



## Board of Health

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

*The Decision Document is for preliminary reference purposes only. Please refer to the Board of Health’s Report to City Council or to the Minutes for the official record.*

**How to Read the Decision Document:**

- *Recommendations of the Board of Health to City Council appear after the item heading*
- *Any amendments by the Board to recommendations appearing in a staff report are italicized;*
- *Other action taken by the Board on its own authority, which does not require Council’s approval, is listed in the decision document under the heading “Decision Advice and Other Information” ;*
- *Declarations of Interest, if any, appear at the end of an item.*

*Minutes Confirmed – July 9, 2007*

HL7.1	ACTION	Amended		
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### Cost of the Nutritious Food Basket - Toronto 2007

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

#### Decision Advice and Other Information

The Board of Health:

1. directed 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. directed 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. requested 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. 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. requested that all levels of government make significant investments in affordable housing, universal child care and other strategies that impact on income security;
  6. reaffirmed its request to the Premier of Ontario to increase minimum wage rates to ensure a standard of living to promote optimal health;
  7. requested the Premier of Ontario to implement the Ontario Child Benefit fully by 2008;
  8. *requested the Association of Local Public Health Agencies (alPHA) to submit its province-wide findings on the nutritious food basket survey and its resolution A05-18 entitled "Adequate Nutrition for Ontario Works and Ontario Disability Support Program Participants and Low Wage Earners" to the leaders of all provincial parties to request a commitment from the parties to implement the recommended measures by September 25, 2007, to enable a public release of the responses prior to the provincial election on October 10, 2007;*
  9. *requested the Chair of the Board of Health to submit the Toronto Nutritious Food Basket results and the Board of Health's positions and strategies to address poverty, to the Toronto Caucus Chair of each provincial party and request a response prior to the end of September so that the results can be made public; and*
  10. forwarded 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 *asking for support in drawing*

*attention to the need for a Provincial poverty reduction strategy including support and resources to Public Health Units to address food security and social determinants of health.*

## **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>)

### Communications

(September 19, 2007) Submission from Executive Director, Association of Local Public Health Agencies (alPHa) (HL.New.HL7.1.1)

(September 19, 2007) Submission from The Stop Community Food Centre (HL.New.HL7.1.2)

HL7.2	ACTION	Amended		
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## Breastfeeding Promotion in Toronto

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

### Committee Recommendations

The Board of Health recommends that City Council:

1. endorse the implementation of the Breastfeeding Friendly Recognition Symbol in Toronto as outlined in the report (September 5, 2007) from the Medical Officer of Health;
2. *require all City facilities, including agencies, boards and commissions, the Association of Community Centres (AOCCs) and Arenas which have City funding, to post the Breastfeeding Friendly Symbol; and*

3. *direct the City Manager to advise all City of Toronto grant recipients and all daycare centres receiving City funding of the City of Toronto’s breastfeeding policy and request that they post the Breastfeeding Friendly Symbol.*

### **Decision Advice and Other Information**

*The Board of Health:*

1. *adopted the following resolution:*

*“Whereas the Board of Health recognizes that breastfeeding is the optimal method of feeding infants and that mothers have the right to breastfeed their babies anytime, anywhere; and*

*Whereas Facebook deemed photos of nursing mothers to be “obscene content”;*

*Therefore be it resolved that:*

- a. *the Board of Health send a letter to Facebook administrators confirming that breastfeeding women should not be stigmatized in any way and that removing images of breastfeeding women from Facebook contributes to this stigma, and*
  - b. *the Board of Health request the Medical Officer of Health to post this letter on the TorontoPublic Health website;*
3. *requested the Medical Officer of Health to include in Phase 2 of the Implementation of the Breastfeeding Friendly Symbol communication with non-profit and community and health centres, arts and cultural centres and Ontario Early Years Centre, Toronto District School Board Family Literacy Centres, non-profit Family Resource Centres advising them of the City’s breastfeeding policy and requesting them to post the Breastfeeding Friendly Symbol; and*
  4. *requested the Medical Officer of Health to provide the new members of the Board of Health with some background information on this issue.*

### **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	Amended		
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### Human Papillomavirus (HPV) Vaccination Program for Grade Eight Females - 2007/08

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

### Decision Advice and Other Information

The Board of Health:

1. recommended to the Budget Committee that 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 clinic; and
2. requested the Medical Officer of Health to host four community HPV Vaccination Program meetings in the four quadrants of the City (north, south, east and west) by December 2007; and that these meetings be held in collaboration with the various community stakeholders (Toronto District School Board, Toronto Catholic District School, French School Boards and community health centres).

