



City of Hamilton

CITY COUNCIL AGENDA

Wednesday, February 28, 2018, 5:00 P.M.
Council Chambers, Hamilton City Hall
71 Main Street West

Call to Order

1. APPROVAL OF AGENDA

(Added Items, if applicable, will be noted with *)

2. DECLARATIONS OF INTEREST

3. CEREMONIAL ACTIVITIES

4. APPROVAL OF MINUTES OF PREVIOUS MEETING

4.1 February 14, 2018

5. COMMUNICATIONS

5.1 Correspondence from the Township of Norwich requesting support for their resolution requesting that the Province ensure that the intent of the legislation and regulations relative to the Ontario Building Code.

Recommendation: Be received.

5.2 Correspondence from Niagara Region requesting comment and support for their resolution respecting Algae Bloom on Western Lake Erie.

Recommendation: Be received.

5.3 Correspondence from Art French respecting news clippings about Glanbrook's last Mayor, Glen Etherington and his way of looking at his community and the process of its governance.

Recommendation: Be received.

- 5.4 Correspondence from the County of Simcoe respecting their White Paper entitled "Building a Seniors Campus: A Sustainable Model to Support Positive Aging and Strengthen our Communities".

Please follow the following link to view the White Paper: <https://www.simcoe.ca/LongTermCare/Documents/County%20of%20Simcoe%20-%20Building%20a%20Seniors%20Campus%202017.pdf#search=building%20a%20seniors%20campus>

Recommendation: Be received and referred to the General Manager of Healthy and Safe Communities for appropriate action.

- 5.5 Correspondence from the Town of Essex requesting support for their resolution respecting the ongoing issue of school closures throughout Ontario

Recommendation: Be endorsed.

- 5.6 Correspondence from the City of Kingston requesting support for their resolution seeking cannabis excise tax revenues to cover all additional costs of municipal policing and bylaw.

Recommendation: Be received.

- 5.7 Correspondence from George Rust-D'Eye, Integrity Commissioner for the City of Hamilton providing advice respecting the City of Hamilton's Code of Conduct with respect to "Conflict of Interest" in relation to the Rental Housing Sub-Committee matters.

Recommendation: Be received.

- 5.8 Correspondence from Allyson Wenzowski on behalf of Interval House of Hamilton respecting the Interval House of Hamilton Mentor Action, Be More Than a Bystander

Recommendation: Be received.

- 5.9 Correspondence from McMaster Student Union respecting the One Year Pilot Program for Yard Maintenance By-laws in the McMaster Neighbourhoods.

Recommendation: Be received and referred to the consideration of Item 3 of Planning Report 18-003.

- 5.10 Correspondence from the County of Simcoe respecting the County's Age Friendly Initiative Project Update - Positive Aging Strategy.

Please follow the following link to view the booklet: https://www.simcoe.ca/LongTermCare/Documents/Positive%20Aging%20Strategy%202017_jan18_low%20res.pdf

Recommendation: Be received and referred to the General Manager of Healthy and Safe Communities for appropriate action.

- 5.11 Correspondence from Debbie Ramsay, Manager, Niagara Escarpment Commission respecting the Application by Armstrong Planning & Project Management on Behalf of Empire (Red Hill) Ltd. for Lands Located at 2 Glover Mountain Road, Stoney Creek.

Recommendation: Be received and referred to Item 6 of Planning Report 18-003.

- 5.12 Correspondence from the City of Cornwall requesting support for their resolution Asking Ontario to Better Promote and Support Remediation of Contaminated Properties in Urban Centres

Recommendation: Be received.

- 5.13 Correspondence from the Honourable Navdeep Bains, Minister of Innovation, Science and Economic Development in response to the Mayor's letter requesting an extension to the Canada 150 Community Infrastructure Program (CIP 150)

Recommendation: Be received and referred to the General Manager of Public Works for appropriate action.

- 5.14 Correspondence from the Honourable Bob Chiarelli, Minister of Infrastructure in response to the Mayor's letter respecting the Community Infrastructure Program (CIP) 150 and the Clean Water Wastewater Fund (CWWF)

Recommendation: Be received and referred to the General Manager of Public Works for appropriate action.

- 5.15 Correspondence from Arun Pathak, President, Hamilton and District Apartment Association respecting a recommendation for the Provincial "Development Charge Rebate Program".

Recommendation: Be received.

6. COMMITTEE REPORTS

- 6.1 Planning Committee Report 18-003 - February 20, 2018

- 6.2 General Issues Committee Report 18-005 - February 21, 2018

- 6.3 Public Works Committee Clerk's Report 18-003 - February 22, 2018

- 6.4 Board of Health Report 18-002 - February 22, 2018

Note: Due to bulk, Appendix "A" is not available in the print version of the agenda but is available for viewing in the City Clerk's Office and online at www.hamilton.ca.

- 6.5 Healthy and Safe Communities Committee Report 18-001 - February 26, 2018 (to be distributed)

- 6.6 Special General Issues Committee Report 18-006 - February 27, 2018 (to be distributed)

7. MOTIONS

- 7.1 Lifting the Motion respecting Hamilton Waterfront Trust Board Reorganization Proposal LS18005 (Governance Review Sub-Committee Report 18-001, January 31, 2018), Tabled at the February 14, 2018 Council meeting.
- 7.2 Inch Park Improvements (Ward 7)
- 7.3 Urging the Provincial Government to invest in Cycling Infrastructure
- 7.4 Amendment to Item 21 of Planning Committee Report 18-002 respecting Application for Official Plan Amendment and Zoning By-law Amendments for Lands Located at 860 Queenston Road (OMB Case No. PL170282) (LS18010)
- 7.5 Gypsy Moth Infestation Control (City Wide) - (PW17088a)
- 7.6 Amendment to Item 20 of Planning Committee Report 18-002 respecting Bill 139, Building Better Communities and Conserving Watersheds Act, 2017 - Ontario Proposed Changes to the Land Use Planning and Appeals System (LS16027(c)/PED16237(b))
- 7.7 Amendment to Item 9 of Public Works Committee Report 17-010 respecting the Ontario Municipal Commuter Cycling (OMCC) 2018 Funding Agreement

8. NOTICES OF MOTIONS

9. STATEMENTS BY MEMBERS

10. PRIVATE AND CONFIDENTIAL

- 10.1 Hamilton Street Railway TransCab Service (HUR18004) (City Wide) (distributed under separate cover)
- (Referred to Council by the General Issues Committee on February 21, 2018)
- Pursuant to Section 8.1, Sub-section (d) of the City's Procedural By-law 14-300, and Section 239(2), Sub-section (d) of the *Ontario Municipal Act, 2001*, as amended, as the subject matter pertains to labour relations or employee negotiations.

