation strategies/plans in place	Quality
Emergency Medical Services	Emergency Management	Median number of community partners/organizations engaged with in an emergency planning event/exercise	Quality
Emergency Medical Services	Emergency Management	Participant satisfaction with exercise	Quality
Emergency Medical Services	Emergency Management	Continuity of Operations Plans (Number plans/Number of essential services)	Result
Emergency Medical Services	Emergency Management	Percentage of corrective action/improvements implemented (Number identified/Number implemented)	Result
Emergency Medical Services	Emergency Management	Percentage of improvement plans developed based on after action reports	Result
Emergency Medical Services	Emergency Management	Frequency in which EOC telecommunications equipment are reviewed and tested	Result
Emergency Medical Services	Emergency Management	Time for pre-identified staff with lead incident management roles acknowledge receipt and understanding of alert notification	Result
Emergency Medical Services	Emergency Management	Emergency Management expenses	Cost
Emergency Medical Services	Emergency Management	Emergency Management revenues	Cost
Emergency Medical Services	Emergency Management	Emergency Management net	Cost
Emergency Medical Services	Emergency Management	Cost per Community Operations Plan	Cost
Emergency Medical Services	Emergency Medical Service	Patient encounters	Quantity
Emergency Medical Services	Emergency Medical Service	Hospital turnaround time (total minutes)	Quantity
Emergency Medical Services	Emergency Medical Service	goth percentile response (urban and rural)	Quantity
Emergency Medical Services	Emergency Medical Service	goth percentile response (urban)	Quantity
Emergency Medical Services	Emergency Medical Service	goth percentile response (rural)	Quantity
Emergency Medical Services	Emergency Medical Service	Calls per 1000 residents	Quantity
Emergency Medical Services	Emergency Medical Service	Vehicle standbys (Code 8)	Quantity
Emergency Medical Services	Emergency Medical Service	MOHLTC service review recommendations	Quantity
Emergency Medical Services	Emergency Medical Service	Average patient age	Quantity
Emergency Medical Services	Emergency Medical Service	Crew reaction time (avg.)	Quantity

Division	Service	Metric name	Metric type
Emergency Medical Services	Emergency Medical Service	Response time s <b>tandard</b> urban	Quantity
Emergency Medical Services	Emergency Medical Service	Response time standard rural	Quantity
Emergency Medical Services	Emergency Medical Service	Hospital turnaround delays (Number of events >30 mins.)	Quality
Emergency Medical Services	Emergency Medical Service	Hospital turnaround time (average minutes / event)	Quality
Emergency Medical Services	Emergency Medical Service	Percent of all patient encounters with hospital turnaround times > 30 mins.	Quality
Emergency Medical Services	Emergency Medical Service	Percent of patients showing improved vital signs after treatment (or at hospital)	Result
Emergency Medical Services	Emergency Medical Service	Response time standard urban met (Y/N)	Result
Emergency Medical Services	Emergency Medical Service	Response time standard urban met (Y/N)	Result
Emergency Medical Services	Emergency Medical Service	Difference between response time standard and actual result (urban)	Result
Emergency Medical Services	Emergency Medical Service	Difference between response time standard and actual result (rural)	Result
Emergency Medical Services	Emergency Medical Service	Gross expenditure	Cost
Emergency Medical Services	Emergency Medical Service	Cost per capita	Cost
Emergency Medical Services	Emergency Medical Service	Cost per hour of service	Cost
Emergency Medical Services	Emergency Medical Service	Gross expenditure per patient encounter	Cost
Emergency Medical Services	Emergency Medical Service	EMS service expenses	Cost
Emergency Medical Services	Emergency Medical Service	EMS service revenues	Cost
Emergency Medical Services	Emergency Medical Service	EMS service net	Cost
Emergency Medical Services	Emergency Medical Service	Net service cost per patient encounter	Cost
Emergency Medical Services	Emergency Medical Service	Percent growth in net service cost Y/Y	Cost
Human Services	Child Care Subsidy	Number of licensed child care spaces - Infant	Quantity
Human Services	Child Care Subsidy	Number of licensed child care spaces - toddler	Quantity
Human Services	Child Care Subsidy	Number of licensed child care spaces - preschool	Quantity
Human Services	Child Care Subsidy	Number of licensed child care spaces - JK/SK	Quantity
Human Services	Child Care Subsidy	Number of licensed child care spaces - school age	Quantity
Human Services	Child Care Subsidy	Number of operating child care spaces - infant	Quantity
Human Services	Child Care Subsidy	Number of operating child care spaces - toddler	Quantity

