

BU39.1Toronto Public Health

2018 Preliminary Operating Budget and 2018 - 2027 Preliminary Capital Budget & Plan

Budget Committee







- TPH Overview:
 - > TPH Services and Resources
- Operating Budget Overview
- Capital Budget Overview







Return on Investment in Public Health

A relatively small investment provides every person with considerable returns.

- The average lifespan of Canadians has increased by more than 30 years since the early 1900s
- 25 of those years are attributable to advances in public health
- · There are numerous public health achievements that led to this remarkable accomplishment

EVERY \$1 INVESTED IN:



Mental Health & Addictions

SAVES

\$30

in lost productivity and social costs



Immunizing Children

SAVES

\$16

in health care costs



Tobacco Prevention

SAVES

\$20

in future health care



Fluoridated Drinking Water

SAVES

\$38

in saved dental care



Early Childhood Development

SAVES

\$9

in future spending on health, social and justice services

PUBLIC HEALTH MILESTONES | ONE TORONTO. ONE HEALTH.







TORONTO'S

sciinics run by TPH and 10 clinics run in collaboration with community partners.

EXPECTANCY THROUGH THE YEARS











Toronto Public Health

TPH reduces health inequities and improves the health of the whole population

Public Health Foundations

Purpose: To ensure effective public health programs responding to the health needs of the population.

Chronic Diseases & Injuries

Purpose: To reduce the burden of preventable chronic diseases and injuries of public health importance and reduce the frequency and severity of preventable injury and of substance misuse.

Family Health

Purpose: To enable individuals and families to achieve optimal preconception health, experience a healthy pregnancy, have the healthiest newborn(s) possible, and be prepared for parenthood and all children to attain and sustain optimal health and developmental potential.

Infectious Diseases

Purpose: To prevent or reduce the burden infectious diseases of public health importance.

Environmental Health

Purpose: To prevent and reduce the burden of illness from health hazards in the physical environment.

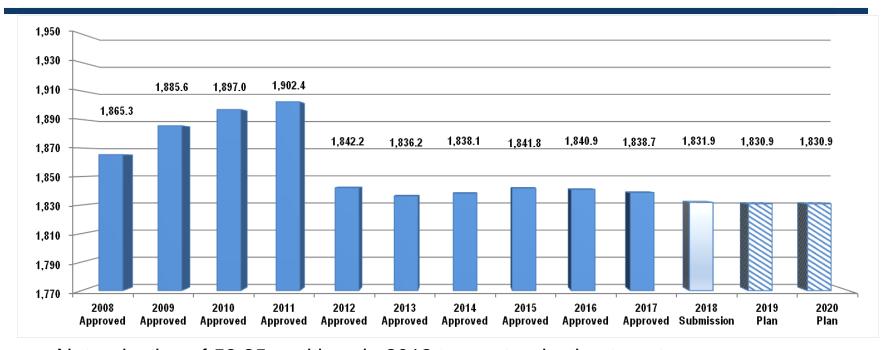
Emergency Preparedness

Purpose: To ensure a consistent and effective response to public health emergencies and emergencies with public health impacts.



Staffing Trend (Excludes Capital Positions)





- Net reduction of 58.25 positions in 2012 to meet reduction target
- 2018 Position Changes include:
 - Recommended Reductions -4.9 FTE's
 - New & Enhanced 1.0 FTE's
 - Base Changes -3.0 FTE's
- Total Positions Changes -6.9 FTE's





		2015			2016		2017 Year-End Projections					
		Vacancies			Vacancies		# of	# of	Vacancies %			
Citizen		% of Total	Approved		% of Total	Approved	Vacancies	Vacancies	of Total	Approved		
Services	# of	Approved	Pos.	# of	Approved	Pos.	as at	Projections	Approved	Pos.		
Centred "X"	Vacancies	Pos.	Equivalent	Vacancies	Pos.	Equivalent	Sep 30 *	to Dec 31	Pos.	Equivalent		
Operating	99.7	5.4%	1,841.8	146.5	7.9%	1,843.5	82.2	78.2	4.3%	1,834.2		
Capital	6.3	18.6%	33.5	4.1	19.5%	21.1	0.1	0.1	0.9%	17.2		
Total	105.9	5.6%	1,875.3	150.6	8.1%	1,864.6	82.4	78.4	4.2%	1,851.4		

^{*} Based on the 2017 9-month Quarterly Variance Report

Vacancy Drivers:

 Increase in retirements, short term leaves and unfilled positions in the first six months of the year.

Hiring Strategies:

- Staffing activity has been accelerated resulting in complement to be in line with the 2017 approved positions.
- A Public Health Nurse position and Support Assistant position pool has been established to enable filling vacancies in a shorter time frame.





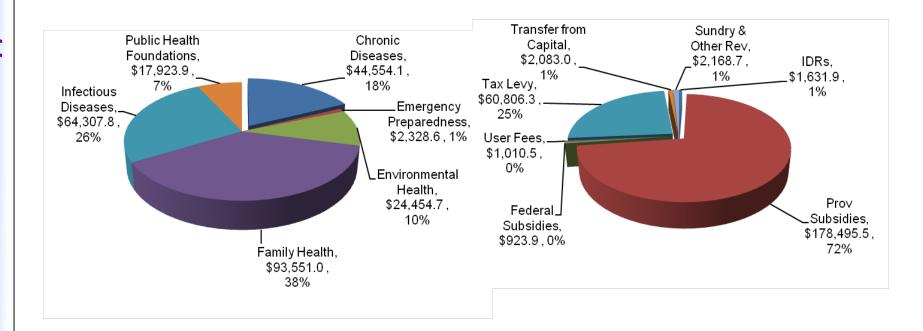
Operating Budget Overview



2018 Preliminary Operating Budget Gross Expenditures by Program & Funding Source

Where the Money Goes \$247.120 Million

Where the Money Comes From \$247.120 Million





Service Objectives & Key Priority Actions

Service Objectives

- Eighty-three percent of doses of meningococcal vaccine to be given to grade 7 students at TPH school clinics to prevent meningitis and its complications
- Ninety-two percent of high risk food premises found to be in compliance with Food Premise Regulation
- Seventy-five percent of higher needs elementary/middle schools, as indicated by Toronto school boards to receive Chronic Disease & Injury Prevention services
- 17,219 children 17 years and younger from low income families to receive dental care through TPH dental clinics
- Ninety-four percent of JK to grade 8 students enrolled in public schools to receive a dental screening
- Eighty-five percent of confirmed gonorrhea cases to receive the recommended treatment, to reduce the spread of drug resistance.

