

2021 Budget Notes Toronto Public Health

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Description

In accordance with the Health Protection and Promotion Act, Toronto Public Health's purpose is to deliver public health programs, services, and policies to prevent the spread of disease and promote and protect the health of the people of Toronto. Toronto Public Health's programs, services and policy directions strive to create the optimal conditions to achieve a healthy city for all, meet community public health needs, comply with the Ontario Public Health Standards, and contribute to a broader sustainable health system.

Why We Do It

Toronto Public Health contributes to the overall quality of life, but more particularly Toronto Public Health's desired outcomes are:

- Prevalence of chronic diseases is reduced and spread of communicable and infectious diseases in Toronto is prevented and controlled in a timely, responsive and equitable manner
- · Toronto residents adopt more healthy behaviours
- Conditions are in place to reduce barriers and inequities that inhibit Torontonians from achieving health and wellbeing

The City of Toronto aims to deliver these outcomes equitably, efficiently and with excellent customer service to help improve the lives of Torontonians and work to earn their trust and confidence.

What Service We Provide

Chronic Disease and Injury Prevention

Who We Serve: Everyone who lives, works or visits the City of Toronto.

What We Deliver: Programs and services that promote optimal nutrition and physical activity; diabetes prevention; skin cancer prevention; well-being promotion; adult oral disease management; tobacco cessation programs; and Ontario Seniors Dental Care Program.

How Much Resources (gross operating budget): \$45.78 million

Emergency Preparedness

Who We Serve: Everyone who lives, works or visits the City of Toronto.

What We Deliver: Programs and initiatives that ensure that public health has the capacity to cope with and recover from threats to public health or disruptions to public health programs and services.

How Much Resources (gross operating budget): \$2.5 million

Environmental Health

Who We Serve: Everyone who lives, works or visits the City of Toronto.

What We Deliver: Educational programs and inspections to prevent and reduce the burden of food-borne illnesses; timely and effective detection, identification, and response to drinking water contaminants and illnesses; inspection of recreational water facilities and public beaches to mitigate water-borne illness and hazards.

How Much Resources (gross operating budget): \$25.1 million

Infectious Diseases Prevention

Who We Serve: Everyone who lives, works or visits the City of Toronto.

What We Deliver: Tuberculosis education and treatment services; sexual health clinics; infection control and prevention liaison services; investigation and management of infectious and communicable disease, such as COVID-19; inspection of personal service settings.

How Much Resources (gross operating budget): \$142.3 million

Family Health

Who We Serve: Everyone who lives, works or visits the City of Toronto.

What We Deliver: Preconception, pregnancy, newborn, child, youth, parental, and family health programs including, breastfeeding clinics, healthy sexual health promotion and education, positive partnering sessions and supports; blind-low vision screening; child and youth oral health screening and treatment programs.

How Much Resources (gross operating budget): \$109.1 million

Public Health Foundations

Who We Serve: Everyone who lives, works or visits the City of Toronto.

What We Deliver: Systematic and routine analysis of surveillance information, including monitoring of trends over time, emerging trends, and priority population; conduct surveillance of community emergency planning and preparedness.

How Much Resources (gross operating budget): \$19.4 million

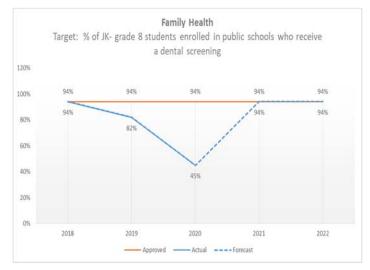
Budget at a Glance*

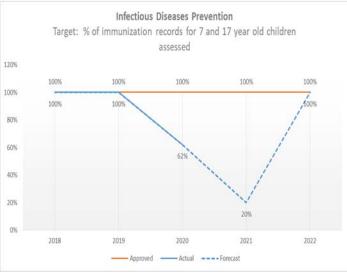
2021 OPERATING BUDGET									
\$Million	2021	2022	2023						
Revenues	\$219.8	\$200.6	\$200.4						
Gross Expenditures	\$344.2	\$275.9	\$279.5						
Net Expenditures	\$124.4	\$ 75.3	\$ 79.1						
Approved Positions	2,407.6	1,926.6	1,932.6						

2021	2022-2030	Total
\$5.1	\$28.7	\$33.8
\$1.9	\$28.7	\$30.6
	\$5.1	\$5.1 \$28.7

^{*}This document reflects the 2021 Operating Budget and 2021-2030 Capital Budget and Plan as recommended by the City's City Manager and Chief Financial Officer and Treasurer, which differs from the budget approved by the Board of Health reflecting adjustments made by TPH with most current information following Board approval of its budget. Please refer to Appendix 12 for details.

How Well We Are Doing – Behind the Numbers





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- Dental caries is a complex and multifactorial chronic disease that is heavily influenced by biomedical factors (diet, bacteria and host) and by social determinants of health.
- In Canada, 69% of children 6-11 years of age enrolled in publicly funded dental programs have dental disease and an estimated 2.26 million school-days are lost annually due to dental visits or dental sick-days.
- Dental screening is a secondary prevention which aims at detecting disease as early as possible to prevent, stop or slow the progression of dental disease to improve function and quality of life.
- With the exception of 2020, a significant number of school aged children are screened annually.
- Children and youth attending primary or secondary school should be appropriately immunized against designated disease such as diphtheria, tetanus, measles, mumps, rubella, meningococcal disease, whooping cough and chickenpox.
- Vaccines build immunity, protect children and youth from getting the disease and prevent children and youth from spreading a vaccine preventable disease to others, particular some of our most vulnerable populations such as younger children and older adults.
- Assessing records ensures children and youth have the appropriate vaccinations.
- Vaccine preventable disease levels are at, or near, record lows in Toronto due to Toronto Public Health efforts to maintain high vaccine coverage.
- Service was suspended due to location closures in response to the COVID-19 pandemic.

How Well We Are Doing

Service	Service Measure	2018 Actual	2019 Actual	2020 Target	2020 Projection	2021 Target	2022 Target	Status
		Outcome M	leasures					
Family Health	Reproductive Health Screening - number of screens completed to identify individuals and families at risk for adverse birth outcomes in pregnancy	1,400	1,511	1,600	500	500	1,400	•
Infectious Diseases Prevention	Immunization Record Assessment - percentage of immunization records for 7 and 17 year old children assessed *	100%	100%	100%	62%	100%	100%	•
Infectious Diseases Prevention	Toronto Urban Health Fund - number of community organizations funded to prevent transmission of HIV	49	40	40	47	48	48	•

^{*} This Service Level Measure was affected by the closure of schools in mid-March 2020 as a result of public health measures enacted as part of the response to COVID-19.

