

Board of Health

Meeting No. 7 **Contact** Candy Davidovits, Committee Administrator
Meeting Date Wednesday, September 19, 2007 **Phone** 416-392-8032
Start Time 1:00 PM **E-mail** boh@toronto.ca
Location Committee Room 1, City Hall

Board of Health		
Councillor John Filion (Chair) Councillor Janet Davis (Vice-Chair) Councillor Raymond Cho Councillor Paula Fletcher Councillor Chin Lee	Councillor Gord Perks Trustee Soo Wong Alejandra Bravo Vaijyanthi Chari	Wangari Muriuki Fiona Nelson Lisa O'Brien Valerie Sterling

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Declarations of Interest under the *Municipal Conflict of Interest Act*.

Confirmation of Minutes - July 9, 2007**Speakers/Presentations – A complete list will be distributed at the meeting.****Communications/Reports**

HL7.1	ACTION			
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Cost of the Nutritious Food Basket - Toronto 2007**(Staff Presentation)**

(September 5, 2007) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. the Board of Health direct the Medical Officer of Health to request the Premier of Ontario to increase Ontario Works benefit rates so that the Basic Allowance includes a nutrition component which is sufficient to meet daily nutritional needs as determined annually by the cost of the Nutritious Food Basket and that the remainder of the Basic Allowance be set to enable recipients to afford other basic needs including transportation, clothing and personal care items.
2. the Board of Health direct the Medical Officer of Health to request the Premier of Ontario to publish annually the details of current social assistance rate components and how they are determined, including the nutrition component of the Basic Allowance.
3. the Board of Health request that the Ministry of Health Promotion collate the results of the Nutritious Food Basket surveys conducted by local Boards of Health and report the findings publicly on an annual basis.
4. the Board of Health continue to champion community efforts to reduce health disparities by endorsing the 25 in 5 Network's call to provincial political candidates and parties to develop a comprehensive plan to reduce poverty rates in Ontario by 25% in five years.
5. the Board of Health request that all levels of government make significant investments in affordable housing, universal child care and other strategies that impact on income security.
6. the Board of Health reaffirm its request to the Premier of Ontario to increase minimum wage rates to ensure a standard of living to promote optimal health.
7. the Board of Health request the Premier of Ontario to implement the Ontario Child Benefit fully by 2008; and

8. the Board of Health forward this report to key stakeholders: the City of Toronto's Community Development and Recreation Committee, the General Managers of Shelter, Support and Housing Administration, Children's Services, Homes for the Aged and Parks, Forestry and Recreation, the Ontario Ministers of Health Promotion, Community and Social Services, Children and Youth Services and Agriculture, Food and Rural Affairs, Agriculture and Agri-Food Canada, the Office of Nutrition Policy and Promotion at Health Canada, the Association of Local Public Health Agencies, the Ontario Public Health Association's Community Food Security Workgroup, all Ontario Boards of Health, the Association of Ontario Health Centres, the Ontario Society of Nutrition Professionals in Public Health and Dietitians of Canada.

Financial Impact

There are no direct financial implications arising from this report.

Summary

This report provides information on the cost of the Nutritious Food Basket in Toronto for 2007 and recommends measures to improve health through increased access to nutritious food for individuals and families on low incomes. The Nutritious Food Basket (NFB) is a food costing tool used to measure the cost of healthy eating in each Board of Health jurisdiction within Ontario.

The average weekly cost for a family of four in Toronto in 2007 is \$133.04 per week (\$576.06 month). This is an increase of 7% in food costs from the 2006 pricing survey. Overall, food costs have increased by 24.5% since 1999, when the current version of the costing tool was first implemented.

Since the 2006 NFB results were presented to the Board of Health in January 2007, the provincial government has introduced an Ontario Child Benefit (OCB) for low income families of up to \$250 per dependent child under 18 years in 2007 rising to up to \$1,100 per child per year by 2011. A 2% increase in social assistance rates is scheduled to take effect in November 2007; however, a family of four receiving Ontario Works benefits would see an average increase of just over \$67/month as a result of implementation of OCB and the increase to social assistance. The cost of rent and basic groceries still exceeds available monthly income, leaving no funds for all other basic needs such as personal care items, clothing and transportation. The minimum wage rate has increased slightly in 2007 to \$8.00 per hour, but this is still far short of an adequate living wage.

Access to adequate amounts of safe and nutritious food is a basic human right as well as a fundamental requirement for health and well-being. The difficulty experienced by many Toronto residents in meeting daily nutritional needs is a result of the high cost of housing, inadequate income, low social assistance rates, as well as the rising cost of food. This forces many people to choose between paying the rent and buying food and other necessities and increases the likelihood of relying on food banks and other emergency food programs.