Service Objectives & Key Priority Actions

Key Priority Actions

- Collaborate with schools and post-secondary institutions to enhance knowledge and awareness of Cannabis legislation and health impacts for youth and young adults through the delivery of youth leadership initiatives, parenting workshops, teacher/school staff support, post-secondary student peer training and support for campus-wide initiatives, and development and dissemination of public education materials and resources as appropriate
- Integrate the Child Friendly Policy Framework across City Divisions in which the focus is to proactively embed a 'child lens' into the development of new municipal healthy public policies going forward.
- Develop new and strengthen existing partnerships with other city divisions to implement innovative cross-city initiatives to improve the determinants of health
- Continue implementation of Toronto's Overdose Action Plan



Actions to Achieve Budget Target Included in 2018 Preliminary Service Change Summary

	Total S	ervice Ch	anges	Inc	rement	al Chan	ge
	\$	\$	#	2019	Plan	2020	Plan
Description (\$000s)	Gross	Net	Pos.	Net	Pos.	Net	Pos.
Base Changes:							
Base Expenditure Changes							
Line by Line Review	(221.4)	(58.6)					
Base Expenditure Change	(221.4)	(58.6)					
Sub-Total	(221.4)	(58.6)					
Service Efficiencies							
Operational and Support Efficiencies	(497.9)	(124.4)	(4.9)	(16.4)			
Sub-Total	(497.9)	(124.4)	(4.9)	(16.4)			
Service Adjustments							
Ambassador Program Funding Reduction	(25.0)	(6.3)		(6.3)			
Sub-Total	(25.0)	(6.3)		(6.3)			
Total Changes	(744.2)	(189.3)	(4.9)	(22.7)			



BOH Recommended New/Enhanced Services Not Included in 2018 Preliminary Operating Budget

		2018 In	npact		l	Net Increme	ntal Impact		
					2019 I	Plan	2020 Plan		
New / Enhanced Service Description (\$000s)	Gross	Revenue	Net	Positions	Net	Positions	Net	Positions	
Not Included									
Referred to the Budget Process									
ISPA (Immunization of School Pupils Act)	530.3	397.7	132.6	9.0	65.5	0.0	0.0	0.0	
Toronto Urban Health Fund (TUHF) - Year 4	150.0	112.5	37.5	0.0	37.5	0.0	0.0	0.0	
Toronto Urban Health Fund - 15% Budget Enhancement	339.1	254.3	84.8	0.0	0.0	0.0	0.0	0.0	
SNP Increase - Expand to 20 New Public Schools	442.8	0.0	442.8	0.0	0.0	0.0	0.0	0.0	
SNP Increase - Financial Stability of Currently Funded	1,681.4	0.0	1,681.4	0.0	0.0	0.0	0.0	0.0	
SNP Increase - Expand to Independent Schools	530.3	0.0	530.3	0.0	0.0	0.0	0.0	0.0	
Total New/Enhanced Services	3,673.9	764.6	2,909.3	9.0	103.0	0.0	0.0	0.0	

- The inclusion of ISPA, TUHF and TUHF 15% Enhancement results in 2018 Operating Budget Request to be 0.42% higher than the 2017 net approved budget
- The inclusion of SNP results in 2018 Operating Budget Request to be 4.52% higher than the 2017 net approved budget
- The total increase from all New & Enhanced Proposals will be 4.94% higher than the 2017 net operating budget





Capital Budget Overview

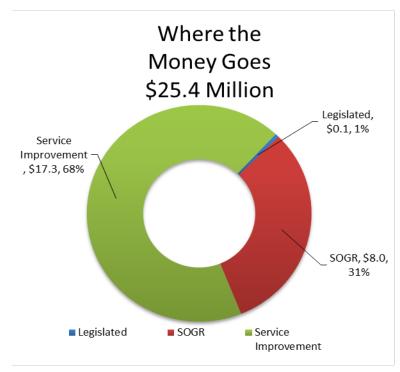


2018 - 2027 Capital Budget & Plan

	2018 Rec.	2019	2020	2021	2022	2023	2024	2025	2026	2027	2018-2027
(\$000	Budget	Plan	Total								
Legislated Infectious Disease Control Information System											
Sub-Total	145										145
State of Good Repair (SOGR)	145										145
Early Abilities Information System - Phase 1											
Inspection Management - Phase 1	375										375
Community Health Information System	295										295
Chemical Tracking Information System	1,199										1,954
Early Abilities Information System - Phase 2		303	604								907
Inspection Management - Phase 2			715	941							1,656
Reporting Environment Enhancement			461	733	825	152					2,171
Sub-Total									267	349	616
	1,869	1,058	1,780	1,674	825	152			267	349	7,974
Service Improvements											
Dental and Oral Health Information System	258	154									412
Datamart Data Warehouse - Phase 3	464	1,005	446								1,915
Electronic Medical Records - Phase 3	427	861	59								1,347
Documents and Records Management System - Phase 1		468									468
Correspondence and Communication Tracking System		343	343								686
Common Geographical Interface			700	300							1,000
Documents and Records Management System - Phase 2			518	635							1,737
Mobile Enablement				391	378	527	550	46			1,892
Public eLearning				00.	365	610	106				1,081
Socio-Demographic Data Collection and Reporting					348	721	779	811			2,659
Geographic Information Enablement					340	190	265	286			741
Public Notifications and Advisories						130	200	557	474		1,031
Call Centre Revitalization								337	452	400	852
Customer Relationship Case Management									507	951	1,458
Sub-Total Sub-Total	1,149	2,831	2,066	1,326	1,675	2,048	1,700	1,700	1,433	1,351	17,279
Total Expenditures by Category (excluding carry forward)	3,163	3,889	3,846	3,000		2,200	1,700	1,700	1,700	1,700	25,398