Service	Service Measure	2018 Actual	2019 Actual	2020 Target	2020 Projection	2021 Target	2022 Target	Status
	S	ervice Level	Measures					
Chronic Disease and Injury Prevention	Percentage of municipally funded Student Nutrition programs receiving nutrition consultation and support in the school year *	59%	53%	55%	N/A**	55%	55%	•
Emergency Preparedness	Maintain the availability of Toronto Public Health staff to respond to public health emergencies on a 24/7 basis	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved	•
Environmental Health	Percentage of High Risk food premises in compliance with Food Premises Regulation	87%	90%	90%	90%	90%	90%	•

^{*} This Service Level Measure could not be reported as schools closed mid-March 2020 as a result of public health measures enacted as part of the COVID-19 response.

^{**} A modified version of this service is being provided and a 2021 Approved Target is not available at this time. Service Levels will be tracked.

Service	Service Measure	2018 Actual	2019 Actual	2020 Target	2020 Projection	2021 Target	2022 Target	Status
	Se	rvice Level	Measures					
Family Health	Percentage of JK- grade 8 students enrolled in public schools who receive a dental screening *	59%	53%	55%	N/A*	N/A**	55%	•
Infectious Diseases Prevention	Percentage of Active Tuberculosis (TB) cases completing adequate treatment according to the Canadian TB Standards	99%	99%	100%	98%	98%	98%	•
Public Health Foundations	Number of surveillance indicators assessed, updated and reported to monitor the health of Toronto's population **	87%	90%	90%	90%	90%	90%	•

^{*} This Service Level Measure was affected by the closure of schools in mid-March 2020 as a result of public health measures enacted as part of the COVID-19 response.

^{**} This Service Level Measure was affected as Toronto Public Health redeployed staff to support the response to COVID-19.

COVID-19 IMPACT AND RECOVERY

2020 Impact

Financial Impact (Operating)

- \$21.1 million incremental cost related to COVID-19 Response, for which Toronto Public Health be seeking re-imbursement from the province:
 - \$37.9 million for staff overtime; additional staff (public health nurses, associate medical officers of health, supervisors); contracted medical doctors; communication supports; support for the development and implementation of information systems to support case and contact management and reporting; recovery and build planning; medical supplies and personal protective equipment; security; and
 - o \$1.6 million for lost revenue; offset by
 - \$18.7 million in savings as a result of positions that have remained vacant for the majority of 2020 as Toronto Public Health's operations were primarily focused on the COVID-19 Response.

2021 Impact and Recovery

Financial Impact (Operating)

- \$59.0 million in cost related to COVID-19 Response, for which Toronto Public Health will be seeking re-imbursement from the province:
 - \$57.5 million for the annualized costs of additional staff (public health nurses, associate medical officers of health, supervisor) and contracted medical doctors brought on board in 2020; communication supports; support for the implementation of the provincial case and contact management system, additional medical supplies and personal protective equipment and security; and
 - \$1.5 million for lost revenues.
- The 2021 budget also takes into consideration:
 - staff funded by the Ministry of Children, Community and Social Services (MCCSS) who were redeployed to COVID-19 Response in 2020 who will return to delivering MCCSS programs in 2021; and
 - resources engaged in case and contact management will be redeployed to support the COVID-19 mass vaccine immunization.

Financial Impact (Capital)

Information Technology Projects:

 \$2.099 million in projects halted as the majority of Toronto Public Health's resources were redeployed to support the COVID-19 response; development and implementation of information systems to support case and contact management and reporting.

Ontario Seniors Dental Care Program:

• \$2.49 million for *Ontario Senior Dental Care Program* projects delayed due to COVID-19.

Financial Impact (Capital)

Information Technology Projects:

- \$2.099 million from 2020 was deferred to 2021 (\$1.785 million) and 2022 (\$0.314 million).
- \$0.41 million for projects has been deferred from 2021 to 2022 due to continued redeployment of Toronto Public Health's resources to support the COVID-19 Response.

Ontario Seniors Dental Care Program:

\$2.49 million from 2020 deferred to 2021.

Service Level Changes

- Service levels have been severely impacted as:
 - a significant number of programs, services and activities have been suspended and/or reduced during the pandemic particularly as a number of these programs are delivered in settings that were closed, in keeping with provincial regulations; this included settings such as schools, dental clinics, community settings and facilities, and civic centres.
 - a significant number of Toronto Public Health's employees have been redeployed to respond to the COVID-19 pandemic.

Service Level Changes

 Service levels will continue to be impacted as Toronto Public Health's programs, services and activities are suspended and/or reduced, so resources can be focused on the preventing and controlling the spread of COVID-19 in a timely and responsive manner.

EXPERIENCES, CHALLENGES AND PRIORITIES

Our Experience and Success

- Resources to support the COVID-19 Response: redeployed approximately 70% of Toronto Public Health
 existing staff complement; expedited hiring for school based nursing positions, and increased staff for
 case and contact management and tracing.
- Established a Toronto Voluntary Isolation Centre to support individuals who are unable to safely and effectively isolate at home.

Key Challenges and Risks

- Multiple resurgence of COVID-19 positive cases. Additional public health measures/policies were enacted
 in the fall of 2020; however, Toronto Public Health continues to plan and prepare for subsequent
 resurgences into 2021 until such time as a vaccine becomes available and a sufficient number of citizens
 are vaccinated.
- Ability to deliver all pre-COVID-19 public health programs and services given resources needed to respond to COVID-19.
- COVID-19 is having a profound negative impact on the social, economic, physical and mental health of the City's population.
- The COVID-19 vaccination campaign will be a significant undertaking involving Toronto Public Health, other city divisions, other health care providers, other levels of government, and community agencies.

Priority Actions

- The key objectives of the COVID-19 response are to:
 - o prevent loss of life
 - o preserve the capacity of the healthcare system
 - o minimize the social and economic impacts
- Toronto Public Health will be focused primarily on responding to COVID-19, with a particular focus on preventing and controlling the spread of COVID-19 in a timely and responsive manner.

