



STAFF REPORT ACTION REQUIRED

Mixed Waste Processing Study Health Impact Assessment

Date:	June 10, 2010
To:	Board of Health
From:	Medical Officer of Health
Wards:	All Wards
Reference Number:	

SUMMARY

Toronto Public Health (TPH) oversaw the Health Impact Assessment (HIA) component of the Mixed Waste Processing Study conducted by Golder Associates on behalf of Solid Waste Management Services (SWMS). This study was initiated to evaluate the options for managing Toronto's mixed waste in order to help achieve the City's Target 70 waste diversion objectives. Potential impacts from various approaches to dealing with City of Toronto residential mixed waste were assessed using HIA screening and scoping approaches. This report presents the findings of the HIA and the recommendations the Medical Officer of Health (MOH) has made for future action by SWMS.

The HIA was conducted in two phases. The first phase assessed various technology options and informed SWMS's decision to move forward with Mechanical Biological Treatment with Anaerobic Digestion (MBT with AD) as the preferred technology for a residential mixed waste processing facility. The only city-owned site that has sufficient area to accommodate the full processing and final curing operations is next to Green Lane Landfill in the Township of Southwold (near London, Ontario).

Once the preferred site and technology were identified, TPH held an HIA workshop with stakeholders from the community neighbouring the selected site. The participants at the workshop identified both negative and positive potential impacts from the proposed facility. Potential mitigation efforts were also discussed.

The Medical Officer of Health has communicated his recommendations on ways to address stakeholder concerns during the design and operation of the proposed facility to the General Manager, SWMS. SWMS has indicated that they will implement these recommendations. The MOH will continue to work with SWMS and the Residual Waste

Working Group to ensure health issues are considered during the next phases. The HIA process helped influence the selection of a mixed waste treatment technology option such that the one with the least environmental and health impact was chosen.

RECOMMENDATIONS

The Medical Officer of Health recommends that:

1. the Board of Health forward this report to the Public Works and Infrastructure Committee for information; and
2. the Board of Health forward this report to the Elgin St. Thomas and Middlesex-London Boards of Health, and the Township of Southwold Council.

Financial Impact

There are no financial impacts arising directly from the adoption of this report.

DECISION HISTORY

At its meeting held on February 5, 6, 7 and 8 2007, City Council considered the Public Works and Infrastructure report PW2.3 “CEAT [Community Environmental Assessment Team] Update Report for January 17, 2007 Public Works and Infrastructure Committee Meeting”. Council adopted the recommendations that the MOH, in consultation with the General Manager of SWMS, oversee development of a framework for a health impact assessment (HIA) to be used in the evaluation of potential technologies and sites for managing Toronto’s solid waste (see <http://www.toronto.ca/legdocs/mmis/2007/cc/decisions/2007-02-05-cc02-dd.pdf>).

At its meeting of April 21, 2008, the Board of Health requested that the HIA by Solid Waste Management Services be placed on an upcoming agenda of the Board of Health for comment (see <http://www.toronto.ca/legdocs/mmis/2008/hl/decisions/2008-04-21-hl13-dd.pdf>).

ISSUE BACKGROUND

At the direction of Toronto City Council, Toronto Public Health (TPH) and Solid Waste Management Services (SWMS) have worked together to apply an HIA approach to assist the evaluation of options for managing Toronto’s mixed waste to help meet the City’s Target 70 waste diversion initiatives. Mixed waste is the portion of waste that remains after materials for other city waste diversion programs, such as the Blue Bin (recycling) or Green Bin (composting), have been separated at source by Toronto residents and

businesses, and collected by or on behalf of the City. This waste still contains materials that can be diverted so that it is not disposed of in landfill. To aid in the HIA work, in 2007 TPH and SWMS commissioned the development of an HIA Framework. This framework includes a screening tool which identifies a range of factors to be considered during an HIA. These are grouped in five categories of determinants of health: physical environment, social and economic environment, lifestyle, access to services and equity.

COMMENTS

This report was prepared in collaboration with Solid Waste Management Services and the Public Consultation Unit.