Division	Service	Metric name	Metric type
Human Services	Child Care Subsidy	Number of operating child care spaces - preschool	Quantity
Human Services	Child Care Subsidy	Number of operating child care spaces - JK/SK	Quantity
Human Services	Child Care Subsidy	Number of operating child care spaces - school age	Quantity
Human Services	Child Care Subsidy	Number of Oxford County child care operations supported - through quarterly operating funding	Quantity
Human Services	Child Care Subsidy	Number of Oxford County child care operations supported - through fee subsidy	Quantity
Human Services	Child Care Subsidy	Number of children o-4	Quantity
Human Services	Child Care Subsidy	Number of children 5-9	Quantity
Human Services	Child Care Subsidy	Number of children 10-14	Quantity
Human Services	Child Care Subsidy	Number of licensed spaces per child 0-4	Quantity
Human Services	Child Care Subsidy	Number of licensed spaces per child 5-9	Quantity
Human Services	Child Care Subsidy	Number of licensed spaces per child 10-14	Quantity
Human Services	Child Care Subsidy	Number of licensed spaces per child 0-14	Quantity
Human Services	Child Care Subsidy	Percentage of operating spaces per licenced space - infant	Quality
Human Services	Child Care Subsidy	Percentage of operating spaces per licenced space - toddler	Quality
Human Services	Child Care Subsidy	Percentage of operating spaces per licenced space - preschool	Quality
Human Services	Child Care Subsidy	Percentage of operating spaces per licenced space -JK/SK	Quality
Human Services	Child Care Subsidy	Percentage of operating spaces per licenced space - school age	Quality
Human Services	Child Care Subsidy	Percentage of all operating spaces per licensed space	Quality
Human Services	Child Care Subsidy	Number of children served	Result
Human Services	Child Care Subsidy	Percentage of children served	Result
Human Services	Child Care Subsidy	Number of children 0-14	Result
Human Services	Child Care Subsidy	Number of children served by age group - toddler	Result
Human Services	Child Care Subsidy	Number of children served by age group -pPreschool	Result
Human Services	Child Care Subsidy	Number of children served by age group - JK/SK	Result
Human Services	Child Care Subsidy	Number of children served by age group - school age	Result

Division	Service	Metric name	Metric type
Human Services	Child Care Subsidy	Number of children served by age group - over 12	Result
Human Services	Child Care Subsidy	Length of waitlist	Result
Human Services	Child Care Subsidy	Child Care Subsidy expenses	Cost
Human Services	Child Care Subsidy	Child Care Subsidy revenues	Cost
Human Services	Child Care Subsidy	Child Care Subsidy net	Cost
Human Services	Child Care Subsidy	Net cost per licensed space	Cost
Human Services	Child Care Subsidy	Net cost per operating space	Cost
Human Services	Child Care Subsidy	Net cost per child served	Cost
Human Services	Financial Assistance	Number of applications received (OW application distribution list- Shared Drive)	Quantity
Human Services	Financial Assistance	Number of referrals to the DAU (Disability Adjudication Unit (OW-Intake Performance Report-Screening-Monthly)	Quantity
Human Services	Financial Assistance	Number of cases referred to FSW as a result of EVP (OW-CVP Performance Report-Monthly)	Quantity
Human Services	Financial Assistance	Number of referrals to FSW at application (manual tracking)	Quantity
Human Services	Financial Assistance	Number of referrals to FSW during case management (manual tracking)	Quantity
Human Services	Financial Assistance	Average number of exits from social assistance (OW Termination Details Report-Monthly)	Quantity
Human Services	Financial Assistance	Average time on social assistance (days) (OW-Avg time/Avg Earnings-Monthly) Months on Assistance (BU summary report-monthly)	Quality
Human Services	Financial Assistance	Number of internal review requests (OW-Internal Review Performance Report-Monthly)	Quality
Human Services	Financial Assistance	Percentage of decisions upheld by the internal review (OW-Internal Review Performance Report-Monthly)	Quality
Human Services	Financial Assistance	Percentage of applications eligible for Financial Assistance (OW-Intake Performance Report-Screening-Monthly)	Result
Human Services	Financial Assistance	Average days to determine eligibility (OW-Intake Performance Report- Screening-Monthly)	Result