RECOMMENDATIONS

The City Manager and Chief Financial Officer and Treasurer recommend that:

1. City Council approve the 2021 Operating Budget for Toronto Public Health of \$344.227 million gross, \$219.835 million revenue and \$124.391 million net for the following services:

Service:	Gross Expenditures	Revenue	Net Expenditures
	(\$000s)	(\$000s)	(\$000s)
Chronic Diseases and Injury Prevention	45,777.3	31,402.1	14,375.2
Emergency Preparedness	2,478.1	1,508.3	969.8
Environmental Health	25,079.5	19,992.9	5,086.6
Family Health	109,138.6	89,214.2	19,924.4
Infectious Diseases	142,309.6	66,253.5	76,056.1
Public Health Foundations	19,443.5	11,464.2	7,979.3
Total Toronto Public Health Budget	344,226.6	219,835.2	124,391.4

- 2. City Council approve the 2021 staff complement for Toronto Public Health of 2,407.6 positions comprised of 4.0 capital positions and 2,403.6 operating positions.
- 3. City Council approve 2021 Capital Budget for Toronto Public Health with cash flows and future year commitments totaling \$11.071 million as detailed by project in Appendix 6a.
- 4. City Council approve the 2022-2030 Capital Plan for Toronto Public Health totalling \$22.745 million in project estimates as detailed by project in Appendix 6b.
- 5. City Council request the Ontario Ministry of Health to provide funding to reimburse the City of Toronto for all extraordinary costs incurred by Toronto Public Health in 2021 for additional staffing and resources for Toronto Public Health's COVID-19 response.

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2021 OPERATING BUDGET

2021 OPERATING BUDGET OVERVIEW

Table 1: 2021 Operating Budget by Service

(In \$000s)	2019 Actual	2020 Budget	2020 Projection*	2021 Base Budget	2021 New / Enhanced Requests	2021 Budget	Change v Project	
By Service	\$	\$	\$	\$	\$	\$	\$	%
Revenues								
Chronic Diseases and Injury Prevention	31.018.8	30,577.8	46,433.1	31,402.1		31,402.1	(15,031.1)	(32.4%)
Emergency Preparedness	2.252.7	1.653.7	1.884.8	1.508.3		1.508.3	(376.5)	(20.0%)
Environmental Health	18,078.5	19,929.8	13,322.5	19,992.9		19,992.9	6,670.4	50.1%
Family Health	67.530.6	88.949.5		89.214.1		89,214.1	(786.6)	(0.9%)
Infectious Diseases	53.246.1	57.206.5	,	66.253.6		66.253.6	29,220.8	78.9%
Public Health Foundations	13,404.6	11,524.5	8,731.1	11,464.2		11,464.2	2,733.2	31.3%
Total Revenues	185,531.4	209,841.8	197,405.0	219,835.2		219,835.2	22,430.1	11.4%
Expenditures	41.561.6	44,743.6	53,640.9	45.777.3		45.777.3	(7 062 7)	(11 70/.)
Chronic Diseases and Injury Prevention	2.495.2	2.693.5		-,		2.478.1	(7,863.7)	(14.7%)
Emergency Preparedness Environmental Health	23.542.6	25,100.0	,	2,478.1 25.079.2		25.079.2	(193.8) 3,589.4	(7.3%)
	95,453.0		,	-,		109,138.7		7.5%
Family Health Infectious Diseases	66,879.4	110,843.8 77,776.4	. ,	109,138.7 142,174.7	135.1		7,646.8 51,194.4	56.2%
Public Health Foundations	18,963.3	19,513.6	-	19,443.5	133.1	19,443.5	1,249.6	6.9%
			,		105.1		•	
Total Gross Expenditures	248,895.1	280,670.9	288,603.8	344,091.5	135.1	344,226.6	55,622.8	19.3%
Net Expenditures	63,363.7	70,829.1	91,198.8	124,256.3	135.1	124,391.4	33,192.6	36.4%
Approved Positions	1.840.7	2,025.9	2,025.9	2,407.6	0.0	2,407.6	381.7	18.8%

^{* 2020} Projection based on Q3 Variance report

COSTS TO MAINTAIN EXISTING SERVICES

Total 2021 Base Budget expenditures of \$344.092 million gross reflecting an increase of \$55.488 million in spending above 2020 projected year-end actuals (prior to enhancements), predominantly arising from:

- Annualized costs of 102 temporary Public Health Nurses hired in 2020 for the COVID-19 School Reopening Initiative.
- 450 temporary nurses positions hired in 2020 to support Case and Contact Management and Tracing.
- 24 temporary Harm Reduction Counsellors and 2 Supervisor positions to support overdose prevention as part of Shelter, Support and Housing Administration's Homeless Initiative and Prevention Services.
- Costs related to the Toronto Voluntary Isolation Centre; contracts for physicians and medical; and computer hardware to support remote work, all of which are directly related to the COVID-19 Response.

Given the financial impacts of COVID-19 on 2020 actuals, a further comparison of the 2021 Recommended Budget (excluding 2021 COVID-19 impacts) to the 2020 Council approved Budget is provided below:

 2021 Base Budget excluding estimated COVID-19 financial impacts totalling \$59.041 million in net expenditures reflects a \$5.479 million decrease from the 2020 Council approved Budget.

COSTS TO ENHANCE SERVICES

New and Enhanced Service expenditures of \$0.135 million gross, enabling:

• Increase in funding to Hassle Free Clinic to maximize overall clinic capacity as well as restore capacity into the sexual health clinic system which has been impacted by COVID-19 public health measures.

EQUITY IMPACTS OF BUDGET CHANGES

No significant equity impacts: The changes in Toronto Public Health's 2021 Operating Budget have a low negative impact for many equity seeking populations as Toronto Public Health has several services and programs which have been paused or reduced as a result of public health measures put in place to address and/or support the COVID-19 Response.