In late 2008, SWMS retained Golder Associates consulting group to conduct a Mixed Waste Processing Study to inform the City on the best options for managing its mixed waste for the period 2010 to 2035. As part of this study, the City requested that the consultant conduct an HIA. The HIA framework developed for TPH was to be used to identify a preferred strategy. Attachment 1 “Report on the Health Impact Assessment (HIA) for the Proposed City of Toronto Mixed Waste Processing Facility” describes the process and outcomes of the HIA. The HIA was conducted in consultation with the Residual Waste Working Group (RWWG).

Phase 1

At the beginning of the study, SWMS considered seven technology options and twelve potential sites on which to build a new facility. An internal TPH working group reviewed the information available to inform decisions early on in the study. Six environmental factors were seen to have the greatest potential impact on health for the proposed technologies: odour, noise, built environment, groundwater quality, air quality and surface water quality. The air and water quality factors can have a direct impact on health. The remaining factors often have a more indirect impact on health and quality of life.

The results of this phase of the HIA were among the parameters that informed SWMS’s decision to identify Mechanical Biological Treatment with Anaerobic Digestion (MBT with AD) as the preferred technology for a mixed waste processing facility. As the land next to the Green Lane Landfill in the Township of Southwold was the only City-owned site available with sufficient area for the full processing and final curing operations, the HIA did not factor into the site selection.

Phase 2

Considering comments received from an open house held in the Township of Southwold to provide the local community with information on the proposed facility, SMWS and TPH decided to hold an HIA workshop involving stakeholders from the community around the selected site. The HIA workshop included representatives from four

stakeholder groups: First Nations communities, Township of Southwold Council, the Green Lane Landfill public liaison committee and the local public health units. The objectives of the workshop were to better understand the stakeholders' perspectives on potential health impacts from the proposed facility and to identify mitigation efforts that could address stakeholder concerns. Local stakeholders identified both negative and positive potential impacts that may occur as a result of building the mixed waste processing facility. Most of these were the same as those identified in the first stage.

Outcomes of the HIA

1. All stakeholder groups identified odour as a priority potential health concern. Township of Southwold Council representatives specifically identified the need for SWMS to contain the composting windrows within a building. Our understanding is that building an enclosure to address odour is one of the more costly odour mitigation strategies. SWMS has identified enclosing the windrows with a fabric cover system specifically designed for composting operations as the preferred approach to address odour. The Medical Officer of Health has recommended that SWMS monitor the effectiveness of the proposed strategy, and if it does not prove to be sufficient to mitigate odours from composting, SWMS should explore additional measures in consultation with the local public liaison committee and TPH.
2. The stakeholder representatives from the local public health units requested that the City conduct a cumulative impact assessment to better understand the extent to which adding a new facility would impact the whole airshed. The Medical Officer of Health has encouraged SWMS to conduct a more detailed assessment in collaboration with TPH staff. This assessment would aim to evaluate potential impacts associated with exposures to chemicals released during the construction and operation of the proposed project. Since air is the main route of human exposure to environmental releases from the proposed facility and air quality is of primary concern to local stakeholders, the Medical Officer of Health has agreed that the focus of the assessment should be an evaluation of potential exposures to chemicals in ambient air in the airshed of the proposed project and surrounding communities. The assessment will take into account existing background ambient air concentrations and consider exposures to sensitive populations (i.e., First Nations, young children and elderly) in the surrounding communities. The assessment will use conservative assumptions to ensure that potential exposures and health risks are not underestimated and incorporate the results from the life-cycle assessment of the facility.
3. To ensure that health and environmental concerns identified in the HIA are addressed in the design and operation of the facility, the Medical Officer of Health has recommended that the terms of reference for the contractors require them to clearly identify the design and operational elements that have been incorporated to mitigate or minimize health and environmental impacts.
4. The stakeholder groups also identified opportunities for a number of potential positive impacts. These included incorporating an educational centre to promote

waste diversion and programs for schools, strengthening local recycling programs, and research on the beneficial use of the compost-like output of the facility, including pilot programs with local farmers. The Medical Officer of Health has encouraged SWMS to pursue these opportunities through the procurement process for the design, permitting and operation of the facility.

The Medical Officer of Health has communicated these recommendations to the General Manager, SWMS (see Attachment 2) and TPH will continue to be involved in the process of design and implementation of the facility as required. SWMS has indicated that they will implement these recommendations.