11. BY-LAWS AND CONFIRMING BY-LAW

11.1 034

To Amend By-law No. 01-215, Being a By-law to Regulate Traffic

Schedule 2 (Speed Limits)

Ward: 2, 3, 6, 9, 10

11.2 035

To Amend By-law No. 01-218, as amended, Being a By-law to Regulate On-Street Parking

Schedule 8 (No Parking Zones)

Schedule 12 (Permit Parking Zones)

Schedule 13 (No Stopping Zones)

Schedule 20 (School Bus Loading Zones)

Ward: 2, 3, 6, 9, 10

11.3 036

To Establish City of Hamilton Land Described as Block 108 on Plan 62M-1144 as Part of Greti Drive

Ward: 11

11.4 037

To Permanently Close and Sell a Portion of a Road Allowance between Stonechurch Road West and Upper Horning Road, Hamilton, namely Part of Road Allowance between Lots 54 and 55, Concession 3, in the Geographic Township of Ancaster, designated as Part 8, Plan 62R-14003, save and except Part 4, Plan 62R-16769, City of Hamilton

Ward: 8

11.5 038

To Repeal and Replace By-law No. 18-001, Being a By-law to Permanently Close and Sell a Portion of Kinsman Drive, being Parts 1 to 6, inclusive, on Plan 62R-19974, City of Hamilton

Ward: 11

11.6 039

To Impose a Sanitary Sewer Charge Upon Owners of Land Abutting Garner Road West from Shaver Road to Approximately 190m Easterly, in the City of Hamilton

Ward: 12

11.7 040

To Amend By-law No. 07-170, Being a By-law to License and Regulate Various Businesses

Schedule 25 (Taxicabs)

Ward: City Wide

11.8 041

To Amend By-law No. 07-170, Being a By-law to License and Regulate Various Businesses

Schedule 25 (Taxicabs)

Ward: City Wide

11.9 042

To Amend By-law No. 07-170, Being a By-law to License and Regulate Various Businesses

Schedule 11 (Payday Loans Businesses)

Ward: City Wide

11.10 043

To Amend By-law No. 17-225, a By-law to Establish a System of Administrative Penalties

Ward: City Wide

11.11 044

To Amend By-law No. 17-225, a By-law to establish a System of Administrative Penalties

Ward: City Wide

- 11.12 045
To Amend Ancaster Zoning By-law No. 87-57, Respecting Lands Located at 555 Highvalley Road (Ancaster)
ZAH-17-035
Ward: 12
- 11.13 046
To Adopt Official Plan Amendment No. 93 to the Urban Hamilton Official Plan Respecting 235 Tanglewood Drive (Glanbrook)
Ward: 11
- 11.14 047
To Amend Zoning By-law No. 464, Respecting Lands Located at 235 Tanglewood Drive in the Former Township of Glanbrook, now in the City of Hamilton
ZAC-17-025/UHOPA-17-019
Ward: 11
- 11.15 048
To Adopt Official Plan Amendment No. 95 to the Urban Hamilton Official Plan Respecting 2782 Barton Street East, Hamilton
Ward: 5
- 11.16 049
To Repeal By-law No. 87-77 and to Amend Zoning By-law No. 6593, as amended by By-law No. 74-007, Respecting Lands Located at 2782 Barton Street East, Hamilton
ZAC-17-050
Ward: 5
- 11.17 050
To Adopt Official Plan Amendment No. 96 to the Urban Hamilton Official Plan Respecting 503 & 515 Garner Road West (former Ancaster)
Ward: 12

- 11.18 051
To Amend Zoning By-law No. 87-57 Respecting Lands Located at 503 and 515
Garner Road West (Ancaster)
ZAC-16-017/UHOPA-16-007
Ward: 12
- 11.19 052
A By-law to Amend Zoning By-law No. 05-200 Respecting Lands Located at 503
and 515 Garner Road West (Ancaster)
ZAC-16-017/UHOPA-16-007
Ward: 12
- 11.20 053
To Adopt Official Plan Amendment No. 16 to the Rural Hamilton Official Plan
Respecting 1051 Green Mountain Road East (Stoney Creek)
Ward: 11
- 11.21 054
To Amend Zoning By-law No. 05-200 Respecting Lands Located at 1051 Green
Mountain Road (Stoney Creek)
ZAC-15-052/RHOP-15-022
Ward: 11
- 11.22 055
To Amend Zoning By-law 3692-92 (Stoney Creek) Respecting Lands Located at 2
Glover Mountain Road (Stoney Creek)
ZAC-16-001/25T-201601
Ward: 11
- 11.23 056
To Amend Zoning By-law No. 05-200 Respecting Lands Located at 2 Glover
Mountain Road (Stoney Creek)
ZAC-16-001/25T-201601
Ward: 11

11.24 057

To Authorize the Execution of the Ontario Municipal Commuter Cycling (OMCC) Program Transfer Payment Agreement between the City of Hamilton and Her Majesty the Queen in right of Ontario as represented by the Minister of Transportation for the Province of Ontario (Funding Year 2017-2018)

Ward: City Wide

11.25 058

To Confirm the Proceedings of City Council

12. ADJOURNMENT



CITY COUNCIL MINUTES 18-002

5:00 p.m.
Wednesday, February 14, 2018
Council Chambers
Hamilton City Hall
71 Main Street West

Present: Acting Mayor T. Jackson, Acting Deputy Mayor A. Johnson
Councillors J. Farr, M. Green, S. Merulla, C. Collins, D. Skelly, T. Whitehead, D. Conley, M. Pearson, B. Johnson, L. Ferguson, R. Pasuta and J. Partridge.

Absent: Mayor F. Eisenberger – City Business, Councillor A. VanderBeek - Personal

Acting Mayor Jackson called the meeting to order and recognized that Council is meeting on the traditional territories of the Mississauga and Haudenosaunee nations, and within the lands protected by the “Dish with One Spoon” Wampum Agreement.

The Acting Mayor called upon Rabbi Hillel Lavery-Yisraeli of the Beth Jacob Synagogue to provide the invocation.

The Acting Mayor paid tribute to the Former Mayor Robert Morrow.

APPROVAL OF THE AGENDA

The Clerk advised of the following changes to the agenda:

1. COMMUNICATIONS - ADDED

5.18 Correspondence from George O'Neill, CEO, REALTOR Association of Hamilton Burlington in support of the discussion paper, Promoting Code Compliant, Safe, Clean and Healthy Rental Housing.

Recommendation: Be received and referred to the consideration of Item 15 of the Planning Committee Report 18-002.