### 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	Amended		
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### The Reduction of Trans Fat in the Toronto Food Supply - Update

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

#### Decision Advice and Other Information

The Board of Health:

1. requested Toronto Public Health to 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. requested Toronto Public Health to 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. urged 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. urged 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. directed the Medical Officer of Health to communicate with the Chief Executive Officers of the five Local Health Integration Networks (LHINs), serving Toronto, *Universities and Colleges, and other public institutions with food services*, 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. directed 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. requested the Medical Officer of Health to 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>)

### Communications

(September 14, 2007) letter from Kim McKinnon, Vice-President Ontario, Canadian Council of Grocery Distributors (HL.Main.HL7.4.1)

(September 19, 2007) Submission from Canadian Restaurant and Foodservices Association (HL.New.HL.7.4.2)

HL7.5	ACTION	Amended		
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### Shade Policy for the City of Toronto

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

### Decision Advice and Other Information

The Board of Health:

1. endorsed the following Policy Statement for Shade and forwarded a copy of the Statement to the City Manager for implementation:
 

“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. requested 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. requested 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>

## Communications

(September 11, 2007) letter from Janet McKay, Executive Director, Local Enhancement and Appreciation of Forests (HL.Supp.HL.Supp.7.5.1)

(September 10, 2007) letter from Jill Worthy, Superintendent of Education, Chair, Environmental Sustainability, Steering Committee and Richard Christie, Program Coordinator, Science, Environment and Ecological Studies, Toronto District School Board (HL.Supp.HLSUPP.7.5.2)

(September 12, 2007) letter from Dr. Cheryl F. Rosen, Chair, Ontario Sun Safety Working Group, Head, Division of Dermatology (HL.Supp.HLSUPP.7.5.3)

(September 12, 2007) letter from Loraine D. Marrett, Senior Scientist and Director, Surveillance Unit, Division of Preventive Oncology, Cancer Care Ontario and Professor, Department of Public Health Sciences, University of Toronto (HL.Supp.HLSUPP.7.5.4)

(September 12, 2007) letter from Christopher Pommer, Partner, Plant Architect Inc. (HL.Supp.HLSUPP.7.5.5)

(September 14, 2007) letter from Robert Freedman, Director, Urban Design, City Planning Division, City of Toronto (HL.Supp.7.5.6)

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

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

#### **Decision Advice and Other Information**

The Board of Health received the report (September 4, 2007) from the Medical Officer of Health for information.

#### **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	Received		
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### **Public Health Implications of the Woodbine Live Development**

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

#### **Decision Advice and Other Information**

The Board of Health received the report (September 4, 2007) from the Medical Officer of Health for information.

#### **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	Adopted		
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## Toronto Public Health 2007 Operating Budget Adjustments

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

### Decision Advice and Other Information

The Board of Health recommended to the Budget Committee 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 and Long-Term Care, Health Promotion and Children and Youth Services.

### 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	Amended		
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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

## Decision Advice and Other Information

The Board of Health:

- expressed to City Council, through the Budget Committee and the Executive Committee, that it regrets the implementation of the cost containment measures and wishes to convey to Toronto City Council the Board of Health's desire to reinstate the program and service reductions as soon as possible; and
- urges City Council to approve the land transfer tax and vehicle registration tax at the October 22, 2007, Council meeting as a means to achieve the investment necessary to ensure the City's financial commitment to public health programs.

## 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	Received		
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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

### **Decision Advice and Other Information**

The Board of Health received the report (August 20, 2007) from the Medical Officer of Health for information.