Division	Service	Metric name	Metric type
Human Services	Financial Assistance	Number of participants finding employment (Participation Report-Monthly)	Result
Human Services	Financial Assistance	Percentage of cases with earnings (Average Time/Average Earnings Performance Report-Monthly)	Result
Human Services	Financial Assistance	Number of cases with earnings (Average Time/Average Earnings Performance Report-Monthly)	Result
Human Services	Financial Assistance	Average Earnings (Average Time/Average Earnings Performance Report-Monthly)	Result
Human Services	Financial Assistance	Average Percentage of cases that exit as a result of employment (OW-Termination Details Report-Monthly)	Result
Human Services	Financial Assistance	Number of cases granted ODSP (OW-Termination Details Report-Monthly)	Result
Human Services	Financial Assistance	Total OW cases (CMSM report)	Quantity
Human Services	Financial Assistance	Total OW beneficiaries (CMSM report)	Quantity
Human Services	Financial Assistance	Percentage of all cases finding employment	Result
Human Services	Financial Assistance	Percentage of all beneficiaries finding employment	Result
Human Services	Financial Assistance	Financial Assistance expenses	Cost
Human Services	Financial Assistance	Financial Assistance revenues	Cost
Human Services	Financial Assistance	Financial Assistance net	Cost
Human Services	Financial Assistance	Net cost per OW case	Cost
Human Services	Financial Assistance	Net cost per OW beneficiary	Cost
Human Services	Shelter (Direct Delivered)	Number of units owned	Quantity
Human Services	Shelter (Direct Delivered)	Number of new clients housed	Quantity
Human Services	Shelter (Direct Delivered)	Number of accessible units	Quantity
Human Services	Shelter (Direct Delivered)	Number of applicants waiting for rent geared to income (RGI) housing	Quantity
Human Services	Shelter (Direct Delivered)	Percentage of applicants on the waitlist housed not currently tracked	Quantity
Human Services	Shelter (Direct Delivered)	Total number of RGI housing in Oxford County	Quantity
Human Services	Shelter (Direct Delivered)	Percentage of RGIowned and managed by Oxford County	Quantity

Division	Service	Metric name	Metric type
Human Services	Shelter (Direct Delivered)	Number market rent tenants in Oxford -owned RGI housing	Quality
Human Services	Shelter (Direct Delivered)	Number of clients in Oxford RGI housing moving to higher level housing	Result
Human Services	Shelter (Direct Delivered)	Annual maintenance costs on Oxford-owned units	Cost
Human Services	Shelter (Direct Delivered)	Annual capital investment on Oxford-owned units	Cost
Human Services	Shelter (Direct Delivered)	Shelter (Direct Delivered) expenses	Cost
Human Services	Shelter (Direct Delivered)	Shelter (Direct Delivered) revenues	Cost
Human Services	Shelter (Direct Delivered)	Shelter (Direct Delivered) net	Cost
Human Services	Shelter (Subsidy)	Number of applicants housed (Shelter subsidy) (Affordable Housing Strategy)	Quantity
Human Services	Shelter (Subsidy)	Number of non-profit housing providers subsidized (Affordable Housing Strategy)	Quantity
Human Services	Shelter (Subsidy)	Number of RGI housing units subsidized with non-profit housing providers (Affordable Housing Strategy)	Quantity
Human Services	Shelter (Subsidy)	Number of rent supplement units subsidized (Affordable Housing Strategy)	Quantity
Human Services	Shelter (Subsidy)	Number of clients supported through the County Bridge Program (Affordable Housing Strategy)	Quantity
Human Services	Shelter (Subsidy)	Number of domiciliary hostels funded	Quantity
Human Services	Shelter (Subsidy)	Number of emergency shelter programs funded	Quantity
Human Services	Shelter (Subsidy)	Average numberof emergency shelter program bed days	Quantity
Human Services	Shelter (Subsidy)	Number of operational reviews completed Affordable Housing Strategy	Quantity
Human Services	Shelter (Subsidy)	Number of clients supported in domiciliary hostels	Quantity
Human Services	Shelter (Subsidy)	Number of clients supported in emergency shelter programs	Quantity
Human Services	Shelter (Subsidy)	Number of clients living in affordable housing	Quantity
Human Services	Shelter (Subsidy)	Number of affordable housing units (including non-Oxford-owned RGI housing)	Quantity