The NFB survey results were analyzed according to the energy and nutrient needs of 23 age/gender groups, as defined in the 1990 Recommended Nutrient Intakes for Canadians. The 2007 results are summarized in Attachment 1.

Background Information

Cost of the Nutritious Food Basket - Toronto 2007

(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6590.pdf>)

Cost of the Nutritious Food Basket - Toronto 2007 - Attachment 1

(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6591.pdf>)

1a "Toronto for All" - Income Security

(July 24, 2007) Letter from City Clerk

Summary

Letter from City Clerk advising that City Council on July 16, 17, 18 and 19, 2007, adopted Community Development and Recreation Committee Item 7.8 entitled "'Toronto for All" - Income Security' and, in so doing, directed that the report from the Chair of the Community Development and Recreation Committee and the attached backgrounder be forwarded to the Board of Health, and other City Divisions, to provide valuable background information on the income security issues identified by City residents, and to inform Divisional work related to income security, access and social inclusion.

Background Information

"Toronto for All" - Income Security

(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6592.pdf>)

"Toronto for All" - Income Security - Attachment 1

(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6593.pdf>)

"Toronto for All" - Income Security - Attachment 2

(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6594.pdf>)

"Toronto for All" - Income Security - Attachment 3

(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6596.pdf>)

HL7.2	ACTION			
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Breastfeeding Promotion in Toronto

(Staff Presentation)

(September 5, 2007) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. the Board of Health endorse the implementation of the Breastfeeding Friendly Recognition Symbol in Toronto as outlined in this report.

Financial Impact

The budget for the roll out of the Breastfeeding Friendly Recognition Symbol is included in the Toronto Public Health Operating Budget.

Summary

The purpose of this report is to inform the Board of Health about Toronto Public Health Breastfeeding Promotion activities, and to seek endorsement for the implementation of a Breastfeeding Friendly recognition symbol in Toronto.

Toronto Public Health offers a wide variety of programs and services that promote and support exclusive and sustained breastfeeding. This includes supporting mothers to breastfeed their children anytime and anywhere. There is wide variation in public attitudes toward breastfeeding in public. Creating a comfortable supportive environment for mothers to breastfeed whenever and wherever they choose will enable increased duration of breastfeeding which will benefit child health.

Background Information

Breastfeeding Promotion in Toronto

<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6597.pdf>

HL7.3	ACTION			
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Human Papillomavirus (HPV) Vaccination Program for Grade Eight Females - 2007/08

(Staff Presentation)

(September 4, 2007) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. the Toronto Public Health 2007 Approved Operating Budget be increased by \$120,000 gross and \$0 net to reflect funding from Ministry of Health and Long Term Care (MOHLTC) for the administration of Human Papillomavirus (HPV) Vaccine in school clinics; and
2. the Board of Health forward this report to the Budget Committee for consideration.

Financial Impact

The Ministry of Health and Long-Term Care is funding \$8.50 per dose administered for the HPV Vaccination Program to grade eight females. There are an estimated 14,000 eligible females who attend Toronto schools. It is estimated that a 50% coverage rate will be achieved in the first year of the HPV vaccination program. Two doses will be administered in fall 2007 and the third dose in 2008. One-time funding from the MOHTLC to cover the cost of the third

dose from January to June 2008 will be approximately \$60,000.

The Deputy City Manager and Chief Financial Officer has reviewed this report and agrees with the financial impact information.

Summary

Human Papillomavirus (HPV) infection causes genital warts and cervical cancer. Three out of every four Canadians will have at least one HPV infection in their lifetime. In 2006, there were an estimated 510 cases of cervical cancer and 150 deaths in Ontario.

A new HPV vaccine, Gardasil®, has been licensed to prevent the four most common HPV strains. The strains included in the vaccine are responsible for 70% of cervical cancer and 90% of genital warts in Canada. The vaccine has been reviewed and recommended by the independent National Advisory Committee on Immunization for females between nine and 26 years of age. The cost of the vaccine is approximately \$150.00 per dose and three doses over six months are required to complete the series. The vaccine works best if given before the onset of sexual activity.

On August 3, 2007, the Ministry of Health and Long-Term Care (MOHLTC) announced funding for the HPV vaccine for all grade eight females in Ontario. The vaccine will be administered by public health units across the province in school based clinics beginning in fall 2007.

This report provides information on Toronto Public Health's Human Papillomavirus (HPV) Vaccination Program for grade eight female students in the 2007-08 school year. It recommends that the 2007 Toronto Public Health Operating Budget be increased by \$120,000 gross and \$0 net to reflect funding from the MOHLTC for the administration of HPV vaccine in school clinics.