CONCLUSIONS

In collaboration with SMWS and in consultation with the RWWG, TPH has successfully implemented an HIA for the proposed mixed waste processing facility. The HIA process helped influence the selection of a technology option such that the one with the least environmental and health impact was chosen. It also helped to identify stakeholder concerns and appropriate mitigation strategies. Based on the results of the HIA, the Medical Officer of Health has made recommendations to SWMS on ways to address stakeholder concerns during the design and operation of the proposed facility. TPH will continue to work in partnership with SWMS and the RWWG to provide input to the project to ensure that health and environmental issues are also properly considered during the next phases.

CONTACT

Monica Campbell
Manager, Environmental Protection Office
Toronto Public Health
Phone: 416-338-8091
Fax: 416-392-7418
Email: mcampbe2@toronto.ca

Carol Timmings
Interim Director, Planning & Policy
Toronto Public Health
Phone: 416-392-7463
Fax: 416-392-0713
Email: ctimming@toronto.ca

SIGNATURE

Dr. David McKeown
Medical Officer of Health

ATTACHMENTS

Attachment 1:

Report on the Health Impact Assessment (HIA) for the Proposed City of Toronto Mixed Waste Processing Facility

Attachment 2:

Correspondence from the Medical Officer of Health to General Manager of SWMS: Mixed Waste Processing Study Health Impact Assessment (HIA) Recommendations

Attachment 1

Report on the Health Impact Assessment (HIA) for the Proposed City of Toronto Mixed Waste Processing Facility

At the request of City Council 2007, the Toronto Medical Officer of Health oversaw the development of a Health Impact Assessment (HIA) framework to guide evaluation of alternative methods for managing Toronto's post-diversion residual solid wastes. Toronto Public Health (TPH), in collaboration with Solid Waste Management Services (SWMS), retained Jacques Whitford to prepare a draft "TPH Health Impact Assessment Framework."¹ In late 2008, SWMS retained Golder Associates consulting group to conduct the Mixed Waste Processing Assessment Study to inform their planning for the period 2010 to 2035. This study was initiated to evaluate the various residual waste processing technologies and siting options that the City could use to manage its mixed waste, which is the portion of waste that remains after materials for other city waste diversion programs are removed. The City directed the consultant to undertake an HIA using the draft framework to ensure that all aspects of human health were considered in the assessment.

Developing the Screening HIA

At the advice of the Residual Waste Working Group (RWWG) and with the assistance of TPH, Golder undertook an HIA screening early on in the study to ensure that health was a priority throughout the decision-making process. Work on the HIA and screening of the technologies based on operational criteria took place in parallel. Initially, 7 mixed waste processing technologies and 12 siting options were considered.

In order to assess this long list of options in a short period of time, the consultants developed a Pre-screening Health Determinants Decision Tool to facilitate the HIA. This tool was based on the Analytic Hierarchy Process, a technique which allows for ranking and comparing options in a systematic way. The tool incorporated all determinants of health indicators identified in the draft TPH framework (See Table 1). TPH was consulted during the tool development process, gave input into the choice of health indicators and agreed to the utility and transparency of this new tool and approach. Throughout the process the RWWG was consulted and asked to provide any feedback. They submitted additional health indicators thought to be appropriate.

An HIA working group consisting of a multi-disciplinary team of TPH, Golder and SWMS staff was formed to undertake the initial screening step using the Pre-screening Health Determinants Decision Tool.

¹ The draft TPH HIA framework document can be found at <http://www.toronto.ca/health>

Table 1: TPH HIA Framework - determinants of health indicators

Environmental Factors		
<i>Air quality</i>	<i>Groundwater quality</i>	<i>Vegetation</i>
<i>Odour</i>	<i>Soil quality</i>	<i>Noise</i>
<i>Surface water quality</i>	<i>Land use</i>	<i>Built Environment</i>
Non-Environmental Factors		
Social and economic factors		
<i>Income / Poverty</i>	<i>Family cohesion</i>	<i>Housing</i>
<i>Employment</i>	<i>Community & social cohesion</i>	<i>Social exclusion</i>
<i>Education</i>	<i>Crime</i>	
Lifestyle factors		
<i>Diet</i>	<i>Smoking</i>	<i>Drug use</i>
<i>Physical activity</i>	<i>Alcohol</i>	<i>Sexual behaviour</i>
Access to services		
<i>Health services</i>	<i>Social services</i>	<i>Leisure</i>
<i>Education</i>	<i>Transportation</i>	
Equality		
<i>Age</i>	<i>Minorities/disadvantaged group</i>	
<i>Sex</i>	<i>Ability</i>	