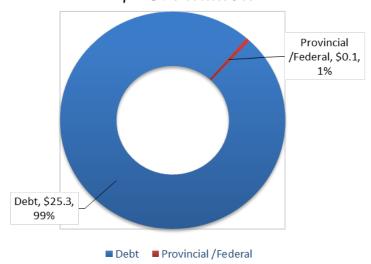


2018 - 2027 Preliminary Capital Budget & Plan Spending & Funding Sources



			2018 - 202	7 Prelimin	ary Capital	Budget a	nd Plan by	Category		
(\$000s)	2025	2026	2027							
Legislated	145.0	-			-	-	-	-	-	-
State of Good Repair (SOGR)	1869.0	1058.0	1780.0	1674.0	825.0	152.0	0.0	0.0	267.0	349.0
Service Improvements	1149.0	2831.0	2066.0	1326.0	1675.0	2048.0	1700.0	1700.0	1433.0	1351.0

Where the Money Comes From \$ 25.4 Million



			201	18 - 2027 P	reliminary	Capital Bu	idget and F	Plan by Fu	nding Sou	rce					
	(\$000s)	2018	3 2019 2020 2021 2022 2023 2024 2025 2026 2027												
Debt/CFC		3018.0	3889.0	3846.0	3000.0	2500.0	2200.0	1700.0	1700.0	1700.0	1700.0				
Provincial/Federal		145.0													





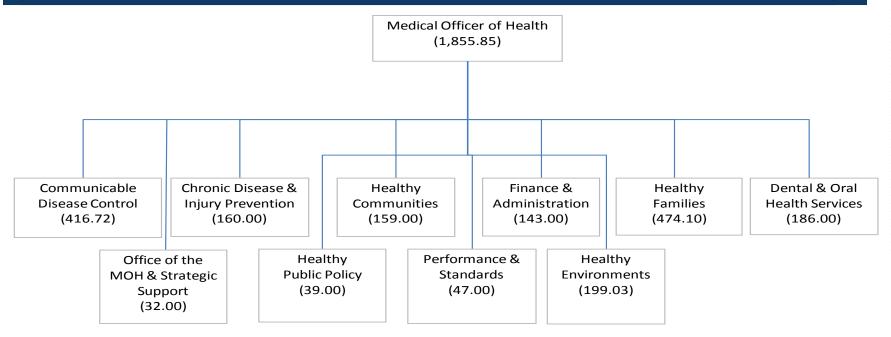
Health System Transformation & Public Health

- Ontario Public Health Standards Modernization (http://www.toronto.ca/legdocs/mmis/2017/hl/bgrd/backgroundfile-103562.pdf)
- Public Health within an Integrated System: Report of the Minister's Expert Panel on Public Health (http://www.health.gov.on.ca/en/news/bulletin/2017/hb_201
 70720.aspx)
- Office of the Auditor General of Ontario: Chronic Disease
 Prevention and Health Promotion Value for Money Audit
- TPH Organizational Design Assessment
 (http://app.toronto.ca/tmmis/viewAgendaltemHistory.do?ite
 m=2017.EX22.2)



2018 Organizational Chart for Toronto Public Health





		Senior	Management with Direct	Management without Direct Reprots / Exempt Professional		
Budget	Category	Management	Reports	& Clerical	Union	Total
Operating	Permanent Pos	11.00	178.80	53.00	1569.05	1811.85
	Temporary Pos		1.00		19.00	20.00
Capital	Temporary Pos		2.00	4.00	18.00	24.00
Total	Total	11.00	181.80	57.00	1606.05	1855.85

86.5% of TPH's staff are union employees





Operating Budget Overview



Operating Budget Variance as of Sep. 30, 2017

C'i-				Yea	r-to-Date)			Year-End Projection							
City Program/Agency	Quarter	Gross Expenditures		Revenue		Net Variance		Alert	Gross Expenditures		Revenue		Net Variance		Alert	
		\$	trend	s	trend	\$	trend		\$	trend	\$	trend	\$	trend		
	3-Month	(1.0)	▼	(0.8)	▼	(0.3)	▼	G	(2.7)	▼	(2.2)	▼	(0.5)	▼	G	
Toronto Public Health	6-Month	(2.2)	•	(1.8)	▼	(0.4)	•	G	(3.9)	▼	(3.4)	•	(0.5)	•	©	
	9-Month	(3.5)	•	(3.2)	•	(0.4)	•	G	(5.0)	▼	(4.5)	•	(0.5)	•	©	
Year-to-Date Net Variance	©	85% to 105%	Ŷ	0% to 85%	₿	>105%		Year-End	©	<=100%	®	>100%				

Key Points:

- At September 30, 2017, the total gross expenditure variance was under budget by \$3,542.4 thousand or 2.1 percent.
 - \$3,250.4 thousand in Salaries and Benefits due to unfilled positions, retirements and short-term leaves;
 - \$292.0 thousand in non-payroll.
- Revenue was under budget by \$3,183.8 thousand or 2.5 percent corresponding to the under spending in provincially funded and other funded programs.