Division	Service	Metric name	Metric type
Human Services	Shelter (Subsidy)	Number of low income households assisted with home ownerships	Quantity
Human Services	Shelter (Subsidy)	Number of affordable housing units using infilling, brownfields, etc.	Quantity
Human Services	Shelter (Subsidy)	Number clients receiving homelessness prevention services	Quantity
Human Services	Shelter (Subsidy)	Increase in collaborative and integrative services	Quality
Human Services	Shelter (Subsidy)	Average number of domiciliary hostel bed days funded	Result
Human Services	Shelter (Subsidy)	Number clients receiving homelessness prevention services remaining in stable housing for more than one year	Result
Human Services	Shelter (Subsidy)	Number of clients using shelters finding and remaining in stable housing for more than one year	Result
Human Services	Shelter (Subsidy)	Number of HS clients with improved affordable suitable and stable housing	Result
Human Services	Shelter (Subsidy)	Dollar amount of housing subsidy to providers - operating	Cost
Human Services	Shelter (Subsidy)	Dollar amount of housing subsidy to providers - capital	Cost
Human Services	Shelter (Subsidy)	Dollar amount of subsidy to individuals	Cost
Human Services	Shelter (Subsidy)	Shelter (Subsidy) expenses	Cost
Human Services	Shelter (Subsidy)	Shelter (Subsidy) revenues	Cost
Human Services	Shelter (Subsidy)	Shelter (Subsidy) net	Cost
Human Services	Shelter (Subsidy)	Shelter (Subsidy) cost per unit subsidized	Cost
Human Services	Shelter (Subsidy)	Shelter (Subsidy) cost per person housed	Cost
Human Services	Shelter (Subsidy)	Shelter (Subsidy) Cost per agency supported	Cost
Human Services	Shelter (Subsidy)	Shelter (Subsidy) cost per person housed per day (includes shelter and domiciliary Hostels)	Cost
Human Services	Shelter (Subsidy)	Shelter (Subsidy) cost for RGI housing (non-Oxford)	Cost
Human Services	Shelter (Subsidy)	Shelter (Subsidy) cost per unit RGI housing (non-Oxford)	Cost
Library	Library Collections	Number of circulations per year	Quantity
Library	Library Collections	Number of purchase requests	Quantity

Division	Service	Metric name	Metric type
Library	Library Collections	Number of requests filled	Quantity
Library	Library Collections	Inter-library loan requests received	Quantity
Library	Library Collections	Inter-library loan requests sent	Quantity
Library	Library Collections	New library cards	Quantity
Library	Library Collections	Active library cards	Quantity
Library	Library Collections	Inactive library cards	Quantity
Library	Library Collections	Collection usage change	Quantity
Library	Library Collections	Collection usage by age	Quantity
Library	Library Collections	Collection usage by shelf (AF)	Quantity
Library	Library Collections	Collection usage by shelf (AN)	Quantity
Library	Library Collections	Collection usage by shelf (DVD)	Quantity
Library	Library Collections	Collection usage by shelf (JF)	Quantity
Library	Library Collections	Collection usage by shelf (JN)	Quantity
Library	Library Collections	Collection usage by shelf (LP)	Quantity
Library	Library Collections	Collection usage by shelf (YF)	Quantity
Library	Library Collections	Collection usage by genre	Quantity
Library	Library Collections	Collection size	Quality
Library	Library Collections	Average hold wait physical	Quality
Library	Library Collections	Average hold wait electronic (days)	Quality
Library	Library Collections	Collection usage by frequency (power)	Quality
Library	Library Collections	Collection usage by frequency (frequently used)	Quality
Library	Library Collections	Collection usage by frequency (infrequently used)	Quality
Library	Library Collections	Collection usage by frequency (never used)	Quality
Library	Library Collections	Cost per usage	Cost
Library	Library Collections	Library Collections expenses	Cost
Library	Library Collections	Library Collections revenues	Cost
Library	Library Collections	Library Collections net	Cost
Library	Library Programming	Programs offered	Quantity
Library	Library Programming	Program attendance	Quantity
-			

