
Community Development and Recreation Committee

Meeting No. 17
Meeting Date Friday, July 4, 2008
Start Time 9:30 AM
Location Committee Room 1, City Hall

Contact Candy Davidovits, Committee Administrator
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Community Development and Recreation Committee		
Councillor Joe Mihevc, Chair Councillor Maria Augimeri, Vice-Chair	Councillor Janet Davis, Vice-Chair Councillor Brian Ashton	Councillor Frances Nunziata Councillor David Shiner

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Declarations of Interest under the *Municipal Conflict of Interest Act*.**Confirmation of Minutes – June 9, 2008****Speakers/Presentations - A complete list will be distributed at the meeting.****Communications/Reports**

CD17.1	ACTION			Ward: 3
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Alzheimer's Adult Day Program at Wesburn Manor

(June 19, 2008) Report from General Manager, Long-Term Care Homes and Services

Recommendations

The General Manager of the Long-Term Care Homes and Services Division recommends that contingent upon being awarded the Health System Improvement Plan (HSIP) for Alzheimer's Adult Day Program at Wesburn Manor:

1. City Council authorize the General Manager of the Long-Term Care Homes and Services Division to enter into the requisite agreement with the Mississauga-Halton Local Health Integration Network (LHIN), as a condition of receiving the provincial funding allocation for the 2008-2009 fiscal year.
2. City Council authorize the General Manager of the Long-Term Care Homes and Services Division to negotiate terms and conditions for the required agreements with Mississauga-Halton Community Care Access Centre (CCAC) and Etobicoke Services for Seniors (HSIP partners) as required by the approved Health System Improvement Plan (HSIP) and in a form approved by the City Solicitor.
3. City Council authorize the General Manager of the Long-Term Care Homes and Services Division to pay Etobicoke Services for Seniors (HSIP partner) for the services purchased at the level and rate outlined in the approved Health System Improvement Plan (HSIP).
4. City Council authorize the General Manager of the Long-Term Care Homes and Services Division to renew agreements with the LHIN, Mississauga-Halton CCAC and Etobicoke Services for Seniors as required, acting as the agent for the City of Toronto and the HSIP partners in order to receive the authorized health services funding from the MOHLTC and Toronto Central LHIN and sustain the Alzheimer's Adult Day Program at Wesburn Manor in subsequent years.
5. The appropriate City officials be authorized and directed to take the necessary action to give effect thereto.

Financial Impact

Although the details and timing of funding flow have not yet been communicated to the division, contingent upon notification of the award, the funding will include base funding plus one time funding (start-up) for the Alzheimer's Adult Day Program at Wesburn Manor in the Province's 2008-2009 fiscal year.

There will be no net impact on the approved 2008 operating budget as this new Alzheimer's Adult Day Program will be fully funded by the MOHLTC. However, this new funding may result in a minor year-end revenue and gross expenditure variance for the division, which will be explained in the year-end report. The total annualized impact of this funding will not be realized until 2009. The 2009 budget submission will be developed to include this new allocation.

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

Summary

Through the *Local Health System Integration Act, 2006*, the Ontario government changed the funding and delivery of health care services in Ontario to operate through fourteen (14) Local Health Integration Networks (LHINs) and local community-based health planning. The Ministry of Health and Long-Term Care (MOHLTC) established LHINs as “a critical part of the evolution of health care in Ontario from a collection of services to a true system that is patient-focused, results-driven, integrated, and sustainable”. The *Local Health System Integration Act, 2006*, placed significant decision-making power at the community level, focusing the local health system on individual community's needs, system integration and improvement of health results. In devolving authority to the LHINs, the MOHLTC set a mandate to facilitate the effective and efficient integration of health care services and make it easier for people to get the best care in the most appropriate setting, when they need it.

To fulfil this mandate, the MOHLTC required LHINs to develop integrated health service plans (IHSPs), through health system planning and community engagement. As of April 1, 2007, LHINs also assumed responsibility for funding a wide range of health service providers, and for managing the majority of service agreements with health service providers. The government continues to provide stewardship of Ontario's health system, setting direction, strategic policy, and system standards and delivering provincial programs and services.