2021 OPERATING BUDGET KEY DRIVERS

The 2021 Operating Base Budget for Toronto Public Health is \$344.092 million gross or 19.2% higher than the 2020 Projected Actuals. Table 2a below summarizes the key cost drivers for the base budget, while Table 2b summarizes New and Enhanced requests

Table 2a: 2021 Key Drivers - Base Budget

	Key Cost Drivers	2019 Actuals	2020 Budget	2020 Projection	2021 Base Budget	Change vs 2020 Projection		
						\$	%	
Expe	nditures							
1	Salaries and Benefits	182,463.4	203,075.7	211,567.2	256,351.0	44,783.9	21.2%	
3	Material & Supplies	3,510.4	4,348.1	3,535.8	4,636.6	1,100.8	31.1%	
4	Equipment	1,975.1	1,753.6	3,078.5	1,926.4	(1,152.1)	-37.4%	
5	Service and Rent	28,339.0	37,890.8	37,083.8	46,618.2	9,534.3	25.7%	
6	Contribution To Reserves	1,373.8	1,377.4	1,377.4	1,311.5	(66.0)	-4.8%	
7	Other Expenditures	31,233.4	32,225.3	31,961.1	33,247.8	1,286.7	4.0%	
Total	Expenditures	248,895.1	280,670.9	288,603.8	344,091.5	55,487.7	19.2%	
Reve	nues							
1	Provincial Subsidies	178,967.9	198,262.6	188,922.4	204,310.2	15,387.8	8.1%	
2	Federal Subsidies	4.8	5,150.8	5,037.3	9,047.8	4,010.6	79.6%	
3	User Fees & Donations	1,108.4	1,007.0	288.8	477.5	188.7	65.3%	
4	Other Revenues (Inc. IDR's)	3,925.7	3,899.9	2,721.6	5,517.6	2,795.9	102.7%	
5	Transfers from Capital	1,524.8	1,521.5	434.9	482.1	47.2	10.8%	
Total	Revenues	185,531.6	209,841.8	197,405.0	219,835.2	22,430.2	11.4%	
Net E	xpenditures	63,363.5	70,829.2	91,198.8	124,256.3	33,057.5	36.2%	
Appr	oved Positions	1,840.7	2,025.9	2,025.9	2,407.6	381.7	18.8%	

Salaries & Benefits:

The annualized costs of positions hired in 2020 as noted on Page 11 in response to the pandemic.

Services and Rents:

Costs related to the Toronto Voluntary Isolation Centre, contracts for physicians and medical advice and computer hardware needed to support remote work.

Provincial Subsidies:

Funding to support the COVID-19 School Reopening Initiative, public health modernization and one-time mitigation funding.

Federal Subsidies:

Funding to support the Toronto Voluntary Isolation Centre.

User Fees & Donations:

Reduction in revenue related to food handler training (course fees).

Other Revenues:

Increase in overdose prevention services from Shelter, Support and Housing Administration along with reductions in revenue for dental (payment from Ontario Works) and vaccination dosage payments (reimbursements from the province).

Table 2b: 2021 Balancing Actions

(\$000s)										
Recommendation	Savings Type	2021				2022				
	Ouvings Type	Revenue	Gross	Net	Positions	Gross	Net	Positions		
Voluntary Separation Program	Other		(2,705.2)	(2,705.2)						
Total Balancing Actions			(2,705.2)	(2,705.2)	-			-		

Voluntary Separation Program:

Amounts shown reflect the savings to the City resulting from holding positions vacant for six months for staff that have accepted early retirement.

Table 2c: 2021 New / Enhanced

	New / Enhanced Request		20	21		2022 Annualized	Equity		Equity	Equity	Equity	Equity		Equity	Equity	Equity	Equity	Supports Key Issue / Challenge
	New / Ellianceu Request	Revenue	Gross	Net	Positions	Gross	Impact	Supports key issue / Challenge										
In \$	Thousands																	
1	Contracted Services (Hassle Free Clinic)		135.1	135.1			Low	Increase funding to Hassle Free Clinic to maximize clinic capacity and restore capacity into the sexual health clinic system which has been impacted by COVID-19 public health measures.										
Tota	New / Enhanced		135.1	135.1														

Hassle Free Clinic capacity increase in response to COVID-19:

This investment (\$0.135 million) will increase the capacity within the broader sexual health clinic system by increasing TPH's contract with Hassle Free Clinic, one of the busiest sexual health clinics in the City of Toronto. The Hassle Free Clinic provides services to hard to reach populations such as new immigrants, different sexual orientations and those with high rates of sexually transmitted infections. The contract will increase capacity at this clinic from 230 clients per week to 630 clients per week to offset the reduced service capacity of the other clinics either closed or seeing a decreased number of clients during COVID-19.

Note:

^{1.} For additional information on 2021 key cost drivers refer to Appendix 2 and Appendix 4 for the 2021 New and Enhanced Service Priorities, respectively.

2022 & 2023 OUTLOOKS

Table 3: 2022 and 2023 Outlooks

(\$000s)	2020 Projection	2021 Budget	2022 Outlook	2023 Outlook
Revenues	197,405.0	219,835.2	200,589.0	200,414.8
Gross Expenditures	288,603.8	344,226.6	275,911.6	279,450.5
Net Expenditures	91,198.8	124,391.4	75,322.6	79,035.8
Approved Positions	2,025.9	2,407.6	1,926.6	1,932.6

Key drivers

The 2022 Outlook with total gross expenditures of \$275.912 million reflects an anticipated \$68.315 million or 19.85 per cent decrease in gross expenditures below the 2021 Operating Budget. The 2023 Outlooks reflects an increase of \$3.539 million or 1.28 per cent above 2022 gross expenditures.

These changes arise from the following:

· Salary and Benefits

Reduction of 481 temporary positions: 467 decrease in positions hired specifically for the COVID-19 Response and 26 decrease in positions for overdose prevention services for Shelter, Support and Housing Administration's Homeless Initiative and Prevention Services reduction.

Revenue Changes

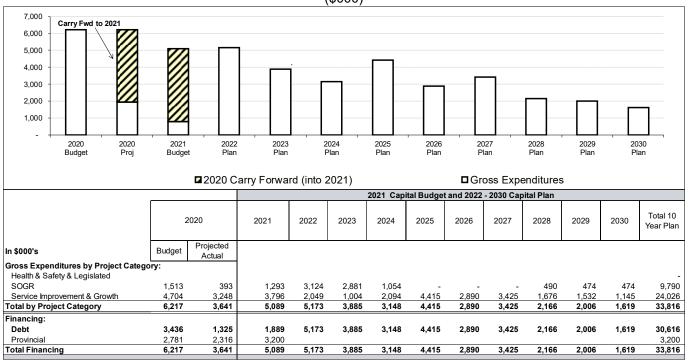
Loss of Transitional Mitigation Funding from the Province in 2022 (\$14.622 million)

2021 - 2030 CAPITAL BUDGET AND PLAN

2021 - 2030 CAPITAL BUDGET & PLAN OVERVIEW

Chart 1: 10-Year Capital Plan Overview

(\$000)



Changes to Existing Projects

(\$0.737 Million)

- Increased funding required to restart projects paused in 2020 due to COVID-19
 - \$0.414 million for DataMart Data Warehouse - Phase 3 (2018-2022) in 2021
 - \$0.757 million for Electronic Medical Record - Phase 3 (2018-2022) in 2022
 - \$0.092 million for *Community Collaboration Seed* (2019-2022) in 2022
- Decreased funding due to revised scope
 - \$0.498 million for Community
 Health Information System (20172022) and deferral of \$0.411 million
 to 2022 from 2021
 - \$0.028 million for the
 Correspondence and
 Communication Tracking Seed

New Projects

(\$0.0 Million)

Toronto Public Health does not have any new capital projects

Capital Needs Constraints

(\$1.864 Million)

The Community
 Collaboration Implementation (20232025) project is dependent
 on the results of the Seed
 funded project and will
 implement secure
 community collaboration
 solutions in order to
 improve information
 sharing.

