

Ontario Budget 2019: Impacts on Toronto Public Health

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- 35 health units
- 3 governance models:
- Responsibilities and Obligations:
 - Ontario Public Health Standards
 - Health Protection and Promotion Act
 - 40 other provincial Acts

- Integration with the municipality or city and the day to day lives of our population
- Strong links with local health care professionals & health care institutions
- Strong links to school boards
- Leverage local community agencies and partnerships

City Council Role (City of Toronto Act)



- Toronto has a semi-autonomous Board of Health
- appoints Board of Health Members
- appoints Medical Officer of Health
- approves public health budget
- provides public health staff

- Statutory authority to address health hazards and communicable disease threats
- Health advisor to Board of Health and City Council
- Appointment approved by the provincial Minister of Health and Long-Term Care and Chief Medical Officer of Health for Ontario
- Responsible for protecting the health of the people of Toronto



How Toronto's chief medical officer became the people's doctor

TORONTO PUBLIC HEALTH ONE TORONTO. ONE HEALTH.



MISSION: A HEALTHY CITY FOR ALL

IMPROVING THE HEALTH STATUS OF
THE WHOLE POPULATION



PREPARING AND RESPONDING TO
EMERGING PUBLIC HEALTH THREATS



REDUCING HEALTH INEQUITIES



CONTRIBUTING TO A SUSTAINABLE
HEALTH SYSTEM



- Preventing the spread of disease, promoting healthy living and advocating for conditions that improve health for Toronto residents and reduce health inequities
- Using epidemiological methods to monitor the health status of the population in order to respond to on-going and emerging health needs and threats
- Developing and implementing practices and policies that enhance the health of individuals, communities and the entire city
- Advising City Council on health issues for Toronto

TORONTO'S AVERAGE LIFE EXPECTANCY THROUGH THE YEARS



RETURN ON INVESTMENT

EVERY \$1 INVESTED IN:



IMMUNIZING CHILDREN

SAVES
\$16

IN HEALTH CARE COSTS

MEASLES



OVERALL MEASLES CASES
IN TORONTO.*

*Before 2 dose schedule.



TOBACCO PREVENTION

SAVES
\$20

IN FUTURE HEALTH CARE

SMOKING PREVALENCE



OVERALL SMOKING PREVALENCE
IN TORONTO.*

*Percentage Reporting Current Cigarette Smoking, Torontonians Aged 18+.

- Provide service in 800 publicly funded schools reaching over 344,000 students
- Vaccinate 53,000 grade 7 students
- 224,000 children receive dental screening
- 66,000 screenings to identify children & families at risk for poor outcomes related to pregnancy, birth or infant & child development
- Respond to 80,000 inquiries to Toronto Health Connection

- Investigate 50,000 cases/contacts & 300 outbreaks of communicable disease
- 25,000 Directly Observed Therapy staff visits to TB patients
- 32,500 food premise inspections
- Work with 250 local agencies to track & report on deaths of people experiencing homelessness
- Established and maintain the Toronto Overdose Information System

Provincial Budget 2019: Provincial Changes to Public Health

Direct Impact:

- Adjusting provincial-municipal cost-sharing of public health funding
- Establishing 10 regional public health entities and 10 new regional boards of health with one common governance model by 2020-2021
- Projecting annual savings of **\$200M** by 2021-2022 through regionalization and governance changes to public health units

- Ministry of Health and Long Term Care public health budget for the province is approximately **\$750M**
- Provincial/Municipal cost shared funding formula changing for Toronto **from 75%/25% to:**
 - 2019/2020: **60%** provincial/**40%** municipal (including 100% provincial MOHLTC funding)
 - 2020/2021: **60%** provincial/**40%** municipal
 - 2021/2022: **50%** provincial/**50%** municipal

- The impact of the change is a \$64.9 million reduction in provincial funding.
- The change to the funding formula would require an additional \$25 million (or 58.5%) increase in the City of Toronto's contribution to maintain the existing Toronto Public Health Budget.
- All calculations are based on the verbal information provided to date by the Province to the City of Toronto.

1. Ensure there is one public health entity for the City of Toronto based on municipal boundaries
2. Maintain and enhance public health's relationships with the municipal sector and community partners and organize public health resources and services to reflect local needs
3. Locally focused with local representation
4. Accountability and oversight are best determined by a model of governance that reflects the population's health needs and the community where they live
5. Maintain current provincial investment in public health