# RE: EX2.5k Toronto Public Health

2019 Requested Operating Budget and 2019 - 2028 Requested Capital Budget & Plan

**Board of Health** 



November 19, 2018



**Agency Overview** 

2019 Operating Budget

2019-28 Capital Budget and Plan







# **Agency Overview**





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



**M Toronto**Public Health











# **EVERY \$1 INVESTED IN:**



**IMMUNIZING CHILDREN** 

**MEASLES** 

**SAVES** 

\$16

IN HEALTH CARE COSTS



1995

2017

OVERALL MEASLES CASES IN TORONTO.\*

\*Before 2 dose schedule



**TOBACCO PREVENTION** 

**SAVES** 

\$20

IN FUTURE HEALTH CARE



2001

2016

OVERALL SMOKING PREVALENCE IN TORONTO.\*

\*Percentage Reporting Current Cigarette Smoking, Torontonians Aged 18-





### **Priority Direction**

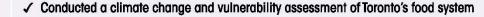
### Key Service Accomplishments

#### Serve the public health needs of Toronto's diverse communities



- Completed over 73,800 screens (hearing, developmental, communications, nutrition, prenatal, postpartum depression and parenting) to identify individuals at risk for adverse birth outcomes and to identify children at risk for adverse child development outcomes
- ✓ Supported 602 school communities to provide 37,660,348 meals to 200,321 children and youth, with municipal funding for student nutrition programs
- ✓ Completed 157,404 assessments of immunization records in public schools resulting in a compliance rate of over 95%

# Champion healthy public policy



✓ Collaborated with Shelter Support and Housing Administration on extreme hot and cold weather responses for Toronto's most vulnerable

# Anticipate & respond to emerging public health threats



#### Responded to the opioid overdose crisis:

- ✓ Provided 2,776 Naloxone kits to our clients between January 1 and August 31, 2018
- ✓ Contracted with 49 community agencies to distribute Naxolone
- ✓ Provided Supervised Injection Services to 21,175 visitors from August 2017 to August 2018

# Lead innovation in public health practice



Working with SSHA and the Chief Information Officer to use Artificial Intelligence to move from descriptive to predictive analytics and ultimately use our data to:

- ✓ Predict the needs of our clients to inform the development of new shelters, services and housing;
- √ Identify the factors that drive homelessness and what contributes to keeping people housed;
- ✓ Identify and close gaps in knowledge about homelessness

Invested in an Electronic Medical Records system for Public Health's harm reduction program and sexual health clinics





2019 REQUESTED OPERATING BUDGET SUBMISSION GROSS (\$000)



2019 REQUESTED OPERATING BUDGET SUBMISSION NET (\$000)



TPH MET THE CITY 2019 BUDGET TARGET GUIDELINE:



WITH REDUCTION OPTIONS
TOTALLING: \$267.4 THOUSAND NET

BOARD OF HEALTH BUDGET COMMITTEE HAS
RECOMMENDED TWO EFFICIENCY REDUCTION OPTIONS
TOTALLING \$38.1 THOUSAND NET



REMAINING REDUCTION OPTIONS OF
\$229.3 THOUSAND NET SUBMITTED FOR
BOARD OF HEALTH CONSIDERATION
Public Health

#### CHRONIC DISEASE & INJURIES:

- Prevent and reduce the burden of chronic diseases of public health importance, preventable injuries and substance use, and improve well-being.
- Deliver health promotion and prevention services focusing on Cancer Prevention and Early Detection, Nutrition Promotion, Physical Activity Promotion, Tobacco Use Prevention and Cessation, and Injury/Substance Misuse Prevention.

#### **FAMILY HEALTH:**

- Enable individuals and families to achieve optimal preconception, pregnancy, newborn, child, youth, parental, and family health and development potential.
- Support proper oral health by providing screening of school aged children, preventative dental services, basic dental treatment for low income children and seniors, administration of Children in Need of Treatment (CINOT) and Ontario Works, and dental services for seniors in collective living centers.

#### **EMERGENCY PREPAREDNESS:**

 Ensure a consistent and effective response to public health emergencies with public health impacts.

#### **ENVIRONMENTAL HEALTH:**

- Prevent and reduce the burden of illness from health hazards in the built and natural environments, including the impacts of a changing climate.
- Promote food safety including inspection of over 18,000 food premises to ensure compliance with provincial food safety standards
- Monitor drinking water and recreational water quality, and take action in the event of adverse water quality conditions.
- Respond to extreme weather, West Nile virus, rabies and Lyme disease.

#### INFECTIOUS DISEASES PREVENTION AND CONTROL:

- Prevent and reduce the burden of communicable and infectious diseases of public health importance.
- Conduct disease surveillance; provide immunizations, health education and counselling, clinical services, inspection services; and respond to reports of communicable diseases and outbreaks in the community and institutions

#### **PUBLIC HEALTH FOUNDATIONS:**

- Ensure public health programs are informed by the population's health status; and programs are evidence-informed
- Emphasize continuous quality improvement



