

TORONTO STAFF REPORT

February 9, 2004

To: Board of Health
From: Dr. Sheela Basrur, Medical Officer of Health
Subject: Toronto Public Health - 2004 Operating Budget Submission

Purpose:

To provide an overview of the 2004 Toronto Public Health Operating Budget submission.

Financial Implications and Impact Statement:

The 2004 Toronto Public Health Operating Budget submission totals \$189,951.3 thousand (gross)/\$79,680.3 thousand (net). This is \$16,217.9 thousand or 9.3% (gross)/\$10,028.4 thousand or 14.4% (net) above the 2003 Approved Adjusted Operating Budget. These estimates assume full provincial cost sharing for eligible programs.

The net increase is comprised of \$4,418.1 thousand for base budget changes, a reduction of \$10.0 thousand for service level adjustment, and \$5,620.3 thousand for new and enhanced services. The net increase for base changes includes \$3,056.2 thousand for economic factors, zero-based and prior year impact adjustments; and \$1,361.9 thousand for Other Base Changes.

The Other Net Base Changes include: the reinstatement of the economic factors and salary adjustments for Healthy Babies Healthy Children (HBHC) subject to 100% funding from the Provincial Government; an addition of \$1,030.4 thousand to the West Nile Virus (WNV) base budget to maintain the 2003 service level; \$128.5 thousand for furnishing; and deferral of THEIS operating cost savings of \$203.0 thousand.

The net request of \$5,620.3 thousand for new or expanded services includes: a reduction in the Toronto Public Health gapping target from 4% to 2%; increased funds for local public health communicable disease emergencies/emerging diseases (ie. the Communicable Diseases Liaison Unit); the West Nile Virus Program; a number of quality assurance measures and costs related to Council initiated by-law implementation.

There are five new requests which did not form part of our Budget Submission for the Executive Management Team (EMT) in September 2003. These are adjustments of \$897.1 thousand

(gross)/ -\$417.1 thousand (net) for the Communicable Diseases Liaison Unit or CDLU (formerly called Hospital Infectious Diseases Unit), \$903.4 thousand (gross) / \$451.7 thousand (net) for enhancements to the Food Safety Program, \$635.5 thousand (gross)/\$317.8 thousand (net) for enhancements to the TB Control program, \$232.4 thousand (gross & net) for wage harmonization settlement relating to Animal Care & Control Officers, and a reduction of \$512.6 thousand (gross)/\$0 (net) to reflect capping of 100% Provincially funded programs.

The EMT 2004 Recommended Operating Base Budget of \$175,426.3 thousand (gross) / \$72,639.4 thousand (net) is \$1,420.7 thousand net lower than the Requested Base mainly due to the following recommended reductions: corporate charges \$899 thousand, employee benefits \$200 thousand, THEIS operating savings \$203 thousand, and Animal Services service level reduction of \$123.5 thousand.

The EMT 2004 Recommended New and Enhanced Budget of \$7,786.9 thousand (gross) / \$940.4 thousand (net) is \$4,679.9 thousand (net) lower than the requests submitted in September 2003 and 5,264.6 thousand (net) lower than all the requests submitted in this report, as detailed on Appendix 1.

The total EMT 2004 Recommended Operating Budget of \$183,213.2 thousand (gross) / \$73,579.8 thousand (net) is \$6,685.2 thousand (net) lower than the total requests included in this submission, as detailed on Appendix 1.

The Chief Financial Officer and Treasurer has reviewed this report and concurs with the financial impact statement.

Recommendations:

It is recommended that the Board of Health approve the following Operating Budget Proposals:

1. The following base budget adjustments:
 - a) Annualization of initiatives, compensation policies and operating impacts of capital program of -\$2,712.7 thousand (gross)/\$1,319.3 thousand (net);
 - b) Economic factors and zero based adjustments of \$3,685.6 thousand (gross)/\$1,736.9 thousand (net);
 - c) Other base changes of \$863.3 thousand (gross)/\$64.7 thousand (net);
 - d) Realignment of IT budget from contracted services to salaries and benefits for a reduction of \$20.0 thousand (gross) / \$10.0 thousand (net);
2. The following service improvements and new service requests recommended by the Executive Management Team:

- a) Reduction in Toronto Public Health gapping from 4% to 3% to improve capacity to meet mandatory guidelines and respond to urgent Public Health issues at a cost of \$1,072.8 thousand (gross) / \$594.9 thousand (net), and that corresponding budget adjustments to gapping be made to new and enhanced requests;
 - b) Criminal background checks at \$10.5 thousand (gross) / \$5.3 thousand (net) as a one time cost for 2004 in response to an anticipated school board requirement;
 - c) Sterile water for needle exchange at \$140.0 (gross)/\$70.0 thousand (net) to address a new provincial download to Toronto Public Health;
 - d) Hassle Free Clinic at \$167.6 thousand (gross) /\$83.8 thousand (net) for one-time costs of moving and renovations as well as increased operating costs to meet growing service demand, with the understanding that the clinic will generate an additional \$30.0 thousand from OHIP revenues to cover recurring operating costs. One time costs of \$125 thousand (gross) / \$62.5 thousand (net) to be reversed in 2005;
 - e) Health Hazard Air Quality equipment for phased in replacement, maintenance and upgrading of pool sampling, indoor air quality and other health hazard equipment at a cost of \$30.0 thousand (gross)/\$15.0 thousand (net);
 - f) Interdepartmental charges for facilities maintenance of \$216.3 thousand (gross)/\$171.5 thousand (net).
3. The following budget proposals recommended by the Executive Management Team at no net cost to the City of Toronto:
- a) Infant Hearing Program reallocation of resources from non-payroll to payroll for an increase adjustment of 1.5 positions;
 - b) Operating expenditures funded in 2004 from the Communicable Disease Control Information System (CDCIS) Capital Project at \$545.9 thousand (gross) /\$0 (net);
 - c) Environmental studies at Ashbridges Bay of \$291.8 thousand (gross) / \$0 (net) funded in 2004 from Water Wastewater Capital;
 - d) Council approved 2004 – 2005 projects funded from the Ontario Works Incentive Funds for Health Promotion for At-Risk youth at \$80.0 thousand (gross) / \$0 (net); Party in the Right Spirit-Once More at \$30 thousand (gross) / \$0 (net); Young Parents with No Fixed Address at \$125.0 thousand (gross) / \$0 (net); and Establishment of a Mobile Dental Clinic for homeless and underhoused persons at \$75.0 thousand (gross) / \$0 (net);
 - e) Funding of 2003 and 2004 economic factors and salary adjustments of \$1,741.7 (gross) / \$0 (net) for Healthy Babies Healthy Children be subject to reinstatement of 100% Provincial funding.

