
Board of Health

Meeting No.	12	Contact	Candy Davidovits, Committee Administrator
Meeting Date	Tuesday, February 26, 2008	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 - January 21, 2008

Speakers/Presentations – A complete list will be distributed at the meeting.

Communications/Reports

HL12.1	ACTION			
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Food and Beverage Marketing to Children

(Staff Presentation)

(February 8, 2008) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. The Board of Health urge Health Canada, Industry Canada and the Ontario Ministry of Government and Consumer Services to prohibit all commercial advertising of food and beverages to children under the age of thirteen years.
2. Until effective legislation is in place, the Medical Officer of Health actively monitor trends, practices and policies related to the commercial marketing of food and beverages to children and report to the Board of Health as needed.
3. The Board of Health ask the national policy consensus conference on children's marketing, hosted by the Chronic Disease Prevention Alliance of Canada in March 2008, to adopt the position of a national ban on all commercial advertising of food and beverages to children under the age of thirteen years
4. The Board of Health ask City of Toronto Agencies, Boards, Commissions and Divisions to avoid commercial advertising of food and beverages to children under the age of thirteen years in City funded or operated services, facilities and venues.
5. The Medical Officer of Health work with City of Toronto Agencies, Boards, Commissions and Divisions on implementing guidelines or policies related to children's marketing and report back to the Board of Health on the status of implementation.
6. The Medical Officer of Health continue to work with schools boards within Toronto and the Ontario Ministry of Education to enhance media literacy among parents and children as it relates to food and beverage marketing.

7. The Medical Officer of Health incorporate media literacy education related to food and beverage marketing into parenting programs delivered by Toronto Public Health where appropriate.
8. The Chair of the Board of Health urge the Public Health Agency of Canada to establish an ongoing monitoring system for food and beverage marketing to children and youth, including data on the frequency and content of exposures in all media, to assess the marketing environment and monitor trends.
9. The Board of Health urge the Canadian Institutes of Health Research (Institute of Human Development, Child and Youth Health and Institute of Nutrition, Metabolism and Diabetes) to fund research to address gaps related to the impact on children of marketing in all media and the relative strength of the effect of marketing in comparison to other influences on children's diets and diet-related health outcomes.
10. This report be sent to the Canadian Public Health Association and the Chronic Disease Prevention Alliance of Canada to seek their endorsement of the Board's position and to ask that they advocate to Health Canada and Industry Canada for a prohibition on all commercial advertising of food and beverages to children under the age of thirteen years.
11. This report be sent to the Association of Local Public Health Agencies, the Ontario Public Health Association, and local Boards of Health to seek their endorsement of the Board's position and to ask that they advocate to Health Canada and Industry Canada for a prohibition on all commercial advertising of food and beverages to children under the age of thirteen years.
12. This report be sent to the Ontario Ministries of Children and Youth Services, Education, Government and Consumer Services, Health and Long-Term Care, Health Promotion, to Health Canada, Industry Canada, and the Public Health Agency of Canada to inform the policy agenda on children's food and beverage marketing.
13. This report be forwarded to the Toronto Food Policy Council, the General Managers of Parks, Forestry and Recreation, Children's Services, and Economic Development, Culture and Tourism, the Chairs of the Toronto Transit Commission and the Toronto Public Library Board, the Directors of the Toronto District School Board, the Toronto Catholic District School Board, Conseil scolaire de district catholique Centre-Sud, and Conseil scolaire de district du Centre Sud-Ouest to increase their awareness of the impact of food and beverage marketing on children.
14. This report be forwarded to Advertising Standards Canada, the Canadian Association of Broadcasters, the Canadian Marketing Association and the Association of Canadian Advertisers for information.

Financial Impact

There are no direct financial implications arising from this report.

Summary

This report discusses children's exposure to food and beverage marketing and its impact on their diets and diet-related health outcomes. It proposes measures to address the children's marketing environment.

Marketing is one of several influences on the diets of young people. Children today are exposed to a greater intensity and frequency of marketing messages than any previous generation. Marketing has expanded into new media (Internet, mobile phones) and employs more sophisticated techniques than ever before. Research has focused almost exclusively on television advertising and has found that it influences children's food and beverage preferences, purchase requests and short-term consumption. Based on U.S. data, young children see 27 television food ads for every public service announcement promoting physical activity or healthy eating.

