

**BOARD OF HEALTH
AGENDA
MEETING No. 7**

Date of Meeting:	September 15, 2003	Enquiry:	Yvonne Davies
Time:	9:30 a.m.		Secretary
Location:	Committee Room No. 1		416-395-7345
	100 Queen Street West		boh@toronto.ca
	Toronto City Hall		

**DECLARATIONS OF INTEREST PURSUANT TO
THE MUNICIPAL CONFLICT OF INTEREST ACT.**

CONFIRMATION OF MINUTES – July 14, 2003

[Sent to Members by electronic mail]

STAFF RECOGNITION

COMMUNICATIONS/REPORTS

1. Toronto Public Health's Response to the Severe Acute Respiratory Syndrome (SARS) Outbreak 2003

Report not yet available.

2. Promoting Healthy Weights

Report (September 2, 2003) from the Medical Officer of Health, providing information to the Board of Health on the "healthy weights" concept and on Toronto Public Health's approach to preventing the conditions of "unhealthy weight"; and recommending that:

- (1) the Board of Health endorse the healthy weights approach described within this report;

- (2) the Board of Health urge Health Canada and the Ontario Ministry of Health to publicly recognize the conditions of unhealthy weights as a public health epidemic and call for national and provincial public health responses including population-based prevention strategies with adequate financial resources for research, implementation and evaluation at national and provincial levels;
- (3) this report be circulated for information to the Toronto Food Policy Council, the Food and Hunger Action Committee, Canadian Public Health Association, Ontario Public Health Association, Association of Local Public Health Agencies and other Boards of Health throughout Ontario; and
- (4) the appropriate City Officials be authorized and directed to take the necessary action to give effect thereto.

3. Effects of Caffeine on Children's Health and Promoting Healthy Eating in Toronto Schools

Report (September 2, 2003) from the Medical Officer of Health responding to the request from the Board of Health to report on the potential harmful effect of caffeine on children and any actions the Board could take to address this issue. In addition, this report highlights issues regarding food choices available in Toronto schools; and recommending that:

- (1) the Board of Health advocate to the Ontario Ministry of Education and Training that regulations be formulated to specify what foods are to be available to children in schools to support healthy eating;
- (2) the Board of Health advocate to the Ontario Ministry of Education and Training, the Toronto District School Board, the Toronto Catholic District School Board, le Conseil scolaire de district du Centre-Sud-Ouest (French Public school board) and le Conseil scolaire de district catholique Centre-Sud (French Catholic school board) to establish healthy eating policies in schools;
- (3) this report be forwarded for information and appropriate action to City of Toronto Parks and Recreation and Children's Services Divisions as well as to the Toronto District School Board, the Toronto Catholic District School Board, le Conseil scolaire de district du Centre-Sud-Ouest and le Conseil scolaire de district catholique Centre-Sud, and the Toronto Food Policy Council;
- (4) the Board of Health request the Ontario Public Health Association (OPHA) to lead a consultation with the support of Toronto Public Health and other key stakeholders, to develop recommendations on foods offered to children in schools for consideration by the Ontario Ministry of Education and Training; and
- (5) the appropriate City Officials be authorized and directed to take the necessary action to give effect thereto.

4. Meeting the Student Nutrition Needs of Toronto's Children and Youth

Report not yet available.

5. Proposed Changes to Local Health Committees

Report (August 29, 2003) from the Medical Officer of Health, reporting on proposed changes to the number and boundaries of local health committees based on the changes to community councils as approved by City Council in July 2003; and recommending that:

- (1) the Board of Health approve the reduction of local health committees from six to four and change the boundaries to conform with the changes to community councils as approved by City Council in July 2003; and
- (2) the appropriate City Officials be authorized and directed to take the necessary action to give effect thereto.

6. Emissions from Transit Buses

Report (August 27, 2003) from the Medical Officer of Health, reviewing data on emissions from transit buses using various fuels and technologies; and recommending that:

- (1) the Board of Health request that the Chief General Manager of the Toronto Transit Commission work with the City's Comprehensive Air Quality Strategy Working Group to develop a short and long-term strategy for reducing emissions from the transit bus fleet;
- (2) this report be sent to the Commissioner, Works and Emergency Services, and the Chief General Manager of the Toronto Transit Commission for consideration; and
- (3) the appropriate City Officials be authorized and directed to take the necessary action to give effect thereto.