HIA is an iterative process and the HIA working group gave input at several decision points. The process identified technologies that were less desirable from a health point of view. For example, because of the potential for impacts on air quality in communities burning refuse-derived fuel (RDF) pellets, Mechanical Biological Treatment (MBT) with biodrying to create RDF pellets which would be marketed for use as an alternative fuel, was eliminated from the list of potential technology options.

As the study evolved and SWMS further refined their qualifying criteria, the list of possible technologies and sites decreased. The HIA was adapted accordingly. In the winter of 2009 SWMS decided on their final qualifying criteria.² Once the consultants had applied these criteria, two technologies remained:

- Option 1- Mechanical Biological Treatment (MBT) with aerobic processing with Compost-Like Output (CLO) for land reclamation and
- Option 2- MBT with Anaerobic Digestion (AD) and CLO being diverted for land reclamation.

The only City-owned site large enough to accommodate an MBT facility is the land adjacent to the Green Lane Landfill located in the Township of Southwold.³ At this point,

² The final qualifying criteria included: ability to divert 75, 000 tpy from landfill; ability to conform to the Ministry of the Environment (MOE) Policy Statement; realistic ability to market recovered materials; ability for markets to meet Ontario Environmental Standards; ability to dispose of the material resulting from treatment in the Green Lane Landfill; technology to have a proven operating history; and ability to have a facility under construction by 2010.

³ Green Lane Landfill will provide for Toronto's waste disposal needs when the City's Michigan landfill disposal contract expires in 2010.

the HIA working group participated in a final HIA screening activity to evaluate the two remaining options and to compare them to the status quo (or Option 3):

- Option 3 – sending the residual waste directly to landfill without treatment or sorting.

Results of the initial screen

As part of the overall study Golder undertook a Life Cycle Assessment (LCA)⁴ that provided estimates of the overall emissions from the three options. The LCA evaluated the environmental impacts associated with each technology through a defined methodology and quantified the inputs and outputs for each option from “cradle to grave”. The HIA working group used the estimates of releases from the LCA and its expert knowledge to screen and rank the environmental factors. For example, the LCA indicated that hydrogen sulphide emissions for the landfill were larger than those of either MBT and MBT/AD. Therefore, both of these options were predicted to contribute less to odour impacts than a landfill would. However, it is worth noting that mitigation measures, such as biofiltration of the exhaust air, were not taken into account.