Division	Service	Metric name	Metric type
Library	Library Programming	Program attend groups - adults	Quantity
Library	Library Programming	Program attend groups - children	Quantity
Library	Library Programming	Program attend groups -seniors	Quantity
Library	Library Programming	Program attend groups - teens	Quantity
Library	Library Programming	Population underserved	Quantity
Library	Library Programming	Joint program attend	Quantity
Library	Library Programming	Outreach program attendance	Quantity
Library	Library Programming	Program feedback	Quality
Library	Library Programming	Rates of literacy	Result
Library	Library Programming	Library Programming expenses	Cost
Library	Library Programming	Library Programming revenues	Cost
Library	Library Programming	Library Programming net	Cost
Library	Library Programming	Net cost per program	Cost
Library	Library Programming	Net cost per participant	Cost
Library	Library Public Space Access	Paid room rentals	Quantity
Library	Library Public Space Access	Free room rentals	Quantity
Library	Library Public Space Access	Events held	Quantity
Library	Library Public Space Access	Event attendance	Quantity
Library	Library Reference and Information	Annual standard reference trans (MTC)	Quantity
Library	Library Reference and Information	Annual reader advisory questions (MTC)	Quantity
Library	Library Reference and Information	Electronic reference transactions (MTC)	Quantity
Library	Library Reference and Information	Online hits	Quantity
Library	Library Reference and Information	County posts promos	Quantity
Library	Library Reference and Information	Reference feedback	Quality
Library	Library Reference and Information	Outreach loc act	Result
Library	Library Reference and Information	Referrals County Communications	Result
Library	Library Reference and Information	Reference requests qual	Result
Library	Library Reference and Information	Electronic cost per use	Cost
Library	Library Reference and Information	Product cost per use	Cost

Page 82 of 92

Division	Service	Metric name	Metric type
Library	Library Reference and Information	Library Reference and Information expenses	Cost
Library	Library Reference and Information	Library Reference and Information revenues	Cost
Library	Library Reference and Information	Library Reference and Information net	Cost
Library	Library Reference and Information	Net cost per reference transactions (sum standard, readers advisory and electronic)	Cost
Library	Library Technology Access	Number of public access computers	Quantity
Library	Library Technology Access	Number of public use devices	Quantity
Library	Library Technology Access	Computer usage (time)	Quantity
Library	Library Technology Access	Wireless usage (time)	Quantity
Library	Library Technology Access	Public access computers wait times	Quantity
Library	Library Technology Access	Attendance at individual sessions	Quantity
Library	Library Technology Access	Attendance at group sessions	Quantity
Library	Library Technology Access	Number of IT sessions	Quantity
Library	Library Technology Access	Age of public access computers	Quality
Library	Library Technology Access	Technology feedback	Quality
Library	Library Technology Access	Number of new technology services	Quality
Library	Library Technology Access	Library Information Technology Access expenses	Cost
Library	Library Technology Access	Library Information Technology Access revenues	Cost
Library	Library Technology Access	Library Information Technology Access net	Cost
Library	Library Collections	Net cost per active card	Cost
Library	Library Collections	Net cost per circulated item	Cost
Library	Library Public Space Access	Library Public Space Access expenses	Cost
Library	Library Public Space Access	Library Public Space Access revenues	Cost
Library	Library Public Space Access	Library Public Space Access net	Cost
Public Health Promotion	Public Health Advocacy and Promotion	Number of anti-smoking campaigns (by type)	Quantity
Public Health Promotion	Public Health Advocacy and Promotion	Range or coverage of anti-smoking campaigns (views, hits, individuals reached)	Quantity
Public Health Promotion	Public Health Advocacy and Promotion	Number of alcohol intervention campaigns (by type)	Quantity
Public Health Promotion	Public Health Advocacy and Promotion	Range or coverage of alcohol consumption campaigns (views, hits, individuals reached)	Quantity

Division	Service	Metric name	Metric type
Public Health Promotion	Public Health Advocacy and Promotion	Percentage of population (19+) that exceeds the Low Risk Alcohol Drinking Guidelines	Result
Public Health Promotion	Public Health Advocacy and Promotion	Fall-related emergency visits in older adults aged 65+	Result
Public Health Promotion	Public Health Advocacy and Promotion	Maintenance of the Baby-Friendly Initiative (BFI)	Result
Public Health Promotion	Public Health Advocacy and Promotion	Reduction in smoking rates	Result
Public Health Promotion	Public Health Advocacy and Promotion	Public Health Promotion and Advocacy expenses	Cost
Public Health Promotion	Public Health Advocacy and Promotion	Public Health Promotion and Advocacy revenues	Cost
Public Health Promotion	Public Health Advocacy and Promotion	Public Health Promotion and Advocacy net	Cost
Public Health Promotion	Public Health Advocacy and Promotion	Cost per Public Health Promotion And Advocacy campaign	Cost
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Percentage of schools screened for dental requirements (Children in Need of Treatment)	Quantity
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Number of children provided dental care through Children in Need of Treatment	Quantity
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Number of children treated through Healthy Smiles	Quantity
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Percentage of with-risk Families consenting to visits	Quantity
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Percentage of with-risk families of all families screened with risk	Quantity
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Number of visits per with-risk family	Quantity
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Total number of families visited (HBHC)	Quantity
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Number of Well Baby clinics held	Quantity
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Number of with-risk children referred to other services (by type)	Quality
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Number of babies per Well Baby clinic	Quality
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Parental satisfaction with Well Baby clinic	Quality
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Parental satisfaction with HBHC home visiting	Quality