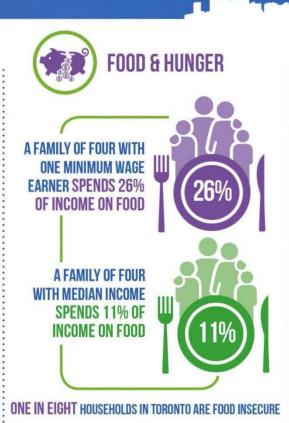


ALMOST ONE QUARTER
(22%) OF RENTER
HOUSEHOLDS IN
TORONTO SPEND MORE
THAN 50% OF THEIR
INCOME ON SHELTER

HOUSEHOLDS SHOULD SPEND UNDER 30% OF BEFORE TAX INCOME ON SHELTER COSTS 30%

**55**%

**50**%€



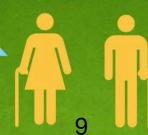


- Socioeconomically disadvantaged residents are living in areas with fewer opportunities for physical activity
- Changing the built environment to support active living is a great equalizer – provides mobility, transit and walking opportunities regardless of ability or socio-economic status



### **SENIORS**

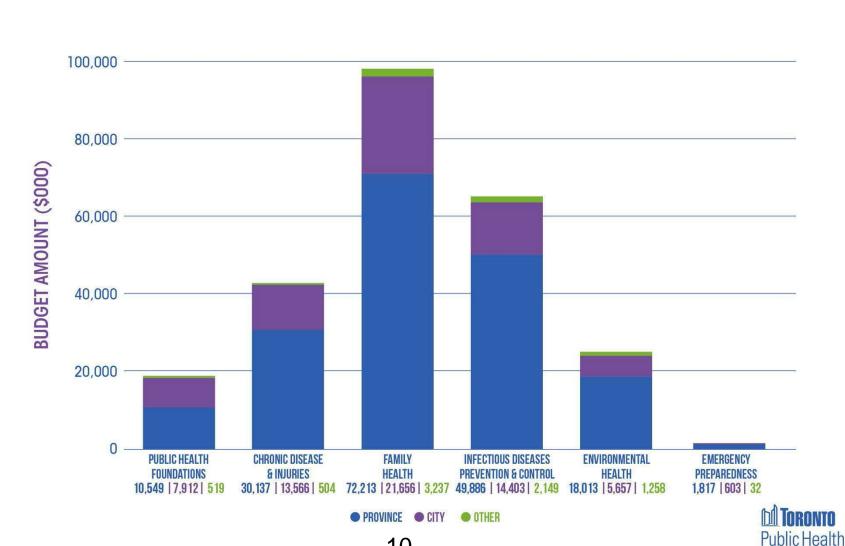
THE NUMBER OF SENIORS IN TORONTO IS PROJECTED TO INCREASE BY OVER 55% IN THE NEXT 20 YEARS



SOME CONDITIONS ARE INCREASING OR ARE EXPECTED TO INCREASE AMONG SENIORS IN TORONTO INCLUDING: DIABETES, DEMENTIA, INJURY (EMERGENCY DEPARTMENT VISITS AND HOSPITALIZATIONS)



# BUDGET 20 SERV



# TORONTO PUBLIC HEALTH



2019 NEW AND ENHANCED BUDGET REQUEST OF \$2,585.5K GROSS, \$1,317.6K NEWT OR 2.07% NET

VIBRANT & INCLUSIVE (\$0.150M Gross, \$0.038M Net)		Toronto Urban Health Fund Enhancement - Year 5 of 5 (\$0.150M gross, \$0.038M net)										
FOOD & HUNGER (\$0.925M Gross, \$0.903M Net)	to Maintain Mu	: Nutrition Program nicipal Contribution at 2 DM gross, \$0.300M net)	20%	Student Nutrition Program for Independent Schools (\$0.625M gross, \$0.603M net)								
HOUSING & HEALTH  (\$1.511M Gross, \$0.378M Net, 14 positions)	Community Outreach for Toronto Public Health Harm Reduction Clients (\$0.710M gross, \$0.178M net, 7 positions)	Infection Prevention and Control-Shelters and Respites (\$0.238M gross, \$0.060M net, 2 positions)	Collection of Health Data in Homeless Population (\$0.260Mgross, \$0.065Mnet, 2 positions)	Communications Strategy (\$0.100M gross, \$0.025M net, 1 position)	Program Modernization (\$0.203M gross, \$0.051M net, 2 positions)							









## Key Service Issues & Challenges for 2019 and Beyond



✓ Toronto Public Health delivers programs and services that meet our mandate to address the public's health at a population level, support fundamental needs of an **increasingly diverse population** and design services for the unique needs of vulnerable populations who face glaring health inequities.

Priority Direction 1: Serve the public health needs of Toronto's diverse communities

✓ From prenatal programs and services to supporting our seniors population, Toronto Public Health's health promotions programs and services strive to ensure individuals start life in good health and remain healthy. Health promotion and protection involves complex systems and requires a wide variety of subject matter expertise. It is an ongoing challenge to identify and collaborate with the right stakeholders and partners to achieve the best health outcome for the population we serve.

Priority Direction 2: Champion healthy public policy



## Key Service Issues & Challenges for 2019 and Beyond



✓ **Data and evidence** is essential for Toronto Public Health to determine how best to identify and respond to public health threats and remain current efforts to optimize and promote public health. The challenge is in obtaining and analyzing the right data with a local focus. The operating impact of introducing information technology, particularly systems mandated by the province such as Panorama.