Background Information

Human Papillomavirus (HPV) Vaccination Program for Grade Eight Females - 2007/08
(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6598.pdf>)

HL7.4	ACTION			
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The Reduction of Trans Fat in the Toronto Food Supply - Update

(September 4, 2007) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. Toronto Public Health promote the adoption of alternatives to trans fat in Toronto foodservice establishments during the two-year voluntary phase of Health Canada's implementation of the Trans Fat Task Force's recommendations. This will include the addition of trans fat education into the mandatory Food Handler Certification Program

provided to Toronto foodservice owners and operators;

2. Toronto Public Health collaborate with Health Canada and the Heart and Stroke Foundation of Canada to monitor and report publicly on trans fat levels in food sold and served in Toronto and provide public education on the health risks and sources of trans fats;
3. the Board of Health urge Health Canada to include low cost food items and ethnic foods in its trans fat monitoring program to ensure that low-income populations and immigrants benefit equally from the reduction in trans fat in the Canadian food supply and are not at greater risk from consumption of imported or specialized products;
4. the Board of Health urge Health Canada and the Government of Canada to immediately regulate trans fat in the Canadian food supply if at the end of the two year voluntary period, 100% of products from food categories targeted by the Trans Fat Task Force as being sources of industrially-produced trans fats have not met the recommended limits;
5. the Board of Health direct the Medical Officer of Health to communicate with the Chief Executive Officers of the five Local Health Integration Networks (LHINs) serving Toronto to request that the trans fat content of food that is served in hospitals and other health care institutions is reduced to meet the targets of the Trans Fat Task Force;
6. the Board of Health direct the Medical Officer of Health to urge Health Canada to implement an educational campaign to inform the food industry and foodservice operators about how they can reduce artificial trans fat. This campaign should include clear language resources in multiple languages in order to reach Toronto's diverse foodservice operators; and
7. the Medical Officer of Health report to the Board of Health on the progress achieved in voluntary trans fat reductions in September 2008.

Financial Impact

There are no direct financial implications arising from this report.

Summary

The purpose of this report is to summarize progress in reducing trans fat in the Toronto food supply since the March 29, 2007 Board of Health report, The Regulation of Trans Fat in the Canadian Food Supply. That report identified the public health implications of “artificially produced trans fat” in the food supply, which include an increased risk of heart disease.

Since the March 2007 report, the Federal government has announced the adoption of the recommendations of the Trans Fat Task Force (TFTF). For vegetable oils and soft spreadable margarines sold at retail, trans fat should be limited to 2 percent of the total fat content. For all other foods sold at retail, and ingredients sold to restaurants, the trans fat content should not exceed 5 percent of the total fat content. A two-year voluntary phase-in period was announced by Health Canada, with a proposed regulatory option if industry fails to make significant progress.

This report highlights the progress that Toronto Public Health (TPH) has made in acting on the recommendations following the March 29 report. In particular, this report provides a summary of the progress made in City-operated Agencies, Boards, Commissions and Divisions (ABCDs) to voluntarily reduce trans fat in foods they are providing. This report also outlines the regulatory options available in the City of Toronto government to reduce trans fat in Toronto restaurants and other foodservice premises. It is recommended that Toronto Public Health assist the food industry and foodservice industry to shift away from the use of trans fat to healthier alternatives through education and monitoring with public reporting on trans fat levels in the food supply. Local regulation should be deferred pending the results of monitoring, and the availability of resources for development and implementation.

Background Information

The Reduction of Trans Fat in the Toronto Food Supply - Update
<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6599.pdf>

HL7.5	ACTION			
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Shade Policy for the City of Toronto

(September 4, 2007) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. the Board of Health recommend that Toronto City Council endorse the following Policy Statement for Shade:

“The provision of shade can be an effective means of reducing exposure to ultraviolet radiation (UVR) and its associated health risks such as skin cancer. Furthermore, the presence of shade can encourage physical activity, reduce greenhouse gas and air pollutant emissions, mitigate the urban heat island effect, and reduce energy costs.

The provision of shade, either natural or constructed, should be an essential element when planning for and developing new City facilities such as parks or public spaces, and in refurbishing existing City-owned and operated facilities and sites. Increasing shade in Toronto contributes to a healthier and more sustainable City.”;

2. the Board of Health request the Medical Officer of Health to direct the Shade Policy Committee to develop specific guidelines, by Summer 2008, to assist City agencies, boards, commissions and divisions to operationalize the Shade Policy; and
3. the Board of Health request the Medical Officer of Health to forward this report to City Agencies, Boards, Commissions and Divisions.

