Board of Health

Meeting No. 24 Contact Candy Davidovits, Committee

Administrator

Meeting DateMonday, June 15, 2009Phone416-392-8032Start Time1:00 PME-mailboh@toronto.caLocationCommittee Room 1, City HallChairCouncillor John Filion

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

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Declarations of Interest under the Municipal Conflict of Interest Act.

Confirmation of Minutes - May 19, 2009

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

Communications/Reports

HL24.1	ACTION			Ward: All
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2009 Update on Public Health Programs Funded by the Ministry of Children and Youth Services

Origin

(June 3, 2009) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

- 1. The Board of Health ask the Minister of Children and Youth Services for sufficient and sustainable provincial funding to ensure that Toronto Public Health can achieve full compliance with provincial service standards.
- 2. The Board of Health forward this report to the Ontario Public Health Association, Association of Local Public Health Agencies, the Toronto Best Start Network, and the Provincial Advocate for Children and Youth.

Summary

Toronto Public Health (TPH) delivers four Ontario Best Start programs: Healthy Babies Healthy Children, Preschool Speech and Language Services, the Infant Hearing Program and the Blind Low-Vision program. Each of these programs receives 100% funding from the Ministry of Children and Youth Services (MCYS). Funding levels for the past several years have been insufficient to meet the needs of Toronto's at risk pregnant women and young children and families. Nevertheless, Toronto Public Health has remained committed to delivering the highest level and quality of service possible within available funding.

The Ministry of Children and Youth Services has advised Toronto Public Health that 2009 funding for each of these programs has been frozen at 2008 levels. The purpose of this report is to advise the Board of Health on service implications of this funding level. These include reducing the universal service components of the programs, prioritizing service to high risk clients, increasing waitlist times and exploring alternate service delivery strategies.

Financial Impact

There are no financial implications to the City directly resulting from this report.

Background Information

HL24.1 - 2009 Update on Public Health Programs Funded by the Ministry of Children and Youth Services - Staff Report

(http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21897.pdf)

HL24.2	ACTION			Ward: All
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Ministry of Health Promotion Funding Reductions to Smoke-Free Ontario Public Health Unit Programs

Origin

(June 4, 2009) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

1. The Board of Health write to the Premier and the Minister of Health Promotion expressing concern about the anticipated impact of funding reductions to Youth Action Alliances, High School Grants, and enforcement under the Smoke-Free Ontario Strategy and requesting that the Ministry of Health Promotion maintain the same level of financial investment in future programs for at-risk youth.

Summary

The purpose of this report is to advise the Board of Health about Ministry of Health Promotion (MHP) funding reductions to 100% provincially funded Smoke-Free Ontario (SFO) programs and outline the implications of these reductions.

MHP notified Toronto Public Health (TPH) on May 25, 2009 that there will be funding reductions related to the Youth Action Alliance program (YAA), the High School Grants programs and enforcement of the Smoke-Free Ontario Act (SFOA) across Ontario.

The MHP will be discontinuing funding for the YAA program as of August 31, 2009. The High School Grants program will also be discontinued for the 2009-2010 school year. The Ministry is also reducing its budget for enforcement of the SFOA by \$1.2 million provincially during the 2009-2010 fiscal year. The impact on Toronto's tobacco enforcement budget will not be known until further direction is received from the Ministry.

Financial Impact

The table on page 2 of the staff report summarizes the financial impact of the recent announcement by the Ministry of Health Promotion regarding funding reductions for the Smoke-Free Ontario program. No funding will be provided for the High School Grant (HSG) program in 2009. Funding for the Youth Action Alliance (YAA) program will be discontinued as of August 31, 2009. Thus, the projected actual funding from the Province for YAA will be reduced by \$153,300 in 2009. No provincial funding will be provided for YAA in 2010. In total, four positions supporting Youth Action Alliance will be eliminated in 2010. The service level impact on Toronto's tobacco enforcement will not be known until further direction is

received from the Ministry of Health Promotion.