5.19 Correspondence from Brian Beamish, Commissioner, Information and Privacy Commissioner of Ontario respecting a significant privacy issue with the City of Hamilton's proposed use of CCTV images taken by private individuals.

Recommendation: Be received and referred to the Information Item (f)(i) of the General Issues Committee Report 18-004.

- 5.20 Correspondence from Peter Robinson in opposition to the amending of Zoning Bylaw No. 6593, respecting lands located at 347 Charlton Avenue West (Bill No. 030).

Recommendation: Be received and referred to the consideration of Item 10 of the Planning Committee Report 18-002.

- 5.21 Correspondence from Oz Kemal, Partner, MHBC in support, in principle of the proposed Centennial Neighbourhoods Secondary Plan and Transit Oriented Corridor Zoning Extension for Lands Located at 640 Queenston Road.

Recommendation: Be received and referred to the consideration of Items 16 and 17 of the Planning Committee Report 18-002.

2. COMMUNICATIONS – REVISED DISPOSITIONS

- 5.13 Correspondence from the Honourable Dr. Eric Hoskins, Minister of Health & Long Term Care respecting Additional Funding for the Needle Exchange Program in the Hamilton Community.

Recommendation: Be received ***and referred to the Board of Health.***

- 5.14 Correspondence from Hassaan Basit, CAO/Secretary – Treasurer, Conservation Halton respecting Conservation Halton's 2018 Budget Municipal Funding.

Recommendation: Be received ***and referred to the General Manager of Corporate Services for appropriate action.***

3. NOTICES OF MOTIONS

- 8.1 Community Grants for Ward 3
- 8.2 Removal of Ash Trees at 23 Cullum Drive, Carlisle and 14 Tynedale Court, Carlisle
- 8.3 Acquisition of St. Helen Catholic Elementary School Property at 785 Britannia Avenue
- 8.4 One Time Funding for Residential Care Facilities

(Ferguson/Whitehead)

That the agenda for the February 14, 2018 meeting of Council be approved, as amended.

CARRIED

DECLARATIONS OF INTEREST

Councillors M. Green, M. Pearson and S. Merulla declared an interest in Planning Committee Item 15, Hamilton Rental Housing Roundtable discussion paper entitled “Promoting Code Compliant Rental Housing with Safe, Clean and Healthy Dwelling Units” presented by Brad Clark of Maple Leaf Strategies, and Correspondence Items 5.17 and 5.18, as they are owners of rental properties.

APPROVAL OF MINUTES**4.1 January 24, 2018****(B. Johnson/Pasuta)**

That the Minutes of the January 24, 2018 meeting of Council be approved, as presented.

CARRIED**COMMUNICATIONS****(A. Johnson/Green)**

That Council Communications 5.1 through 5.21 be approved, *as amended*, as follows:

- 5.1 Correspondence from the Honourable Steven Del Duca, Minister of Transportation in response to the Mayor's letter respecting the proposed new Highway 5 and 6 Interchange and the expansion of Highway 403 to three lanes between The Linc and Main Street.

Recommendation: Be received.

- 5.2 Correspondence from West Nipissing requesting support for their resolution requesting that the Province amend Regulation 366/09 for a permanent exemption for use of Hand-Held Devices to employees of or persons contracted to a road authority.

Recommendation: Be received.

- 5.3 Correspondence from the Town of Lakeshore requesting support for their resolution urging the Government of Ontario to allocate a proportionate share of the new tax revenues generated from the sale of marijuana, to municipalities directly.

Recommendation: Be *endorsed*.

- 5.4 Correspondence from the Town of Lakeshore urging the Government of Ontario to grant more autonomy to lower-tier municipalities, to adopt and rely upon their own growth projections and estimates, especially for financial planning purposes.

Recommendation: Be received.

- 5.5 Correspondence from the Department of Infrastructure Canada respecting Government of Canada's Smart Cities Challenge.

For more information, interested applicants are encouraged to visit the Smart Cities Challenge website at <https://impact.canada.ca/en/challenges/smart-cities> or contact Infrastructure Canada directly at infsc-vi.infsc@canada.ca.

Recommendation: Be received.

- 5.6 Correspondence from the Town of Lakeshore requesting support for their resolution urging the Government of Ontario to immediately allocate infrastructure funding dedicated to municipalities for storm water management and drainage improvements.

Recommendation: Be received.

- 5.7 Correspondence from Joshua Weresch respecting the 2018 City of Hamilton Budget.

Recommendation: Be received and referred to the General Issues Committee 2018 Budget.

- 5.8 Correspondence from the Honourable Steven Del Duca, Minister of Transportation in response to the Mayor's letter respecting MTO Digital Signage for the Eastport Drive Lift Bridge.

Recommendation: Be received.

- 5.9 Correspondence from Debbie Bramer, Winona Peach Festival/Social Media/Sponsorship Chair in appreciation of the City of Hamilton's sponsorship and partnership for the Winona Peach Festival's 50th Anniversary.

Recommendation: Be received.

- 5.10 Correspondence from the Honourable Amarjeet Sohi, Minister of Infrastructure and Communities in response to the Mayor's letter requesting greater flexibility under both the Canada 150 Community Infrastructure Program and the Clean Water & Wastewater Fund.

Recommendation: Be received.

- 5.11 Correspondence from Martin Keller, Source Protection Program Manager, Grand River Conservation Authority respecting Roy Haggart's resignation from the Lake Erie Region Source Protection Committee.

Recommendation: Be received and referred to the General Manager of Public Works for appropriate action.

- 5.12 Correspondence from PJ Mercanti, CEO, Carmen's Group respecting a Renewed Vision or the Future of Hamilton's Sports, Entertainment, Hospitality and Convention Facilities.

Recommendation: Be received and referred to the City Manager for appropriate action.

- 5.13 Correspondence from the Honourable Dr. Eric Hoskins, Minister of Health & Long Term Care respecting Additional Funding for the Needle Exchange Program in the Hamilton Community.

Recommendation: Be received and referred to the Board of Health.

- 5.14 Correspondence from Hassaan Basit, CAO/Secretary-Treasurer, Conservation Halton respecting Conservation Halton's 2018 Budget Municipal Funding

Recommendation: Be received and referred to the General Manager of Corporate Services for appropriate action.

- 5.15 Correspondence from Mathieu Koevoets, President, Ancaster Tennis Club, respecting the Ancaster Tennis Club Dome Project

Recommendation: Be received **and referred to the General Manager of Public Works for appropriate action.**

- 5.16 Correspondence from the Honourable Nathalie Des Rosiers, Minister of Natural Resources and Forestry, respecting a Conservation Authority Boundary Review.

Recommendation: Be received.