### **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	Adopted		
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## Toronto Public Health 2008 Operating Budget Request

(September 14, 2007) Report from Medical Officer of Health

### Decision Advice and Other Information

The Board of Health recommended to the Budget Committee for its consideration during the 2008 budget process that:

1. City Council approve a Toronto Public Health 2008 Operating Budget request of \$218,943.2 thousand gross / \$51,150.9 thousand net as summarized in Table 1, “2008 Operating Budget Request”;
2. City Council approve the list of budget adjustments included in Table 3, “Summary of 2008 Base Budget Changes from 2007 Operating Budget” of this report totalling an increase of \$7,946.6 thousand gross / \$753.5 thousand net;
3. City Council continue to invest sufficient municipal funds to strengthen public health services in Toronto as recommended by the Walker expert panel and the Campbell commission, and to leverage 75 percent provincial funding to promote and protect the health of the Toronto population;
4. the Budget Committee consider service reduction options as summarized in Table 4, “Summary of 2008 Service Reduction Options” of the report (September 14, 2007) from the Medical Officer of Health totalling a budget reduction of \$753.5 thousand gross and net expenditures to achieve the City’s target of a zero net increase over the 2007 Operating Budget.

### Financial Impact

The TPH 2008 Operating Budget request totals \$218,943.2 thousand gross / \$51,150.9 thousand net. This request represents an increase of \$7,946.6 thousand or 3.8 percent in gross and \$753.5 thousand or 1.5 percent in net expenditures from the 2007 Operating Budget as shown in Table 1 below. The net increase of \$753.5 thousand over the 2007 Operating Budget is attributable to the base budget increases in compensation including a cost of living allowance, merit adjustments and annualization of 2007 new and enhanced services.

Table 2 – 2008 Operating Budget for Consideration reflects the proposed service reduction of \$753.4 thousand gross and net, thus bringing the total request for the TPH 2008 Operating Budget to \$218,189.9 thousand gross and \$50,397.4 thousand net expenditures in order to achieve the City’s target of a zero net increase over the 2007 Operating Budget.

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

## Summary

This report outlines the Toronto Public Health (TPH) 2008 Operating Budget request and explains the service and financial implications of meeting the City's target of a zero net increase over the 2007 Operating Budget.

The 2008 Operating Budget request totals \$218,943.2 thousand gross / \$51,150.9 thousand net. This request represents an increase of \$7,946.6 thousand or 3.8 percent in gross and \$753.5 thousand or 1.5 percent in net expenditures from the 2007 Operating Budget. These estimates assume full provincial cost sharing for eligible programs with the related cost sharing formula at 75 percent and expected growth in provincial funding of five percent for 2008, thus allowing the City of Toronto to leverage provincial funding to promote and protect public health in Toronto.

## Background Information

Toronto Public Health 2008 Operating Budget Request

(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6976.pdf>)

HL7.12	ACTION	Adopted		
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## Toronto Public Health 2008 - 2012 Capital Budget and Plan Submission

(September 14, 2007) Report from Medical Officer of Health

## Decision Advice and Other Information

The Board of Health recommended to the Budget Committee for consideration during the 2008 budget process that:

- 1 City Council approve a 2008 Capital Budget with a total project cost of \$1.929 million and a 2008 cash flow of 3.879 million and future year commitments of \$3.237 million as detailed in Appendix 3, "Toronto Public Health 2008 Capital Budget". The 2008 Capital Budget Submission consists of the following:
  - a. new cash flow funding for:
    - i. four change in scope sub-projects with a 2008 total project cost of \$1.929 million that requires cash flow of \$0.693 million in 2008, \$0.450 million in 2009, (\$0.072) million in 2010, \$0.468 million in 2011 and \$0.391 million in 2012; and,
    - ii. four previously approved sub-projects with a 2008 cash flow of \$2.797 million and future year commitments of \$1.436 million in 2009 and \$0.564 million in 2010, totalling \$4.797 million.
  - b. 2007 approved cash flow for two previously approved sub-projects, with carry-



forward funding from 2007 into 2008, totalling \$0.389 million;

2. City Council approve a 2009-2012 Capital Plan of \$10.562 million with future year estimates of \$1.614 million in 2009, \$3.007 million in 2010, \$2.932 million in 2011 and \$3.009 million in 2012 as outlined in Appendix 1; and
3. the net operating impacts \$0.088 million for 2009 and \$0.057 million for 2010 emanating from the approval of the 2008 Capital Budget as detailed in Appendix 2, “Toronto Public Health 2009-2012 Operating Budget Impact of Capital” be considered within the future years’ Toronto Public Health operating budget submissions.