Financial Impact

There are no financial impacts resulting from this report.

Summary

Skin cancer resulting from overexposure to ultraviolet radiation (UVR), is the most common cancer in Ontario, representing one third of all new cancer cases. The treatment costs are considerable due to the sheer number of cases. For melanoma, the most serious form of skin cancer, treatment options are few; hence prevention is critical.

Reducing overall exposure to sunlight is the most important way to prevent skin cancer and the other health effects of UVR. The provision of natural and constructed shade combined with personal sun protection methods (hats, appropriate clothing, sunscreen) are important strategies for reducing exposure and protecting exposed skin when outdoors.

Children tend to be outdoors more than adults and overexposure to the carcinogenic effects of UVR during the early years of life is a major determinant of lifetime risk of skin cancer.

The past twelve months have seen both a growing momentum of activities by City divisions to encourage greening and green development standards and a stronger political commitment to a “Climate Change and Clean Air agenda”. A series of shade related pilot projects and events have been completed by Toronto Public Health and the Toronto Cancer Prevention Coalition’s Shade Policy Committee. The health and environmental benefits of shade, not only as a protective measure against skin cancer and other sun-related diseases, but as a means to encourage physical activity, reduce greenhouse gas and air pollutant emissions, mitigate the urban heat island effect, and reduce energy costs, are being recognized and acted upon.

The adoption by Toronto City Council of a policy to make the provision of shade, both natural and constructed, a key consideration in the planning and development of all municipally-owned and operated facilities will help to ensure an environmentally sustainable future and healthier City.

Background Information

Shade Policy for the City of Toronto
<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6600.pdf>

HL7.6	Information			
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Towards a Healthy City: Toronto Public Health Strategic Plan Update

(Staff Presentation)

(September 4, 2007) Report from Medical Officer of Health

Financial Impact

There are no financial implications stemming from this report.

Summary

This report provides an update on the implementation of the Toronto Public Health (TPH) Strategic Plan “Toward a Healthy City” over the past year. It outlines selected accomplishments within each of the six Strategic Directions and describes the progress of TPH in achieving the overall mission of improving the health of the whole population while reducing health disparities.

Background Information

Towards a Healthy City: Toronto Public Health Strategic Plan Update
<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6601.pdf>

HL7.7	Information			
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Public Health Implications of the Woodbine Live Development

(September 4, 2007) Report from Medical Officer of Health

Financial Impact

There is no financial impact.

Summary

At its April 16, 2007 meeting, the Board of Health referred the motion from the Etobicoke/York Local Health Committee to the Medical Officer of Health to investigate and report back to the September 19, 2007 Board of Health on implications with respect to the proposed Woodbine Live Development.

At its meeting on July 17, 2007, City Council approved the \$750 million development at the Woodbine racetrack, located in the city's northwest corner, including a hotel, shopping and skating rink.

The project has addressed at a high level a number of determinants of health such as local employment, transit access and green planning. The residential component of the proposal is still in development and will be reported in the future for Council approval. The Medical Officer of Health, through the Etobicoke/York Local Health Committee and City Planning, will monitor this development and report when appropriate to the Board of Health on healthy public policy issues as well as service implications.

Background Information

Public Health Implications of the Woodbine Live Development
<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6602.pdf>

HL7.8	ACTION			
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Toronto Public Health 2007 Operating Budget Adjustments

(August 20, 2007) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. the Toronto Public Health 2007 Operating Budget be increased by \$1,105.6 thousand gross and \$0.0 thousand net, and a staff increase of 32 temporary positions, to reflect confirmed funding from the Ministries of Health & Long-term Care, Health Promotion and Children & Youth Services; and,
2. this report be forwarded to the Budget Committee for consideration.

Financial Impact

The table on page 2 reflects the required budget adjustments resulting from the confirmation of 2007 / 2008 funds from various provincial ministries.

The Deputy City Manager and Chief Financial Officer has reviewed this report and agrees with the financial impact information.

Summary

The purpose of this report is to request budget adjustments to the Toronto Public Health (TPH) 2007 Operating Budget due to confirmation of funding from the Provincial Ministries received after the June Board of Health meeting.

Background Information

Toronto Public Health 2007 Operating Budget Adjustments
<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6604.pdf>

HL7.9	Information			
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Toronto Public Health Operating Budget Variance Report for the six months ended June 30, 2007

(August 20, 2007) Report from Medical Officer of Health

Financial Impact

Please refer to the table on page 2 of the staff report for the financial impact.