- 5.17 Correspondence from Joe Hoffer, Cohen Higley, respecting Hamilton District Apartment Association (HDAA) and City Discussion Paper Referral.

Recommendation: Be received and referred for consideration of Item 15 of the Planning Committee Report 18-002.

- 5.18 Correspondence from George O'Neill, CEO, REALTOR Association of Hamilton Burlington in support of the discussion paper, Promoting Code Compliant, Safe, Clean and Healthy Rental Housing.

Recommendation: Be received and referred to the consideration of Item 15 of the Planning Committee Report 18-002.

- 5.19 Correspondence from Brian Beamish, Commissioner, Information and Privacy Commissioner of Ontario respecting a significant privacy issue with the City of Hamilton's proposed use of CCTV images taken by private individuals.

Recommendation: Be received and referred to the consideration of Item (f)(i) of the General Issues Committee Report 18-004.

- 5.20 Correspondence from Peter Robinson in opposition to the amending of Zoning Bylaw No. 6593, respecting lands located at 347 Charlton Avenue West (Bill No. 030).

Recommendation: Be received and referred to the consideration of Item 10 of the Planning Committee Report 18-002.

- 5.21 Correspondence from Oz Kemal, Partner, MHBC in support, in principle of the proposed Centennial Neighbourhoods Secondary Plan and Transit Oriented Corridor Zoning Extension for Lands Located at 640 Queenston Road.

Recommendation: Be received ~~and referred to the consideration of Items 16 and 17 of the Planning Committee Report 18-002.~~

CARRIED

(Pasuta/Partridge)

That Council move into Committee of the Whole for consideration of the Committee Reports.

CARRIED

GENERAL ISSUES COMMITTEE REPORT 18-001

(B. Johnson/Pearson)

That the FIRST Report of the General Issues Committee, be adopted, as presented, and the information section received.

CARRIED

PUBLIC WORKS COMMITTEE REPORT 18-002

(Ferguson/Pasuta)

That the SECOND Report of the Public Works Committee be adopted, as presented, and the information section received.

CARRIED

PLANNING COMMITTEE REPORT 18-002

13. **Applications for an Official Plan Amendment and Zoning By-law Amendment for Lands Located at 503 and 515 Garner Road West (Ancaster) (PED18032) (Ward 12)**

(Ferguson/Pearson)

That Report PED18032, respecting Applications for an Official Plan Amendment and Zoning By-law Amendment for Lands Located at 503 and 515 Garner Road West (Ancaster) be amended by adding the following subsection (e) and the balance be renumbered:

- (e) That staff be directed to work with the applicants at the Site Plan Approval stage for a connection to the proposed public trail from the subject development in the vicinity of Blocks C and D.

CARRIED

16. Centennial Neighbourhoods Secondary Plan and Centennial Neighbourhoods Transportation Management Plan (PED18007) (Wards 5 and 9)

(Collins/Merulla)

That subsection (a)(i) of Item 16 of Planning Committee Report 18-002 respecting Centennial Neighbourhoods Secondary Plan be amended by inserting the highlighted wording as outlined below:

- (a) That the Centennial Neighbourhoods Secondary Plan, for the area shown on Appendix “A” of PED18007, attached as Official Plan Amendment (OPA) No.XX to the Urban Hamilton Official Plan (UHOP) be APPROVED, and that:
- (i) The By-law of adoption for the Official Plan Amendment, attached as Appendix “B” to Report PED18007, as amended, which has been prepared in a form satisfactory to the City Solicitor, **be further amended as follows:**
1. ***That the wording of Policy B.6.7.18.12 entitled Area Specific Policy – Area L (670, 674, 686, 692, 700 and 706 Queenston Road) be amended to exempt the reconstruction of existing drive throughs in existing locations from certain design and built form requirements;***

and be adopted by Council;

CARRIED

(Farr/Green)

That the SECOND Report of the Planning Committee be adopted, **as amended**, and the information section received.

CARRIED

GENERAL ISSUES COMMITTEE REPORT 18-004

(Jackson/Partridge)

That the FOURTH Report of the General Issues Committee be adopted, as presented, and the information section received.

CARRIED

AUDIT, FINANCE AND ADMINISTRATION COMMITTEE REPORT 18-002
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1. **2019 Development Charges (DC) Study and Initial meeting of the DC Stakeholders Sub-Committee (FCS18022) (City Wide) (Item 5.2)**

(Whitehead/Conley)

- (b) ***That Councillor Jason Farr be appointed as a member of the DC Stakeholders Sub-Committee.***

**Amendment CARRIED
Main Motion as Amended CARRIED**

4. Governance Review Sub-Committee Report 18-001 - January 31, 2018 (Item 8.3)**(Farr/Ferguson)**

That the following, be TABLED to the February 28, 2018 Council meeting:

(a) Hamilton Waterfront Trust Board Reorganization Proposal LS18005 (City Wide)(Item 12.1)

- (i) That the City Manager or his delegate be authorized and directed to advise the Hamilton Waterfront Trust (HWT) and the Hamilton Port Authority (HPA) that the City of Hamilton consents to the removal of the HPA board member as outlined in the HWT's January 10, 2017 resolution, with the exception of the HPA Board member remaining as a member of the HWT Board until the review of the HWT's governance model is completed by Council.
- (ii) That Report LS18005 remain confidential.

CARRIED

(B. Johnson/Ferguson)

That the SECOND Report of the Audit, Finance and Administration Committee be adopted, *as amended*, and the information section received.

CARRIED

EMERGENCY AND COMMUNITY SERVICES COMMITTEE REPORT 18-002

1. Development Charge Rebate Program Expression of Interest (CES18011) (City Wide) (Item 5.1)

- (a) That staff be directed to submit an expression of interest to the Minister of Housing indicating the City of Hamilton's interest in participating in the Ontario Development Charges Rebate Program;
- (b) That the General Manager of the Community and Emergency Services Department or his designate be authorized and directed to deliver and administer the Development Charges Rebate Program;
- (c) That the Mayor and City Clerk be authorized and directed to execute the "Transfer Payment Agreement" for the Development Charges Rebate Program with content acceptable to the General Manager of the Community and Emergency Services Department or his designate and in a form satisfactory to the City Solicitor;
- (d) That the General Manager of Community and Emergency Services or his designate be authorized and directed to execute all agreements as may be required to deliver the Development Charges Rebate Program, in a form satisfactory to the City Solicitor;

- (e) That a letter be sent to the Minister of Housing requesting that the existing Development Charge waivers that the City has on affordable housing be included for consideration within the application process; and,

(Green/Jackson)

- (f) *That staff be directed to include as a condition of the Development Charge Rebate Program on new apartment developments, that the unit rental rates be capped at no more than 150% of the present market rent for a minimum of ten years after occupation.*

**Amendment CARRIED
Main Motion as Amended CARRIED**

(Merulla/Collins)

That the SECOND Report of the Emergency and Community Services Committee be adopted, **as amended** and the information section received.