### **Financial Impact**

TPH is submitting a 2008 Capital Budget and 2009 - 2012 Capital Plan request of \$17.288 million, including 2008 cash flow of \$3.490 million (excluding the carry forward funding from 2007), which is entirely financed from debt. The approved annual Debt Affordability Target for TPH is \$3.490 million in 2008, \$3.499 million in 2009 and 2010, and \$3.400 million in 2011 and 2012. The total requested amount for the 2008 Capital Budget and 2009 - 2012 Capital Plan meets the Debt Affordability Target of \$17.288 million as shown in the Table 1.

The associated operating impact of these capital projects on the TPH Operating Budget at the end of five years will be \$2.018 million gross and \$0.616 million net for twelve new positions and ongoing costs for service and maintenance.

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

### **Summary**

This report provides an overview of the Toronto Public Health (TPH) 2008 Capital Budget and 2009-2012 Capital Plan Submission for approval.

TPH is submitting a 2008 Capital Budget and 2009 - 2012 Capital Budget and Plan request of \$17.288 million, including a 2008 Capital Budget of \$6.726 million and a 2009 – 2012 Capital Plan of \$10.562 million. The Debt Affordability Target provided by the City for TPH is \$3.490 million in 2008, \$3.499 million in 2009 and 2010 and, \$3.400 million in 2011 and 2012 for a total of \$17.288 million.

The 5-Year Capital Budget and Plan request will provide funding for twelve Information and Technology (IT) projects that support TPH strategic plan of improving service delivery with the development and enhancement of systems while complying with provincial mandatory reporting system requirements. The associated operating impact of these twelve IT projects at the end of five years is \$2.018 million gross and \$0.616 million net for twelve new positions and ongoing costs for service and maintenance.

### **Background Information**

Toronto Public Health 2008 - 2012 Capital Budget and Plan Submission  
(<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6974.pdf>)

HL7.13	Information	Received		
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### **Pandemic Influenza Preparedness Update**

#### **Decision Advice and Other Information**

The Board of Health received the verbal update on pandemic influenza for information.

#### **Summary**

Verbal update by the Medical Officer of Health.

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

(August 8, 2007) Report from Chief Corporate Officer

#### **Decision Advice and Other Information**

The Board of Health directed the Medical Officer of Health to request the Toronto Transit Commission, the Toronto Zoo and the Toronto Parking Authority to, in future, send their used motor oil for re-refinement in order to better protect the environment.

#### **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	Adopted		
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### **Amendment to Capital Budget Plan - Toronto Animal Services**

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

#### **Decision Advice and Other Information**

The Board of Health adopted the recommendation in the letter (June 19, 2007) from the Budget Sub-committee "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."

#### **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**

Amendment to Capital Budget Plan - Toronto Animal Services  
<http://www.toronto.ca/legdocs/mmis/2007/hl/bgrd/backgroundfile-6609.pdf>

HL7.16	ACTION	Adopted		
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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

#### **Decision Advice and Other Information**

The Board of Health directed the Medical Officer of Health to proceed with the Access to Environmental Information By-law development and to consider the inclusion of greenhouse gas emissions in the associated reporting system and tools.

#### **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>)

HL7.17	ACTION	Adopted		
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### Appointment of Board of Health Representative to the Children's Services Advisory Committee

(September 17, 2007) Memo from Councillor Janet Davis, Chair, Children's Services Advisory Committee

### Decision Advice and Other Information

The Board of Health appointed Fiona Nelson as its representative to the Children's Services Advisory Committee for the 2006-2010 term of Council.

### Summary

Inviting the Board of Health to appoint a representative to the Children's Services Advisory Committee for the 2006 - 2010 term of Council.

### Meeting Sessions

Session Date	Session Type	Start Time	End Time	Public or Closed Session
2007-09-19	Afternoon	1:05 PM	5:45 PM	Public