4. The following service improvements and new service requests with net costs to the City, not recommended by the EMT (in priority order):
 - a) The Communicable Diseases Liaison Unit (CDLU) (formerly called the Hospital Infectious Diseases Unit (HIDU) be approved with an annualized cost of \$4,475.2 thousand (gross) / \$2,237.6 thousand (net) and an additional adjustment of \$897.1 thousand (gross) / -\$417.1 thousand (net) to reflect the maximum allowed Provincial Funding in 2004 and an incremental 2005 annualization of \$1,314.1 thousand (net); and that the City of Toronto request continued 100% Provincial funding for this service from April 1st 2004 and on;
 - b) Tobacco Control By-law implementation at a cost of \$273.3 thousand (gross) / \$136.7 thousand (net) in 2004 and an incremental annualization of \$24.8 thousand (gross) / \$12.4 thousand (net) in 2005 to achieve a consistent level of service for tobacco control activities and a higher level of compliance for Phase 3 of the by-law implementation;
 - c) Pesticide By-law implementation at \$450.0 thousand (gross) / \$225.0 thousand (net) in order to implement a public awareness, education and outreach campaign and respond to complaints as described in the February 2004 report to the Board of Health, "Implementation of the Pesticide By-Law";
 - d) The enhanced West Nile Virus Program at \$526.8 thousand (gross) / \$263.4 thousand (net) and that the City of Toronto request the Province to fund this enhancement at 100%;
 - e) One additional Vaccine Preventable Disease Call Centre supervisor to address major workload and quality assurance issues at a cost of \$45.2 thousand (gross) / \$22.9 thousand (net) for 2004 and an incremental annualization of \$42.1 thousand (gross) / \$21 thousand (net) in 2005;
 - f) A dedicated AIDS and Drug Prevention Grants Supervisor to improve risk management, accountability and evaluation at a cost of \$45.8 thousand (gross) / \$22.9 thousand (net) for 2004 and an incremental annualization of \$42.1 thousand (gross) / \$21 thousand (net) in 2005;
 - g) Child and Youth Action Committee (CYAC) Action Plan – Peer Nutrition and Nobody's Perfect Parenting program enhancement at \$525.5 thousand (gross) / \$262.8 thousand (net) in 2004 and an incremental annualization of \$415.8 thousand (gross) / \$207.9 thousand (net) in 2005;
 - h) Harmonization of mobile dental care for seniors in long-term care facilities at \$472.6 thousand (gross and net) to ensure provision of service on an annual basis;
 - i) Enhanced service supports for vulnerable adults and frail elderly including assessment, referral and education at a cost of \$307.6 thousand (gross) / \$153.8 thousand (net) for

- 2004 and an incremental annualization of \$248.6 thousand (gross) / \$124.3 thousand (net) in 2005;
- j) Hotline and inspection services for retirement homes at \$545.4 thousand (gross)/ \$272.7 thousand (net) in 2004 and an incremental annualization of \$401.1 thousand (gross) / \$200.53 thousand (net) in 2005;
5. The Board of Health endorse an increase of \$903.4 thousand (gross) / \$451.7 thousand (net) to match provincial funding for the food safety program as identified in the February 2004 report to the Board of Health, "Supplementary Funding for the Food Safety Program";
 6. The Board of Health endorse an increase of \$635.5 thousand (gross)/\$317.8 thousand (net) in 2004 for the TB Control Expanded Program, and additional net increments of \$631,898 thousand in 2005, \$99,351 thousand in 2006 and \$121,595 thousand in 2007, as identified in the February 2004 report to the Board of Health, "Tuberculosis Prevention and Control Services for Homeless/Underhoused Persons and Inmates of Correctional Facilities";
 7. The Board of Health endorse a reduction of \$512.6 thousand (gross)/\$0 (net) to reflect the capping to 2003 levels of 100% Provincially Funded programs other than Healthy Babies Healthy Children;
 8. The Board of Health endorse an increase of \$232.4 thousand (gross and net) to fund the payroll impact of the wage harmonization settlement relating to Animal Care & Control Officers;
 9. The Board of Health recommend the reinstatement of \$123.5 thousand (gross and net) to the TPH Animal Services budget for continuation of animal cadaver pick-up services and if these monies are not restored to the budget that the service be discontinued;
 10. That the budget decisions of the Board of Health be referred to the Budget Advisory Committee for consideration and appropriate action; and
 11. That the appropriate City Officials be authorized and directed to take the necessary actions to give effect thereto.

Background:

The 2003 approved operating budget contained an increase of \$4,431.7 thousand (net) or 6.8% over the 2002 Approved Adjusted Operating Budget.

The 2004 Operating Budget net submission is \$10,028.4 thousand or 14.4% more than the 2003 Approved Adjusted Operating Budget. In addition, there is a net increase of \$584.7 thousand for new requests for TB expansion, Food Safety Program enhancements, CDLU, and wage harmonization settlement. The 2004 Operating Budget has been prepared on the assumption that

the Ontario Ministry of Health and Long Term Care will fund its full share of the costs for all mandatory health programs and services in 2004.

Comments:

Financial details on the proposed TPH operating budget can be found in Appendix A. This template shows all changes to the 2003 Approved Operating budget following its approval by City Council in March, 2003.

The 2003 Approved Operating Budget has been subject to several in-year adjustments, the major components being enhancements to WNV of \$2,693.4 thousand (gross)/\$0 (net) and funding for the CDLU of \$904.1 thousand (gross)/\$0 (net). The resulting 2003 Approved Adjusted Budget including the in-year adjustments is \$173,733.4 thousand/\$69,651.9 thousand (net) and a staff complement of 1,791.6 positions.