In August 2007, the Minister of Health and Long-Term Care announced a comprehensive ‘Aging in Place Strategy’ to expand community living options for seniors, through a wider range of home care and community support services, to enable people to continue leading healthy and independent lives in their own homes. The Aging in Place Strategy recognized that Ontario's population is aging. Recent estimates project the seniors' population to double in the next 16 years, making it vitally important to ensure that there are resources available to assist those who wish to remain at home. Through the Aging in Place Strategy, the government of Ontario launched a three-year, \$700 million initiative designed to allow seniors to live healthy, independent lives in the comfort and dignity of their own homes.

The Minister of Health and Long-Term Care mandated the LHINs to lead this initiative on the MOHLTC's behalf, by identifying and providing funding for enhanced home care and community support services, as well as for innovative projects specific to the LHINs' assessed community need. Twenty percent of the funding was earmarked for innovative projects, with the objective of inviting proposals for new projects to support non-traditional partnerships and new preventive and wellness services.

Each LHIN released proposal calls for health system improvement plans (HSIP), based on the priorities identified in their own IHSP. All HSIP proposals were required to be developed in partnership with at least one (1) other service provider. HSIPs from single service providers were ineligible for funding. In the Mississauga-Halton LHIN, HSIP priorities included the provision of new community service options for seniors with mental health issues, including the provision of adult day services for seniors with Alzheimer's and other progressive cognitive disorders or dementia.

The Integrated Health Service Plan (IHSP) of the Mississauga-Halton LHIN, which serves a portion of Etobicoke including Ward 3, identified "growth, the aging population and cultural diversity as the critical drivers for planning and system design in the next decade". The IHSP contained two (2) key priorities related to the Aging in Place Strategy, namely:

1. to increase the overall supply of services that support seniors to stay healthy and live safely at home with independence and dignity, including community support services, home care, assistive devices, supportive living, long-term care and end-of-life care; and
2. to leverage change through innovation, such as new preventive and wellness services and partnerships with non-traditional providers.

In particular, the Mississauga-Halton LHIN expressed interest in expanding access to services to meet the needs of seniors with Alzheimer's disease and related dementias. One in twenty Canadians over the age of 65 is affected by Alzheimer's disease. Statistically, this number is significant since the Mississauga-Halton LHIN is anticipating a 67 percent increase in seniors aged 65 years and older by 2018, making the LHIN the second highest rate in the province. At present, specialized adult day programs for individuals with Alzheimer's and other progressive cognitive disorders or dementia are limited within the Mississauga-Halton LHIN.

The Long-Term Care Homes and Services Division submitted a health system improvement plan (HSIP) for the development of an Alzheimer's Adult Day Program at Wesburn Manor, 400 The West Mall. Partners in the submission were: (i) Etobicoke Services for Seniors, and (ii) Community Care Access Centre.

It is anticipated that the division will be informed about the results of this proposal call, prior to the July 4, 2008 meeting of the Community Development and Recreation Committee. A verbal update will be provided at that time.

Background Information

cd17.1-Staff Report

<http://www.toronto.ca/legdocs/mmis/2008/cd/bgrd/backgroundfile-14381.pdf>

CD17.2	ACTION			Ward: 28
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Supportive Housing Services at 55 Bleecker Street

(June 19, 2008) Report from General Manager, Long-Term Care Homes and Services

Recommendations

The General Manager of the Long-Term Care Homes and Services Division recommends that:

1. City Council authorize the General Manager of the Long-Term Care Homes and Services Division to enter into the requisite agreement with the Toronto Central Local Health Integration Network (LHIN), as a condition of receiving the provincial funding allocation of \$312,760.00 for the 2008-2009 fiscal year.
2. City Council authorize the General Manager of the Long-Term Care Homes and Services Division to negotiate terms and conditions for the required agreements with Toronto Community Housing Corporation and Central Neighbourhood House (HSIP partners) as required by the approved Health System Improvement Plan (HSIP) and in a form approved by the City Solicitor.
3. City Council authorize the General Manager of the Long-Term Care Homes and Services Division to pay Toronto Community Housing Corporation and Central Neighbourhood House (HSIP partners) for the services purchased at the level and rate outlined in the approved Health System Improvement Plan (HSIP).
4. City Council authorize the General Manager to renew agreements with the LHIN, Toronto Community Housing Corporation and Central Neighbourhood House as required, acting as the agent for the City of Toronto and the HSIP partners in order to receive the authorized health services funding from the MOHLTC and Toronto Central LHIN and sustain supportive housing services at 55 Bleecker Street in subsequent years.
5. The appropriate City officials be authorized and directed to take the necessary action to give effect thereto.

Financial Impact

Although the details and timing of funding flow have not yet been communicated to the division, due to the immediacy of this funding announcement, the announcement confirmed that \$312,760.00 would be provided for supportive housing services at 55 Bleecker Street in the Province's 2008-2009 fiscal year.

There is no net impact in the approved 2008 operating budget as a result of this report as the supportive housing services will be fully funded by the MOHLTC. However, this new funding may result in a minor year-end revenue and gross expenditure variance for the division, which will be explained in the year-end report. The total annualized impact of this funding will not be realized until 2009. The 2009 budget submission will be developed to include this new allocation.

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

Summary

Through the *Local Health System Integration Act, 2006*, the Ontario government changed the funding and delivery of health care services in Ontario to operate through fourteen (14) Local Health Integration Networks (LHINs) and local community-based health planning. The Ministry of Health and Long-Term Care (MOHLTC) established LHINs as “a critical part of the evolution of health care in Ontario from a collection of services to a true system that is patient-focused, results-driven, integrated, and sustainable”. The *Local Health System Integration Act, 2006*, placed significant decision-making power at the community level, focusing the local health system on individual community's needs, system integration and improvement of health results. In devolving authority to the LHINs, the MOHLTC set a mandate to facilitate the effective and efficient integration of health care services and make it easier for people to get the best care in the most appropriate setting, when they need it.

To fulfil this mandate, the MOHLTC required LHINs to develop integrated health service plans (IHSPs), through health system planning and community engagement. As of April 1, 2007, LHINs also assumed responsibility for funding a wide range of health service providers, and for managing the majority of service agreements with health service providers. The government continues to provide stewardship of Ontario's health system, setting direction, strategic policy, and system standards and delivering provincial programs and services.

In August 2007, the Minister of Health and Long-Term Care announced a comprehensive ‘Aging in Place Strategy’ to expand community living options for seniors, through a wider range of home care and community support services, to enable people to continue leading healthy and independent lives in their own homes. The Aging in Place Strategy recognized that Ontario's population is aging. Recent estimates project the seniors' population to double in the next 16 years, making it vitally important to ensure that there are resources available to assist those who wish to remain at home. Through the Aging in Place Strategy, the government of Ontario launched a four-year \$1.1 billion initiative designed to allow seniors to live healthy, independent lives in the comfort and dignity of their own homes.

The Minister of Health and Long-Term Care mandated the LHINs to lead this initiative on the MOHLTC's behalf, by identifying and providing funding for enhanced home care and community support services, as well as for innovative projects specific to the LHINs' assessed community need. Twenty percent of the year-one funding was earmarked for innovative projects, with the objective of inviting proposals for new projects to support non-traditional partnerships and new preventive and wellness services.

Each LHIN released proposal calls for health system improvement plans (HSIP), based on the priorities identified in their own IHSP. All HSIP proposals were required to be developed in partnership with at least one (1) other service provider. HSIPs from single service providers were ineligible for funding. In the Toronto Central LHIN, HSIP priorities included the provision of new community service options for seniors with mental health issues, including the provision of supportive housing.

The Long-Term Care Homes and Services Division submitted a health system improvement plan (HSIP) for the development of supportive housing services at 55 Bleecker Street, a Toronto Community Housing Corporation building located adjacent to St. Jamestown. Partners in the submission were: (i) Central Neighbourhood House; and (ii) Toronto Community Housing Corporation.