<u>Priority Direction 3: Anticipate and response to emerging public health threats</u> and <u>Priority Direction 4: Lead innovation in public health practice</u>

- Toronto Public Health must enhance our use of technology to deliver programs, services and information to all stakeholders. Technology will
  - Increase productivity of staff, the reach of programs and services, and the effectiveness of programs and services by increasing the use of mobile technology
  - Improve the public's access programs, services, and information online at their convenience
  - Inform decision making around programs, services, and operational issues by improving what and how information is collected, and enhancing our analytic capabilities
  - Improve collaboration with our partners and stakeholders to enhance programs for clients who use a range of services

<u>Priority Direction 4: Lead innovation in public health practice</u> and <u>Priority Direction 5: Be a healthy workplace</u>



### Key Service Issues & Challenges for 2019 and Beyond



- ✓ Changes in legislation, regulation, and contractual obligations continue to introduce significant
  administrative and financial pressures, as well as, presents significant operational challenges to respond
  to the timeframes established for the implementation deadlines. Examples of recent changes include
  - Updated Ontario Public Health Standards which introduced new or modified protocols, interventions, program delivery standards and additional reporting requirements to the province
  - Changes to the Smoke Free Ontario Act and Cannabis Act related to enforcement
  - Changes in legislation such as the Immunization of School Public Act to increase reporting for all vaccinations administered
  - Provincial review of Supervised Injection Sites and Overdose Prevention Sites
  - Financial implications of provincial and federal workforce related legislation



### **Service Objectives & Key Priority Actions**



# Service Objective: Serve the public health needs of Toronto's diverse communities Key Priority Actions:

- ✓ Work with City, community and institutional partners to continue to expedite implementation of recommendations in the Toronto Overdose Action Plan
- Monitor and evaluate ongoing supervised injection services, naloxone distribution efforts, and overdose training to address the ongoing opioid crisis
- ✓ Collaborate with external agencies to create social and physical environments to support health
  and to engage priority populations in support of a Healthy City of All
- ✓ Use information from research and other jurisdictions to identify policy and program options that can be used to create positive social and physical conditions that improve health

### Service Objective: Champion healthy public policy

**Key Priority Actions:** 

- ✓ Identify strategic partnerships to improve/increase physical activity levels, healthy eating, reduce smoking and the heavy use of alcohol for the prevention of chronic diseases, substance misuse and avoidable injuries
- ✓ Implement best practices to expand reach of Family Health services, including expansion of Nurse Family Partnership, positive health communication campaigns, and collaborate on preterm research project
- ✓ Collaborate on a pilot project with the Ontario HIV Treatment Network (OHTN) to link patients to HIV care and promote treatment as prevention.
- ✓ Integrate the Child Friendly Policy Framework across City Divisions to support more integral consideration of policy and program impacts on child health



### **Service Objectives & Key Priority Actions**



# Service Objective: Anticipate and response to emerging public health threats and priority direction Key Priority Actions:

- ✓ Collaborate with Toronto City divisions to ensure effective coordination and implementation of municipal actions related to legalization of non-medical cannabis
- ✓ Use evidence to identify policy options that will create positive social and physical conditions that improve long term health outcomes
- ✓ Build new and strengthen existing academic and community partnerships through funding and inkind resources, including implementing formal mechanisms to work with academic partners, to leverage reach of policy, research, and advocacy initiatives

### Service Objective: Lead innovation in public health practice

- Key Priority Actions:
  - ✓ Develop online presentations to support the roll-out of the new Infection Prevention and Control (IPAC) Guidance Document for shelters and temporary shelter settings to attempt to meet the demand for IPAC education and develop policies and procedures for outbreak response in shelters
  - ✓ Identify and work with strategic partnerships that have a significant impact on improving social determinants of health, preventing chronic diseases, and reducing substance misuse and preventable injuries
  - ✓ Work with the province and stakeholders on the seamless integration of electronic health records to enable health care provider reporting



### **Modernization, Transformation, Innovation Initiatives**



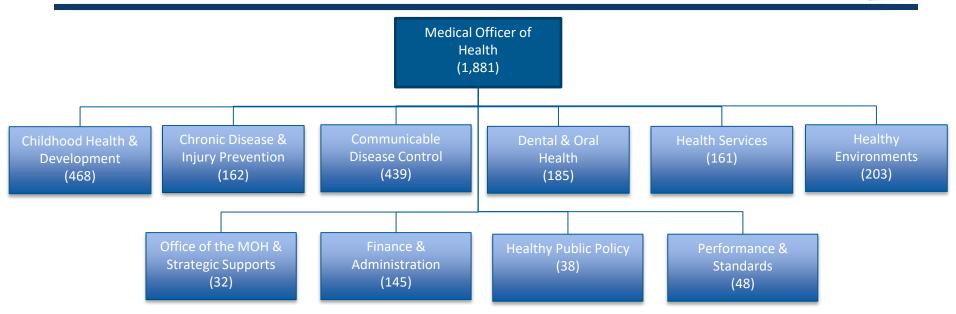
#### **Initiatives**

- ✓ No specific services or initiatives have been identified as part of the Budget 2019 process to address the business modernization, transformation or innovation initiatives requirement; however the following activities are being undertaken by Toronto Public Health:
  - Currently undergoing an organizational review whose implementation could commence in early 2019;
  - In 2019, a series of program reviews pending the completion and release of a 2018
     Comprehensive Health Status Report; and
  - Addressing changes in the Ontario Public Health Standards
- ✓ Toronto Public Health anticipates that the above activities, in addition to the implementation of our projects in the 2019-2028 Capital Plan, will identify business modernization transformation and innovation initiatives for future budget cycles.