Payroll Pressures:

A significant portion of the financial pressures within the 2004 TPH Operating Budget arise from payroll increases that were awarded through collective bargaining or Council compensation policies. These pressures (merit increase, benefit rate adjustments, leap year impact, COLA) total \$3,048.2 thousand (net) or 4.4% over the 2003 Approved Adjusted Budget. Payroll costs comprise 75% of the overall Public Health budget.

Corporate and Interdepartmental Charges:

As part of the maximization of the 1999 provincial cost sharing funding for Toronto Public Health, an allocation of \$13.2 million in Corporate Charges was added to the Toronto Public Health budget with a corresponding recovery in non-program costs for the City. As recommended by Council, the City Auditor conducted a review based on actual services provided to Public Health and city-wide standards for overhead recoveries in place during 2002 and established that a total of \$10.3 million was an appropriate and consistent charge. The 2004 equivalent costs are estimated at \$11.4 million. The EMT recommended 2004 Toronto Public Health Operating Budget reflects this decrease in corporate and interdepartmental charges.

Service Level Adjustments:

a) Realignment of I&T Budget

Following the lead of Corporate Information and Technology, TPH has submitted a proposal to improve productivity and generate savings of \$20 thousand (gross)/\$10 thousand (net) by reducing its reliance on external consultants and replacing them with eight lower cost permanent positions. This will bring I&T staff to 36 permanent approved positions and three part-year contractors. The EMT has recommended this budget adjustment.

b) Reduction in Animal Services

The EMT is proposing the reduction in level of service of animal cadaver pick-up for a savings of \$123.5 thousand (gross and net) and a reduction of 1.2 Animal Care and Control Officer positions. Animal Services picks up dead domestic and wild animals as requested by residents, elected officials and animal owners, on public or private property. There were about 5,400 animal cadavers picked up in 2002. The EMT has recommended this reduction in order to meet overall affordability targets. It is recommended that this funding be reinstated. However, if these monies are not restored to the budget, this service cannot continue.

New and Expanded Programs with No Net Cost to the City of Toronto recommended by EMT:

a) Infant Hearing Program

The provincial government provides 100% funding for this program which was initiated in 2002. Based on an operational assessment, a re-allocation of resources from non-payroll to payroll within the infant hearing program would improve the efficiency of program delivery. The program requires the following additional staff in order to maintain the records of the approximately 38,000 babies born in Toronto each year: 1 data entry clerk and 0.5 of a budget clerk position with no net cost to the City of Toronto. The EMT has recommended this adjustment.

b) Operating Impact of Communicable Disease Control Information System (CDCIS):

The development of the CDCIS requires the support of 7.1 temporary staff positions. Funding is included in the 2004 EMT recommended capital budget for Toronto Public Health at a cost of \$545.9 thousand (gross)/\$0 (net).

c) Environmental Studies at Ashbridges Bay:

The Ashbridges Bay Treatment Plant mediation agreement included various studies to be undertaken by Toronto Public Health at the request of City of Toronto Works and Emergency Services (WES). The three studies to be conducted in 2004 include a Health Status Study, Emissions Study and Biosolids Review. Funding of \$291.8 thousand (gross)/\$0 (net) has been recommended by the EMT and is part of the EMT recommended capital budget for WES.

d) Ontario Works Projects:

The following Ontario Works projects were approved by Council in 2003. These projects are fully funded through the Ontario Works Incentive Fund. The Health Promotion for At Risk Youth, at \$80.0 thousand (gross)/\$0 (net), will develop mechanisms to involve youth, including those who tend to be disenfranchised, in the development, implementation and evaluation of a comprehensive youth health promotion framework. "Party in the Right Spirit – Once More" at \$30.0 thousand (gross)/\$0 (net), will develop, implement and evaluate safer partying strategies that will address personal safety issues for high risk youth at four high

schools in communities of high need in Toronto. The Young Parents, No Fixed Address (YPNFA) initiative will work with the YPNFA partnership to develop a comprehensive and coordinated response for homeless pregnant and parenting youth and their children at a cost of \$125.0 thousand (gross) /\$0 (net) and includes a staff position for the duration of the project. The Mobile Dental Clinic for Underhoused and Homeless Persons will help provide dental services for homeless and underhoused youth and adults across Scarborough at a cost of \$75.0 thousand (gross)/\$0 (net). The EMT has recommended these budget requests.

e) Healthy Babies Healthy Children:

Funding for Healthy Babies Healthy Children has been capped at 2002 levels without allowance for cost of living adjustments or other changes in economic factors. As a result, there is a subsidy shortfall in the amount of \$1,741.6 thousand (gross). TPH and EMT is recommending reinstatement of this amount subject to 100% funding from the Provincial Government. Until confirmation from the Province is received, 23 positions must be gapped.

New and Expanded Programs with Net Cost to the City of Toronto recommended by EMT:

a) Reduction in Gapping:

The current gapping for Toronto Public Health is 4%. This level is higher than the corporate average. To maintain the high gapping target, Toronto Public Health has had to reduce service levels across the division resulting in increased non-compliance with mandatory guidelines and reduced capacity to respond to emergencies and urgent public health issues. TPH has proposed that gapping be reduced to 2% which has a \$2,145.6 (gross) / \$1,189.9 thousand (net) impact on the base budget. EMT has proposed a reduction of TPH gapping from 4% to 3% or an impact of \$1,072.8 thousand (gross)/\$594.9 thousand (net) in the base budget.

TPH new and enhanced requests have assumed a gapping of 4%. Should Council approve a lower gapping percentage, gapping for new and enhanced requests needs to be adjusted accordingly.

b) Criminal Background Checks:

It is anticipated that all service providers with regular and direct contact with school pupils at school sites will be required by school boards to undergo criminal background checks. Approximately 525 TPH employees who provide services at school sites will require these checks. The fee for this service is estimated at \$20 per person. The total one-time cost for TPH for this new requirement will therefore be \$10.5 thousand (gross) and \$5.3 thousand (net). This funding has been recommended by EMT.

c) Sterile Water for Needle Exchange:

Until the 2003 fiscal year, the Province provided sterile water ampoules at no charge to needle exchange programs in Ontario. In May 2003, the Province announced that they would

discontinue this support. Sterile water is necessary for mixing with the drug solution before injection. If sterile water is not available, drug users resort to sharing water which can result in transmission of HIV, Hepatitis B and Hepatitis C or to using tap water which can result in infections. TPH is therefore requesting that \$140.0 thousand (gross) / \$70.0 thousand (net) be added to the base 2004 Operating Budget. This funding has been recommended by EMT.

d) Hassle Free Clinic – Moving, Renovation and Additional Operating Costs:

Hassle Free Clinic is a contracted agency under a purchase of service agreement with Toronto Public Health. It provides sexual health clinic services to people not easily serviced by TPH and other health services. In particular, the clinic effectively addresses the needs of men having sex with men.