On June 19, 2008, the Minister of Health and Long-Term Care announced funding for twelve (12) Aging at Home Strategy HSIPS within the Toronto Central LHIN, including approval of provincial health funding for the proposed Supportive Housing Services project at 55 Bleecker Street. The City of Toronto Long-Term Care Homes and Services Division will receive the new health funding, acting as an agent for the three (3) collaborators in the HSIP (HSIP partners).

Background Information

cd17.2-Staff Report

<http://www.toronto.ca/legdocs/mmis/2008/cd/bgrd/backgroundfile-14382.pdf>

CD17.3	ACTION			Ward: All
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Full-Day Learning for Four-and Five-Year Olds

(June 18, 2008) Report from General Manager, Children's Services

Recommendations

The General Manager, Children's Services, recommends that:

1. City Council endorse the principles from the Full-day Learning Forum co-sponsored by the Children's Services Advisory Committee and Toronto Best Start Network as outlined in Appendix A and that a copy be sent to the Early Learning Advisor.
2. City Council also adopt the principle that the success of full-day learning implementation requires that the City's child care system is adequately funded to meet the child care needs of its residents.
3. City Council urge the Province of Ontario and the Early Learning Advisor to ensure that during the transition to full-day learning, school space is preserved.

Financial Impact

This report has no financial impact.

Summary

This report recommends the City endorse key principles developed at a Forum on Full-day Learning co-sponsored by the Children's Services Advisory Committee and Toronto Best Start Network and that the principles be sent to the Early Learning Advisor for his consideration in developing a strategy for implementing full-day learning for four- and five-year-olds.

Background Information

cd17.3-Staff Report

<http://www.toronto.ca/legdocs/mmis/2008/cd/bgrd/backgroundfile-14383.pdf>

CD17.4	ACTION			Ward: All
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Per Diem Rate for Child Care Operators

(June 17, 2008) Report from General Manager, Children's Services

Recommendations

It is recommended that:

1. Retroactive to January 1, 2008, base funding rate adjustments be made to eligible licensed child care programs, family resource programs, special needs resourcing services and home child care provider rates, in accordance with City budget guidelines and in a manner that maximizes the available provincial subsidy.
2. Health and safety funding of \$1.407 million, included in Children's Services' 2008 Approved Capital Budget (\$1.0 million funded from debt and \$0.407 funded by the Province), be paid to eligible child care operators.

Financial Impact

This report will have no financial impact beyond what has already been approved in Children's Services' 2008 Approved Operating and Capital Budgets.

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

Summary

This report seeks approval to increase base rates payable to eligible child care operators, family resource programs, special needs resourcing services and home child care provider rates in accordance with City budget guidelines. It also seeks approval to make payments to eligible child care operators for approved Health and Safety projects.

Background Information

cd17.4-Staff Report

<http://www.toronto.ca/legdocs/mmis/2008/cd/bgrd/backgroundfile-14389.pdf>

CD17.5	ACTION			Ward: 1, 2, 3, 4, 5, 7, 8, 9, 10, 11, 12, 13, 14, 15, 17, 20, 23, 24, 26, 27, 28, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 42
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Provincial Funding for Social Housing Capital Repairs

Confidential Attachment - A proposed or pending acquisition or sale of land for municipal or local board purposes

(June 18, 2008) Report from General Manager, Shelter, Support and Housing Administration

Recommendations

The General Manager, Shelter, Support and Housing Administration, recommends that:

1. Council approve the acceptance of \$36,459,240 from the Province, as a one time capital allocation for repair of the social housing stock.
2. Council approve the allocation to Toronto Community Housing Corporation of up to \$34,659,240 from the capital funding accepted from the Province, to be allocated to the following capital repair projects:
 - a. As listed in Appendix A, \$2,760,000 in capital repairs to be allocated to 138 vacant units; and
 - b. As listed in Appendix B, \$31,899,240 in capital repairs to be allocated for refurbishment of 2,437 kitchens and 1,780 bathrooms.
3. Council approve the allocation of \$1,800,000 to specific projects in Attachment 1 – Confidential Information.
4. The 2008 Shelter, Support and Housing Administration approved budget be increased by \$36,459,240 gross and \$0 net.
5. Council authorize the public release of the confidential information in Attachment 1, if Council approves the specific projects and they are completed to the satisfaction of the City Solicitor.

