

October 24, 2008

To: Executive Committee

From: Budget Committee

Subject: Toronto Public Health 2008 Operating Budget Adjustment

Recommendation:

The Budget Committee recommended to the Executive Committee that:

- 1. City Council approve increasing the Toronto Public Health 2008 base Operating Budget by \$115.0 thousand gross and \$0.0 net, and a staff increase of 1.0 permanent position, to reflect confirmed funding from the Ministry of Health Promotion.**

Background:

The Budget Committee on October 24, 2008, considered a letter (October 22, 2008) from the Board of Health, entitled “Toronto Public Health 2008 Operating Budget Adjustment”.

for City Clerk

Merle MacDonald/mb
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October 22, 2008

To: Budget Committee

From: Board of Health

Subject: Toronto Public Health 2008 Operating Budget Adjustment

Recommendation:

The Board of Health recommended to the Budget Committee that:

- 1. The Toronto Public Health 2008 base Operating Budget be increased by \$115.0 thousand gross and \$0.0 net, and a staff increase of 1.0 permanent position, to reflect confirmed funding from the Ministry of Health Promotion.**

Background:

The Board of Health on October 22, 2008, considered the following:

1. (October 1, 2008) Report from the Medical Officer of Health entitled "Toronto Public Health 2008 Operating Budget Adjustment".

Background Information

Toronto Public Health 2008 Operating Budget Adjustment - Staff Report
(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-16114.pdf>)

Secretary,
Board of Health

C. Davidovits/jd
Item HL18.5

Attachment

- c. Medical Officer of Health



STAFF REPORT ACTION REQUIRED

Toronto Public Health 2008 Operating Budget Adjustment

Date:	October 1, 2008
To:	Board of Health
From:	Medical Officer of Health
Wards:	All
Reference Number:	

SUMMARY

The purpose of this report is to request a budget adjustment to Toronto Public Health's (TPH) 2008 Operating Budget due to confirmation of additional base funding from the Ministry of Health Promotion.

RECOMMENDATIONS

The Medical Officer of Health recommends to City Council that:

1. the Toronto Public Health 2008 base Operating Budget be increased by \$115.0 thousand gross and \$0.0 net, and a staff increase of 1.0 permanent position, to reflect confirmed funding from the Ministry of Health Promotion.

Financial Impact

In 2005 the Ministry of Health and Long-Term Care (MOHLTC) introduced 100% funding to support tobacco control programs in public health units across the province. Existing tobacco inspection and enforcement activities which were previously cost shared are now 100% provincially funded under the Smoke-Free Ontario (SFO) Strategy, administered by the Ministry of Health Promotion (MHP). Recently, additional 100% funding for new tobacco prevention activities has been provided.

A budget adjustment of \$115.0 thousand gross and \$0.0 thousand net is required to reflect confirmed base funding from the Ministry of Health Promotion in the Toronto Public Health 2008 Operating Budget, for the Smoke Free Ontario program. The funding will be used to establish an Aboriginal youth cluster in the Youth Action Alliance area. This will involve

the hiring of one permanent full-time Youth Advisor and recruiting up to ten Aboriginal youth peer leaders.

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

ISSUE BACKGROUND

Toronto Public Health currently has three Youth Action Alliances (YAA) called T-DOT (Tobacco Don't Own Toronto). Youth Action Alliances are peer leadership programs that engage youth (14-18 years of age) in local actions around SFO's three goals:

- Prevent tobacco use initiation and addiction among children, youth and young adults
- To reduce tobacco use in Ontario
- To eliminate involuntary exposure to environmental tobacco smoke

The objectives of the program are to:

1. Provide youth with job-related experience and opportunities to develop positive attitudes, skills and behaviours required for employment;
2. Provide training and foster development of knowledge and skills needed for civic participation; and,
3. Engage youth as participants in the planning and implementation of programme, policy and social marketing (media) activities, primarily relating to tobacco control, to protect, and improve the health status of their peers and communities.

The 2001 Aboriginal People's Survey indicates that Toronto is home to approximately 25,000 people who self-identify as Aboriginal. However, this number is thought to be lower than the actual population due to underreporting related to how this population identifies themselves. There is a steady trend of migration to urban centres and approximately 45% of this urban Aboriginal population is under the age of 25 (Urban Aboriginal Task Force Report, December 2007).

The 1997 First Nations and Inuit Regional Health Surveys reported smoking rates of 62% for First Nations and 72% for Inuit peoples. According to these surveys the average age for taking up smoking is also younger for these populations than for the population as a whole.

Given the higher rates of Aboriginal tobacco use and the tendency for earlier smoking initiation, the Ministry of Health Promotion is providing funding to Toronto Public Health to work with youth in these communities.

COMMENTS

Toronto Public Health will use these new funds to hire a Youth Advisor and recruit up to ten youth peer leaders to carry out activities related to the Smoke-free Ontario Youth Action Alliance program. These activities will focus on the Aboriginal communities within the city

of Toronto and will work in close partnership with Aboriginal community agencies and stakeholders.

Funding received from the Ministry of Health Promotion for the Aboriginal Youth Action Alliance cannot be used to replace existing funding for Toronto Public Health tobacco control programs.

Conclusions:

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The Smoke-Free Ontario Strategy has been expanded to enhance public health efforts in the areas of preventing youth from starting to smoke, helping smokers to quit and protecting people from the harmful effects of second-hand smoke. The funds awarded will enhance Toronto Public Health's comprehensive tobacco control program by expanding staffing resources and providing opportunities to work in partnership with community agencies to empower youth and support at-risk groups to quit smoking.

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Dr. David McKeown
Medical Officer of Health