2017 Key Service Accomplishments



- Ensured the new "Apartment Buildings" bylaw now requires landlords of apartment buildings to post in the lobby the location of nearby, airconditioned public spaces where residents can cool down during summer extreme heat.
- Worked with Environment and Energy Division and other partners on TransformTO, a low-carbon pathway to achieve the City's greenhouse gas reduction target for 2050 and collaborated to identify actions to reduce exposures to Traffic- Related Air Pollution among more vulnerable populations
- Successfully defended the Hookah by-law in collaboration with Municipal Licensing and Standards.
- Established an interim Supervised Injection Service site and received a Health Canada Exemption and provincial funding for 3 permanent sites



2017 Key Service Accomplishments (Cont'd)



- Developed the Toronto Overdose Action Plan: Prevention and Response, a comprehensive overdose prevention and response strategy
- Supported 563 school communities to provide 34,588,616 meals during the 2016/2017 school year to 183,982 children and youth, with municipal funding for student nutrition programs
- Plan to:
 - Respond to approx. 41,000 cases & contacts of reportable/communicable diseases and to 350 communicable diseases outbreaks
 - Reach 25,338 children, youth, and post-secondary students with Healthy Schools and Substance Misuse Prevention services to promote substance misuse prevention and mental health promotion
 - Complete 68,000 screens (incl. hearing, developmental, communications, nutrition, prenatal, postpartum depression and parenting screens) to identify individuals at risk for adverse birth outcomes and/or children at risk for adverse/or decreased child development outcomes

Key Issues & Challenges for 2018 and Beyond

- Growing number of Infection Prevention and Control complaints in healthcare settings.
 Investigations are complex, time consuming, involve multiple agencies, and result in legal follow up.
- Increasing rates of opioid overdoses in the City of Toronto requiring enhanced surveillance and increased distribution of harm reduction supplies including naloxone.
- Increase in case management services for HIV infections due to new provincial requirement for reportable HIV viral load testing to Public Health.
- Increased provincial requirements under the Immunization of School Pupils Act (ISPA) for assessment, updating and provision of vaccine clinics to ensure all students' immunizations are up to date for the 9 required vaccines in public and private schools.
- New federal legislation and regulation of Cannabis in Canada effective July 1, 2018 will result in increased demands for enforcement and public education.
- Need for increased access to perinatal mental health services and 18 month well baby medical assessments



Business Modernization & Transformation Initiatives

- Completion of Personal Services Settings wireless system to provide real time access to inspection results and faster posting of results to BodySafe.
- Modernize service delivery to Tuberculosis clients receiving Video Direct Observed Therapy services.
- Replace current on-line vaccine reporting system with provincial Immunize Connect Ontario (ICON) to improve immunization information.
- Rollout online learning modules for agency service providers to increase education skills on Falls Prevention.
- Expand the use of technology to enhance the customer experience, improve service
 access and equity (e.g., use of Point of Care devices for direct data entry and
 documentation; Online Registration for parenting groups, explore use of language line
 app technology to reduce interpreter costs and improve service).
- Increased accessibility for clients with service barriers with improved adaptation of technology.

2018 Preliminary Operating Budget Summary

Key Points:

- Base pressures include salaries, benefits and union COLA increases for \$0.169 million net (0.2%)
- Efficiency reduction options will not affect service levels
- Preliminary budget is 0.03% below the 2017 Net Operating Budget
- 2018 Preliminary Operating Budget includes:
 - BOH Recommended Base and Reduction Options to achieve the budget target
 - New & Enhanced Adult Ontario Works Dental
- 2018 Preliminary recommended budget excludes 4 New & Enhanced service requests recommended by BOH



2018 Preliminary Operating Budget Summary

(In \$000s)	20 Bud		2018 Pre Bud	•	Change Gro	7 Over (U Ne		
	Gross	Net	Gross	Net	\$	%	\$	%
Toronto Public Health (TPH)								
Chronic Diseases & Injuries	44,204.8	12,985.1	44,554.1	12,969.4	349.3	1%	(15.7)	0%
Emergency Preparedness	2,376.5	580.5	2,328.6	570.3	(47.9)	-2%	(10.1)	-2%
Environmental Health	24,342.8	5,562.5	24,454.7	5,563.0	111.9	0%	0.5	0%
Family Health	93,943.7	20,716.7	93,551.0	20,608.3	(392.7)	0%	(108.4)	-1%
Infectious Diseases	64,211.0	13,876.6	64,307.8	13,961.7	96.8	0%	85.1	1%
Public Health Foundations	17,417.5	17,417.5 7,105.5		7,133.5	506.4	3%	28.0	0%
Toronto Public Health (TPH)	246,496.2	60,826.9	247,119.9	60,806.3	623.7	0.3%	(20.6)	0.0%



Key Cost Drivers

	Total Base	Changes
(In \$000s)	\$	Position
Gross Expenditure Changes		
Prior Year Impacts		
Annualization of 2017 New & Enhanced	91.3	
Annualization of 2017 Operating Impact of Capital Reductions	(24.4)	
Other Annualizations	10.9	
Salaries and Benefits		
COLA, Progression Pay, Step Increases and Realignments & Capital Project Delivery	49.5	3.9
Economic Factors		
Various Inflationary Increases	41.9	
Other Base Changes		
Other Adjustments (IDC/IDR, 100% Funded Programs)	6.0	
Total Gross Expenditure Changes	175.2	3.9
Revenue Changes		
User Fees	(6.4)	
Total Revenue Changes	(6.4)	
Net Expenditure Changes	168.7	3.9



2018 User Fee Changes

 User Fee increases for Inflation and volume changes results in \$6.4 thousand net savings



New/Enhanced Services <u>Included</u> in 2018 Preliminary Operating Budget

- Adult Ontario Works Dental (\$0.101 million gross & \$0 net and 1 position)
- The 2018 Preliminary Operating Budget includes new service priority for \$0.101 million gross and \$0 net to provide increased access to dental services to about 1,200 Ontario Works recipients annually.