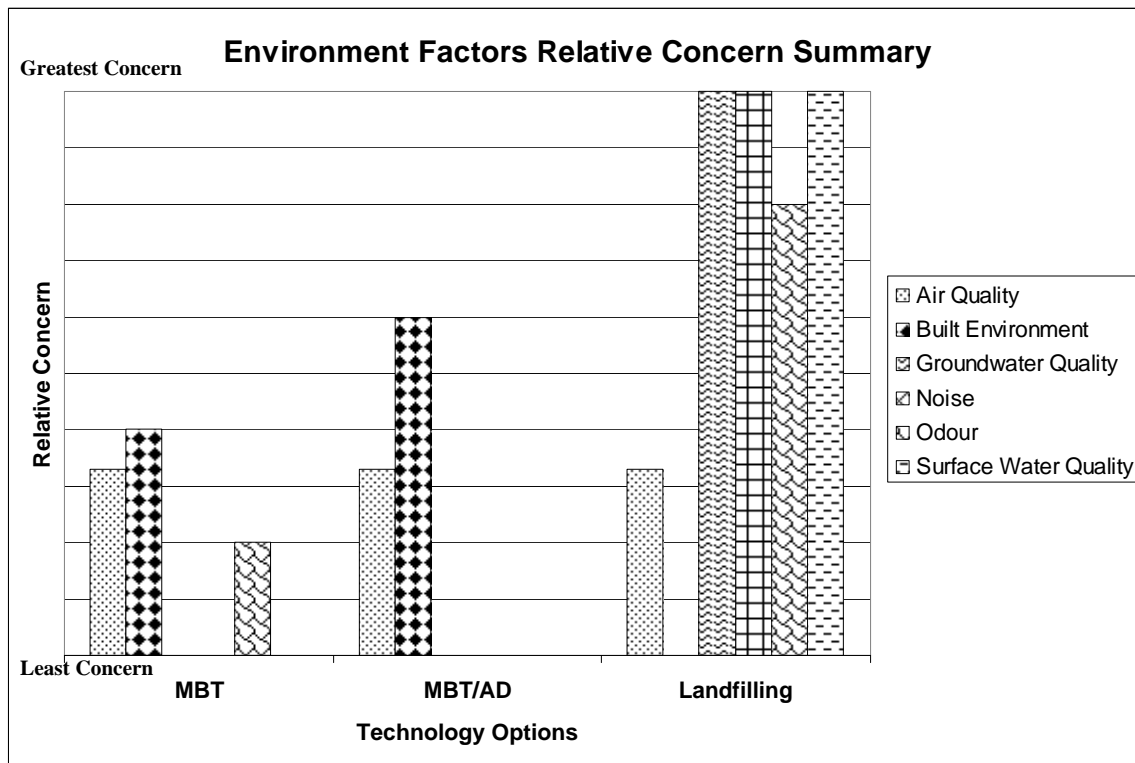
The initial screen identified the following six environmental factors as best distinguishing among the three options: odour, noise, built environment, groundwater quality, air quality and surface water quality. Air and water quality factors reflect environmental contamination issues which can have a direct impact on health. The remaining factors, (e.g. odour, noise, built environment), often have a more indirect impact on health and quality of life.

While all three options have potential for negative impacts on health, the degree of negative impact varies among technologies (see Figure 1). For example, the factor “built environment” is more of a concern from Options 1 and 2 and not a concern from the landfill since the area (largely rural) already houses an operational landfill. In contrast, either of the two MBT processes would require a building which would have a visual impact on the surrounding landscape.

The HIA screening for non-environmental factors (see Table 1) found that these factors were not very useful in distinguishing between the two MBT options as each is likely to have similar impacts on these determinants of health. The working group agreed however, that representatives of the neighbours of the site would be better able to assess these factors.

⁴ A description of the LCA process and results can be found in Golder Associates Workpackage 3 Report: Planning Study for Assessment of Mixed Solid Waste Processing Technology and Siting Options, City of Toronto provides more detail on the initial HIA screening. available at http://www.toronto.ca/garbage/mwp/pdf/work_package-3.pdf

Figure 1: Relative Concern for Main Environmental Factors by Technology Option



The HIA screening results indicated that Option 2 (MBT with AD and CLO) had the lowest potential negative impact overall, largely due to the effect of the energy offset from biogas capture. Biogas is created during the process of anaerobic digestion. This biogas (or biofuel) can be utilized for energy production, which can replace energy from other sources and therefore reduce air pollution from these other sources (such as a polluting coal-fired power plant). While both technologies may have an impact on several aspects of health through impacts on the environment, landfilling residual waste with no pre-treatment is the option with the most potential negative impacts. Engineering technologies and design of the facility and site can mitigate some of the potential adverse impacts of the preferred option.

Workpackage 3 Report: Planning Study for Assessment of Mixed Solid Waste Processing Technology and Siting Options, City of Toronto provides more detail on the initial HIA screening.⁵

The results of the Mixed Waste Processing Study including the HIA were presented to the local community in a public consultation process which included:

- 1) a presentation and open house for the local council, representatives from the local Public Liaison Committee, the First Nations Liaison committee, Middlesex-London and Elgin-St. Thomas health units and site neighbours on September 29, 2010;

⁵ Workpackage 3 Report can be found at http://www.toronto.ca/garbage/mwp/pdf/work_package-3.pdf.

- 2) an evening open house for the local community on September 30, 2010; and
- 3) written and verbal comments collected from the attendees.