Division	Service	Metric name	Metric type
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Percentage of children treated through CINOT obtaining primary dental practitioner	Result
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Percentage of children treated through CINOT requiring follow up treatment in less than 1 year	Result
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Percent of all LICO children in Oxford County treated through Healthy Smiles	Result
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Percentage of children treated through Healthy Smiles obtaining primary dental practitioner	Result
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Percentage of children treated through Healthy Smiles requiring follow up treatment in less than 1 year	Result
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Number of with-risk children meeting NDDS Milestones	Result
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Number of with-risk children meeting EDI scores	Result
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Number of with-risk children meeting NCAST scores.	Result
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Number of with risk babies per well-baby cliinic	Result
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Individual Health Assessment and Intervention expenses	
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Individual Health Assessment and Intervention revenue	Cost
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Individual Health Assessment and Intervention net	Cost
Public Health Promotion	Public Health Individual Health Assessment and Intervention	Cost per individual treated (count of all HBHC, CINOT, Sexual Health, etc.)	Cost
Public Health Protection	Building Health Partnerships/Collaborations/Networks	Building Health Partnerships expenses	Cost
Public Health Protection	Building Health Partnerships/Collaborations/Networks	Building Health Partnerships revenue	Cost
Public Health Protection	Building Health Partnerships/Collaborations/Networks	Building Health Partnerships net	Cost
Public Health Protection	Building Health Partnerships/Collaborations/Networks	Cost per partnership	Cost
Public Health Protection	Case and Outbreak Management	Number of institutional outbreaks managed	Quantity

Division	Service	Metric name	Metric type
Public Health Protection	Case and Outbreak Management	Number of non-institutional outbreaks of reportable / communicable diseases managed	Quantity
Public Health Protection	Case and Outbreak Management	Percentage of gonorrhea cases receiving follow-up within 48 business hours	Quality
Public Health Protection	Case and Outbreak Management	Percentage of iGAS investigation started within 24 hours of receipt	Quality
Public Health Protection	Case and Outbreak Management	Length of respiratory outbreaks (time frame?)	Result
Public Health Protection	Case and Outbreak Management	Case and Outbreak Management expenses	Cost
Public Health Protection	Case and Outbreak Management	Case and Outbreak Management revenues	Cost
Public Health Protection	Case and Outbreak Management	Case and Outbreak Management net	Cost
Public Health Protection	Case and Outbreak Management	Cost per outbreak managed?	Cost
Public Health Protection	Health Advocacy and Promotion	Chlamydia rate (cases per 1000, or per 100,000)?	Result
Public Health Protection	Health Advocacy and Promotion	Percentage of dogs involved in rabies investigations that are up-to-date for rabies immunizations	Result
Public Health Protection	Health Monitoring and Surveillance	Percentage of weeks where county flu activity is reported to MOHLTC	Quality
Public Health Protection	Health Monitoring and Surveillance	Percentage of private well water results contaminated with bacteria	Result
Public Health Protection	Health Monitoring and Surveillance	Health Monitoring and Surveillance Public Health Protection Expenses	Cost
Public Health Protection	Health Monitoring and Surveillance	Health Monitoring and Surveillance Public Health Protection Revenue	Cost
Public Health Protection	Health Monitoring and Surveillance	Health Monitoring and Surveillance Public Health Protection Net	Cost
Public Health Protection	Health Monitoring and Surveillance	Cost per surveillance report	Cost
Public Health Protection	Health Protection Certification	Number of food handlers certified in a year	Quantity
Public Health Protection	Health Protection Certification	Certified food handlers as a percentage of all food handlers	Result
Public Health Protection	Health Protection Certification	Health Protection Certification Public Health Protection Expenses	Cost
Public Health Protection	Health Protection Certification	Health Protection Certification Public Health Protection Revenue	Cost
Public Health Protection	Health Protection Certification	Health Protection Certification Public Health Protection Net	Cost
Public Health Protection	Health Protection Certification	Cost per certification issued	Cost