Note:

For additional information, refer to Appendix 6 for a more detailed listing of the 2021 and 2022-2030 Capital Budget & Plan by project and Appendix 8 for Capital Needs Constraints, respectively.

2021 - 2030 CAPITAL BUDGET AND PLAN

\$33.816 Million 10-Year Gross Capital Program

		- O		3.11	•
Decision Making	Workforce Capabilities	Business Processes	Information Technology	Access to Government Services	Access to Services
\$6.259M 18.5%	\$1.334 M 4.0%	\$10.801 M 31.9%	\$8.352 M 24.7%	\$3.870 M 11.4%	\$3.200M 9.5%
Datamart /Data Warehouse Geographical Information Enablement Common Geographical Interface Healthy Smart City - Data and Predictive Analytics Healthy Smart Cities	Community Collaboration Mobile Enablement	Electronic Medical Record Socio- Demographic Data Collection and Reporting Call Centre Revitalization Customer Relationship Case Management	Inspection Management Early Abilities Information System Implementation Community Health Information System	Public eLearning Public Notifications and Advisories	Ontario Seniors Dental Care Program: o Dental Vans o Dental Clinic Infection Control Upgrades Project o Renovation for Dental Clinics

How the Capital Program is Funded

City o	of Toronto	Provincial Funding	Federal Funding
	30.6 M 91%	\$3.2 M 9%	\$0 M 0%
Debt	\$30.6 M		

CAPACITY TO SPEND REVIEW

The 10-Year Capital Plan has been developed with consideration of historical demonstrated ability to spend within any given year of the ten year capital plan. A review was undertaken to ensure budgets align with Toronto Public Health's ability to spend and the markets capacity to deliver.

A key component in determining an appropriate level of annual cash flows includes historical capacity to spend reviews by project categories (Chart 2 below) as well as the level of projected 2020 underspending that will be carried forward into 2021 to complete capital work.

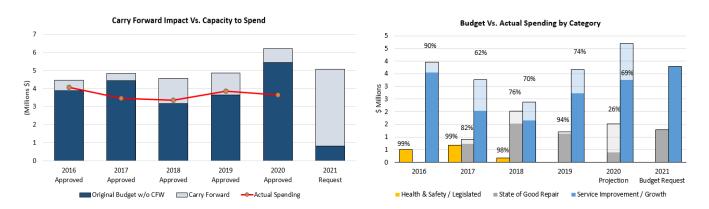


Chart 2 - Capacity to Spend

Capacity to Spend Review Impact on the 10-Year Plan

Based on the review of historical capital spending constraints and a capacity to spend review, \$4.274 million in capital spending originally cash flowed in 2020 has been deferred to 2021, with an additional \$0.314 million deferred to 2022. Adjustments to the Capital Plan are noted below:

- Deferral of \$2.489 million on Dental Clinic's renovations and building of dental vans for the Ontario Seniors Dental Care Program.
- Deferral of \$2.099 million for information technology projects as resources were redeployed to support the COVID-19 Response.

OPERATING IMPACT OF COMPLETED CAPITAL PROJECTS

The 10-Year Capital Plan will impact future year Operating Budgets by (\$0.480) million net over the 2021-2030 period, primarily due to the completion of planning projects, as shown in Table 4 below.

Table 4: Net Operating Impact (In \$000's)

Proiects	2021 B	udget	2022	Plan	2023	Plan	2024	Plan	2025	Plan	2021	-2025	2021-	-2030
1 Tojects	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions
Previously Approved														
Inspection Management Implementation							554.0		(567.3)	(4.0)	(13.3)	(4.0)	(13.3)	(4.0)
Datamart Data Warehouse					(15.0)		(151.2)	(0.8)			(166.2)	(0.8)	(166.2)	(0.8)
Electronic Medical Record			216.0		(270.0)	(3.0)					(54.0)	(3.0)	(54.0)	(3.0)
Dental & Oral Health Information Systems Project			(89.4)						3.0		(86.4)	0.0	(86.4)	0.0
Community Health Information System							(160.0)	(1.5)			(160.0)	(1.5)	(160.0)	(1.5)
Sub-Total: Previously Approved	0.0	0.0	126.6	0.0	(285.0)	(3.0)	242.8	(2.3)	(564.3)	(4.0)	(479.9)	(9.3)	(479.9)	(9.3)
New Projects - 2021														
											0.0	0.0		
Sub-Total: New Projects - 2021	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
New Projects - Future Years														
											0.0	0.0		
Sub-Total: New Projects - Future Years	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	0.0	0.0	126.6	0.0	(285.0)	(3.0)	242.8	(2.3)	(564.3)	(4.0)	(479.9)	(9.3)	(479.9)	(9.3)

Previously Approved projects

- The Inspection Management Implementation project will end in 2023. The estimated platform software subscription costs beginning in 2024 are expected to be completely absorbed by financial and operational efficiencies in 2025
- The DataMart Data Warehouse Phase 3 project to be completed in 2022, will generate financial and operational efficiencies starting in 2022.
- The Electronic Medical Records Phase 3 project will end in 2022. The estimated ongoing annual cloud solution licensing costs are expected to be completely absorbed by financial and operational efficiencies after full implementation in 2021.
- The Dental and Oral Health Information System project, ending in 2020, will realize operational efficiencies starting in 2022.
- The Community Health Information System project, ending in 2022, will realize financial and operational efficiencies starting in 2024.