Hassle Free Clinic is requesting one time costs to assist with moving and renovations (\$125.0 thousand (gross) / \$62.5 thousand (net)); as well as an annual increase in the operating budget to fund an increase in contracted sexual health services (\$42.6 thousand (gross) / \$21.3 (net)) as well as increased rent (30.0 thousand (gross) / \$15.0 thousand (net)). Hassle Free Clinic has experienced a 25% increase in the number of clinic visits in the past five years and present clinic space is not accessible for persons with physical disabilities. In addition, there is currently an outbreak of syphilis in Toronto with a six fold increase in cases of syphilis in 2002 compared to 2001. Of these syphilis cases, 98% are in men, the majority of whom are men having sex with men. The Hassle Free Clinic provides a vital service in containing this outbreak. This funding has been recommended by EMT with the understanding that the clinic will generate an additional \$30.0 thousand from OHIP revenues to cover recurring operating costs.

e) Health Hazard Air Quality Equipment:

Adequate health hazard monitoring equipment is required for indoor air quality, pool sampling and other health hazards in order to meet legislated requirements to provide prompt and effective response to health hazard investigations. The TPH health hazard equipment is old and in a state of disrepair. This means that the equipment regularly breaks down and is unavailable in times of need. In order to have adequate, well maintained equipment, it is recommended that \$30.0 thousand (gross) / \$15.0 thousand (net) be added to the TPH 2004 Operating Budget in order to phase in the purchase and maintenance of priority equipment for all regional healthy environment offices. This funding request has been recommended by EMT.

f) Interdepartmental Charges for Facilities Maintenance

Corporate Facilities conducted a State of Good Repair audit of eight City-owned facilities fully occupied by Public Health and recommended a maintenance schedule to avoid the deterioration of these facilities. Items that qualify for capital funding have been included in the capital budget. The EMT has recommended the operating funding requirement of \$216.3 thousand (gross) / \$171.5 thousand (net).

New and Expanded Programs with Net Cost to the City of Toronto not recommended by EMT:

The following new and expanded programs include quality assurance measures, improved capacity to respond to communicable disease emergencies/emerging diseases, implementation of Council approved by-laws, Board of Health directives, and Corporate initiatives.

a) Communicable Diseases Liaison Unit:

Experience from SARS demonstrated the importance of Toronto Public Health having the capacity to establish enhanced disease surveillance and public health response to hospital-based infectious diseases. Prior to SARS Toronto Public Health was not meeting provincial minimum mandatory requirements for control of infectious diseases and infection control in institutions. Council approved a dedicated communicable diseases hospital liaison unit to be established for one year ending June 2004 and requested 100% provincial funding for this unit. The province approved 100% for the unit until March 2004 and 50% funding as an ongoing commitment. This means that as of April 1st, 2004, the City of Toronto is required to fund 50% of the operating costs at \$2,237.6 thousand (net) on an annual basis. The CDLU is essential for Toronto Public Health's capacity to prevent and control serious infectious disease outbreaks in the future. The EMT has recommended this enhancement of \$4,475.2 thousand (gross) subject to 100% funding from the Province.

An additional adjustment of \$897.1 thousand (gross)/ -\$417.1 thousand (net) in 2004 is required to reflect the 100% provincial funding until March 31st, 2004.

b) ETS by-law Implementation:

The next phase of the ETS By-law will be implemented starting June 1st, 2004 when all bars, bingo halls and casinos will be required to be smoke free. In order to ensure a consistent level of enforcement across the City of Toronto and to help achieve a high level of compliance, TPH requires additional resources. Currently enforcement is provided by public health inspectors who also conduct enforcement activities for food safety, safe water, rabies control and other health hazard investigation. The volume of work in these areas makes it very difficult to keep up with complaints investigations and surveillance activity for the ETS By-law implementation. The next phase of smoke-free bars is expected to result in a significant increase in complaints and enforcement demands. Much of the enforcement activity is required outside regular business hours. Without an effective enforcement program, TPH will have difficulty in ensuring the continued success of the by-law.

Therefore, four permanent municipal code enforcement officers and a clerk to provide administrative support, are required to achieve a consistent level of service for tobacco control activities and a higher level of compliance on an ongoing basis. An additional four temporary officers will allow TPH to respond to the high enforcement demand leading up to and following the ETS By-law implementation in June 2004. The total cost for this will be

\$273.3 thousand (gross) / \$136.7 thousand (net) for 2004 with an annualization net cost of \$12.4 thousand in 2005. The EMT has not recommended this request.

c) Pesticide by-law Implementation:

Council endorsed a by-law restricting the use of outdoor pesticides. The By-law comes into effect April 1st, 2004. The first phase of implementation includes a public awareness, education and outreach campaign that will inform the public about the new requirements and will provide information about lawn and garden strategies that reduce the use of pesticides. In addition, staff are required to respond to complaints and make on-site visits to provide information about the restrictions and alternative products permitted under the by-law. TPH requires a total of \$450.0 thousand (gross)/\$225.0 thousand (net), comprising seven seasonal positions and funds for a public education and outreach campaign. The EMT has not recommended this request

d) West Nile Virus:

The 2004 base budget for West Nile Virus (WNV) of \$3,507.5 thousand (gross) / \$1,753.7 thousand (net) maintains the 2003 service level approved by Council to comply with minimum standards of prevention and control legislated by the Province in 2003. The TPH enhanced WNV request for 2004 includes: larviciding of 200,000 catch basins twice within the required three months, requiring 24 additional students (6 FTEs) and 1 Public Health Inspector (.5 FTE) to supplement the 28 students hired in 2003, plus related materials and equipment. This represents an additional cost of \$209.0 thousand (gross) / \$104.5 thousand (net) in salaries and \$53.0 thousand (gross) / \$26.5 thousand (net) in non salary cost for a total request of \$262.0 thousand (gross) / \$131.0 thousand (net).