This consultation indicated that members of the community were interested in being involved in the HIA process.

HIA Stakeholder Workshop

It was decided that the best approach to involve the local receiving community in the HIA was to hold a stakeholder workshop, which occurred at the Green Lane Landfill administrative offices on March 8, 2010. The workshop was facilitated by TPH with support of the Public Consultation Unit, SWMS and Golder.

Invitations were sent to:

- Munsee-Delaware First Nation
- Chippewas of the Thames First Nation
- Oneida Nation of the Thames
- Elgin-St. Thomas Public Health Unit
- Middlesex-London Health Unit
- Green Lane Landfill Public Liaison Committee, and
- Township of Southwold Council.

Seventeen stakeholder representatives participated including (among others): Mayor McIntyre, three Councillors, the Township's Chief Administrative Officer, and Dr. Frank Warsh, the Medical Officer of Health for Elgin-St. Thomas Public Health. There was no representative from the Munsee-Delaware First Nation.

In the time intervening between the first phase of the HIA and the workshop, SWMS had further refined their operational criteria. Once applied, these identified Option 2 – MBT with AD as the preferred technology. This is the same option that the initial HIA screen assessed as having the lowest health impact. The HIA workshop therefore focussed on getting input into this preferred option.

The main objective of the HIA workshop was to gain a better understanding of any potential health concerns of the community relating to the proposed technology and to identify the areas where further mitigation efforts could be needed to address these concerns.

The screening tool found in the draft TPH HIA framework was used to gather input from the participants who were divided into stakeholder groups.⁶ Each group discussed the potential impacts of the facility on health and identified their ranking of factors in terms of level of importance for positive or negative impacts. The stakeholders presented their small group findings to the whole group, and

⁶ The four stakeholder groups completing the HIA tool were: 1) First Nations, 2) Township of Southwold Council, 3) public health and 4) Green Lane Landfill Public Liaison Committee.

discussed them. This discussion highlighted their concerns (see Table 2). Ways in which these concerns might be addressed were also suggested.

The local community stakeholders identified similar potential impacts on health as those identified in the first phase of the HIA. The potential negative impacts of most importance to the participants included odour, air quality and truck traffic. The group discussion also brought forward a number of specific mitigation requests from the participants, including comments from the Township of Southwold Council representatives on the need to enclose the CLO during the curing process and a request by the local health units for a cumulative impact assessment. In addition, matters that had not been previously recognized, such as the potential for educational opportunities and impacts of catastrophic failure of the facility, were brought forward. The group identified an education centre, research and development opportunities, trust fund benefits and joint recycling between the City of Toronto and the local community as ways the new facility could benefit the community.

Table 2: Participants’ Ranking of Potential Impacts from the Proposed Mixed Waste Processing Facility

Negative Impacts			Positive Impacts		
Most Important	Important	Least Important	Most Important	Important	Least Important
Odour	Physical activity	Aesthetic and tourism	Local jobs	Greenhouse gas reduction	
Air Quality	Local food supply	Relationship/resentment of Toronto	Education	Waste diversion	
Transportation	Litter/nuisance	Crime	Local compost use	Recycling with Toronto	
Water	Noise and dust		Revenue	Research and development	
Soil Quality	Transportation concerns		Social cohesion	Experimental farm to test benefit/impacts of CLO	
Health Services	Increase in coyote and vermin		Increased benefit to trust fund		
Vector born illness	Hunting and fishing				
Vermin issues	Traditional medicine				
Catastrophic failures					
Community and social cohesion					
Family cohesion					
Noise					
Property Values					

More detail on the HIA stakeholder workshop can be found in the document titled, *Summary of the Health Impact Assessment (HIA) Consultation, City of Toronto Mixed Waste Processing Facility* found at http://www.toronto.ca/garbage/mwp/pdf/work_package-3.pdf.