# 2019 Organizational Chart

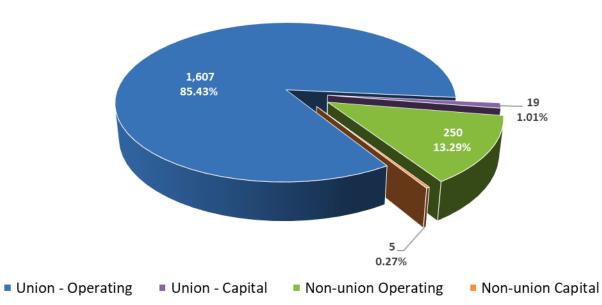




# **2019 Full Time Equivalent**

4. 1 .
41 11
180
4 18
190

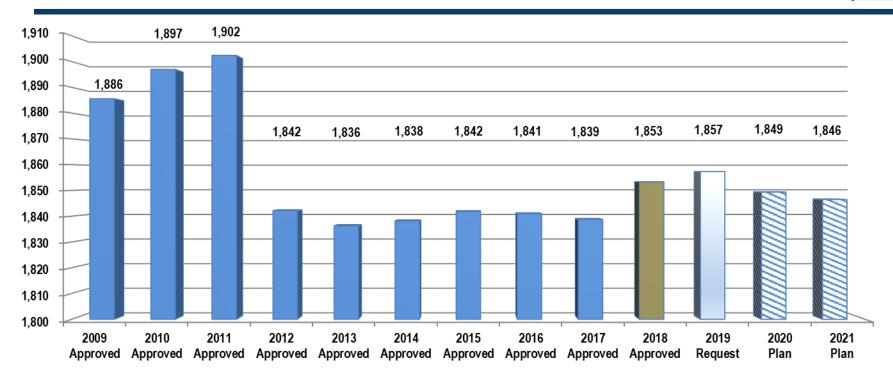
Budget	Category	Senior Management	Management with Direct Reports		Union	Total
Operating	Permanent	1	194	54	1,587	1,836
Operating	Temporary	-	1	-	20	21
Conital	Permanent	-	-	-	-	-
Capital	Temporary	-	4	1	19	24
Cubtotal	Permanent	1	194	54	1,587	1,836
Subtotal	Temporary	-	5	1	39	45
Total		1	199	55	1,626	1,881
% of Tota	ıl	0.05%	10.58%	2.92%	86.44%	





# **Staffing Trend (Excludes Capital Positions)**





- 2019 Position Changes is an increase of 4 FTEs as follows:
  - 14 increase for New & Enhanced; offset by
  - 4 decrease for Recommended Efficiencies and Minor Service Reduction, and
  - 6 decrease for base changes primarily related to reduction to 100% provincially funded programs



# 2019 Requested Operating Budget vs 2018



Agency Name Toronto Public Health	2018 Budget	2019 Requested Base Budget (incl. Efficiencies & Revenue Changes)	Change 2018 ( (Unc	Over	2019 Service Changes	2019 Requested Base	2018	e from Over der)	2019 New/ Enhanced	2019 Total Request	Change 2018 C (Und	Over
(In \$000s)	Net	Net	\$	%	Net	Net	\$	%	Net	Net	\$	%
Chronic Diseases & Injuries	13,556.5	13,565.7	9.2	0.1%		13,565.7	9.2	0.1%	332.7	13,898.4	342.0	2.5%
Emergency Preparedness	580.7	603.4	22.7	3.9%		603.4	22.7	3.9%	4.9	608.3	27.5	4.7%
Environmental Health	5,641.9	5,657.1	15.2	0.3%		5,657.1	15.2	0.3%	15.3	5,672.4	30.5	0.5%
Family Health	21,831.8	21,885.4	53.6	0.2%	(229.3)	21,656.2	(175.7)	(0.8%)	319.9	21,976.1	144.2	0.7%
Infectious Diseases	14,289.1	14,402.5	113.4	0.8%		14,402.5	113.4	0.8%	272.0	14,674.5	385.4	2.7%
Public Health Foundations	7,896.7	7,911.8	15.2	0.2%		7,911.8	15.2	0.2%	372.8	8,284.7	388.0	4.9%
Total	63,796.7	64,026.0	229.3	0.4%	(229.3)	63,796.7	(0.0)	(0.0%)	1,317.6	65,114.3	1,317.6	2.1%

- TPH met the City issued 2019 Budget Target guidelines
- New and Enhanced 2019 Budget request of \$1,317.6K net, 2.07% net includes
  - \$377.6K net for Council Direct Services
  - \$940.0K net for Staff Initiative Services



# 2019 Requested Operating Budget vs 2018



	2018 Budget	2019 Base Adjustment	2019 Efficiency Savings / Minor Service Changes	2019 Council Directed New and Enhanced Services	2019 Staff Initiated New and Enhanced Services	2019 Requested Operating Budget Submission	Change fro Budge	
(\$000s)	\$	\$	\$	\$	\$	\$	\$	%
Gross Exp.	254,864.8	(370.8)	(382.7)	1,510.5	1,075.0	256,696.8	1,832.0	0.7
Revenue	191,068.1	(638.2)	(115.3)	1,132.9	135.0	191,582.5	514.4	0.3
Net Exp.	63,796.7	267.4	(267.4)	377.6	940.0	65,114.3	1,317.6	2.1
Positions	1,877.35	(6.00)	(4.00)	14.00	0.00	1,881.35	4.00	0.2