In 2003, a one-time funded communications budget was provided as a shared initiative with Works and Emergency Services. A minimal communications strategy and public awareness campaign conducted by TPH in 2004, will require \$65.0 thousand (gross) /\$32.5 thousand (net).

In previous WNV seasons the approach generally focused on controlling mosquitoes which favour man-made water sources and can be found close to human population concentrations. In reviewing the data for 2003, it became clear that late season human cases were linked to mosquito species that favour natural bodies of surface water which were not targeted for control in 2003. Therefore TPH is requesting \$200.0 thousand (gross) \$100.0 thousand (net) for the larviciding of surface bodies of water to be undertaken by a private pest exterminator in 2004.

The 2004 request for the TPH WNV program enhancement is \$526.8 thousand (gross) / \$263.4 thousand (net). EMT has recommended \$527.0 (gross)/\$0 (net). It is important to note that the effectiveness of the overall WNV Prevention and Control Program for the City of Toronto depends on co-ordinated and collaborative response from a number of City divisions and Departments. EMT has recommended that the resources for WES, UDS and Parks and Recreation involvement in WNV be subject to 100% Provincial funding. Since the

Province has previously indicated an unwillingness to cover 100% of these costs for 2004, the City of Toronto's comprehensive WNV Prevention and Control Program will be limited since the WNV activities of other city departments will not occur if full provincial funding is not forthcoming.

e) Vaccine Preventable Disease Call Centre Supervisor:

The Vaccine Preventable Disease (VPD) program requires one additional Call Centre supervisor at a cost of \$45.8 thousand (gross) / \$22.9 thousand (net) for 2004 with an annualization cost of \$21.0 thousand (net) in 2005. Currently the Call Centre supervisor is responsible for overseeing 28 clerical staff, oversees the program's complex information technology infrastructure and is the primary liaison with over 1000 public and private Toronto schools. The Call Centre deals with critical and confidential client information and receives over 100,000 calls from the public each year. Recent additional program responsibilities mandated by the Ministry of Health and Long-term Care such as the universal influenza immunization program have made it increasingly difficult for the Call Centre supervisor to manage all required responsibilities. The EMT has not recommended this funding request.

f) AIDS and Drugs Prevention Grants Supervisor:

The Auditor's report on Community Services grants, "CNS - Community Services Program Grants Review", contained a number of recommendations pertaining to risk management, accountability and evaluation of all grants programs. As a result, the TPH AIDS and Drug Prevention grants programs have made a number of administrative changes. It is proposed that they be administered under a single supervisor who has dedicated grants responsibilities. This will require an additional \$45.8 thousand (gross) / \$22.9 thousand (net) in 2004 with an annualization cost of \$21.0 thousand (net) in 2005. The EMT has not recommended this request.

g) Children and Youth Action Committee Action Plan – Peer Nutrition/Parenting Program:

In 2000, TPH received funding to initiate the highly successful peer nutrition program. The proposed enhancement will provide services for an additional 900 parents and 1,400 children in Peer Nutrition and it will add Nobody's Perfect parenting groups (reaching a total of 2,700 parents and 4,000 children) to the program. The goal of the Peer Nutrition program is to enhance the nutritional status of children 6 months to 6 years. This is accomplished by improving food selection, purchasing and food preparation skills of families participating in the program plus providing social supports and building leadership skills among parents in the diverse ethno-racial communities who are often missed by traditional nutritional programs. A study conducted in 2003 clearly demonstrated that once these parents enter the program other parenting issues arise. The addition of Nobody's Perfect parenting groups will ensure that participants have access to education and support relating to these concerns. The cost for this enhancement is \$525.5 thousand (gross)/ \$262.8 thousand (net) in 2004 with an annualization cost of \$207.9 thousand (net) in 2005 and includes 14 staff (7 Community

Nutrition Assistants, 1 clerk, 3 PHN's, 1 dietician, 1 nutritionist and a manager). The EMT has not recommended this funding request.

h) Harmonization of Mobile Dental Care for Seniors in Long-term Care Facilities:

During the 2003 budget process, Council approved the addition of \$100.0 thousand (gross/net) to expand the mobile dental program for seniors in long-term care facilities to regions of the City of Toronto that did not receive this service. This resulted in a service reduction for residents in the former City of Toronto. The Board of Health therefore requested the Medical Officer of Health to report on the cost to harmonize the program across the city at the level that existed in the former City of Toronto. With the present level of harmonization, 3,635 residents in 23 facilities in the former City of Toronto and approximately 4,500 residents in long-term care facilities in the rest of the city, as well as residents of city-operated Homes for the Aged, will receive screening, denture identification, preventive services, caregiver education and referral for dental treatment services every two years. An additional \$472.6 thousand (gross/net) is required to provide this service annually which is the level of service that existed in the former City of Toronto. The EMT has not recommended this funding request.

i) Enhanced Service Supports for Vulnerable Adults and Frail Elderly:

At its meeting in July 2003, Council received the Seniors Assembly report and requested that recommendations for funding contained in the report, be referred to the Budget Advisory Committee for consideration in the 2004 budget. An enhancement of the TPH vulnerable adults and frail elderly program would provide crucial supports for the most vulnerable members of the community. The need for such support was reinforced through the City's experience during SARS and the extreme heat alerts in summer 2003. The requested additional 7 staff positions (5 Public Health Nurses (PHN's), 1 administrative assistant and a dedicated manager) at a cost of \$307.6 thousand (gross) / \$153.8 (net) in 2004, with an annualization cost of \$124.3 thousand (net) in 2005, would bring the total staff complement for this program to 15 PHN's. This would enable TPH to better respond to the needs of vulnerable adults and the frail elderly through assessment, education and linkages to available resources. The EMT has not recommended this funding request.

j) Hotline and Inspection Services for Retirement Homes:

Currently there are limitations with the Ontario Residential Care Association monitoring system for seniors living in retirement homes. These limitations include voluntary membership, advance notice of monitoring visits, lack of spot checks and a lack of jurisdiction over non-members. Presently, inspections of retirement homes are complaints driven and only within TPH current authority. A harmonized personal care and boarding home by-law is essential to ensure consistency and level of service across the city. The Seniors Assembly report requested that TPH establish a hotline and inspections program for seniors living in retirement homes. This request would require 12 additional staff at a cost of \$545.4 thousand (gross) / \$272.7 thousand (net) in 2004 with an annualization cost of \$200.5 thousand (net) in 2005. The EMT has not recommended this funding request.