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

Background Information

HL24.2 - Ministry of Health Promotion Funding Reductions to Smoke-Free Ontario Public Health Unit Programs - Staff Report (http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21909.pdf)

HL24.3	ACTION			Ward: All
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A Five Year Plan for Strengthening Student Nutrition Programs in Toronto

Origin

(June 3, 2009) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

- 1. The Board of Health endorse a five year plan to extend municipal funding incrementally to all provincially designated school communities over 2010-14, including annual funding increases to address the cost of nutritious food.
- 2. The Medical Officer of Health initiate a program review of the Student Nutrition Program in collaboration with the City of Toronto Social Development, Finance and Administration Division, Toronto District School Board, Toronto Catholic District School Board, Ministry of Children and Youth Services, and other stakeholders, to recommend the most appropriate organization and funding model to support program growth and sustainability.
- 3. The Board of Health reiterate its request to the federal government to provide core funding for a national universal student nutrition program.
- 4. The Board of Health forward this report to the Budget Committee for consideration during the 2010 Operating Budget process.
- 5. The Board of Health forward this report to the Community Development and Recreation Committee for its information.
- 6. The Board of Health also forward this report to the Ministry of Children and Youth Services, the Toronto District School Board, the Toronto Catholic District School Board, the Toronto Food Policy Council, Toronto Foundation for Student Success and the Angel Foundation for Learning.

Summary

During the 2009/10 school year, municipal and provincial funding for student nutrition programs in Toronto will provide over 108,000 children and youth with access to nutritious foods in schools and community sites. At a minimum, provincial funding will reach almost 20,000 additional students.

Student nutrition programs help to create healthier eating habits and to prevent obesity and the related early onset of chronic conditions such as diabetes and cardiovascular disease. Nutritious meals and snacks provide students with the nutrients and energy they need to be ready to learn. They can also alleviate short term hunger resulting from food insecurity among children living in low income families. Student nutrition programs also provide a positive setting for children to meet and socialize and an opportunity for food skills training and social connections for parents and volunteers in the community.

As poverty in the City deepens as a result of the economic downturn, a greater level of municipal investment is needed to ensure that student nutrition programs are available and can be sustained in priority neighbourhoods where families live in poverty and struggle on a daily basis to meet basic needs. Additionally, as the cost of food continues to increase, funding levels must continue to keep pace with inflation.

This report outlines a plan for the next five years to strengthen student nutrition programs by addressing the needs of priority communities while ensuring that existing programs across the City continue to thrive and are better able to meet the nutritional needs of Toronto's children and youth. The report also envisions a Toronto where all students have access to a high quality, sustainable student nutrition program in their school or community. The plan incorporates the rising cost of food as well as an incremental increase in municipal funding for 146 new school communities that are eligible for provincial funding, but not municipal funding, in 2009/10.

As the student nutrition program continues to grow in response to community need, it is recommended that a program review be undertaken to evaluate how program participation, fundraising capacity and parental involvement impacts upon program success and to identify the optimal organization and funding model to ensure long term sustainability.

Financial Impact

See Table on page 3 of the staff report for detailed financial impact information.

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

Background Information

HL24.3 - A Five Year Plan for Strengthening Student Nutrition Programs in Toronto - Staff Report

(http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21910.pdf)

HL24.4	ACTION			Ward: All
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Air Quality Impact Assessment - Metrolinx Georgetown South Service Expansion and Union-Pearson Rail Link

Origin

(June 3, 2009) Report from Medical Officer of Health

Recommendations

The Medical Officer of Health recommends that:

- 1. The Board of Health request Metrolinx to do the following as part of its assessment of the proposed Georgetown South Service Expansion and Union-Pearson Rail Link:
 - a. make the following additions to the consultants' risk assessment studies:
 - i. estimate particulate deposition to soil, and evaluate skin contact and ingestion exposures to these particulates;
 - ii. evaluate diesel exhaust both as a whole and as a mixture of individual components;
 - iii. undertake an ultrafine particulate matter (PM0.1) monitoring program to characterize baseline concentrations and concentration gradients;
 - b. conduct a health impact assessment (HIA) study, in consultation with the Medical Officer of Health, to examine the distribution in the community of risks and benefits from the proposed Georgetown South Service Expansion and Union-Pearson Rail Link;
 - c. estimate the contribution of each train line operating on the Georgetown South Corridor to total, annual diesel exhaust emissions, and thereby predict the emissions reductions achievable through electrification of GO Georgetown services and the Union-Pearson Rail Link; and
 - d. make the above information available in a way that allows the public sufficient time to review and comment before Metrolinx finalizes its Environmental Project Report.
- 2. The Board of Health request the Medical Officer of Health to review the risk assessment reports, air quality impact mitigation strategy and health impact assessment when they are released by Metrolinx, and provide input to Metrolinx and the public through the Environmental Bill of Rights Registry.
- 3. The Board of Health request Metrolinx to:
 - a. electrify the Georgetown South Service Expansion and the Union-Pearson Rail Link as soon as possible;