2018 Complement Changes

					-	2018 Comple	ment Char	iges			
	2017 Approved Staff Complement	Prior Year Impact	Operating Impacts of Capital		Base Changes	Efficiencies	Service Changes Included	Total Base Change	New/Enh Service Priorities Included	Total 2018 Preliminary Budget	Change from 2017 Approved
Operating		•	•								
Chronic Diseases & Injuries	309.49				(2.94)	(1.88)		(4.82)		304.67	(4.82)
Emergency Preparedness	19.55				4.13	(0.21)		3.92		23.47	3.92
Environmental Health	197.49				(1.60)	(0.11)		(1.71)		195.78	(1.71)
Family Health	707.31				(17.08)	(1.52)		(18.60)	1.00	689.71	(17.60)
Infectious Diseases	509.66				(5.44)	(0.33)		(5.77)		503.89	(5.77)
Public Health Foundations	95.21				19.93	(0.81)		19.12		114.33	19.12
Subtotal - Operating	1,838.71				(3.00)	(4.86)	0.00	(7.86)	1.00	1,831.85	(6.86)
Capital								0.00			
Chronic Diseases & Injuries	2.73							0.00		2.73	0.00
Emergency Preparedness	0.32			0.12				0.12		0.44	0.12
Environmental Health				1.20				1.20		1.20	1.20
Family Health	3.90			1.75				1.75		5.65	1.75
Infectious Diseases	6.75			3.53				3.53		10.28	3.53
Public Health Foundations	3.45			0.25				0.25		3.70	0.25
Subtotal - Capital	17.15			6.85	0.00	0.00	0.00	6.85	0.00	24.00	6.85
Total Complement	1,855.86			6.85	(3.00)	(4.86)	0.00	(1.01)	1.00	1,855.85	(0.01)



2018 Key Complement Changes

Base Changes:

- Reduction of 3 positions deleted as a technical adjustment.
- Capital positions increased by 6.9

Efficiencies:

- Reduction of 2.86 positions through efficiencies from realignment of program and management positions.
- Reduction of 2.0 will be realized from confidential operational efficiencies.

New and Enhanced:

 Increase of 1 position in Dental and Oral Services to provide increased access to dental services to about 1,200 Ontario Works recipients annually



	BOH BC Recom	mended on S 2017	eptember 20,	2018 Preli	minary Operat	ing Budget		ry Budget vers Recommende		
Description (\$000s)	Position	Gross	Net	Position	Gross	Net	Position	Gross	Net	
	#	\$	\$	#	\$	\$	#	\$	\$	Comments
2017 Approved Budget	1,837.96	245,071.4	60,796.9	1,838.08	245,071.35	60,796.89	0.12	(0.0)	(0.0)	
In Year Adjustments	17.78	1,695.7	30.0	17.78	1,424.90	30.00	-	(270.8)	0.0	Additional in-year adjustments, mainly reduction of funding for Healthy Apartment Neighbourhoods and increase for Toronto Overdose Actions Plan.
2017 Adjusted Approved Budget	1,855.74	246,767.0	60,826.9	1,855.86	246,496.3	60,826.9	0.12	(270.7)	(0.0)	
Base Changes:	,	-,	,-	,	-,	,.		,	(,	1
Base Expenditure Changes										
Impact of Capital Changes	9.9	639.7	-	6.9	208.7	-	(3.1)	(431.0)	-	Reduction in capital positions as a result of capital projects review. No net impact.
Salary and Benefit Changes	(3.0)	469.9	69.8	(3.0)	343.3	49.5	-	(126.6)	(20.3)	Adjustment to salaries and benefits projections.
Economic Factors (Utilities, Rent and Inflationary Increases for										
Sexual Health Clinics, Dental Street Youth & Low Income Adults		114.6	29.4		114.6	29.4	-	-	-	
Interdivisional Charges and Recoveries		20.6	6.1		20.6	6.1	-	-	-	
Annualization, Changes to 100% Funded Programs		112.0	90.5		566.1	90.3	-	454.1	(0.2)	Reversal of Cooling Centres annualized impact, Food Works Newcomer Settlement Award, Healthy Apartment Neighbourhoods and reduction to 100% provincially funded Programs.
Base Revenue Changes							-	-	-	
User Fees		14.2	(6.4)		14.2	(6.4)	-	(0.0)	0.0	
Base Savings				-	-	-	-		-	
Sub-Total	6.9	1,371.0	189.4	3.9	1,267.5	168.9	(3.1)	(103.5)	(20.5)	
2018 Recommended Base Budget	1,862.6	248,138.0	61,016.3	1,859.7	247,763.7	60,995.8	(2.9)	(374.3)	(20.5)	
Service Changes:			0.31%	1		0.28%				
Service Efficiencies										
Line by Line Review		(221.4)	(58.7)		(221.4)	(58.7)	_	_		
·	(0.0)									
Operational and Support Efficiencies 1	(0.9)	(95.5)	(23.9)	(0.9)	(95.5)	(23.9)	1.0	110 5	29.7	-
Operational and Support Efficiencies2	(3.0)	(307.1)	(76.8)	(2.0)	(188.6)	(47.2)	1.0	118.5	29.7	
Operational and Support Efficiencies3	(1.0)	(95.3)	(23.8)	(2.0)	(213.8)	(53.4)	(1.0)	(118.5)	(29.6)	
	(4.9)	(719.3)	(183.2)	(4.9)	(719.3)	(183.2)	-	0.0	0.0	
Minor Service Change		(25.0)	(6.3)		(25.0)	(6.2)				-
Ambassador Program Funding Reduction	-	(25.0) (25.0)	(6.3) (6.3)	-	(25.0) (25.0)	(6.3)	-	-	-	4
Sub-Total Service Changes	(4.9)	(744.3)	(189.5)	(4.9)	(744.3)	(189.5)	-	0.0	0.0	•
2018 Budget to be Considered	1,857.8	247,393.7	60,826.8		247,019.4	60,806.3	(2.9)	(374.3)	(20.5)	1
Change over 2017 Budget	2,00110	,	0.00%		,	-0.03%	(===)	(5)	(=5:5)	
New/ Enhanced:										
Immunization of School Pupils Act (ISPA)	9.0	530.3	132.6				(9.0)	(530.3)	(132.6)	
Toronto Urban Health Fund - Year 4	5.0	150.0	37.5				-	(150.0)		
Toronto Urban Health Fund 15% Budget Enhancement		339.1	84.8				-	(339.1)		These new/enhanced priorities are not included
Student Nutrition Program (SNP) - Strengthen Current Program		1,681.4	1,681.4				-	(1,681.4)		in the Preliminary budget but are part of the lis of new/enhanced requests.
SNP Program - Expansion		442.8	442.8				-	(442.8)		·
SNP Program - Expansion to Independent Schools		624.8	624.8				-	(624.8)	(624.8)	
Adult Ontario Works Dental	1.0	100.5		1.0	100.5	-		-	-	
Sub-Total New/ Enhanced	10.0	3,868.9	3,003.9	1.0	100.5	-	(9.0)	(3,768.4)		
2018 Operating Budget to be Considered	1,867.8	251,262.6	63,830.7	1,855.85	247,119.9	60,806.3	(11.9)	(4,142.7)	(3,024.4)	-
Change over 2017 Budget			4.94%			-0.03%				