- The \$267.4 thousand net 2019 Base Adjustment is predominantly related to cost drivers such as salary and benefits.
- The 2019 Requested Operating Budget is \$1,317.6 thousand net or 2.1% higher than the 2018 Budget to address:
  - \$377.6K net to further our efforts around Housing and Health
  - \$902.5K net to continue with our work around Food and Hunger
  - \$37.5K net for initiatives around promoting a Vibrant and Inclusive city



# 2019 Requested Operating Budget vs 2018



	2018 Opera	ting Budget	2019 Re Operating Submi	_	Year over Year Increase / (Decrease)				
(\$000s)	Gross	Net	et Gross Ne		% Gross change		Net	% change	
Service Area:									
Foundational Standard	19,604.0	7,896.7	19,558.8	8,284.7	(45.2)	(0.2%)	388.0	4.9%	
Chronic Diseases & Injuries	44,611.1	13,556.5	44,652.3	13,898.4	41.2	0.1%	341.9	2.5%	
Family Health	97,288.5	21,831.8	97,499.7	21,976.1	211.2	0.2%	144.3	0.7%	
Infectious Diseases Prevention and Control	65,989.4	14,289.1	67,525.1	14,674.5	1,535.7	2.3%	385.4	2.7%	
Environmental Health	24,983.5	5,641.9	24,989.0	5,672.4	5.5	0.0%	30.5	0.5%	
Public Health Emergency Preparedness	2,388.3	580.7	2,471.9	608.2	83.6	3.5%	27.5	4.7%	
TOTAL	254,864.8	63,796.7	256,696.8	65,114.3	1,832.0	0.7%	1,317.6	2.1%	

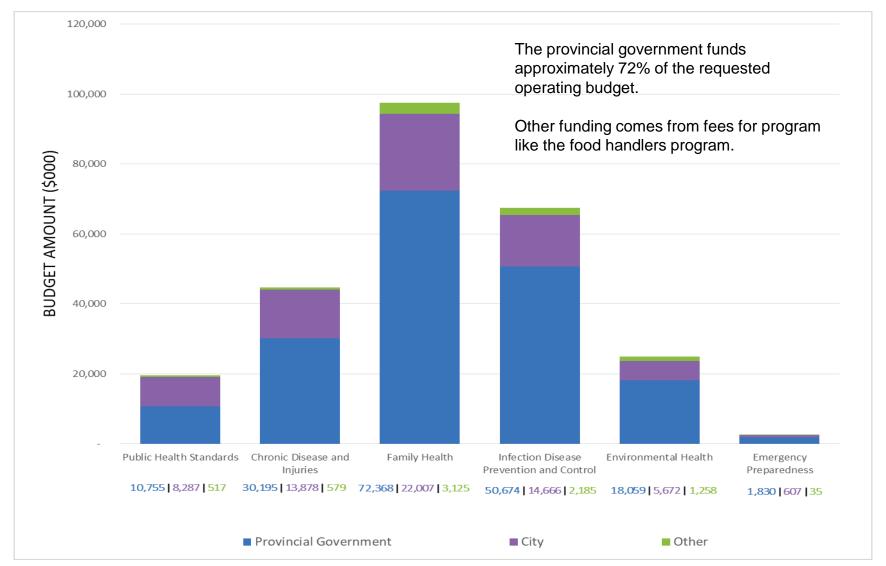
### **Key Points:**

The \$1,317.6 thousand net increase supports programs and services in all of TPH's service areas.



# **2019 Requested Operating Budget By Service and Funding Source**





	То	tal
(\$000s)	\$	Position
Expenditure Changes		
Prior Year Impacts	(420.5)	(2.0)
Delivery of Capital Projects	0.0	0.0
Economic Factors	2.7	0.0
Salary and Benefits	657.9	0.0
Other Base Expenditure Changes	51.5	(4.0)
Total Expenditure Changes	291.6	(6.0)
Revenue Changes		
Base Revenue Changes	(24.2)	
Total Revenue Changes	(24.2)	0.0
Net Expenditure Changes	267.4	(6.0)

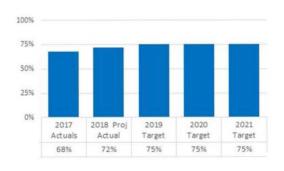
- The largest cost driver is Salary and Benefits which reflects that fact that TPH's budget is predominately composed of salaries and benefit.
- Other Base Expenditure Changes are predominately related to consumer price index increase in contracted services.