CARRIED

MOTIONS

7.1 I Heart Beer and Bacon Festival - Special Occasion Permit Liquor Licence

(Farr/Conley)

WHEREAS, Hamilton City Council has received Notice (attached hereto as Appendix "A") from Faron Benoit on behalf of the I Heart Beer Limited that they wish to obtain approval for a Special Occasion Permit Liquor Licence to sell alcohol on March 3, 2018 between the hours of 2:00 p.m. and 11:00 p.m. at the Hamilton Convention Centre, 1 Summers Lane, Hamilton, Ontario during the I Heart Beer and Bacon Festival taking place in Hamilton, Ontario;

WHEREAS, the Alcohol and Gaming Commission of Ontario requires that if a permit holder is not a registered charity or non-profit organization, that a resolution of the Council is required to designate the event as one of municipal significance; and

WHEREAS, the City of Hamilton does not have an objection to the Liquor Licence Serving Time Extension for the following establishment;

THEREFORE BE IT RESOLVED:

- (a) That the City of Hamilton hereby deems the I Heart Beer and Bacon Festival, being held in the City of Hamilton, Ontario on March 3, 2018, as municipally significant; and,
- (b) That the following applicant be provided a copy of this resolution for inclusion with their application to the Alcohol and Gaming Commission of Ontario:
- (i) I Heart Beer Limited c/o Faron Benoit, Brantford, Ontario.

CARRIED

7.2 Provincial Library Funding

(Merulla/Pearson)

WHEREAS, public libraries support the goals of the Province of Ontario Culture Strategy to promote cultural engagement and inclusion, strengthen culture in communities, fuel the creative economy, and promote the value of the arts;

WHEREAS, the Hamilton Public Library is a source of pride in the community, contributing to social and cultural well-being by providing safe, inclusive, and vibrant community spaces where everyone is welcome to learn, work, connect, and have fun;

WHEREAS, the Hamilton Public Library continues to seek funding opportunities through grant programs, donor development and community support;

WHEREAS, the Hamilton Public Library continues to manage resources with the utmost care and is committed to the sustainability of its services;

WHEREAS, the Hamilton Public Library continues to have a limited operating budget which is 94% funded by the City of Hamilton; and,

WHEREAS, the annual provincial operating grant received by the Hamilton Public Library has remained fixed at \$949,451 per year since amalgamation, while consumer price inflation has increased by more than 35% during this time;

THEREFORE BE IT RESOLVED:

- (a) That the Mayor correspond with the Honourable Daiene Vernile, Minister of Tourism, Culture and Sport, to urge the Province to recognize the contribution of public libraries within their communities by:
 - (i) Ceasing the budget freeze to public libraries, in acknowledgement to the services they offer to all residents; and,
 - (ii) Providing adequate and appropriate funding for public libraries, with increases each year going forward, in line with the consumer price index; and,
- (b) That a copy of the Council approved resolution be sent to the to the Ontario Minister of Municipal Affairs, to local MPs and MPPs, to the Federation of Canadian Municipalities, to the Association of Municipalities of Ontario, to the Ontario Library Association, and to the Federation of Ontario Public Libraries.

CARRIED

Acting Mayor Jackson relinquished the Chair to Acting Deputy Mayor A. Johnson in order to introduce the following motion:

7.3 Amendment to Item 10 of the Audit, Finance & Administration Committee Report 17-014

(Jackson/B. Johnson)

- (a) That Appendix "B" to Item 10 (attached hereto) of the Audit, Finance & Administration Committee Report 17-014, which was approved by Council on October 25, 2017, be amended by adding a column to reflect the 91st Highlanders 2018 Advanced Payment Schedule for the amount of \$19,470; and,
- (b) That sub-sections (a)(i) and (a)(ii) to Item 10 of the Audit, Finance & Administration Committee Report 17-014, which was approved by Council on October 25, 2017, be amended by adding the words "**as amended**", to read as follows:

10. Grants Sub-Committee Report 17-005 from the October 12, 2017 meeting (Item 8.3)

- (a) **2018 Advance - City Enrichment Fund (GRA17010) (City Wide) (Item 6.1)**
 - (i) That effective January 1, 2018, an advance of funds be provided to the organizations specified in the attached Appendix "B", **as amended**, to AF&A Report 17-014; and,
 - (ii) That any outstanding arrears due to the City of Hamilton by the organizations (as shown in the attached Appendix "B", **as amended**, to AF&A Report 17-014) be first applied against the approved grant funding, including advances, until the debt is satisfied, prior to that organization receiving the balance of any approved payment.

CARRIED

7.4 Community Grants for Ward 3

(Green/Merulla)

WHEREAS, cell tower revenues from Ward 3 of \$40,628.19 are available in project 3301609603 to provide financial support to community led projects and initiatives that benefit Ward 3;

THEREFORE BE IT RESOLVED:

- (a) That the funding for the following programs and initiatives, to be financed from the Cell Tower Revenues Project 3301609603, be approved:
 - (i) That the Sikh Heritage Month Committee is granted funds in the amount of \$2,000 to support Hamilton's first Sikh music concert.

- (ii) That First Place Resident Representative Organization is granted funds in the amount of \$1,500 to reduce barriers of social isolation, and increase educational programs for seniors through purchase of a television player and locked cabinet for video education and community building.
 - (iii) That Erich's Cupboard is granted funds in the amount of \$1,000 to support Ward 3 Safe Talk Courses. These courses help support and educate residents on suicide awareness.
 - (iv) That The Sexual Assault Centre of Hamilton (SACHA) in the amount of \$1,000 to support Chocolate Fest at 270 Sherman Ave N, and to support survivors and raise awareness of the impact of sexual assault and sexual violence.
 - (v) That Hamilton Hurricanes Football is granted \$1,000 to help support healthy active living and provide equipment and reduce barriers to sports for youth aged 10 to 19 in Hamilton.
 - (vi) That The Kingsway Eagle Worldwide Community Enrichment Group is granted funds in the amount of \$1,500 for the Come to the Table Program. This program will help provide healthy and fresh food for residents experiencing hardship in Ward 3.
 - (vii) That the Hamilton Black History Month Committee is granted funds in the amount of \$500.00 to support the many and community events and programs celebrating black history in Hamilton.
- (b) That the Mayor and City Clerk be authorized and directed to execute any required agreement(s) and ancillary documents, with such terms and conditions in a form satisfactory to the City Solicitor.