2021 Operating Budget & 2021 - 2030 Capital Plan	Toronto Public Health
ADDENDICEO	
APPENDICES	

COVID-19 Financial Impact - Operating

			(\$00	00s)		
COVID-19 Impacts		2020			2021	
COVID-19 Impacts	Revenues	Gross	Net	Revenues	Gross	Net
Revenue Loss		ĺ				
Vaccine Doses *	(644)		644	(281)		281
City Dental Clinics *	(299)		299	(630)		630
Food Handler's Training *	(688)		688	(550)		550
Sub-Total	(1,631)		1,631	(1,461)		1,461
Expenditure Increase						
Overtime, Additional Staff Salaries & Benefits *		35,000	35,000		52,701	52,701
Contractors, Personal Protective Equipment and Supplies *		2,000	2,000		4,879	4,879
Security *		912	912			
Sub-Total Sub-Total		37,912	37,912		57,580	57,580
Savings due to Underspending						
Other Savings from Supplies and Services		(588)	(588)			
Sub-Total		(588)	(588)			
Savings due to Management Actions						
Limited Hiring of Non-COVID-19 Related Positions		(18,112)	(18,112)			
Sub-Total Sub-Total		(18,112)	(18,112)			
Support from Other Levels of Gov't						
Extra-ordinary COVID-19 Reimbursement from Province *						
Sub-Total						
Total COVID-19 Impact	(1,631)	19,212	20,843	(1,461)	57,580	59,041

^{*} Funding for these expenses will be requested from the Ministry of Health as part of its extra-ordinary COVID-19 cost recovery initiative.

2021 Operating Budget by Revenue / Expenditure Category

	2018	2019	2020	2020	2021	2021 Chang	e from 2020
Category	Actual	Actual	Budget	Projection*	Total Budget	Projecte	d Actual
(In \$000s)	\$	\$	\$	\$	\$	\$	%
Provincial Subsidies	182,241.9	179,430.8	198,740.5	188,922.4	204,310.2	15,387.8	8.1%
Federal Subsidies	463.3	4.8	5,150.8	5,037.3	9,047.8	4,010.5	79.6%
User Fees & Donations	1,095.2	1,108.4	1,007.0	288.8	477.5	188.7	65.3%
Transfers From Capital	1,662.2	1,524.8	1,521.5	434.9	482.1	47.2	10.8%
Sundry and Other Revenues	2,619.9	1,796.3	1,705.7	1,042.6	1,180.5	137.9	13.2%
Inter-Divisional Recoveries	1,599.2	1,666.5	1,716.3	1,679.0	4,337.1	2,658.1	158.3%
Total Revenues	189,681.7	185,531.6	209,841.8	197,405.0	219,835.2	22,430.2	11.4%
Salaries and Benefits	185,290.1	182,463.4	203,075.7	211,567.2	256,351.0	44,783.8	21.2%
Materials & Supplies	3,796.1	3,510.4	4,348.1	3,535.8	4,636.6	1,100.8	31.1%
Equipment	1,338.7	1,975.1	1,753.6	3,078.5	1,926.4	(1,152.1)	(37.4%)
Service and Rent	31,106.5	28,339.0	37,890.8	37,083.8	46,753.3	9,669.5	26.1%
Contribution To Reserves/Reserve Funds	1,367.9	1,373.8	1,377.4	1,377.4	1,311.5	(66.0)	(4.8%)
Other Expenditures	14,891.1	15,310.6	16,638.2	16,551.6	17,016.4	464.8	2.8%
Inter-Divisional Charges	15,636.8	15,922.8	15,587.1	15,409.5	16,231.4	821.9	5.3%
Total Gross Expenditures	253,427.2	248,895.1	280,670.9	288,603.8	344,226.6	55,622.8	19.3%
Net Expenditures	63,745.5	63,363.5	70,829.1	91,198.8	124,391.4	33,192.6	36.4%
Approved Positions		1,840.7	2,025.9	2,025.9	2,407.6	381.7	18.8%

^{*} Year-End Projection Based on Q3 2020 Variance Report

Summary of 2021 Service Changes

n/a

Summary of 2021 New / Enhanced Service Priorities Included in Budget

Form ID	Agencies - Cluster		Adjustr	nents	77		
Category Equity Impact	Agencies - Cluster	Gross Expenditure	Revenue	Net	Approved Positions	2022 Plan Net Change	2023 Plan Net Change
22964	Hassle Free Clinic capacity increase in response to	COVID-19					
74 Positive	Description:						

Funding of \$0.135 million gross and net in 2021 to increase the capacity within the broader sexual health clinic system by increasing Toronto Public Health's (TPH) contract with Hassle Free Clinic, one of the busiest sexual health clinics in the City of Toronto. The clinic provides services to hard to reach populations such as new immigrants, different sexual orientations and those with high rates of sexually transmitted infections.

Service Level Impact:

TPH sexual health clinics serve approximately 60,000 clients annually. Due to clinic closures and enhanced infection prevention and control procedures in place, it is anticipated that the number of clients served will decrease to approximately 11,960 (an 80% reduction in service). This proposal will increase the capacity at this clinic from 230 clients per week to 630 clients per week to offset the reduced service capacity of the other clinics either closed or seeing a decreased number of clients during COVID-19.

Equity Statement:

The Hassle Free Clinic Capacity Increase budget proposal's overall equity impact is low positive. Indigenous peoples', immigrants, refugees & undocumented individuals', members of the LGBTQ2S+ community's access to health services will be positively impacted through the provision of low barrier access to sexually health clinics which provide services to identify and treat sexually transmitted infectious diseases.

Summary: Staff Recommended New / Enhanced Services:	135.1	0.0	135.1	0.00	(135.1)	0.0
Staff Recommended New/Enhanced Services:	135.1	0.0	135.1	0.00	(135.1)	0.0
Service: Infectious Diseases Total Staff Recommended Changes:	128.3	0.0	128.3	0.00	(128.3)	0.0
Service: Family Health Total Staff Recommended Changes:	6.8	0.0	6.8	0.00	(6.8)	0.0
· · · · · · · · · · · · · · · · · · ·						