- b. apply the following good practices for the protection of public health to the Georgetown South Service Expansion and the Union-Pearson Rail Link until such time as electrification is in place:
 - i. select hybrid locomotives with on-board rechargeable energy storage systems and regenerative braking;
 - ii. select new locomotives and remanufacture systems of the best available technology, which may be more advanced than that required by the current US EPA emissions standards for line-haul locomotives;
 - iii. use ultra low-sulphur diesel (ULSD, 15 ppm);
 - iv. ensure that idle control systems are in place, and develop and implement idling reduction policies; and,
 - v. regularly assess and maintain tracks and locomotives to maintain emissions performance at or above the relevant emissions standards;
 - vi. develop a detailed mitigation strategy to manage the residual human health risks;
- c. collaborate with Toronto Public Health, City Planning, and Transportation Services to ensure that the stations on the Georgetown South Corridor are developed into connected "mobility hubs" where residents can live, shop, eat, work, play, and connect to active transportation and public transit;
- 4. The Board of Health request Metrolinx to apply the good practices for the protection of public health requested above to all non-electrified GO transit rail services that pass through residential neighbourhoods in the City of Toronto.
- 5. The Board of Health forward this report to Canadian National Railway, Canadian Pacific Railway and Via Rail Canada, and request that they apply the good practices for the protection of public health requested above to their services that pass through residential neighbourhoods in the City of Toronto.
- 6. The Board of Health forward this report to the:
 - a. Clean Train Coalition, Environmental Health Association of Ontario, Mount Dennis Community Association and Weston Community Coalition;
 - b. Toronto District Catholic School Board and Toronto District School Board;
 - c. Medical Officers of Health for Halton and Peel Regions;
 - d. Ontario Minister of the Environment; and,

- e. Federal Ministers of the Environment and Transportation.
- 7. The Board of Health forward this report and the Board of Health's decision to the Parks and Environment Committee for its June 16, 2009, meeting.

Summary

In response to requests from the Board of Health and the Parks and Environment Committee, Toronto Public Health (TPH) undertook a review of the health-related studies under preparation by Metrolinx' consultants for the proposed Georgetown South Service Expansion and Union-Pearson Rail Link. The scope of this review was dependent on the availability of data from Metrolinx.

The Medical Officer of Health (MOH) and City Council support enhancements to public transit such as those proposed by Metrolinx. However, the potential health impacts associated with diesel exhaust from increased train traffic are cause for concern. Diesel exhaust and many of its component pollutants are associated with significant health impacts. In addition, certain residential neighbourhoods through which the trains will pass have lower socioeconomic status than the average for the City and, therefore, are particularly vulnerable to any health impacts that may occur.

This report recommends improvements to Metrolinx' assessment of its proposed project, including a health impact assessment and changes in scope to better estimate exposure and health effects. Electrification of the Georgetown GO Line and Union-Pearson Rail Link should be undertaken as soon as possible, and several health-protective practices should be implemented in the interim.

Financial Impact

There are no financial impacts of these recommendations.

Background Information

HL24.4 - Air Quality Impact Assessment - Metrolinx Georgetown South Service Expansion and Union-Pearson Rail Link - Staff Report (http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21895.pdf)

HL24.5	Information			Ward: All
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Toronto Food Policy Council 2008 Annual Report: Thinking Globally, Eating Locally

Origin

(June 1, 2009) Report from Medical Officer of Health

Summary

This annual report from the Toronto Food Policy Council (TFPC) updates the Board of Health on public health and related implications of the rising popularity of locally-grown food. The report identifies six important areas where healthy public policy needs to address the many

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complications of moving toward a more local food system. These six areas are: the definition of local; the ranking of local food environmental benefits; the centrality of government-funded infrastructure; the uplifting role of public markets; urban agriculture and community gardening; and local job creation. This report shows that the integrated perspectives of healthy public policy and community food security provide common ground for developing relevant programs, advocacy and communication materials.