CARRIED

7.5 Removal of Ash Trees at 23 Cullum Drive, Carlisle and 14 Tynedale Court, Carlisle

(Partridge/Pearson)

WHEREAS, the former Town of Flamborough required the installation of trees in the road allowance as part of all new residential construction;

WHEREAS, the trees were often installed by the builder of residential developments;

WHEREAS, the builder of the houses at 23 Cullum Drive and 14 Tynedale Court in Carlisle installed Ash trees on the private side of the property line in error; and,

WHEREAS, the homeowners of 23 Cullum Drive and 14 Tynedale Court, Carlisle, wish to have these dying Ash trees removed under the City of Hamilton's Emerald Ash Borer Management Program as has been done for their neighbours.

THEREFORE BE IT RESOLVED:

That staff be directed to remove the one Ash tree in front of 23 Cullum Drive, Carlisle, and the two Ash trees in front of 14 Tynedale Court, Carlisle, as part of the Emerald Ash Borer Management Program and that the costs for removal, stumping and replacement be funded from Project ID 4451153001, Emerald Ash Borer (EAB) Management Plan.

CARRIED

7.6 Acquisition of St. Helen Catholic Elementary School Property at 785 Britannia Avenue

(Merulla/Collins)

WHEREAS, the St. Helen Catholic Elementary School at 785 Britannia Ave, Hamilton (“the Property”) was closed in 2009 by the Hamilton-Wentworth Catholic District School Board (hereafter HWCDSB), and has been operating as a neighbourhood hub for the McQuesten neighbourhood; and

WHEREAS, the HWCDSB has been generously subsidizing the operating cost of keeping the Property available for community use with the Hamilton Community Foundation and the City of Hamilton since 2009; and

WHEREAS, the McQuesten Neighbourhood Planning Team has been active for over a decade and using the Property as a resource centre while developing the McQuesten Urban Farm on an adjacent piece of land; and

WHEREAS, De Dwa Da Dehs Nye>s Aboriginal Health Centre has expressed interest in relocating their services to the Property, and is currently engaged with the Ministry of Health Capital process for redevelopment; and

WHEREAS, Niwasa Kendaaswin Teg, the Indigenous early years and head start service provider, has obtained funding to support relocating their services to the Property; and

WHEREAS, De Dwa Da Dehs Nye>s and Niwasa have expressed an interest in working with the McQuesten Planning Team and other partners to create the *Biindigen Community Hub* (Anishnaabe for Welcome! Come In!); and

WHEREAS, the *Biindigen Community Hub* will serve as an Indigenous “one-stop” shop for services as well as a sustainable, long-term resource centre for McQuesten and the surrounding neighbourhoods; and

WHEREAS, such a development is consistent with the Truth and Reconciliation Commission of Canada’s Calls to Action by creating a model of reconciliation where Indigenous and non-Indigenous service providers come together to provide a bundle of services and resources to improve the social determinants of health for all people in the community;

WHEREAS, De Dwa Da Dehs Nye>s was one of four projects provincially to receive funding in February 2018 from the Government of Ontario Ministry of Infrastructure’s Surplus Property Transition Initiative, which was created to promote the development of community hubs;

WHEREAS, the HWCDSB circulated a Proposal to Sell Real Property for the Property, requiring the delivery of a letter of intent within 90 days of receipt of the Proposal as per the regulation; and,

WHEREAS, the Property has been identified as being of interest for potential acquisition for a City-wide use as identified by the Ward 4 Councillor;

THEREFORE BE IT RESOLVED:

- (a) That staff be directed to acquire St. Helen Catholic Elementary School Property at 785 Britannia Avenue, Hamilton from the Hamilton-Wentworth Catholic District School Board (HWCDSB) for the purpose of disposing of the land for the creation of the Biindigen Community Hub;
- (b) That staff be authorized and directed to complete due diligence work in preparation of the acquisition of the Hamilton-Wentworth Catholic District School Board ("HWCDSB") lands located at 785 Britannia Avenue, Hamilton;
- (c) That the Real Estate Section of the Planning and Economic Development Department be authorized and directed to present a bona-fide offer to purchase the property located at 785 Britannia Avenue, Hamilton to the Hamilton-Wentworth Catholic District School Board (HWCDSB) on terms and conditions deemed appropriate to the General Manager of Planning and Economic Development;
- (d) That following successful acquisition the Real Estate Section of the Planning and Economic Development Department be authorized and directed to sell the property at 785 Britannia Avenue, Hamilton to De Dwa Da Dehs Nye>s Aboriginal Health Centre on the terms and conditions that the City will be fully reimbursed for all City's costs and fees associated with acquisition and disposition of the property and on such other terms and conditions deemed appropriate to the General Manager of Planning and Economic Development;
- (e) That all costs related to the due diligence, acquisition, and disposition of the property at 785 Britannia Avenue, Hamilton be authorized and funded from the Best Start Reserve and that all net proceeds of sale be returned to the same account;
- (f) That the Mayor and Clerk be authorized to execute all necessary documents in a form satisfactory to the City Solicitor.

CARRIED

7.7 One Time Funding for Residential Care Facilities

(Whitehead/Skelly)

WHEREAS, a delegation from the Residential Care Facilities presented at the January 22, 2018 Emergency & Community Services Committee;

WHEREAS, the Residential Care Facilities are currently funded at \$50 per diem, and there has been no per diem or cost of living increase in funding to the Residential Care Facilities since April 1, 2015;

WHEREAS, the average cost per diem for other Residential Care Facilities in Ontario is \$52 per diem;

WHEREAS, in March 2017, through the Long Term Affordable Housing Strategy (LTAHS) the Province released its Supportive Housing Policy Framework with guidelines on a review of the Residential Care Facilities to ensure alignment with Housing First legislation; and

WHEREAS, staff will be using the LTAHS Supportive Housing Policy Framework and Best Practices to conduct a review of the Residential Care Facilities in 2018 with a focus on outcomes and funding models.

THEREFORE BE IT RESOLVED:

That the appropriate staff from Emergency & Community Services be authorized to provide an additional \$200,000 to the Residential Care Facilities Program on a one time basis within existing 2017/2018 CHPI budget to mitigate some of their financial pressures, pending the 2018 review of the Residential Care Facilities.

(Ferguson/Collins)

That the Motion regarding One Time Funding for Residential Care Facilities be referred to staff with a report to come back to the Healthy and Safe Communities Committee (formerly Emergency and Community Services Committee).

CARRIED

Councillor Skelly wished to be recorded as OPPOSED to the above motion.