Capping of 100% Provincially Funded Programs:

The Provincial Government has capped the funding level for some 100% funded programs in 2003. This cap is expected to continue through 2004 and beyond. Given this, an adjustment of \$512.6 thousand (gross) and \$0 (net) is necessary in order for TPH's budget to reflect approved Provincial funding levels in programs such as Heart Health, AIDS Hotline, and Preschool Speech & Language.

Salary Arbitration Settlement:

Local 416 filed a policy grievance over harmonization of work week and salary rates among the Animal Care & Control Officers working for the amalgamated City. The matter was referred for arbitration, the result of which adds an additional \$232.4 thousand (gross & net) financial pressure to TPH's 2004 budget. The final arbitration decisions were made after the deadline of the TPH budget submission and therefore EMT has not made a recommendation on this.

Conclusions:

The 2004 Public Health Operating Base Budget submission totals \$178,396.2 thousand (gross) / \$74,060.0 thousand (net). This is \$4,662.7 thousand (gross) / \$4,408.1 thousand (net) above the 2003 Approved (Adjusted) Operating Budget, for increases of 2.7% (gross) / 6.3% (net). These estimates assume full provincial cost-sharing for eligible programs. The estimates include a service level adjustment realigning IT staff from contracted services to salaries and benefits.

The net request of \$5,620.3 thousand for "New and Expansion" services includes a reduction in the gapping target from 4.0% to 2.0%, increased funds for local public health communicable disease emergencies/emerging diseases, implementation of Council approved by-laws, Board of Health directives and corporate initiatives.

In addition, adjustments of \$897.1 thousand (gross)/ -\$417.1 thousand (net) will be required for CDLU, \$903.4 thousand (gross) / \$451.7 thousand (net) for the Food Safety Program to match new provincial funding, \$635.5 thousand (gross)/\$317.8 thousand for enhancements to the TB Control program, -\$512.6 thousand (gross) and \$0 (net) to reflect capping of 100% Provincially funded programs, and \$232.4 thousand (gross & net) for a recent wage arbitration settlement for the Animal Services Control Officers.

In 2004, TPH will continue to evaluate strategies, programs and project priorities to ensure its readiness and ability to respond to priority public health needs and meet mandatory requirements. TPH remains committed to achieving operational efficiencies while ensuring effective service delivery.

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List of Attachments:

1. 2004 Preliminary Operating Plan & Budget

PUBLIC HEALTH											
2004 SUBMISSION OF OPERATING PLAN & BUDGET											
			2004 Request		Adjustments		EMT Recommendation				
			Positions	GROSS	NET	GROSS	NET	Positions	GROSS	NET	COMMENT
2003 Approved Operating Budget			1,725.8	\$ 170,100.8	\$ 69,616.7	\$ -	\$ -	1725.8	\$ 170,100.8	\$ 69,616.7	
In-Year Adjustments											
	West Nile Virus - Base (WES Comm. Strategy)	-	\$ 200.0	\$ -				0.0			
	West Nile Virus - Enhanced Program	20.8	\$ 2,493.4	\$ -				20.8			
	Fleet Adjustment (net) from Non-Program		\$ 18.7	\$ 18.7				0.0			
	Solid Waste budget transfer from Children's Services		\$ 16.5	\$ 16.5				0.0			
	Communicable Diseases Liaison Unit (CDLU)	45.0	\$ 904.1					45.0			
2003 Approved (Adj.) Operating Budget			1,791.6	\$ 173,733.4	\$ 69,651.9	\$ -	\$ -	1791.6	\$ 173,733.4	\$ 69,651.9	
<u>Operating Impact of Capital</u>											
	TCHIS/CNCMS - Contribution to capital costs	(2.00)	\$ -	\$ -				(2.0)	\$ -	\$ -	
	TCHIS/CNCMS Reduction in Capital S&B	(9.70)	\$ (327.3)	\$ -				(9.7)	\$ (327.3)	\$ -	
	Coordinated Access	(4.00)	\$ (271.4)	\$ -				(4.0)	\$ (271.4)	\$ -	
	CDCIS - Operating Impact of Capital	2.30	\$ 210.0	\$ -				2.3	\$ 210.0	\$ -	
	VPD - Operating Impact of Capital	1.00	\$ 87.4	\$ -				1.0	\$ 87.4	\$ -	
	THEIS - Phase 3 - Operating Impact (Savings)	(6.00)	\$ (406.0)	\$ (203.0)				(6.0)	\$ (406.0)	\$ (203.0)	
	Animal Services - Contribution to Reserve		\$ 59.0	\$ -				-	\$ 59.0	\$ -	
								-			
<u>Reversal of Non-Recurring Items</u>											
	TB Expansion	(8.00)	\$ (495.1)	\$ (247.6)				(8.0)	\$ (495.1)	\$ (247.6)	
	West Nile Virus - Enhanced	(20.83)	\$ (2,493.4)	\$ -				(20.8)	\$ (2,493.4)	\$ -	
	Ontario Works Incentive Funds	(2.00)	\$ (667.7)	\$ -				(2.0)	\$ (667.7)	\$ -	
	Smog Heat Research Federal Grant	(0.67)	\$ (68.1)	\$ (0.0)				(0.7)	\$ (68.1)	\$ (0.0)	
	Perinatal & child Health Survey Strategies	(1.00)	\$ (152.9)	\$ -				(1.0)	\$ (152.9)	\$ -	
	CDLU (One-time funding)	(45.00)	\$ (904.1)	\$ -				(45.0)	\$ (904.1)	\$ -	
	Environmental Studies		\$ (190.0)	\$ -				-	\$ (190.0)	\$ -	
	Interdepartmental charges		\$ (58.6)	\$ (23.6)				-	\$ (58.6)	\$ (23.6)	
								-			
<u>Other Prior Year Impact</u>				\$ 2,965.5	\$ 1,793.5				\$ 2,965.5	\$ 1,793.5	Payroll related adjustments.
Sub-Total: Prior Year Impact			(110.90)	\$ (2,712.7)	\$ 1,319.3	\$ -	\$ -	-110.9	\$ (2,712.7)	\$ 1,319.3	
<u>Zero Based Expenditures</u>											
	Furnishing		\$ (262.7)	\$ (129.5)					\$ (262.7)	\$ (129.5)	
<u>Economic Factors</u>				\$ 3,948.3	\$ 1,866.4				\$ 3,948.3	\$ 1,866.4	
TOTAL ADJUSTED BASE BUDGET			1,680.7	174,706.3	72,708.1	-	-	1,680.7	174,706.3	72,708.1	
Change from 2003 Revised Approved			(110.90)	\$ 972.9	\$ 3,056.2				\$ 972.9	\$ 3,056.2	
% Change			-6.19%	0.56%	4.39%				0.56%	4.39%	
<u>Other Base Changes</u>											
	Furnishings		\$ 257.0	\$ 128.5	\$ -	\$ -			\$ 257.0	\$ 128.5	