Summary

This report provides an update to the Board of Health on Toronto Public Health's (TPH)

Operating Budget Variance for the six months of operation ending on June 30, 2007.

Toronto Public Health's operating budget was underspent by \$392.7 thousand net or 1.7 percent for the six-month period ending on June 30, 2007.

TPH gross expenditures were below budget by \$2,652.0 thousand or 2.9 percent attributable to the underspending of \$2,917.8 thousand in Salaries and Benefits offset by overspending of \$265.8 thousand in non-payroll. Revenue was underachieved by \$2,259.4 thousand or 3.3 percent due to under-expenditures in mandatory cost shared programs, underachievement of Interdepartmental Revenue in the Ontario Works Dental program and lower than expected animal licensing revenues.

At year-end, TPH expects to be \$5,687.2 thousand gross or 2.7 percent and \$1,513.6 thousand net or 3.0 percent under the 2007 Operating Budget. The net under-expenditure of \$1,513.6 thousand includes anticipated savings due to cost containment measures implemented in the second half of 2007.

Background Information

Toronto Public Health Operating Budget Variance Report for the Six Months ended June 30, 2007

(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6606.pdf>)

HL7.10	Information			
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Toronto Public Health Capital Budget Variance Report for the six months ended June 30, 2007

(August 20, 2007) Report from Medical Officer of Health

Financial Impact

Please refer to the table on page 1 of the staff report for the financial impact.

The Deputy City Manager and Chief Financial Officer has reviewed this report and agrees with the financial impact information.

Summary

This report provides an update to the Board of Health on the Toronto Public Health Capital Budget variance for the six-month period ended June 30, 2007 (Appendix 1).

Toronto Public Health (TPH) spent \$1.121 million or 23 percent of the 2007 approved cash flow of \$4.880 million as of June 30, 2007.

The year-end capital expenditure is projected to be \$4.491 million or 92 percent of the approved cash flow.

Background Information

Toronto Public Health Capital Budget Variance Report for the Six Months ended June 30, 2007
<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6607.pdf>

HL7.11	ACTION			
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Toronto Public Health 2008 Operating Budget Request**Summary**

A report from the Medical Officer of Health will be provided as soon as possible.

HL7.12	ACTION			
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Toronto Public Health 2008 - 2012 Capital Budget and Plan Submission**Summary**

A report from the Medical Officer of Health will be provided as soon as possible.

HL7.13	Information			
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Pandemic Influenza Preparedness Update**Summary**

Verbal update by the Medical Officer of Health.

HL7.14	Information			
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Collection of City of Toronto's Used Oil

(August 8, 2007) Report from Chief Corporate Officer

Financial Impact

This report will have no financial impact beyond what has already been approved in the current year's budget.

Summary

At its meeting April 23 and 24, 2007, Council considered a report on used motor oil and requested a list of companies to which the City and its agencies, boards and commissions (ABCs) sell their used motor oil. This report provides that list.

The majority of City of Toronto's divisions and ABCs have their used oil collected by Safety-Kleen Canada Inc. Used oil from TTC and Toronto Zoo vehicles is collected by Quantex Technologies Inc. Used oil from Toronto Parking Authority vehicles is collected by Noco Lubricants Canada and Direct Line Environmental Services Inc.

Background Information

Collection of City of Toronto's Used Oil

(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6608.pdf>)

HL7.15	ACTION			
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Amendment to Capital Budget Plan - Toronto Animal Services

(June 19, 2007) Letter from Board of Health Budget Sub-committee

Summary

The Board of Health Budget Sub-committee recommended to the Board of Health that the Animal Services Electronic Communications system, specifically the installation of the GPS system and wireless computers for animal control officers and shelter staff, be moved up to the year 2009 from 2010.

Background Information

Implementation of Internal Audit Recommendations for Toronto Animal Services - Update

(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6609.pdf>)

HL7.16	ACTION			
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Climate Change, Clean Air and Sustainable Energy Action Plan: Moving from Framework to Action (Wards: All)

(July 24, 2007) Letter from City Clerk

Summary

Letter from City Clerk advising that City Council on July 16, 17 and 18, 2007, adopted Executive Committee Item 10.3, as amended and in so doing requested the Board of Health to develop a proposed reporting program for the use and release of toxic air contaminants and to explore reporting of greenhouse gas emissions.

Background Information

Climate Change, Clean Air and Sustainable Energy Action Plan: Moving from Framework to Action (Ward: All)

(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6610.pdf>)

Climate Change, Clean Air and Sustainable Energy Action Plan: Moving from Framework to Action (Ward: All) - Attachment 1

<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6611.pdf>