Summary of 2021 New / Enhanced Service Priorities Not Included in Budget

n/a

2021 Capital Budget; 2022 - 2030 Capital Plan Including Carry Forward Funding

			-			_	-			_					
Project Code	(In \$000s)	2021 Budget	2022 Plan	2023 Plan	2024 Plan	2025 Plan	2026 Plan	2027 Plan	2028 Plan	2029 Plan	2030 Plan	2021 2030 Total	Health & Safety & Legislated	SOGR	Growth & Improved Service
PH001	Datamart Data Warehouse - Phase 3	536	414									950			950
PH002	Electronic Medical Record - Phase 3	60	970									1,030			1,030
PH003	Community Collaboration - Seed		193									193			193
PH004	Community Health Information System		411									411		411	
PH005	Inspection Management Implementation	1,293	2,169	1,825								5,287		5,287	
PH006	Ontario Senior Dental Care Program(OSDCP) - Dental Vans	780										780			780
PH007	OSDCP - Dental Clinic Infection Control Upgrades Project	321										321			321
PH008	OSDCP - Dental Clinic Renovations	2,099										2,099			2,099
PH009	Correspondence and Comm.Tracking - Seed														
PH010	Healthy Smart City - Data and Predictive Analytics		472	395	671	860						2,398			2,398
PH011	Early Abilities Information System Implementation		544	1,056	1,054							2,654		2,654	
PH012	Electronic Medical Record - Phase 4			609	1,423	1,823	240					4,095			4,095
PH013	Geographical Information Enablement					190	265					455			455
PH014	Common Geographical Interface (CGI)					250	344					594			594
PH015	Mobile Enablement					394	378	369				1,141			1,141
PH016	Public eLearning					550	942	940				2,432			2,432
PH017	Socio-Demographic Data Collection and Reporting					348	721	779				1,848			1,848
PH018	Call Centre Revitalization							630	1,000			1,630			1,630
PH019	Customer Relationship Case Management							707	676	540	275	2,198			2,198
PH020	Healthy Smart Cities									992	870	1,862			1,862
PH021	Public Notifications & Advisories								490	474	474	1,438		1,438	, , , , , , , , , , , , , , , , , , ,
	Total Expenditures (including carry forward from 2020)	5,089	5,173	3,885	3,148	4,415	2,890	3,425	2,166	2,006	1,619	33,816		9,790	24,026

Health &		Growth &
Safety &	SOGR	Improved
Legislated		Service
		950
		1,030
		193
	411	
	5,287	
		780
		321
		2,099
		2,398
	2,654	
		4,095
		455
		594
		1,141
		2,432
		1,848
		1,630
		2,198
		1,862
	1,438	
	9,790	24,026

Appendix 6a

2021 Cash Flow and Future Year Commitments Including Carry Forward Funding

Project Code	(In \$000s)	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	Total 2021 Cash Flow & FY Commits
PH001	Datamart Data Warehouse - Phase 3	536	414									950
PH002	Electronic Medical Record - Phase 3	60	970									1,030
PH003	Community Collaboration - Seed		193									193
PH004	Community Health Information System		411									411
PH005	Inspection Management Implementation	1,293	2,169	1,825								5,287
PH006	Ontario Senior Dental Care Program (OSDCP) - Dental Vans	780										780
PH007	OSDCP - Dental Clinic Infection Control Upgrades Project	321										321
PH008	OSDCP - Dental Clinic Renovations	2,099										2,099
PH009	Correspondence and Comm.Tracking - Seed											
	Total Expenditure (including carry forward from 2020)	5,089	4,157	1,825								11,071

Previously Approved	Change in Scope	New w/ Future Year
536	414	
273	757	
101	92	
909	(498)	
5,287		
780		
321		
2,099		
28	(28)	
10,334	737	

Appendix 6b

2022 - 2030 Capital Plan

Project Code	(In \$000s)	2022 Plan	2023 Plan	2024 Plan	2025 Plan	2026 Plan	2027 Plan	2028 Plan	2029 Plan	2030 Plan	2022 2030 Total	Health & Safety & Legislated	SOGR	Growth & Improved Service
PH018	Call Centre Revitalization						630	1,000			1,630			1,630
PH014	Common Geographical Interface (CGI)				250	344					594			594
PH019	Customer Relationship Case Management						707	676	540	275	2,198			2,198
PH010	Healthy Smart City - Data and Predictive Analytics	472	395	671	860						2,398			2,398
PH011	Early Abilities Information System Implementation	544	1,056	1,054							2,654		2,654	
PH012	Electronic Medical Record - Phase 4		609	1,423	1,823	240					4,095			4,095
PH013	Geographical Information Enablement				190	265					455			455
PH015	Mobile Enablement				394	378	369				1,141			1,141
PH016	Public eLearning				550	942	940				2,432			2,432
PH017	Socio-Demographic Data Collection and Reporting				348	721	779				1,848			1,848
PH020	Healthy Smart Cities								992	870	1,862			1,862
PH021	Public Notifications & Advisories							490	474	474	1,438		1,438	
	Total Expenditures	1,016	2,060	3,148	4,415	2,890	3,425	2,166	2,006	1,619	22,745		4,092	18,653

Reporting on Major Capital Projects: Status Update

n/a

Summary of Capital Needs Constraints

(In \$ Millions)

Duniant Depositation	Total	Non	Debt	Cash Flow (In \$ Millions)									
Project Description	Project	Debt	Required	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030
Community Collaboration - Implementation	1.864		1.864			0.534	0.599	0.731					
Total Needs Constraints (Not Included)	1.864	0	1.864	0	0	0.534	0.599	0.731	0	0	0	0	0

2021 User Fee Changes (Excludes User Fees Adjusted for Inflation)

Table 9a - New User Fees

n/a

Table 9b - Fees Above Inflation

n/a

Table 9c - User Fees for Discontinuation

n/a

Table 9d - User Fees for Technical Adjustments

n/a

Table 9e - User Fees for Transfers

n/a

Table 9f - User Fees for Rationalization

n/a

Inflows and Outflows to/from Reserves and Reserve Funds 2021 Operating Budget

Program Specific Reserve / Reserve Funds

		Withdrawals (-) / Contributions (+)			
Reserve / Reserve Fund Name	Reserve / Reserve	2021	2022	2023	
(In \$000s)	Fund Number	\$	\$	\$	
Beginning Balance		575.0	641.6	708.1	
Vehicle Reserve - Public Health	XQ1101				
Withdrawals (-)					
Toronto Public Health		-	-	-	
Contributions (+)					
Toronto Public Health		66.6	66.6	66.6	
Total Reserve / Reserve Fund Draws / Co	641.6	708.1	774.7		
Other Program / Agency Net Withdrawals	-	-	-		
Balance at Year-End	641.6	708.1	774.7		

^{*} Based on 9-month 2020 Reserve Fund Variance Report

Corporate Reserve / Reserve Funds

		Withdrawals (-) / Contributions (+)			
Reserve / Reserve Fund Name	Reserve / Reserve	2021	2022	2023	
(In \$000s)	Fund Number	\$	\$	\$	
Beginning Balance		30,142.3	14,678.1	17.8	
Insurance Reserve Fund	XR1010				
Withdrawals (-)					
Toronto Public Health		-	2	-	
Contributions (+)					
Toronto Public Health		478.2	478.2	478.2	
Total Reserve / Reserve Fund Draws / 0	Contributions	30,620.5	15,156.4	496.1	
Other Program / Agency Net Withdrawa	(15,989.4)	(15,155.4)	2,072.4		
Interest	47.0	16.9	4.3		
Balance at Year-End	14,678.1	17.8	2,572.8		