This report also updates the Board of Health on the activities of the TFPC in fulfilling its Terms of Reference, which are set by the Board of Health. Members and staff of the Toronto Food Policy Council have been actively working in most areas related to the developing local food movement.

Background Information

HL24.5 - Toronto Food Policy Council 2008 Annual Report: Thinking Globally, Eating Locally - Staff Report

(http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21815.pdf)

HL24.6	Information			Ward: All
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Pandemic Influenza Preparedness Update

Summary

The Medical Officer of Health will give a verbal update on Pandemic Influenza Preparedness.

HL24.7	ACTION			Ward: All
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2009 AIDS Prevention Community Investment Program Allocation Recommendations

Origin

(June 2, 2009) Report from Chair, AIDS Prevention Community Investment Program Review Panel

Recommendations

The 2009 AIDS Prevention Community Investment Program Review Panel recommends that:

- 1. The Board of Health recommend that Toronto City Council approve the allocation of \$1,544,080.00 to 40 projects as recommended by the 2009 AIDS Prevention Community Investment Program Review Panel in Appendix C and Appendix D of this report.
- 2. The Board of Health recommend that Toronto City Council approve an allocation of \$102,000 to Schools Without Borders to enhance Toronto's response to HIV/AIDS globally and as a legacy to the XVI International AIDS Conference held in Toronto in

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August 2006, as recommended by the AIDS Prevention Community Investment Program Review Panel in Appendix E of this report.

- 3. The Board of Health request the Medical Officer of Health to meet with representatives from Toronto Community Health Centres to discuss the availability of provincial funding for AIDS prevention programs.
- 4. Authority be granted to the Medical Officer of Health to execute Letters of Understanding on behalf of the City.

Summary

This report outlines the review process, funding applications and recommendations of the Board of Health AIDS Prevention Community Investment Program Review Panel regarding allocations in 2009.

The 2009 Approved budget for the AIDS Prevention Community Investment Program (APCIP) includes an allocation of \$1,646,080.00. This report proposes funding allocations in the total amount of \$1,544,080.00 for 40 projects in Toronto and \$102,000.00 to Schools Without Borders (SWB) for the AIDS Prevention Community Investment Program Global HIV/AIDS Initiative. Funding is to be used between July 1, 2009 and June 30, 2010.

Financial Impact

There is no financial impact beyond what has been approved in the 2009 Approved Operating Budget.

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

Background Information

HL24.7 - 2009 AIDS Prevention Community Investment Program Allocation Recommendations - Staff Report (http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21818.pdf)

HL24.8	ACTION			Ward: All
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2009 Drug Prevention Community Investment Program Allocations

Origin

(June 2, 2009) Report from Chair, Drug Prevention Community Investment Review Panel

Recommendations

The 2009 Drug Prevention Community Investment Program Review Panel recommends that:

1. The Board of Health request that City Council approve the allocation of \$827,730 to 42 projects as recommended by the 2009 DPCIP Review Panel in Appendix B and Appendix C of this report.

- 2. The Board of Health request that City Council approve the listed applicants for multiyear assessment in Appendix D and E of this report.
- 3. Authority be granted to the Medical Officer of Health to execute Letters of Understanding on behalf of the City.

Summary

This report outlines the review process, funding applications and recommendations of the Board of Health Drug Prevention Community Investment Program Review Panel regarding allocations in 2009.

The 2009 Approved Budget for the Drug Prevention Community Investment Program (DPCIP) includes an allocation of \$827,730. This report recommends the allocation of \$827,730 to 42 projects. Funding is to be used between July 1, 2009 and June 20, 2010.

Financial Impact

There is no financial impact beyond what has been approved in the 2009 Approved Operating Budget.