	2019 - Incremental Increase					2020 - Incremental Increase				
	Gross		Net	%		Gross		Net	%	
Description (\$000s)	Expense	Revenue	Expense	Change	Position	Expense	Revenue	Expense	Change	Position
Known Impacts:				_					_	
Prior Year Impact										
Annualization of one-time budgets	(257.3)	(234.7)	(22.6)	0.0%	(1.0)	(13.3)	(13.3)			
Operating Impacts of Capital						·				
Delivery of Capital Positions	(13.7)	(13.7)			(5.0)	(282.0)	(282.0)			
Salaries and Benefits	3,607.2	2,756.8	850.5	1.4%		2,033.0	1,524.5	508.5	0.8%	
Other Base Changes (specify)				0.0%						
Inflationary Increases	529.8	65.8	463.9	0.8%		543.9	66.5	477.4	0.8%	
IDC/IDR	(86.7)		(86.7)	-0.1%		2.8		2.8	0.0%	
Revenue (specify)				0.0%						
User Fees		19.8	(19.8)	0.0%			19.9	(19.9)	0.0%	
Sub-Total	3,779.2	2,594.0	1,185.3	1.9%	(6.0)	2,284.4	1,315.6	968.8	1.6%	0.00
Total Incremental Impact	3,779.2	2,594.0	1,185.3	1.9%	(6.0)	2,284.4	1,315.6	968.8	1.6%	0.00





Capital Budget Overview





























Summary of Key Projects Completed in 2017

> HF/HL Point of Care

■ The purpose of this project was to implement wireless devices which communicate securely with the Toronto Community Health Information System (TCHIS) and synchronize data between the mobile units and the TCHIS database. This project increased quality of care; improved accuracy of documentation; improved compliance with documentation guidelines, standards and policies; provided increased accountability with information contained within the customer record; and enhanced the infrastructure of the TCHIS system

> TPH Datamart Data Warehouse - Phase 2

This project enabled stakeholders to better monitor performance and analyze trends to adjust programs and meet mandatory Ministry of Health and Long-Term Care reporting requirements in a timely manner.

> Healthy Environment Inspection System (Mobile).

This project implemented a mobile application for Food Safety and Health Hazard (Pools & Spas and Rabies), Bed Bugs, Special Events and Mobile Premises inspectors/ investigators, leveraging the corporate Remote Computing System (RCS) solution.

Summary of Key Projects Completed in 2017



> Communicable Disease Control (CDC) Wireless Rollout

This project enabled staff in the Vaccine Preventable Disease (VPD), TB and Personal Service Settings (PSS) components of the Control of Infectious Disease /Infection Control (CID/IC) program to enter and access data directly from health information management systems while in the field. Wireless technology was used to improve Communicable Disease Control (CDC) business processes and service to clients.

Supervised Injection Service (SIS)

TPH completed renovations to the existing space at 277 Victoria St. to include 5 booths for supervised injection, an assessment room and a after injection room. Nine new staff have been hired and trained and policies and procedures have been developed to ensure the safe and effective operation of this service. The benefits of this program are the reduction in: fatal overdose, discarded drug use supplies, and public injection in the community.



Capital Budget Variance as of Sep. 30, 2017

		2017 Approved		Alert (Benchmark								
Program		2017 Approved Cash Flow	YTD Spending	Year-End Projection	% at Year End	Trending	70% spending rate)					
rrogiam	Q1	4.50	0.76	4.13	91.7%		©					
Toronto Public Health	Q2	4.50	1.41	4.13	91.7%	_	©					
	Q3	4.85	2.52	3.61	74.4%	¥	<u>©</u>					
③ >70%												

Key Points (explanation of variances):

 The under-spending is mainly attributable to the Reallocation and Expansion of Scarborough Dental Clinic project which is delayed due to the RFQ being awarded later than planned; and contract issues with the Project Consultants and Architect.