PUBLIC HEALTH											
2004 SUBMISSION OF OPERATING PLAN & BUDGET											
			2004 Request			Adjustments		EMT Recommendation			
	Positions	GROSS	NET	GROSS	NET	Positions	GROSS	NET	COMMENT		
THEIS - Deferral of Savings (Mobile Computing)	6.00	\$ 406.0	\$ 203.0	\$ (406.0)	\$ (203.0)	6.0	\$ -	\$ -			
Reinstatement of HBHC budget to cover 2003 economic factor adjustments	15.00	\$ 985.9	\$ -			15.0	\$ 985.9	\$ -	EMT recommended the reinstatement of budget provided that 100% provincial funding is obtained. Pending provincial funding, positions will be gapped.		
WNV Communications				\$ (200.0)	\$ -		\$ (200.0)	\$ -	Revenue funding from WES was one-time only.		
Reduction of Corporate Charges from 13.2M to 11.4M				\$ (1,798.0)	\$ (899.0)		\$ (1,798.0)	\$ (899.0)	To reflect a more appropriate charge per auditor's recommendation.		
EI/ CPP rate adjustments				\$ (400.0)	\$ (200.0)		\$ (400.0)	\$ (200.0)	To reflect actual 2003 experience.		
WNV (Minimal Control)	20.8	\$ 2,060.9	1,030.4			20.8	\$ 2,060.9	\$ 1,030.4	To bring WNV budget to 2003 service level.		
Other adjustments				\$ (42.5)	\$ 4.8		\$ (42.5)	\$ 4.8			
Sub-Total: Other Base and Revenue Changes	\$ 41.8	\$ 3,709.8	\$ 1,361.9	\$ (2,846.5)	\$ (1,297.2)	41.8	\$ 863.3	\$ 64.7			
Total 2004 BASE BUDGET REQUEST/EMT REC'D	1,722.5	\$ 178,416.2	\$ 74,070.0	\$ (2,846.5)	\$ (1,297.2)	1,722.5	\$ 175,569.8	\$ 72,772.9			
Change from 2003 Approved (Adj.) Budget	(69.1)	\$ 4,682.7	\$ 4,418.1			\$ (69.1)	\$ 1,836.3	\$ 3,121.0			
% Change from 2003 Approved (Adj.) Budget	-3.9%	2.7%	6.3%				1.1%	4.5%			
Realignment of IT Budget (from Contracted Services to Salaries & Benefits)	8.00	\$ (20.0)	\$ (10.0)			8.0	\$ (20.0)	\$ (10.0)			
Reduction of Animal Services				\$ (123.5)	\$ (123.5)	(1.2)	\$ (123.5)	\$ (123.5)			
2004 SERVICE LEVEL ADJS.	8.00	\$ (20.0)	\$ (10.0)	\$ (123.5)	\$ (123.5)	6.8	\$ (143.5)	\$ (133.5)			
2004 RECOMMENDED BASE BUDGET	1,730.5	178,396.2	74,060.0	(2,970.0)	(1,420.7)	1,729.3	175,426.3	72,639.4			
Change from 2003 Approved (Adj.) Budget	(61.1)	4,662.7	4,408.1			(62.3)	1,692.8	2,987.5			
% Change from 2003 Approved (Adj.) Budget	-3.4%	2.7%	6.3%			-3.5%	1.0%	4.3%			
Expansion/Service Improvement/New Service											
CDLU	45.0	\$ 4,475.2	\$ 2,237.6	\$ -	\$ (2,237.6)	45.0	\$ 4,475.2	\$ -			
Tuberculosis Control - Expansion Program		\$ -	\$ -	\$ -	\$ -		\$ -	\$ -	A separate BOH report will be submitted for consideration.		
A. Provincial Legislation											
WNV - Enhancement Program	6.5	\$ 526.8	\$ 263.4	\$ -	\$ (263.4)	6.5	\$ 526.8	\$ -			
Criminal Background Checks	-	\$ 10.5	\$ 5.2	\$ -	\$ -		\$ 10.5	\$ 5.2	One time only.		
Sterile Water Download		\$ 140.0	\$ 70.0	\$ -	\$ -		\$ 140.0	\$ 70.0			
Hassle Free Clinics		\$ 197.6	\$ 98.8	\$ (30.0)	\$ (15.0)		\$ 167.6	\$ 83.8	Recommended by EMT with the understanding that additional OHIP revenues of 30T will be generated by HFC to fund recurring components.		
B. Quality Assurance Measures											
Reduction in Gapping - 2%	-	\$ 2,145.6	\$ 1,189.9	\$ (1,072.8)	\$ (595.0)		\$ 1,072.8	\$ 594.9	EMT recommended adjusting gapping to 3%.		