Page 86 of 92

Division	Service	Metric name	Metric type	
Public Health Protection	Health Resource Distribution	Number of vaccine doses distributed	Quantity	
Public Health Protection	Health Resource Distribution	Health Resource Distribution Public Health Protection Expenses	Cost	
Public Health Protection	Health Resource Distribution	Health Resource Distribution Public Health Protection Revenue	Cost	
Public Health Protection	Health Resource Distribution	Health Resource Distribution Public Health Protection Net	Cost	
Public Health Protection	Health Resource Distribution	Cost per vaccine distributed	Cost	
Public Health Protection	Individual Health Assessment and Intervention	Immunizations given at health unit immunization clinic	Quantity	
Public Health Protection	Individual Health Assessment and Intervention	Number of sexual health clients assessed	Quantity	
Public Health Protection	Individual Health Assessment and Intervention	Number of users of Needle Exchange Program	Quantity	
Public Health Protection	Individual Health Assessment and Intervention	Number of individuals seen in sexual health clinic	Quantity	
Public Health Protection	Individual Health Assessment and Intervention	Number of reportable sexually transmitted diseases treated (by type)	Quantity	
Public Health Protection	Individual Health Assessment and Intervention	Vaccine wastage	Quality	
Public Health Protection	Individual Health Assessment and Intervention	Number of users of Needle Exchange Program clients referred to other community services	Quality	
Public Health Protection	Individual Health Assessment and Intervention	Percentage of users of Needle Exchange Program exiting to substance abuse program or other improvement	Result	
Public Health Protection	Individual Health Assessment and Intervention	Rate of reportable sexually transmitted diseases for Oxford County (by type)	Result	
Public Health Protection	Inspections, Investigations and Enforcement	Percentage of vaccine fridge inspections completed annually	Quantity	
Public Health Protection	Inspections, Investigations and Enforcement	Percentage of Class A pools inspected while in operation	Quantity	
Public Health Protection	Inspections, Investigations and Enforcement	Percentage of public spas inspected while in operation	Quantity	
Public Health Protection	Inspections, Investigations and Enforcement	Total number of Fixed Premises Public Health inspections	Quantity	
Public Health Protection	Inspections, Investigations and Enforcement	Percentage of high-risk food inspections completed	Quantity	
Public Health Protection	Inspections, Investigations and Enforcement	Percentage of moderate-risk food inspections completed	Quantity	
Public Health Protection	Inspections, Investigations and Enforcement	Percentage of low and moderate-risk small drinking water systems (SDWS) inspections completed for those that are due for re-inspection	Quantity	

Division	Service	Metric name	Metric type
Public Health Protection	Inspections, Investigations and Enforcement	Number of complaints, service requests, rReferrals - inspection	Quantity
Public Health Protection	Inspections, Investigations and Enforcement	Percentage of secondary schools inspected once per year for compliance with section 10 of the Smoke-Free Ontario Act (SFOA)	Quantity
Public Health Protection	Inspections, Investigations and Enforcement	Percentage of tobacco retailers inspected once per year for compliance with display, handling and promotion sections of the Smoke-Free Ontario Act (SFOA)	Quantity
Public Health Protection	Inspections, Investigations and Enforcement	Percentage of tobacco retailers inspected for compliance with section 3 of the Smoke-Free Ontario Act (SFOA)	Quantity
Public Health Protection	Inspections, Investigations and Enforcement	Percentage of suspect rabies exposures where investigation initiated within one day of notification	Quality
Public Health Protection	Inspections, Investigations and Enforcement	Food premises violations	Result
Public Health Protection	Inspections, Investigations and Enforcement	Food premises in violation as a percentage of all food premises inspected	Result
Public Health Protection	Inspections, Investigations and Enforcement	Percentage of tobacco vendors in compliance with youth access legislation at the time of last inspection	Result
Public Health Protection	Inspections, Investigations and Enforcement	Number of school pupil records reviewed that do not meet ISPA	Result
Public Health Protection	Inspections, Investigations and Enforcement	Inspections, Investigations and Enforcement expenses	Cost
Public Health Protection	Inspections, Investigations and Enforcement	Inspections, Investigations and Enforcement revenues	Cost
Public Health Protection	Inspections, Investigations and Enforcement	Inspections, Investigations and Enforcement net	Cost