The susceptibility of young children to marketing messages is well established. There is strong evidence that children under eight years of age generally lack the cognitive abilities to objectively evaluate marketing messages. Younger children, four years and under, cannot consistently tell the difference between television commercials and programming. Food and beverage products developed for, and advertised to, children are dominated by those that are calorie dense and nutrient poor. Marketing to children is seen as critical to establishing and maintaining a life-long relationship with customers and children are increasingly becoming a powerful economic group in their own right. Children's advertising is primarily regulated by industry in Canada. A review of the current system and proposed industry voluntary changes finds substantial shortcomings and raises doubt that industry self-regulation could adequately address public health concerns related to children's marketing.

An analysis of approaches to alter the children's marketing environment finds that a ban on the commercial advertising of food and beverages to children under the age of thirteen years is appropriate in Canada at this time.

Background Information

Food and Beverage Marketing to Children

(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11151.pdf>)

HL12.2	ACTION			
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Improving Access to Dental Care for Low Income People

(February 11, 2008) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. The Board of Health write to the Premier of Ontario, the Minister of Health and Long-Term Care (MOHTLC) and the Ontario Cabinet Committee on Poverty Reduction:

- a. commending them on their acknowledgement in the last provincial election that access to basic dental care is essential for Ontarians who do not have dental insurance through employment and who cannot afford to pay;
- b. requesting that the \$45 million promised in the election campaign be used to improve access to basic dental care and improve the health of Ontario's children and adults who are suffering from dental diseases;
- c. reiterating that local Public Health Units play an important role in oral health in schools and in their communities and therefore should be included in the planning process for the allocation of these funds;
- d. informing them that since this important health issue has been neglected for so long, health and social services agencies in some municipalities have developed local charity solutions to assist the most vulnerable members of their community access dental care for the relief of pain and infection. This model of providing dental care is not sustainable;
- e. recommending that the \$45 million be used to build on existing infrastructures in local communities that already serve low/no income people and so maximize the health benefits for low/no income Ontarians;
- f. endorsing the recommendations in the Toronto Oral Health Coalition Proposal (see Attachment 2); and
- g. stating that while this is a good initial step to address unmet needs for basic dental care, a comprehensive approach is necessary to ensure equitable access to basic dental care for Ontarians.

Financial Impact

There is no financial impact to the City of Toronto arising from this report.

Summary

For almost 100 years Toronto Public Health (TPH) has been providing dental services to children in low income families. Dental services are not included in the provincial health insurance plan which means that these children would find it difficult, if not impossible, to access basic dental services if their families do not have dental insurance. Since 1993 Toronto Public Health has also been providing basic dental treatment services to eligible low income seniors, to low/no income parents enrolled in some public health programs, and seniors living in long-term care facilities. These health services are not mandatory under Provincial standards/guidelines and are fully funded by the municipality.

In 1987 the Provincial government introduced the Children In Need Of Treatment dental program for children of low/no families who have urgent dental problems and in 1998 introduced a dental program for dependent children of Ontario Works recipients. These programs are cost shared between the Province and the municipality.

Since 1999, the Board of Health (BOH) has been advocating to the Minister of Health and Long-Term Care for provincial funding for dental care for marginalized populations. The current provincial government committed during the recent election to spend \$45 million to improve access to dental care for low income families. The BOH should join other advocates in advising the provincial government on the most effective use of these funds based on public health's extensive experience in the delivery of basic dental care for low income families.

Background Information

Improving Access to Dental Care for Low Income People

(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11152.pdf>)

HL12.3	ACTION			
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Pandemic Influenza Preparedness Update

(February 6, 2008) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. The Chair of the Board of Health request that the Minister of Health and Long-Term Care reconsider the operation of flu centres by local public health units and examine other means of assessment, treatment and antiviral distribution, building on the existing health care infrastructure.
2. The Chair of the Board of Health request that the Minister of Health and Long-Term Care immediately convene a surveillance workshop with relevant stakeholders to develop minimum data requirements and to recommend an information system to be used on an interim basis should a pandemic occur prior to the new information system being in place.
3. The Chair of the Board of Health request that the Minister of Health and Long-Term Care accelerate work on their Publication Facility, with a priority on establishing a mechanism to ensure that all Medical Officers of Health (MOH's) can communicate with physicians in their health unit in a timely fashion.
4. The Chair of the Board of Health request that the Minister of Health and Long-Term Care assign responsibility and provide adequate resources to Local Health Integration Networks to coordinate the health care system planning and response in a pandemic.