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

Background Information

HL24.8 - 2009 Drug Prevention Community Investment Program Allocations - Staff Report (http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21820.pdf)

HL24.9	Information			Ward: All
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Toronto Public Health Capital Budget Variance Report for the Three Months Ended March 31, 2009

Origin

(May 21, 2009) Report from Medical Officer of Health

Summary

This report provides an update to the Board of Health on the Toronto Public Health (TPH) Capital Budget variance for the three-month period ended March 31, 2009 (Appendix 1).

Toronto Public Health spent \$0.488 million or 8.6 percent of the 2009 approved cash flow of \$5.670 million as of March 31, 2009. The year-end capital expenditure is projected to be \$5.390 million or 95.1 percent of the approved cash flow.

Financial Impact

See Table on page 1 of the staff report for detailed financial impact information.

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

Background Information

HL24.9 - Toronto Public Health Capital Budget Variance Report for the Three Months Ended March 31, 2009 - Staff Report

(http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21816.pdf)

HL24.9 - Toronto Public Health Capital Budget Variance Report for the Three Months Ended March 31, 2009 - Appendix 1

(http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21823.pdf)

HL24.10	Information			Ward: All
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Toronto Public Health Operating Budget Variance Report for the Four Months ended April 30, 2009

Origin

(May 22, 2009) Report from Medical Officer of Health

Summary

This report provides an update to the Board of Health on Toronto Public Health's (TPH) Operating Budget Variance for the four months of operation ending on April 30, 2009 (see Attachment 1).

Toronto Public Health's operating budget was under spent by \$83.4 thousand net or 0.8 percent for the four-month period ending on April 30, 2009.

TPH gross expenditures were below budget by \$2,520.2 thousand or 4.3 percent, attributable to the underspending of \$182 thousand in Salaries and Benefits and \$2,338.2 thousand in non-payroll. Revenue was underachieved by \$2,436.8 thousand or 5.0 percent due to under-expenditures in provincial cost shared and fully funded programs, underachievement of Interdepartmental Revenue in the Ontario Works Dental and Investing In Families programs and underspending in capital projects resulting in a favourable variance of transfer funds from capital. At year-end, TPH expects to be fully spent with no variance.

Financial Impact

See Table 1 on page 1 of the staff report for detailed financial impact information.

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

Background Information

HL24.10 - Toronto Public Health Operating Budget Variance Report for the Four Months ended April 30, 2009 - Staff Report

(http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21817.pdf)

HL24.10 - Toronto Public Health Operating Budget Variance Report for the Four Months ended April 30, 2009 - Attachment 1

(http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21824.pdf)

HL24.11	Information			Ward: All
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Scarborough Local Health Committee Minutes

Summary

- Minutes of the Scarborough Local Health Committee meeting held on February 2, 2009.
- Minutes of the Scarborough Local Health Committee meeting held on April 14, 2009.

Background Information

HL24.11 - Scarborough Local Health Committee Minutes - February 2, 2009 (http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21821.pdf) HL24.11 - Scarborough Local Health Committee Minutes - April 14, 2009 (http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21822.pdf)

HL24.12	ACTION			
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Report from the Board of Health Sub-Committee to Conduct the 2008 Performance Appraisal for the Medical Officer of Health

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

Origin

(May 19, 2009) Report from Board of Health Sub-Committee to Conduct the 2008 Performance Appraisal for the Medical Officer of Health

Recommendations

The Board of Health Sub-Committee to Conduct the 2008 Performance Appraisal for the Medical Officer of Health recommended to the Board of Health that the recommendations in the confidential communication (May 19, 2009) from the Sub-Committee be approved, such communication to remain confidential as it contains personal matters about an identifiable individual, including municipal or local board employees.

Summary

The Board of Health Sub-Committee to Conduct the 2008 Performance Appraisal for the Medical Officer of Health met on May 19, 2009, to consider the 2008 Performance Appraisal for the Medical Officer of Health, and forwarded its recommendations to the Board of Health, such matter to remain confidential as it relates to personal matters about an identifiable individual, including municipal or local board employees.

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Background Information

HL24.12 - Report from the Board of Health Sub-Committee to Conduct the Performance Appraisal for the Medical Officer of Health (http://www.toronto.ca/legdocs/mmis/2009/hl/bgrd/backgroundfile-21894.pdf)