NOTICES OF MOTION

8.1 Community Grants for Ward 3

Councillor Green introduced a Notice of Motion respecting Community Grants for Ward 3.

(Green/Merulla)

That the Rules of Order be waived to allow for the introduction of a Motion respecting Community Grants for Ward 3.

CARRIED

For disposition of this matter, please refer to Item 7.4.

8.2 Removal of Ash Trees at 23 Cullum Drive, Carlisle and 14 Tynedale Court, Carlisle

Councillor Partridge introduced a Notice of Motion respecting a Removal of Ash Trees at 23 Cullum Drive, Carlisle and 14 Tynedale Court, Carlisle.

(Partridge/Pearson)

That the Rules of Order be waived to allow for the introduction of a Motion respecting a Removal of Ash Trees at 23 Cullum Drive, Carlisle and 14 Tynedale Court, Carlisle.

CARRIED

For disposition of this matter, please refer to Item 7.5.

8.3 Acquisition of St. Helen Catholic Elementary School Property at 785 Britannia Avenue

Councillor Merulla introduced a Notice of Motion respecting the Acquisition of St. Helen Catholic Elementary School Property at 785 Britannia Avenue.

(Merulla/Collins)

That the Rules of Order be waived to allow for the introduction of a Motion respecting the Acquisition of St. Helen Catholic Elementary School Property at 785 Britannia Avenue.

CARRIED

For disposition of this matter, please refer to Item 7.6.

8.4 One Time Funding for Residential Care Facilities

Councillor Whitehead introduced a Notice of Motion respecting One Time Funding for Residential Care Facilities.

(Whitehead/Merulla)

That the Rules of Order be waived to allow for the introduction of a Motion respecting One Time Funding for Residential Care Facilities.

CARRIED

For disposition of this matter, please refer to Item 7.7

STATEMENTS BY MEMBERS

Members of Council used this opportunity to discuss matters of general interest.

PRIVATE AND CONFIDENTIAL

10.1 Selection Committee Report 18-002

Council determined that they did not need to go into Closed Session to discuss Selection Committee Report 18-002.

(Whitehead/Farr)

That Jim Howlett be appointed to the Hamilton Port Authority Board of Directors, as a Citizen Member and on a temporary basis, for a term commencing February 15, 2018.

CARRIED

BY-LAWS

(A. Johnson/Farr)

That Bills No. 18-022 to No. 18-033 be passed and that the Corporate Seal be affixed thereto, and that the By-laws be signed by the Mayor and the City Clerk to read as follows:

By-law No.

- | | |
|---------------|--|
| 18-022 | To Establish City of Hamilton Land Described as Part of Block 20 on 62M-1020, designated as Part 9, 10, & 11 on 62R-17213 as Part of Edgcroft Crescent
Ward: 9 |
| 18-023 | To Permanently Close and Sell a Portion of Bellroyal Crescent being Block 117 on 62M-1172
Ward: 9 |
| 18-024 | To Amend Zoning By-law No. 05-200 Respecting Lands Located at 630 Rymal Road East and 1770 Upper Sherman Avenue, Hamilton
ZAH-16-032
Ward: 7 |
| 18-025 | To Amend By-law No. 01-218, as amended, Being a By-law to Regulate On-Street Parking
Schedule 6 (Time Limit Parking)
Schedule 8 (No Parking Zones)
Schedule 10 (Alternate Side Parking)
Schedule 12 (Permit Parking Zones)
Schedule 13 (No Stopping Zones)
Schedule 14 (Wheelchair Loading Zones)
Ward: 1, 2, 3, 4, 6, 7, 8, 10, 11, 15 |
| 18-026 | To Amend By-law No. 10-197, a By-law Respecting Signs within the City of Hamilton
Ward: City Wide |
| 18-027 | To Adopt Official Plan Amendment No. 91 to the Urban Hamilton Official Plan Respecting 154 and 166 Mount Albion Road (Hamilton)
Ward: 5 |
| 18-028 | To Amend Zoning By-law No. 6593 (Hamilton), Respecting Lands Located at 154 and 166 Mount Albion Road (Hamilton)
ZAC-16-002
UHOPA-17-014
Ward: 5 |
| 18-029 | To Adopt Official Plan Amendment No. 92 to the Urban Hamilton Official Plan Respecting The Centennial Neighbourhoods Secondary Plan (Wards 5 and 9)
Ward: 5, 9 |
| 18-030 | To Amend Zoning By-law No. 6593 Respecting Lands Located at 347 Charlton Avenue West, Hamilton
ZAC-17-018
Ward: 1 |
| 18-031 | To Adopt Official Plan Amendment No. 94 to the Urban Hamilton Official Plan Respecting Text and Schedule/Mapping Amendment to Implement Transit Oriented Corridor Zoning for Wards 1, 3, 4, 5 and 9 |

Ward: 1, 3, 4, 5, 9

18-032 To Amend Zoning By-law No. 05-200 to Extend New Transit Oriented Corridor Zones between Jefferson Avenue (Hamilton) and Irene Avenue (Stoney Creek), Create One New Transit Oriented Corridor Zone, and Amend Existing Transit Oriented Corridor Zones

Ward: 1, 2, 4, 5, 9

18-033 To Confirm the Proceedings of City Council

(Pearson/Conley)

That, there being no further business, City Council be adjourned at 8:58 p.m.

CARRIED

Respectfully submitted,

Acting Mayor T. Jackson

Rose Caterini
City Cle



THE CORPORATION OF THE TOWNSHIP OF NORWICH

February 5, 2018

Honourable Peter Milczyn, MPP
Minister of Housing
17th Floor - 777 Bay Street
Toronto, Ontario
M5G 2E5

Dear Sir

Re: Ontario Building Code Amendments

At their meeting held Tuesday January 30, 2018 the Council of the Township of Norwich passed the following resolution:

“... Whereas the Preface and Introduction to the Ontario Building Code Compendium reads such that the Code is meant to be; “essentially a set of minimum provisions respecting the safety of buildings with reference to public health, fire protection, accessibility, and structurally sufficiency,

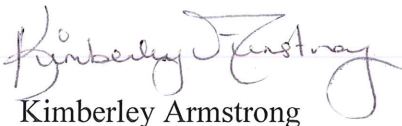
And Whereas the Ministry of Housing has for a number of years and continues to make significant changes to the scope of the Ontario Building Code to include provincial policy initiatives such as Environmental Protection, Resource Conservation, and Energy Conservation,

And Whereas these expanded roles in the Code have had significant impacts on local municipal Building Departments for additional training, staffing, and other resources required to implement such initiatives,

Therefore be it resolved that the Township of Norwich hereby requests that the Province ensure that the intent of the legislation and regulations relative to the Ontario Building Code continues to be principally for the protection of the public, and occupant health and safety in relation to the built environment, and examine other avenues for implementation of other initiatives.”