Financial Impact

There are no financial implications arising from this report.

Summary

The report updates information on the spread of avian influenza and outlines the progress TPH has made in its preparedness activities since the last report to the Board of Health.

This report also identifies issues that affect the capacity of Toronto Public Health (TPH) to respond effectively to an influenza pandemic. Some of the issues relate to responsibilities assigned to local health units by the Ministry of Health and Long-Term Care (MOHLTC) which are outside their traditional mandate and expertise. Other issues impeding pandemic planning relate to the absence of clear policy direction from other orders of government.

Background Information

Pandemic Influenza Preparedness Update

(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11153.pdf>)

Pandemic Influenza Preparedness Update - Attachment 1

(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11154.pdf>)

HL12.4	ACTION			
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Bed Bug Issues in Toronto

(February 14, 2008) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. The Medical Officer of Health establish an action committee comprised of city divisions, housing providers, health care organizations, social services, community groups, representatives of landlords and tenants, and other appropriate stakeholders to develop a comprehensive action plan to reduce bed bug infestations in the City of Toronto with particular emphasis on vulnerable populations.
2. The Medical Officer of Health report on the progress of the action committee within six months.
3. The Board of Health request the government of Ontario to incorporate the issue of bed bug infestations in their poverty reduction strategy.
4. This report to be referred to the Licensing and Standards Committee and the Community Development and Recreation Committee for information.

Financial Impact

There are no financial implications resulting directly from the adoption of this report.

Summary

This report responds to a Board of Health request at its meeting of November 12, 2007 that the Medical Officer of Health investigate and report back on a number of issues related to the spread of bed bugs in Toronto. The report provides a brief overview of the epidemiology, health impacts, the extent of bed bug infestations in Toronto, control strategies and outlines a plan to deal with this resurgent pest.

Bed bug infestations occur in all neighbourhoods and communities in the City and most households deal with the problem without assistance from the Municipality. This is not the case with the most vulnerable populations in our community. In recent months, Toronto Public Health has devoted significant resources to deal with severe infestations impacting on the health of the elderly, those living with physical and mental health issues and people living in poverty. This report is intended to focus primarily on strategies to ensure that vulnerable people get the assistance they need to lead independent, pest free lives.

Background Information

Bed Bug Issues in Toronto

(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11155.pdf>)

Bed Bug Issues in Toronto - Attachment 1

(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11156.pdf>)

Bed Bug Issues in Toronto - Attachment 2

(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11157.pdf>)

Bed Bug Issues in Toronto - Attachment 3

(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11158.pdf>)

Bed Bug Issues in Toronto - Attachment 4

(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11159.pdf>)

Bed Bug Issues in Toronto - Attachment 5

(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11160.pdf>)

Bed Bug Issues in Toronto - Attachment 6

(<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11161.pdf>)

HL12.5	ACTION			
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Toronto Public Health: 125 Years Toward a Healthy City

(February 8, 2008) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. The Board of Health create Public Health Champions Awards as a legacy of celebrations marking the 125th Anniversary of Public Health in Toronto in 2008.
2. The Board of Health appoint a sub-committee of the Board to develop a nomination process and criteria for the selection of recipients of the Public Health Champions Awards.
3. The Public Health Champions Awards sub-committee report back to the May, 2008 Board of Health meeting with a proposed schedule for the inaugural award to be presented in the fall of 2008.

Financial Impact

There are no direct financial implications arising from this report.

Summary

The purpose of this report is to outline the activities being planned to celebrate the 125th Anniversary of Toronto Public Health (TPH) during 2008. The anniversary presents an opportunity to recognize Public Health as a foundation in the evolution of the City and to promote awareness of the continuing role of TPH in building a healthy city where everyone enjoys the highest level of well-being.