Key Issues & Challenges for 2018 and Beyond

- There is an increased demand by the public to be able to access government services and information over the Internet.
- Service metrics and reporting with real time quality data are an increasing expectation. Professionals require tools that allow them to provide services effectively and enable them to access information to report on services, costs, and performance metrics. Doing so enables staff to ensure standards are being met.
- Toronto Public Health uses a number of information systems and technology to assist in delivering services. In certain cases, TPH is required to use specific types of technology and certain systems to collect and share information with other jurisdictions through provincially developed systems.
- Toronto Public Health, as with all health units in Ontario, is also required by law to collect and report critical information related to reportable diseases within mandated timelines and formats prescribed.
- Within the next ten years some critical business systems will reach their end of life due to technical obsolescence and inability to satisfy new legislation/business requirements and will need to be enhanced or replaced.





2018 – 2027 Preliminary Capital Budget & Plan



Key Objectives & Priority Actions

Family Health	Issues: The Scarborough Dental Clinic is experiencing over-crowding resulting in health and safety concerns and inability to satisfy demand.							
	 Priority Actions: Expansion of Scarborough Dental Clinic (year 3 of 2 year project) To increase access to dental services for adults on social assistance (OW), adults with disabilities (ODSP), and Refugees (IFHP); and decrease wait times as a result of improved service delivery. To be compliant with Accessibility for Ontarians with Disabilities Act (AODA) and address the health and safety concerns created from overcrowding. 							
Family	Issues: Dental clinics use manual processes for booking and storing patient information.							
Health	 Priority Actions: Dental and Oral Health Information System (year 2 of 3 year project) To implement an integrated Oral Health Information System to provide access to meaningful, real time dental and oral health practice management information. To improve the operational efficiency and effectiveness of providing Dental and Oral Health Services. 							
Family Health;	Issues: System has reached its end of life due to obsolete technology and does not conform to current standards resulting in service degradations.							
and Chronic Diseases and Injuries	 Priority Actions: Community Health Information System (year 2 of 3 year project) Enhance the Toronto Community Health Information System (TCHIS) to improve system reliability, comply with legal requirements (including Accessibility for Ontarians with Disabilities Act (AODA) and Personal Health (PHIPA) legislation) and industry standards. Improve workflows and reduce errors so that program staff can continue to efficiently deliver public health service to a growing public health client base. 							

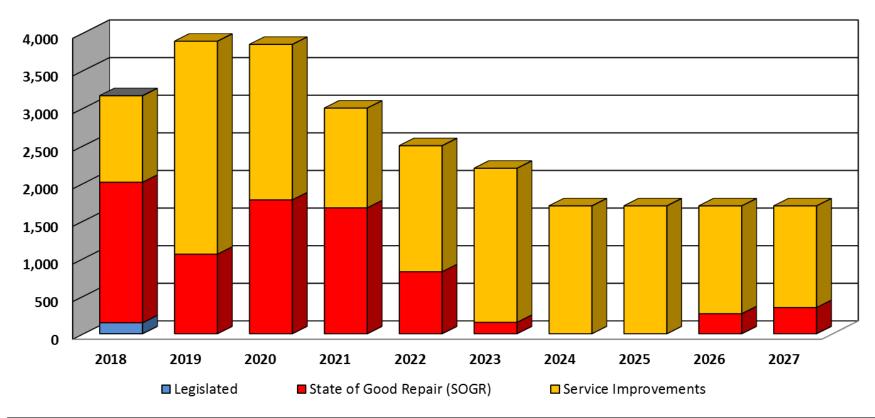


Key Objectives & Priority Actions

	<u> </u>								
Environmental Health	Issues: TPH conducts inspections of a wide range of establishments in the City. Current inspection applications can not accommodate TPH mobility requirements and need significant customization to accommodate variant inspections processes. The system also lacks appropriate configuration and setup to provide complete auditing capability for reporting on historical data snapshots, which is an essential to respond to provincial auditors in accordance with provincial accountability framework.								
	 Priority Actions: Inspection Management - Phase 1 and 2 Leverage corporate case management capabilities and common infrastructure components to enhance technical capabilities and data integrity. Comply with AODA and Personal Health Information Legislation (e-PHIPA), and integrate with City (e.g. business licensing) and provincial systems (e.g. Panorama). 								
Infectious Diseases	Issues: System used by the Sexual Health Clinic program is obsolete and does not meet program requirements. The Needle Exchange program utilizes manual inefficient tools to manage and track service delivery and manage patient records.								
	 Priority Actions: The Electronic Medical Records Phase 3 (1 of 3 years) Deliver a client information system to provide a comprehensive electronic record of patients' health-related information for people attending sexual health and needle exchange clinics. Create efficiencies in business processes and improved client care. 								
Public Health Foundations	Issues: Service metrics and reporting with real time quality data are an increasing expectation. Difficulty obtaining quality client/patient information and management information for service and decision-making in a timely manner.								
	Priority Actions: Datamart Data Warehouse Phase 3 (year 1 of 2 year project) Improve reporting, trend analysis and performance measurement to meet mandatory Ministry of Health and Long-Term Care reporting requirements.								



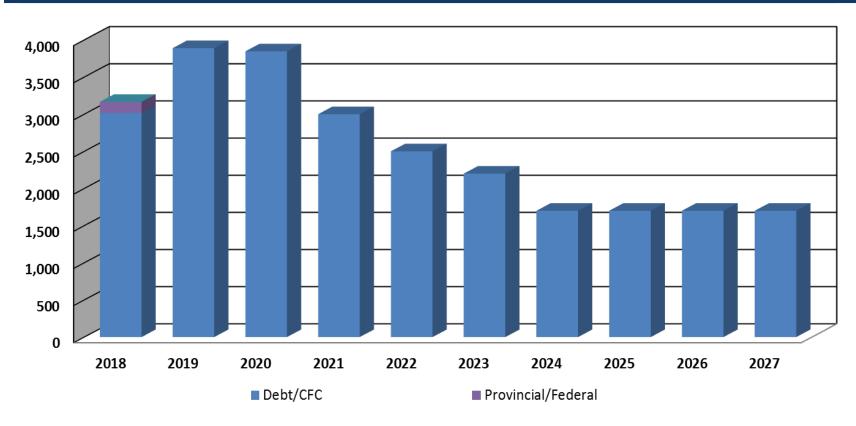
2018 - 2027 Preliminary Capital Budget & Plan by Project Category



