

# Accountability for Public Health Performance: The State of the Art

Robert Schwartz, Raisa Deber, Melinda Krynen-Hill, Alex Price

## Research Questions

From which accountability holders do Public Health Units feel pressures and for what?

What accountability approaches are in place?

What are the perceived effects on accountability goals of performance & equity?

What are the unintended consequences?

How do contextual variables (governance/ownership, goals, service characteristics, etc.) affect the performance of accountability approaches?

What are perceived emerging effects of Ontario Public Health Standards and associated Accountability Agreements?

### Methods

- Key Informant Interviews (n=7)
- Web-survey of Public Health Units (n=36)
- Comparative Case Studies (n=5)
- Validation & interpretation meetings

### Some Preliminary Results

1. Primary accountability pressure are more local than provincial
2. Accountability to provincial ministries has been weak for most services
3. Pressure to demonstrate results (population level outcomes)
4. For many services measurability is an issue
5. Recent experiences with Balanced Score Cards require exploration
6. For some Public Health Units, accreditation may be an important accountability mechanism
7. Financial incentives do not seem to play much of a role
8. Several Public Health Units appear to be developing promising internal accountability mechanisms
9. Multiple accountabilities pose challenges and creates reporting burdens
10. Adjudication and consequencing of information provided for accountability is not always in place

## Model: Accountability Approaches & Goals