7. Air Quality and Off-road Diesel Fuel in Toronto

Report (August 29, 2003) from the Medical Officer of Health, reporting on recent developments relating to the use of off-road diesel fuel and their implications for air quality in Toronto; and recommending that:

- (1) the Board of Health reiterate its request to the federal Minister of the Environment to reduce the public health risks arising from diesel emissions by:
 - (a) limiting the concentration of sulphur in off-road diesel fuel to 15 parts per million by 2010, as proposed in the United States;

- (b) applying this limit to diesel fuel used in locomotive and marine applications and generators;
 - (c) providing incentives for the early introduction of low-sulphur diesel; and
- (2) the appropriate City Officials be authorized and directed to take the necessary action to give effect thereto.

8. Interpretation Services - Request for Proposals No. 9112-03-7340

Joint report (August 25, 2003) from the Medical Officer of Health, Commissioner, Community and Neighbourhood Services, and Chief Financial Officer and Treasurer, advising on the results of Request for Proposals No. 9112-03-7340, for interpretation services for the period October 1, 2003 to September 30, 2004, and to obtain authorization to award a contract to Access Alliance Multicultural Community Health Centre for a one-year term with the option to renew for two (2) additional one-year terms under the same terms and conditions; and recommending that:

- (1) the firm of Access Alliance Multicultural Community Health Centre, the highest overall scoring proponent, be engaged to provide interpreter services as outlined in the Request for Proposal for an estimated cost not to exceed \$800,000.00 annually including all taxes;
- (2) the option to renew for two additional one-year terms in the estimated amount of \$800,000 per year under the same terms and conditions be reviewed by the Medical Officer of Health, in co-operation with the Purchasing Agent, to ensure that; the provision of interpretation services was performed at a satisfactory level, it is feasible to extend the contract, and funds are available in the Public Health Operating Budgets for the two (2) one-year renewals ending September 30, 2006;
- (3) provided that there is a favourable review, in accordance with Recommendation No. 2, the Medical Officer of Health be authorized to exercise the options to renew on the terms and conditions set out above and be authorized to instruct the Purchasing Agent to process the necessary contract; and
- (4) the appropriate City officials be authorized and directed to take the necessary action to give effect thereto.

9. Environmental Assessments at Lester B. Pearson International Airport

Report (August 11, 2003) from the Medical Officer of Health, providing information on the applicability of the Canadian Environmental Assessment Act (CEAA) to future activities at Lester B. Pearson International Airport; and recommending that the Board of Health receive this report for information.

10. Contracts for Food Coupons

Report (August 26, 2003) from the Medical Officer of Health, seeking approval for the sole source purchase of food coupons and to authorize the Medical Officer of Health to award and execute one year contracts with the grocery retailers, with option to renew for a second year under the same terms and conditions; and recommending that:

- (1) approve a sole source purchase of food coupons from Loblaws to ensure that Toronto Public Health can continue to provide food coupons to high-risk pregnant women and families through the Healthy Babies Healthy Children, Healthiest Babies Possible, and Peer Nutrition programs;
- (2) authorize the Medical Officer of Health to award and execute a contract with Loblaws, within the approved budget and in accordance with divisional distribution protocol and corporate financial and legal protocols; and
- (3) authorize and direct the appropriate City Officials to take the necessary action to give effect thereto.

11. Toronto Public Health Second Quarter, 2003 Capital Budget Variance

Report (September 2, 2003) from the Medical Officer of Health, apprising the Board of Health of the Toronto Public Health 2003 capital budget variance as of the second quarter, 2003; and recommending that this report be received for information.

12. Toronto Public Health – Second Quarter, 2003 Operating Budget Variance

Report (September 2, 2003) from the Medical Officer of Health apprising the Board of Health of the Public Health operating budget variance as of the second quarter, 2003; and recommending that this report be received for information.