The theme for the anniversary celebrations is “125 Years Toward a Healthy City” and this will be reflected in a range of activities being planned for internal staff engagement and for outreach to the community. One project being planned as a legacy initiative of the 125 anniversary is the Public Health Champions Awards. This award will recognize the outstanding contribution of an individual or group to public health in Toronto. It is recommended the Board of Health establish a sub-committee to develop a nomination and selection process and a schedule to inaugurate the award in the fall of 2008.

Background Information

Toronto Public Health: 125 Years Toward a Healthy City
<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11162.pdf>

HL12.6	Information			
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Halton Region Report on Health Impacts from an Energy-from-Waste Facility

(February 7, 2008) Report from Medical Officer of Health

Summary

Ontario is facing a challenge in managing the amount of solid waste created, primarily due to limited existing landfill capacity. Some Ontario municipalities have chosen to explore energy-from-waste (EFW) as a disposal option. In June of 2007, Halton Region Council discussed a Business Case that considered EFW as a potential option for Halton. This report summarizes the information on the health and environmental impacts that was presented in the Business Case, along with comments from a peer review requested by the Halton Regional Health Department.

The Business Case is a preliminary step in exploring the potential for an EFW facility in Halton. It identifies the pollutants and health effects that might be of concern with an EFW facility that would need to be studied in more detail before such a facility is built. These include criteria air pollutants (such as nitrogen dioxide and particulate matter), dioxins and furans, polycyclic aromatic hydrocarbons, mercury and other metals as well as cancer, respiratory effects and adverse reproductive outcomes.

Toronto Public Health agrees with both the authors of the Business Case and the peer reviewer that there are a number of potential health issues associated with both EFW facilities and landfill operations, and that a more detailed study of health and environmental impacts is necessary before considering the construction and operation of a specific facility. The Medical

Officer of Health supports the use of health impact assessment, which Toronto's Solid Waste Management Services is planning to do as part of its Solid Waste Residuals Management Study.

Background Information

Halton Region Report on Health Impacts from an Energy-from-Waste Facility
<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11163.pdf>

HL12.7	Information			
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Update on City Council Approved Toronto Public Health 2008-2012 Capital Budget and Plan

(February 5, 2008) Report from Medical Officer of Health

Summary

This report provides an update to the Board of Health (BOH) on the Toronto Public Health (TPH) 2008 Capital Budget and 2009-2012 Capital Plan as approved by City Council.

At its meeting of December 11-13, 2007, City Council approved a Toronto Public Health 2008-2012 Capital Budget and Plan for a total of \$18.422 million with a 2008 cash flow of \$4.624 million (including a carry-forward of \$1.134 million from 2007). The future year commitments and plan estimates are comprised of \$3.499 million for 2009, \$3.499 million for 2010, \$3.400 million for 2011 and \$3.400 million for 2012, totalling \$13.798 million.

At the same meeting, City Council requested the Medical Officer of Health, in conjunction with the Chief Information Officer to report to the Budget Committee, prior to the start of the 2009 Capital Budget process, on the estimated costs and timeline of any new and existing projects required because of provincial initiatives and future TPH strategic plans, including the operating budget impact of capital projects beyond 2012.

Background Information

Update on City Council Approved Toronto Public Health 2008-2012 Capital Budget and Plan
<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11164.pdf>

HL12.8	Information			
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Local Health Committee Minutes

Summary

- Minutes of the North Region Local Health Committee meeting held on November 5, 2007.
- Minutes of the Scarborough Local Health Committee meeting held on November 6, 2007.

- Minutes of the North Region Local Health Committee meeting held on November 29, 2007.

Background Information

North Region Local Health Committee - November 5, 2007

<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11165.pdf>

Scarborough Local Health Committee - November 6, 2007

<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11166.pdf>

North Region Local Health Committee - November 29, 2007

<http://www.toronto.ca/legdocs/mmis/2008/hl/bgrd/backgroundfile-11167.pdf>

HL12.9	ACTION			
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Report of the Sub-committee to Conduct the 2007 Performance Appraisal for the Medical Officer of Health

Confidential Attachment - Personal matters about an identifiable individual, including municipal or local board employees

Summary

The Sub-committee is meeting on February 19, 2008, and will submit its report on this matter to the Board of Health on February 26, 2008.