Memorandum

Dr. David McKeown
Medical Officer of Health

Public Health
277 Victoria Street
5th Floor
Toronto, Ontario M5B 1W2

Tel: 416 338-7820
Fax: 416 392-0713
dmckeown@toronto.ca
www.toronto.ca/health

To: Geoff Rathbone, General Manager, Solid Waste Management Services

From: Dr. David McKeown, Medical Officer of Health

Date: June 11, 2010

Subject: Mixed Waste Processing Study Health Impact Assessment (HIA) Recommendations

Toronto Public Health (TPH) staff have appreciated working with Solid Waste Management Services (SWMS) on the health impact assessment (HIA) for the Mixed Waste Processing Study. The initial HIA screen identified mechanical biological treatment with anaerobic digestion (MBT with AD) as the technology option with the fewest potential health impacts. I understand that this technology option for the residential mixed waste processing facility also presented favourably based on study technology screening criteria, life cycle assessment (LCA) and affordability considerations. I also understand that the City-owned land next to Green Lane Landfill in the Township of Southwold was the only site in the candidate sites list that had sufficient area for the full processing and final curing operations.

Based on staff suggestions, and to address the receiving community's request to be involved in the HIA, a workshop was organised on March 8th, 2010 at the Green Lane Landfill Administration Office. Representatives from four stakeholder groups (First Nations, public health, local government and public liaison committee) were invited. Seventeen people participated in the workshop, including Mr. James McIntyre, Mayor of the Township of Southwold and Dr. Frank Warsh, Medical Officer of Health for Elgin-St Thomas Public Health. The purpose was to better understand the community's perspectives on potential health impacts from the proposed facility and to identify any mitigation efforts that could be adopted to address these concerns. Local stakeholders identified both negative and positive potential impacts that could result from building and operating the mixed waste processing facility. Based on the outcomes of the HIA and the workshop I recommend the following.

- (1) All stakeholder groups identified odour as a priority potential health concern. The Township of Southwold Council representatives specifically identified the need to contain the composting windrows within a building. Building an enclosure to contain the windrows is one of the more costly odour mitigation strategies and could add substantially to the project's costs. Your staff have identified enclosing the windrows with a fabric cover system specifically designed for compost operations as the preferred measure to address odour. Once the facility is built, I recommend that you monitor the effectiveness of this strategy and, if it does not prove to be sufficient to address the community's concerns of odour from composting, explore additional measures in consultation with the local public liaison committee and my staff.

- (2) The stakeholder representatives from the local public health units requested that the City conduct a cumulative impact assessment to better understand the extent to which adding a new facility would impact the whole airshed. I encourage you to conduct a more detailed assessment in collaboration with TPH staff. This assessment should aim to evaluate potential impacts associated with exposures to chemicals released during the construction and operation of the proposed project. Since air is the main route of human exposure to environmental releases from the proposed facility and air quality is of primary concern to local stakeholders, the focus of the assessment should be an evaluation of potential exposures to chemicals in ambient air in the airshed of the facility and surrounding communities. The assessment should take into account existing background ambient air concentrations and consider exposures to sensitive populations (i.e., First Nations, young children and elderly) in the surrounding communities. The assessment should use conservative assumptions to ensure that potential exposures and health risks are not underestimated and incorporate the results from the life-cycle assessment of the facility.
- (3) To ensure that health and environmental concerns identified in the HIA are addressed in the design and operation of the facility, I recommend that the terms of reference for the contractors require them to clearly identify the design and operational elements that have been incorporated to mitigate or minimize health and environmental impacts.
- (4) Stakeholders groups also identified a number of opportunities for potential positive impacts. These included an educational centre to promote waste diversion and programs for schools, strengthening of local recycling programs, and research on the beneficial use of the compost-like output of the facility, including pilot programs with the local farmers. I encourage you to pursue these opportunities through the procurement process for the design, permitting and operation of the facility.

I will be submitting a report “Mixed Waste Processing Study Health Impact Assessment” to the June 28, 2010 Board of Health meeting, which will include the summary of the HIA which is attached. You or your staff are most welcome to attend.

I am happy to discuss these recommendations further with you. I look forward to our continued collaboration with SWMS and the Residual Waste Working Group as we move into the next stages. For further information please contact Ronald Macfarlane of my staff (e-mail rmacfar3@toronto.ca; tel.: 338-8097).



Dr. David McKeown
Medical Officer of Health

Attachment: Report on the Health Impact Assessment (HIA) for the Proposed City of Toronto Mixed Waste Processing Facility