Financial Impact

Approval of the recommendations in this report will result in an increase of \$36,459,240 to the 2008 gross budget of the Social Housing program with zero net impact. This report recommends allocation of \$34,659,240 to TCHC state of good repair projects as detailed in the Appendices A and B. The remaining \$1,800,000 in Provincial revenues is allocated to specific projects in Attachment 1 - Confidential Information. As the City will be disbursing the provincial one time payment in year, there will be no future financial impact beyond this year.

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

Summary

The Ministry of Municipal Affairs and Housing announced on March 17, 2008 that \$100 million will be provided to municipalities this year to assist with capital repairs to about 4,000 affordable housing units. The funding is a one time payment to all 47 municipal service managers. On March 31, the Minister of Municipal Affairs and Housing advised the City that Toronto is to receive \$36,459,240, based on Toronto's share of the downloaded social housing stock.

This report recommends that Council approve the acceptance of \$36.459 million from the Province as a capital allocation for repair of the social housing stock and that the funds be allocated to Toronto Community Housing Corporation and to specific projects in Attachment 1 – Confidential Information.

Background Information

cd17.5-Staff Report

<http://www.toronto.ca/legdocs/mmis/2008/cd/bgrd/backgroundfile-14390.pdf>

cd17.5-Appendix A

<http://www.toronto.ca/legdocs/mmis/2008/cd/bgrd/backgroundfile-14391.pdf>

cd17.5-Appendix B

<http://www.toronto.ca/legdocs/mmis/2008/cd/bgrd/backgroundfile-14392.pdf>

CD17.6	ACTION			Ward: All
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Installation of Smart Meters in Rental Units and Its Impacts on Tenant Affordability

(June 17, 2008) Letter from Tenant Defence Sub-Committee

Recommendations

The Tenant Defence Sub-Committee recommended to the Community Development and Recreation Committee that:

1. City Council authorize the General Manager, Shelter, Support and Housing Administration to consult and seek further input from the landlord and tenant communities and other stakeholders as appropriate on the installation of smart meters in residential rental units and the impact of such initiatives on tenant affordability, and report back to the next meeting of the Tenant Defence Sub-Committee.
2. City Council request the Province of Ontario to:
 - a. consider and explore possible ways of implementing a form of mandatory oversight in cases of voluntary smart-meter conversion, which includes:

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- (i) ensuring that rent reductions are calculated fairly; and
 - (ii) ensuring that tenants are fully informed of their rights under s.125 of the *Residential Tenancies Act* (RTA); and
- b. put on hold the installation of "smart meters" in residential rental units until such time as the City has thoroughly considered all the outstanding issues, and appropriate legislative amendments and/or regulations have been brought into force by the provincial government.

Summary

Letter from the Tenant Defence Sub-Committee forwarding recommendations from its meeting on June 17, 2008, respecting the installation of smart meters in rental units and its impacts on tenant affordability.

Background Information

cd17.6-Letter from Tenant Defence Sub-Committee

<http://www.toronto.ca/legdocs/mmis/2008/cd/bgrd/backgroundfile-14393.pdf>

cd17.6-Staff Report

<http://www.toronto.ca/legdocs/mmis/2008/cd/bgrd/backgroundfile-14394.pdf>

cd17.6-Appendix A

<http://www.toronto.ca/legdocs/mmis/2008/cd/bgrd/backgroundfile-14395.pdf>

cd17.6-Letter from General Manager, Shelter, Support and Housing Administration

<http://www.toronto.ca/legdocs/mmis/2008/cd/bgrd/backgroundfile-14400.pdf>