^{*} Based on 9-month 2020 Reserve Fund Variance Report

		Withdrawals (-) / Contributions (
Reserve / Reserve Fund Name	Reserve / Reserve	2021	2022	2023	
(In \$000s)	Fund Number	\$	\$	\$	
Beginning Balance		7,825.5	4,475.3	(508.8)	
Vehicle Reserve- It Sustainment	XQ1508				
Withdrawals (-)					
Toronto Public Health		-	-	-	
Contributions (+)					
Toronto Public Health		766.6	766.6	766.6	
Total Reserve / Reserve Fund Draws / Co	ntributions	8,592.2	5,242.0	257.8	
Other Program / Agency Net Withdrawals	(4,116.8)	(5,750.8)	(13,413.8)		
Balance at Year-End		4,475.3	(508.8)	(13,156.0)	

^{*} Based on 9-month 2020 Reserve Fund Variance Report

Inflows and Outflows to/from Reserves and Reserve Funds

2021 - 2030 Capital Budget and Plan

Program Specific Reserve / Reserve Funds

Reserve / Reserve			Contributions / (Withdrawals)									
Fund Name	Project / Sub Project Name	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	
(In \$000s)	and Number	Budget	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Total
XR1108 Toronto Public Health	Beginning Balance Withdrawals (-)	71	71	72	72	72	72	72	72	72	73	
Efficiency Reserve	Total Withdrawals									-		-
Fund	Contributions (+)											
	Interest Income	0	0	0	0	0	0	0	0	0	0	2
	Total Contributions	0	0	0	0	0	0	0	0	0	0	2
Balance at Year-End		71	72	72	72	72	72	72	72	73	73	2

^{*} Based on 9-month 2020 Reserve Fund Variance Report

Corporate Reserve / Reserve Funds

n/a

Glossary

Approved Position: Permanent or temporary positions that support the delivery of City services and service levels as approved by Council.

Actuals: An actual financial amount paid (or received) for the delivery of City services (these exclude any commitments to be paid in the future).

Capacity to Spend: Ability to spend money along with the capacity to deliver projects as demonstrated by historic spending patterns and approved contractual obligations.

Capital Budget: A Capital Budget is the City's plan to acquire / build assets or extend the useful life of existing assets; an example of a capital expenditure is the construction of a new community centre.

Capital Needs Constraints: The capital needs that cannot be accommodated within the capital plan that the Division or Agency have the capacity to deliver.

Complement: Positions that support the delivery of City services and service levels as approved by Council.

Efficiencies: Reductions in the cost of delivering a service without a reduction in service level.

New / Enhanced: New and enhanced service changes resulting in an increase in service levels from what was previously approved by Council.

Operating Budget: An Operating Budget is the City's annual plan to provide services to the residents of Toronto; the budget includes all revenues and expenses needed to provided services; an example of an operating cost would be the cost to run the TTC subways.

Operating Impact of Completed Capital Projects: The additional expense (or savings) and positions needed to operate or maintain a new asset; an example would be the additional expense and staff needed to operate a recently completed community centre.

Rate Supported Budget: Budget fully funded by user fees such as Solid Waste, Toronto Water and Toronto Parking Authority

Staff Recommended Operating / Capital Budget: An operating or capital budget recommended by City Manager and Chief Financial Officer and Treasurer to City Council for consideration and approval.

State of Good Repair (SOGR): The cost of maintaining assets to ensure they are able to support the delivery of City services and meet service outcomes

Tax Supported Budget: Budget funded by property taxes.

User Fees: Program generated fee and rental revenue for the use of its services (such as the TTC fare, ice rental fees and various City permits).

Value Based Outcome Review (VBOR): The City conducted a Value Based Outcome Review in 2019 for all of its operations and agencies to identify specific opportunities and strategies to maximize the use of tax dollars, enhance its financial sustainability while achieving service outcomes. These opportunities will help the City chart its financial course in the next four years.

Voluntary Separation Program – On July 28th, 2020, City Council approved the implementation of a Voluntary Separation Program for staff who are eligible to retire with an unreduced pension providing a lump sum payment of up to three months' salary to eligible employees, subject to the terms of the program guidelines, funded through savings generated from a combination of permanently eliminating vacated positions and/or holding the positions vacant for a minimum of six months.

Board Approved Vs. City Staff Recommended Budget 2021 Operating Budget – Board Approved Vs. City Staff Recommended Budget

	Board	City Staff	Differe	nce
\$ Millions	Approved	Recommended	\$	%
Revenues	217.2	219.8	(2.6)	-1.2%
Gross Expenditures	344.6	344.2	0.4	0.1%
Net Expenditures	127.4	124.4	3.0	2.4%
Approved Positions	2,486.3	2,407.6	78.7	3.3%

The difference between the Board Approved and Budget is mainly driven by the following:

- The addition of 26 positions to support Shelter, Support and Housing Administration's Homeless Initiative and Prevention Services \$2.605 million gross, \$0 net.
- Further benefits adjustments post BOH Budget Submission of \$0.273 million gross and net.
- Salary and benefit savings adjusted from the Voluntary Separation Program \$2.705 Million gross and net.
- 104 Temporary positions for 2020 one-time 100% provincially funded initiatives (School Focused Nurses and the Infant Hearing Program) expiring in 2021 were included in the Board of Health report.

2021-2030 Capital Budget and Plan - Board Approved Vs. City Staff Recommended Budget

	Board	City Staff	Difference		
\$ Millions	Approved	Recommended	\$	%	
2021					
Gross Expenditures	3.065	5.089	(2.024)	-39.8%	
Debt	1.889	1.889			
Provincial	1.176	3.200	(2.024)	-63.3%	
2022-2030					
Gross Expenditures	28.727	28.727			
Debt	28.727	28.727			
Provincial					
Total					
Gross Expenditures	31.792	33.816	(2.024)	-6.0%	
Debt	30.616	30.616			
Provincial	1.176	3.200	(2.024)	-63.3%	

• The difference of \$2.024 million is due to the 2020 carry forward funding from the *Ontario Seniors Dental Care Program* project.