		2018 - 2027 Preliminary Capital Budget and Plan by Category												
(\$000s)	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027				
Legislated	145.0	-	-	-	-	-	-	-	-	-				
State of Good Repair (SOGR)	1869.0	1058.0	1780.0	1674.0	825.0	152.0	0.0	0.0	267.0	349.0				
Service Improvements	1149.0	2831.0	2066.0	1326.0	1675.0	2048.0	1700.0	1700.0	1433.0	1351.0				



2018 - 2027 Preliminary Capital Budget and Plan by Funding Source



	2018 - 2027 Preliminary Capital Budget and Plan by Funding Source												
(\$000s)	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027			
Debt/CFC	3018.0	3889.0	3846.0	3000.0	2500.0	2200.0	1700.0	1700.0	1700.0	1700.0			
Provincial/Federal	145.0												



Incremental Operating Impact of Capital

Net Expenditures (\$000s)	2018 Prelim. Budget		2019 Plan		2020 Plan		2021 Plan		2022 Plan		2023 - 2027 Plan		2018 - 2027 Total	
	\$	Position	\$	Position	\$	Position	\$	Position	\$	Position	\$	Position	\$	Position
Previously Approved Projects														
CDC Wireless Rollout	(17.5)												(17.5)	0.0
Healthy Environment Inspection System (Mobile)	(7.0)												(7.0)	0.0
Dental & Oral Health Information Systems					21.8		(31.5)	(0.5)					(9.7)	(0.5)
Community Health Information System											(40.0)	(1.5)	(40.0)	(1.5)
Sub-Total	(24.4)	0.0	0.0	0.0	21.8	0.0	(31.5)	(0.5)	0.0	0.0	(40.0)	(1.5)	(74.1)	(2.0)
New Projects 2018														
Electronic Medical Records System					35.0		(45.0)	(2.0)					(10.0)	(2.0)
DataMart Data Warehouse							(43.5)	(1.5)					(43.5)	(1.5)
Sub-Total	0.0	0.0	0.0	0.0	35.0	0.0	(88.5)	(3.5)	0.0	0.0	0.0	0.0	(53.5)	(3.5)
Total	(24.4)	0.0	0.0	0.0	56.8	0.0	(120.0)	(4.0)	0.0	0.0	(40.0)	(1.5)	(127.6)	(5.5)

Key Points:

• The Dental and Oral Health Information System project estimated ongoing annual cloud solution licensing and x-ray related costs will be \$0.087 million gross and \$0.022 million net beginning 2020. These costs will increase by \$0.003 million gross annually effective 2024. This project is expected to generate operational efficiencies of \$0.126 million gross and \$0.032 million net and a reduction of 0.5 position effective 2021.

Incremental Operating Impact of Capital

Key Points:

- Community Health Information System project will be completed in 2019 and is forecasted to provide operational efficiencies of \$0.160 million gross and \$0.040 million net effective 2023.
- Electronic Medical Records Phase 3 project will end in 2020. The
 estimated ongoing annual cloud solution licensing costs are expected
 to be \$0.140 million gross and \$0.035 million net. The project is
 expected to generate operational efficiencies of \$0.180 million gross
 and \$0.045 million net after full implementation in 2021 and a reduction
 of 2 positions.
- Datamart Data Warehouse Phase 3 project will be completed in 2020. The estimated ongoing sustainment costs of \$0.058 million gross and \$0.015 million net beginning 2021. The financial and operational efficiencies to be realized from this project total \$0.232 million gross and \$0.044 million net and a reduction of 1.5 positions.

Unfunded Capital Projects

Project Name (\$000s)	Project Description	Total Project Cost	Non-Debt Funding	Debt Required	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027
,	Develop a strategy to implement corporate document and video collaboration solutions	413		413		413								
	Implement corporate document and video collaboration solutions within Public Health.	1,150		1,150		345	805							
	Implement corporate document and video collaboration solutions to facilitate sharing of information with the public and external partners	1,572		1,572			485	477	610					
	Implement system to support venue scheduling of immunization clinics; and scheduling of agency nurses and volunteers at clinics.	1,173		1,173			330	843						
Total		4,308	-	4,308	-	758	1,620	1,320	610	-	-	-	-	-

Community Collaboration Strategy

This project will document the business requirements, investigate possible options, develop a strategy and define the scope for implementing community collaboration solutions at TPH, in conjunction with other interested Divisions.



Unfunded Capital Projects

Collaboration (Internal Tools)

This project will implement Sharepoint within TPH to facilitate knowledge sharing and team based productivity through collaborating around documents and ideas, and enabling real time employee interactions from any City location

Community Collaboration

This project will deliver an enhanced information sharing portal that provides secure two-way communication with the public, partner agencies and businesses in order to improve information sharing of data sharing with service delivery partners and general interaction with the public.

Venue and Agency Scheduling

This project will deliver a scheduling solution that will allow for sharing of data with the corporate Time and Attendance and Payroll solutions. This solution will facilitate efficient and effective use of the program's work force by managing fee for service agency resource allocation more appropriately and scheduling venues more efficiently. It will enable the program staff to better respond to: changes in school clinic schedules; staffing outbreaks; emergency situations; and scheduling for community influenza clinics.

TORONTO



TORONTO

TORONTO

TORONTO

Interpretation of the Control

TORONTO

TORONTO

TORONTO

TORONTO



Interpretation of the Control