PUBLIC HEALTH											
2004 SUBMISSION OF OPERATING PLAN & BUDGET											
			2004 Request			Adjustments		EMT Recommendation			
	Positions	GROSS	NET	GROSS	NET	Positions	GROSS	NET	COMMENT		
Vaccine Preventable Disease Call Centre*	1.0	\$ 45.2	\$ 22.6	\$ (45.2)	\$ (22.6)		\$ -	\$ -	Dollar equivalent of FTE only for part year; to be annualized in 2005.		
Health Hazard - Air Quality Equipment	-	\$ 30.0	\$ 15.0	\$ -	\$ -		\$ 30.0	\$ 15.0			
AIDS and Drug Prevention Programs - Grants*	1.0	\$ 45.8	\$ 22.9	\$ (45.8)	\$ (22.9)		\$ -	\$ -	Dollar equivalent of FTE only for part year; to be annualized in 2005.		
C. Council By-Laws											
Tobacco Control By-Law Implementation*	9.0	\$ 273.3	\$ 136.7	\$ (273.3)	\$ (136.7)		\$ -	\$ -	Dollar equivalent of FTE only for part year; to be annualized in 2005.		
Pesticide By-Law Implementation	3.5	\$ 450.0	\$ 225.0	\$ (450.0)	\$ (225.0)		\$ -	\$ -			
D. Board of Health Directives											
Mobile Dental for Senior in Long-term Facilities	7.5	\$ 472.6	\$ 472.6	\$ (472.6)	\$ (472.6)		\$ -	\$ -			
Service for Vulnerable & Frail Elderly*	7.0	\$ 307.6	\$ 153.8	\$ (307.6)	\$ (153.8)		\$ -	\$ -	Dollar equivalent of FTE only for part year; to be annualized in 2005.		
Hotline and Inspection Services for Retirement Homes*	12.0	\$ 545.4	\$ 272.7	\$ (545.4)	\$ (272.7)		\$ -	\$ -	Dollar equivalent of FTE only for part year; to be annualized in 2005.		
E. Corporate Initiative											
CYAC Action Plan/Peer Nutrition*	14.0	\$ 525.5	\$ 262.8	\$ (525.5)	\$ (262.8)		\$ -	\$ -	Dollar equivalent of FTE is only for part year; to be annualized in 2005.		
F. 100% Funded											
Infant Hearing Program Needs	1.5	\$ -	\$ -	\$ -	\$ -	1.5	\$ -	\$ -	Impact is on FTE.		
Environmental Studies - Ashbridges Bay	-	\$ 291.8	\$ -	\$ -	\$ -		\$ 291.8	\$ -			
CDCIS - Operating Impact of Capital (new request)	7.1	\$ 545.9	\$ -	\$ -	\$ -	7.1	\$ 545.9	\$ -	To reflect corporate guidelines requiring salaries and benefits of capital project to be included in the Operating Budget.		
OW - Health Promotion for At-Risk Youth	-	\$ 80.0	\$ -	\$ -	\$ -		\$ 80.0	\$ -			
OW - Party in the Right Spirit - Once More	-	\$ 30.0	\$ -	\$ -	\$ -		\$ 30.0	\$ -	No FTE impacts. Payroll estimate is for staff time.		
OW - Homeless Parents	1.0	\$ 125.0	\$ -	\$ -	\$ -	1.0	\$ 125.0	\$ -			
OW - Mobile Dental Clinics for Homeless & Underhouse	-	\$ 75.0	\$ -	\$ -	\$ -		\$ 75.0	\$ -			
G. Others											
Interdepartmental charges (Facilities Maintenance, etc.)		\$ 216.3	\$ 171.5	\$ -	\$ -		\$ 216.3	\$ 171.5			
	-										
Sub-total - Expansion and New	116.1	\$ 11,555.1	\$ 5,620.3	\$ (3,768.2)	\$ (4,680.0)	61.1	\$ 7,786.9	\$ 940.4			
2004 Total Budget	1,846.6	\$ 189,951.3	\$ 79,680.3	\$ (6,614.7)	\$ (5,977.2)	1,790.4	\$ 183,213.2	\$ 73,579.7			
Overall Change from 2003 Approved (Adj.)	55.0	\$ 16,217.9	\$ 10,028.4			\$ (1.2)	\$ 9,479.8	\$ 3,927.8			
% Overall Change from 2003 Approved (Adj.)	3.07%	9.33%	14.40%			-0.07%	5.46%	5.64%			
Overall Change from 2004 Requested Base	124.10	\$ 11,535.1	\$ 5,610.3			\$ 67.9	\$ 7,643.4	\$ 806.9			

PUBLIC HEALTH											
2004 SUBMISSION OF OPERATING PLAN & BUDGET											
			2004 Request			Adjustments		EMT Recommendation			
			Positions	GROSS	NET	GROSS	NET	Positions	GROSS	NET	COMMENT
% Overall Change from 2004 Requested Base			7.20%	6.47%	7.57%			3.94%	4.35%	1.11%	
Items not part of original submission (Needs to be submitted to the BAC through the BOH)											
1	TB Program - Screening for the Homeless & Releases from Correctional		19.6	\$ 635.5	\$ 317.8						Pls. refer to a separate BOH report for details.
2	Food Safety Program Enhancement		10.0	\$ 903.3	\$ 451.7						Pls. refer to a separate BOH report for details.
3	CDLU - Additional Request			\$ 897.1	\$ (417.1)						Subsequent to the TPH budget submission, the Province has advised its proposed funding for CDLU in 2004. The adjustment includes a one-time funding of \$517.7 thousand (gross)/\$0 (net).
4	Salary Arbitration Settlement for Animal Services			\$ 232.4	\$ 232.4						Policy grievance filed by the Union relating to work hours and wage rates for Animal Care & Control officers.
5	Capping of 100% funded Programs			\$ (512.6)	\$ -						Adjustments required to reflect the capping to 2003 funding levels of 100% funded programs such Heart Health, Aids Hotline & Preschool Speech & Language.
TOTAL			29.6	\$ 2,155.8	\$ 584.7						
Other item to note:											
4	Other base changes included the reinstatement of 2003 economic factors for the HBHC Program of \$985.9 (gross)/\$0 (net). 2004 economic factor impact is estimated at \$755.7T (gross)/\$0 (net). The total is estimated at \$1,741.6T (gross)/\$0 (net).										