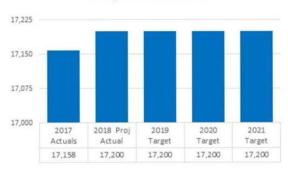
### **Key Service Performance Measures**



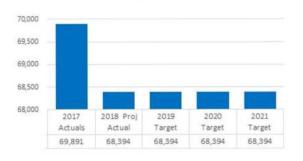
Percentage (%) of higher needs elementary/middle schools, as indicated by Toronto school boards, receiving Chronic Disease & Injury Prevention services



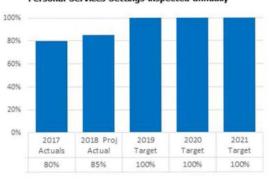
Number # of children 17 years of age and younger from low income families who receive dental care through TPH dental clinics



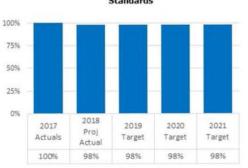
Number (#) of screens completed (including hearing, developmental, communications, nutrition, prenatal, perinatal depression and parenting screens) to identify individuals at risk for adverse birth outcomes and/or to identify children at risk for adverse



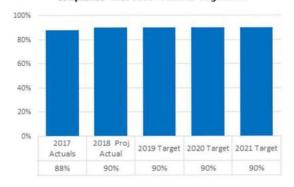
Percentage (%) of known Critical and Semi-critical Personal Services Settings inspected annually



Percentage (%) of Active TB Cases completing adequate treatment according to the Canadian TB Standards



Percentage (%) of High Risk food premises in compliance with Food Premises Regulation







# Capital Budget and Plan





























### Key Capital Issues & Challenges for 2019 and Beyond



- ✓ Increased demand by public and staff to be able to access services and information via the Internet and mobile devices.
- Providing reliable client/patient information and management information for service and decisionmaking in an accurate, easy and timely manner.
- ✓ In the next ten years a number of critical business systems will reach their end of life due to technical obsolescence and/or their inability to satisfy new legislation/business requirements.
- ✓ There is a heavy reliance on in-person meetings between staff, community partners, the public, and
  businesses due to the lack of available electronic tools to collaborate over the web/corporate network
  from any location, at any-time.
- ✓ Leveraging Smart City technologies/solutions that aim at solving significant and complex problems being experienced by a city's residents to advance TPH mission..





### **Goal/Objective: Improve Decision-making Support**

Information technology has a key role in supporting TPH's objectives of service excellence and accountability.

### **Priority Action:**

TPH plans to improve access to quality information in business systems and data warehouses; and by strengthening analytical capabilities through the use of various analytical tools.

#### **Supporting Projects:**

- Datamart Data Warehouse Phase 3
- Datamart Data Warehouse Phase 4
- Geographic Information Enablement
- Common Geographical Interface (CGI)
- Healthy Smart Cities





### **Goal/Objective: Improve Workforce Capabilities**

In support of TPH's commitment to excellence by ensuring continuous improvement in organizational performance, TPH strives to provide tools and systems to enhance performance and provide high quality service to clients.

### **Priority Action:**

Workforce capabilities will be enhanced by: improving knowledge sharing and team based productivity, and enabling staff to effectively deliver services from alternate work locations.

### **Supporting Projects:**

- Community Collaboration Seed
- Community Collaboration Implementation
- Mobile Enablement



### **Goal/Objective: Improve Business Processes**

Improve business processes and enhance service to clients.

### **Priority Action(s):**

TPH will capitalize on opportunities to automate work through: increasing the use of common business systems and process automation; simplification and redesign of processes; and system integration.

### **Supporting Project(s):**

- Dental and Oral Health Information System
- Electronic Medical Records Phase 3
- Correspondence and Communication Tracking Seed
- Correspondence and Communication Tracking Implementation
- Socio-Demographic Data Collection and Reporting
- Call Centre Revitalization
- Customer Relationship Case Management





### Goal/Objective: Improve Information Technology Services

As a strategic enabler in the delivery of TPH services, it is critical that information technology services, systems and applications are maintained and continually improved.

### **Priority Action:**

TPH plans to improve workforce skills, abilities, and client relationship management; stakeholder communication; the management of risk; information technology processes and service delivery; and information technology for continued optimal use.

### **Supporting Projects:**

- Early Abilities Information System Phase 1
- Early Abilities Information System Implementation
- Inspection Management Phase 1
- Inspection Management Implementation
- Community Health Information System
- Reporting Environment Enhancement





### **Goal/Objective: Improve Access to Government services**

Information technology plays an important role in meeting the public's demand for access to TPH information and services.

### **Priority Action:**

TPH plans to improve the use of Social Media channels and mobile applications and to provide additional non classroom based learning opportunities for Toronto citizens.

### **Supporting Projects:**

- Mobile Enablement
- Public eLearning
- Public Notifications & Advisories
- Chemical Tracking Information System (ChemTRAC)