## Appendix D: Service Improvement Opportunities

SIO ID number	Opportunity	Risks and Implications	Potential Savings / Productivity	Timeframe	Barriers
HSPH.01.01	Adopt Social Determinants of Health	Improved County-wide planning	Nominal	Less than one year	Low
HSPH.01.03	Transformation to Full Integration of Services Supporting Families, Children and Singles	Improved client service, combining multiple unions and staff	\$100 – 500K	More than one year	Medium
HS.03.01	Long Term Housing and Homelessness Capital Plan	Improved planning, increased County expense	Net expense	One year to develop, more than one year to implement	Medium to high
HS.03.03	Housing / Shelter First Strategy	Improved client outcomes, intense staff and financial requirements	>\$500k in Social Return on Investment	One year to review, more than one year to implement	Medium to high
HS.07.00	Community Capacity Subsidy Review	Improved visibility of agency service delivery, resistance by providers	Nominal	Less than one year	Low to medium

SIO ID number	Opportunity	Risks and Implications	Potential Savings / Productivity	Timeframe	Barriers
HS.06.00	Case Conferencing for HS Staff	Improved learning and client support	Nominal	Less than one year	Low
HS.01.00	Integrated Program Benefits Evaluation	Determination of whether integrated service delivery has greater client impact	Nominal	Less than one year	Medium – baseline data may be unavailable
HS.02.00	Digital Signatures for Human Services Clients	Improved paper and data management; client resistance	Nominal	Less than one year	Low
HSPH.01.02	Provide County-wide Staff Training on Social Determinants of Health	Improved county-wide planning	Nominal	Less than one year	Low
HSPH.01.05	Quality of Life Tool and Social Determinants of Health Process Linking	Improved coordination of planning and services	Nominal	Less than one year	Medium
PH.03.00	Public Health Nurse and Inspectors Scheduling, Process and Decentralization Strategy	Improved planning and productivity, reduced travel time and expense	\$100 – 500K	One year to develop, more than one year to implement	Medium
PH.02.00	After Hours Services	Improved client service, potential for staff resistance	Nominal	Less than one year	Low to medium
PH.01.00	Building Health Partnerships Governance and Management	Improved accountability for partnership outcomes, potential for partner resistance.	Nominal	Less than one year	Low to medium
PH.07.00	PHES Process Improvements	Improved use of digital resources and reduced cost and risk of paper storage	Nominal	Less than one year	Low to medium
EMS.04.00	Community Paramedicine Planning	Improved planning for potential future download	Net expense	More than one year	Low (for planning)

SIO ID number	Opportunity	Risks and Implications	Potential Savings / Productivity	Timeframe	Barriers
EMS.03.01	Review EMS Response Time Standard and Deployment	Improved productivity and service response	Unknown	More than one year	Medium
EMS.03.02	EMS Hospital Wait Times Review	Improved productivity with shortened and reduced number of turn around delays, may be hospital resistance to change	Nominal	Less than one year	Medium to high
EMS.01.00	EMS Fleet Review	Potential for improved shared service with PW	Unknown	Within Wave 2	Low
EMS.02.01/02	911 Call Taking and Dispatch Review	Planning for improved or changed technology or single source dispatch	Net expense	More than one year	Low
LB.01.06	Reimagine Libraries as County Multi-Service Hubs	Improved services to clients, improved library services, improved library traffic	\$100 – 500K	More than one year	Medium to high
LB.01.03	Library Resource Review	Improved client service, efficiencies in service delivery	Less than \$100K	More than one year	Medium
LB.01.04	Library Space Needs Review	Reduced costs and efficiencies, improved client service.	\$100 – 500K	One year to develop, more than one year to implement	Medium
LB.01.01	Library Governance Review	Potential efficiencies in staff time usage.	Nominal	Less than one year	Low

SIO ID number	Opportunity	Risks and Implications	Potential Savings / Productivity	Timeframe	Barriers
AR.01.00	Archives and Records Management Process and Policy	Reduced duplication and improved management of records collected	Nominal	Less than one year	Low (in process)
AR.02.00	Archives Outreach and Programming Service Volunteer Service Delivery or Merger with Public Library History Programming	Reduction in costs, reduced duplication	>\$100k	Less than one year	Medium
AR.03.00	Expand Archives to all Area Municipalities	Increased costs and responsibilities.	Unknown	More than one year	Medium
AR.04.00	Merge Archives and Records Management	Reduction in cost, and service levels (elimination of service), centralized mgmt of all records.	\$100k - \$500k	More than one year	Medium