13. TB or not TB? Report of a Public Inquiry into the State of Tuberculosis Within Toronto's Homeless Population

Communication (August 25, 2003) from Councillor Jane Pitfield, Co-Chair, Advisory Committee on Homeless and Socially Isolated Persons, advising that at its meeting on July 11, 2003, the Advisory Committee on Homeless & Socially Isolated Persons, in considering the attached report entitled "TB or not TB? Report of a Public Inquiry into the State of Tuberculosis within Toronto's Homeless Population" presented by the TB Action Group, endorsed the recommendations of the TB Action Group report; and recommended that:

- (1) the Board of Health adopt recommendations 8, 16, 17, 18, 19 and 20 of the TB Action Group report to the Board of Health, specifically that:

- a) Toronto Public Health must immediately inspect shelters and drop in centers (day shelters) to identify and correct deficiencies that have negative implications for public health safety;
 - b) Toronto Public Health must develop and implement protocols for the prevention and management of infectious and airborne diseases in homeless service systems. Such protocols are critical and are urgently needed;
 - c) Toronto Public Health must develop and implement comprehensive TB screening programs in shelters, drop-in centres (day shelters) and other homeless service centres that includes TB skin testing. It is not sufficient to rely on contact tracing among homeless populations;
 - d) Toronto Public Health must develop and implement a standard of care for contact tracing among homeless people that tests individuals based on *locations* they have frequented, rather than on traditional tracing methods which depend on accurate recall of people with whom an infected person has had contact;
 - e) Toronto Public Health must expand its D.O.T. (Directly Observed Therapy) program to include D.O.P.T. (Directly Observed Prophylactic Therapy) among homeless populations; and
 - f) Toronto Public Health staff must liaise closely with health providers in jails to reduce the likelihood of losing individuals with LTBI or active TB to follow-up after release.
- (2) the Board of Health adopt recommendations 7, 14, 15, 21, 22, 23, 24, 25, 26, and 27 of the TB Action Group report related to the federal or provincial governments with a request that Toronto Council forward these recommendations to the appropriate ministry, specifically that:
- a) the Ministry of Health and Long Term Care must expand the Mandatory Core Program and Service Guidelines for infection control to include a requirement that Boards of Health must inspect shelters, drop in centers (day shelters) and other programs that provide temporary shelter for those who are homeless;
 - b) the Province of Ontario must provide adequate funding to Toronto Public Health so that it can ensure sufficient TB prevention, detection and treatment programs are in place to safeguard the public's health;
 - c) the Ministry of Health and Long-Term Care must create a network of comprehensive TB clinics across Toronto for the purpose of diagnosing and treating latent or active TB. To reduce barriers to obtaining care, such

as lack of health insurance, lack of identification and lack of transportation resources among homeless people, such clinics must provide convenient hours of operation, geographic access, and access to individuals regardless of health insurance status;

- d) the Ministry of Public Safety and Security must recognize the public health risks associated with dangerous overcrowding in correctional facilities and immediately move to reduce such overcrowding;
- e) the Ministry of Public Safety and Security must develop a protocol for ensuring that inmates who are being treated for active TB and are released into the community be provided with comprehensive discharge planning including referral to local public health authorities prior to release, to ensure appropriate follow-up is arranged;
- f) the Ministry of Public Safety and Security must test all inmates for TB within 24 hours of confinement, and must develop a mechanism for maintaining and transferring records of inmates' TB status when inmates are transferred to other facilities;
- g) the Ontario Ministry of Public Safety and Security must develop and administer guidelines for treating latent TB infection in jails which call for prophylaxis only in cases in which a full course of treatment can be guaranteed, or in those cases in which comprehensive discharge planning can be done;
- h) the federal government must provide Federal Interim Health Benefits to refugee claimants immediately upon entry to Canada;
- i) the federal government must provide all newcomers with comprehensive TB screening, and ensure timely follow up of any abnormal findings; and
- j) the Ministry of Health and Long Term Care must provide Ontario Health Insurance cards to landed immigrants immediately (without the current three-month waiting period) upon entry to Ontario.

(Additional material to be handed out at the meeting)

In-Camera: In accordance with the Municipal Act, a motion is required for the Board of Health to meet privately and the reason must be stated

In-Camera

14. Appointment to the North York Local Health Committee

Confidential communication (September 2, 2003) from the Chair, North York Local Health Committee recommending the appointment of three (3) members to the North York Local Health Committee; such report to be considered in-camera having regard that the subject matter may contain information which relates to an identifiable individual.