# Major Capital Projects Included in the 10-Year Plan

(\$ Millions)	2019	2020	2021	2022	2023	Total 2019- 2023	2024	2025	2026	2027	2028	Total 2019- 2028
Improve Decision Making Support						2023						2028
Datamart Data Warehouse - Phase 3 & 4	1.005	0.905	0.615	0.462		2.987						2.987
Geographic Information Enablement					0.190		0.265					0.455
Common Geographical Interface (CGI)					0.557	0.557	0.344					0.901
Healthy Smart Cities											0.602	0.602
Subtotal	1.005	0.905	0.615	0.462	0.747	3.734	0.609				0.602	4.945
Improve Workforce Capabilities												
Community Collaboration - Seed &												
Implementation	0.319	0.101	0.474	0.462	0.610	1.966						1.966
Mobile Enablement					0.391		0.378	0.369				1.138
Subtotal	0.319	0.101	0.474	0.462	1.001	2.357		0.369				3.104
Improve Business Processes												
Dental and Oral Health Information System	0.250					0.250						0.250
Electronic Medical Records - Phase 3	1.271	0.273				1.544						1.544
Correspondence and Communication												
Tracking System - Seed & Implementation	0.118	0.028	0.165	0.488		0.799						0.799
Socio-Demographic Data Collection and												
Reporting							0.348	0.721	0.779			1.848
Call Centre Revitalization									0.414	0.400		0.814
Customer Relationship Case Management									0.507	0.676	0.275	1.458
Subtotal	1.639	0.301	0.165	0.488		2.593	0.348	0.721	1.700	1.076	0.275	6.713
Improve IT Services												
Inspection Management - Phase 1 &												
Implementation	0.118	0.461	0.717	0.758	0.152	2.206						2.206
Early Abilities Information System - Phase 1 &												
Implementation	0.053	0.904	0.494			1.451						1.451
Community Health Information System	0.755		0.411			1.946						1.946
Reporting Environment Enhancement										0.267	0.349	0.616
Subtotal	0.926	2.145	1.622	0.758	0.152	5.603				0.267	0.349	6.219
Improve Access to Government Services												
Public eLearning							0.365	0.610				0.975
Public Notifications and Advisories										0.357	0.474	0.831
Chemical Tracking Information System												
(ChemTRAC)			0.124			1.148						1 1 1 0
Subtotal			0.124				0.365			0.357		RONTO
Total	3.889	3.846	3.000	2.500	2.200	15.435	1.700	1.700	1.700	1.700	1.700	20.300

# 2019 - 2028 Requested Capital Budget & Plan



Project Name (\$000s)	Description	2019 - 2028
Datamart Data Warehouse -	Extend analysis, metrics, and reporting capabilities to monitor program performance	1,451
Phase 3	to meet reporting requirements	
Datamart Data Warehouse -	Migrate integrated public health information environment database to corporate SAP	1,536
Phase 4	environment	
Geographical Information	Enhance capacity to display location based information geographically	455
Enablement		
Common Geographical	Implement solution to improve integration of data with mapping information	901
Interface (CGI)		
Healthy Smart Cities	Develop a strategy and multi-year plan to participate in Smart City initiatives and opportunities	602
		4,945
Community Collaboration -	Evaluate cloud based document sharing products to manage and share information	420
Seed	with external parties	
Community Collaboration -	Implement solution to manage and share information with external parties	1,546
Implementation		
Mobile Enablement	Provide mobile solutions to Dental and Oral Health and Communicable Disease	1,138
	Control professionals and the public	
		3,104
Dental and Oral Health	Implement a dental and oral health information system	250
Information System		
Electronic Medical Record -	Implement an Electronic Medical Record system to support case and contact manager	1,544
Phase 3		
Correspondence and	Evaluate workflow solutions that will automate the tracking of correspondence and	146
Communications Tracking - Seed	communications items received by the Medical Officer of Health (MOH)	
Correspondence and	Implement a workflow solution that will automate the tracking of correspondence and	653
Communications Tracking -	communications items received by the Medical Officer of Health (MOH)	
Implementation		

# 2019 - 2028 Requested Capital Budget & Plan (continued)

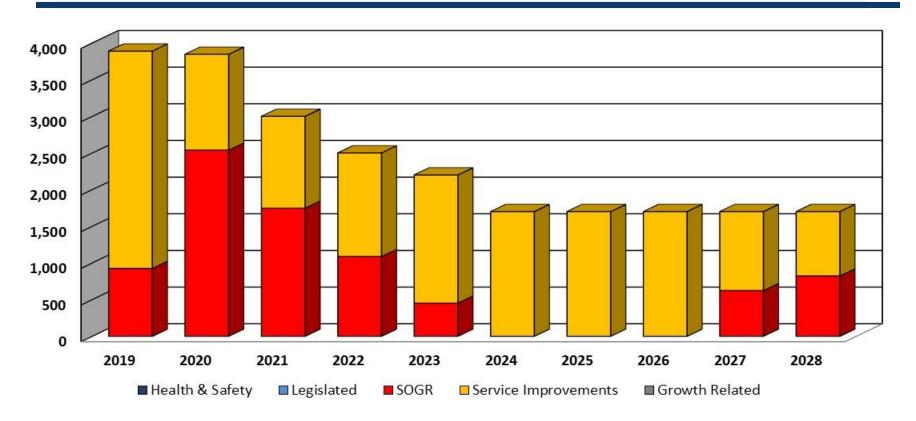


Project Name (\$000s)	Description	2019 - 2028
Socio-Demographic Data	Implement mechanisms to capture, analyze and report socio-demographic information	1,848
Collection and Reporting	about Public Health clients	
Call Centre Revitalization	Implement standard tools commonly used by call centres in various Public Health Call Centres	814
Customer Relationship Case Management	Implement solution to improve external customer experience	1,458
		6,713
Inspection Management - Phase 1	Evaluate solution options to replace Healthy Environments, Infection Control, and Vaccine Preventable Diseases (VPD) information systems to improve service decision making	118
Inspection Management - Implementation	Implement solution to replace Healthy Environments, Infection Control, and VPD information systems to improve service decision making	2,088
Early Abilities Information System - Phase 1	Perform required analysis in order to receive approval to implement a solution to replace the Early Abilities (EA) case management DANIC system	53
Early Abilities Information System - Implementation	Implement solution to replace the Early Abilities (EA) case management DANIC system	1,398
Community Health Information System	Enhance Toronto Community Health Information System	1,946
Reporting Environment Enhancement	Replace obsolete reporting technology utilized by Communicable Disease Control and Healthy Environments programs	616
		6,219
Public eLearning	Implement web based solutions to facilitate knowledge transfer and learning by the public	975
Public Notifications & Advisories	Implement solution to provide public with advisory information (including alerts) through the Web	831
Chemical Tracking Information System (ChemTRAC)	Replace the Chemical Tracking Information System	1,148
		2,954

Total 23,935

# 2019 - 2028 Requested Capital Budget & Plan by **Project Category**



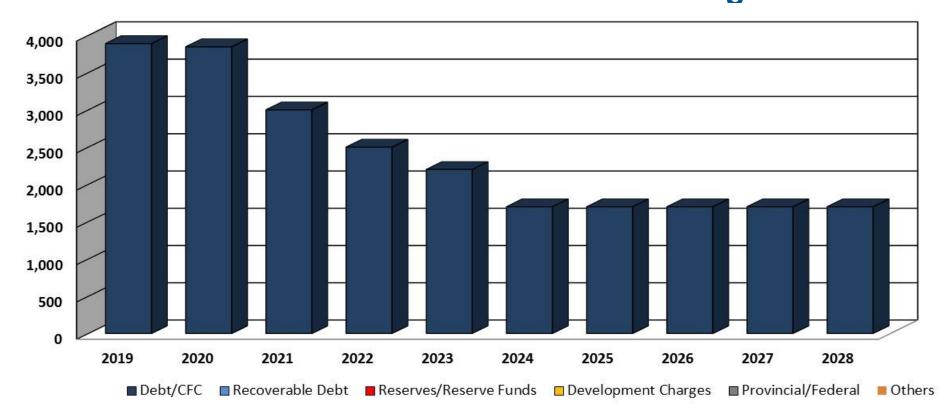


		2019 - 2028 Requested Capital Budget and Plan by Category										
(\$000s)	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028		
Health & Safety												
Legislated												
SOGR	926	2,539	1,746	1,088	452	-	-	-	624	823		
Service Improvements	2,963	1,307	1,254	1,412	1,748	1,700	1,700	1,700	1,076	877		
Growth Related												



# 2019 - 2028 Requested Capital Budget & Plan by Funding Source S





		2019 - 2028 Requested Capital Budget and Plan by Funding Source										
(\$000s)	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028		
Debt/CFC	3,889	3,846	3,000	2,500	2,200	1,700	1,700	1,700	1,700	1,700		
Recoverable Debt												
Reserves/Reserve Funds												
<b>Development Charges</b>												
Provincial/Federal												
Others												



### **Incremental Operating Impact of Capital**



	2019 Budget		2020 Plan		2021 Plan		2022 Plan		2023 Plan		2019 - 2023		2019 - 2028	
Projects	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions	\$000s	Positions
Previously Approved														
Community Health Information System									(40.0)	(0.4)	(40.0)	(0.4)	(40.0)	(0.4)
Datamart Data Warehouse							(36.5)	(0.2)			(36.5)	(0.2)	(36.5)	(0.2)
Dental & Oral Health Information Systems Project			21.8		(31.5)						(9.7)		(9.0)	-
Electronic Medical Record			35.0		(45.0)	(0.8)					(10.0)	(0.8)	(10.0)	(0.8)
Sub-Total: Previously Approved	-	-	56.8	-	(76.5)	(0.8)	(36.5)	(0.2)	(40.0)	(0.4)	(96.2)	(1.4)	(95.5)	(1.4)
New Projects - 2019														
Dental & Oral Health Information Systems Project					9.1						9.1		9.1	-
Electronic Medical Record			19.0		(22.5)						(3.5)	-	(3.5)	-
Sub-Total: New Projects - 2019			19.0	-	(13.4)	-		-	-		5.6	-	5.6	-
New Projects - Future Years														
Sub-Total: New Projects - Future Years			-	_			-	-					-	-
Total (Net)	-	-	75.8	-	(89.9)	(0.8)	(36.5)	(0.2)	(40.0)	(0.4)	(90.6)	(1.4)	(89.9)	(1.4)

- Community Health Information System project Financial and operational efficiencies of \$40 thousand net effective 2023.
- Datamart Data Warehouse Phase 3 project Financial and operational efficiencies of \$37 thousand net effective 2022.
- Electronic Medical Record Phase 3 Financial and operational efficiencies of \$14 thousand net effective 2021.
- The Dental and Oral Health Information System Financial and operational efficiencies will offset costs for hardware and software.



### **Unfunded Capital Projects**



#### (In Thousand)

	Total												
Project Description	Project	Non-Debt	Debt										
(\$000s)	Cost	Funding	Required	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028
Document and Records Management - Seed	353		353	262	91								
Document and Records Management													
Implementation	1,737		1,737			518	635	584					
Total	2,090		2,090	262	91	518	635	584					

- Documents and Records Management System Seed This project will assess TPH's document management and records management needs against the City Clerk's OpenText ERDMS solution to ensure TPH's information systems and data assets are suitable and ready for ERDMS integration. This project will also ensure that the OpenText ERDMS solution is in compliance with TPH's legislated public health information privacy requirements and is suitable for integration with TPH processes and information systems, and business requirements.
- Documents and Records Management System Implementation This project will implement an
  electronic system which will address TPH's documents and records management needs to enable
  staff to efficiently search, share, revise, and store electronic information.



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