If you require further information with respect to the above noted matter, please contact the undersigned.

Sincerely



Kimberley Armstrong
Deputy Clerk

- cc. Honourable Kathleen Wynne, Premier
Ontario Building Officials Association CAO Aubrey LeBlanc, cao@oboa.on.ca
Ms. Hannah Evans, Director, Building Development Branch, MMA
hannah.evans@ontario.ca
Ontario Municipalities – via email

Administration

Office of the Regional Clerk

1815 Sir Isaac Brock Way, PO Box 1042, Thorold, ON L2V 4T7

Telephone: 905-980-6000 Toll-free: 1-800-263-7215 Fax: 905-687-4977

www.niagararegion.ca

February 6, 2018

DISTRIBUTION LIST***SENT ELECTRONICALLY*****RE: Algae Bloom on Western Lake Erie
Minute Item 13.1 CL 1-2018, January 18, 2018**

Regional Council at its meeting held on Thursday, January 18, 2018, passed the following resolution:

1. That Niagara Region **ENDORSE** the 2016 resolution of Great Lakes and St. Lawrence Cities Initiative call to reduce inflows of phosphorus into Lake Erie by at least 40%;
2. That Niagara Region **ASK** the Canadian Federal and Provincial governments and International Joint Committee to establish enforceable regulations on phosphorous and nutrient flows into Lake Erie; and
3. That Niagara Region **CIRCULATE** this resolution to Great Lakes St. Lawrence Cities Initiative (GLSLCI), area MPS, MPPs, and Ontario members of the GLSLCI for comment and support.

If you have any further questions, please contact the undersigned.

Yours truly,

A handwritten signature in black ink, appearing to read "Frank Fabiano".

Frank Fabiano
Acting Regional Clerk

:cjp

CLK-C-2018-17

FEB - 7 2018

Mount Hope ON
Feb 2, 2018

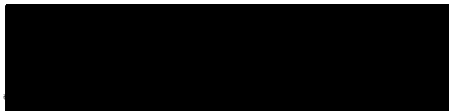
To Members of Hamilton City Council;

In searching various historical papers I came across this news clipping about Glanbrook's last mayor, Glen Etherington. Unfortunately, Glen died on September 15, 2003. His way of looking at his community (which did include the whole of the present City of Hamilton) and the process of its governance should be considered by the present members of council. It has been more than adequately expressed in the two enclosed articles from the Hamilton Spectator from September, 2003.

The comments expressed seem timely today in watching some of the long-winded speeches at council meetings in which the same point has been repeated almost verbatim as the talk rotates around the chambers. "I concur with Councillor" seems to be a popular lead-in for a five or more minute ramble about points already made and agreed to.

Perhaps next time, after h hopefully reading these articles, a council member may consider the points made about brevity and "to the point." I'm sure staff would appreciate the potential saving of their time.

For your information.



Art French



Etherington was a true country gentleman

Used old-fashioned horse sense as mayor of Glanbrook

Not long after I heard the sad word of Glen Etherington's death, some lyrics from an old Genesis song kept looping through my head.

"I'd rather trust a countryman than a townman, you can judge by his eyes ..."

It's not the first time I've associated those and other lines from that forgotten tune with the former mayor of Glanbrook, who passed away Monday at 78 from bone cancer, poignantly taking his leave in the same farmhouse he was born in.

It may be hopelessly romantic, but during my professional dealings with Etherington, mainly when he represented pre-amalgamation Glanbrook on the old Hamilton-Wentworth regional council, he came to embody for me what I think of as typical rural virtues and values.

He was a farmer with mud on his boots but he was never slick or slippery.

He was laconic, speaking only to the point and never taking the long way around the barn to get there.

He was straightforward and he was honest, but you couldn't pull the wool over his eyes. Mild-mannered and soft-spoken he might be, but he was



Andrew Dreschel
City Columnist

no pushover.

He was astute without being guileful, sharp and savvy without a hint of arrogance, confident without conceit.

His folksy sense of humour was informed by a wisdom that ran deeper than book learning.

Finally, but perhaps foremost, Glen Etherington was a gentleman, no mean feat for a politician, particularly one whose responsibilities to his town brought him into contact with the sharks and jellyfish that shadowed the backrooms of Hamilton City Hall. He was someone to believe in, someone to trust.

I'd be less than frank if I claimed all of these fine qualities were immediately noticeable. In fact, the first few times I saw Etherington at regional council, I wondered what the devil he

was doing there. There was a sleepy, laid-back quality to his weathered, angular face. Folded into his chair, his bony elbows and knees poking out at odd angles from his loose-fitting suit, he looked more equipped for grabbing some shut-eye than nimbly following the debates of the day.

He said little and when he did speak, it was often hard to decipher. Even when his trademark pipe wasn't in his mouth, he seemed to be speaking around the stem of it.

But it soon became clear that he had the wonderful gift of summing up both situations and people in spare words rich with old-fashioned if-you-can't-afford-it-don't-buy-it farm sense.

Again, lines from that old song: "I'd rather trust a man who works with his hands, he looks at you once, you know he understands. Don't need any shield, when you're out in a field."

I remember to this day Etherington's classic comeback to Flamborough Councillor Dave Braden's allegations about under-the-table dealings in high places at regional government. It was four years ago, during municipal adviser David O'Brien's public hearings into the proposed merger of Hamilton with the five sur-

rounding suburban municipalities.

Providing no supporting proof for his accusations, Braden urged O'Brien to get the province to investigate possible and perceived corruption at the region.

I called other suburban politicians for their reactions. While they all roundly condemned Braden's allegations, Etherington mildly emptied the wind from his sails.

"I wondered if it was just one of those situations where somebody decided to make a presentation and they got a little overenthusiastic about it," he said.

Etherington's response had the subtle ring of a psychological truth. But it did more than gently conjure up the hilarious image of an overexcited Braden getting ahead of himself.

It contained a forgiving wink at human nature.

For me, Glen Etherington was that most rare of presences on the local political scene. He was a politician to believe in, someone to trust.

Andrew Dreschel's commentary appears Monday, Wednesday and Friday. Contact him at adreschel@thespec.com or 905-526-3495.

The Spectator's view: A10

Glen Etherington: Last mayor of Glanbrook

He made it a better place

Died Sept 15, 2003

Many people in the old city of Hamilton likely never met Glen Etherington and that's too bad. The highly-respected last mayor of Glanbrook, who died this week of bone cancer, was a man who demonstrated commitment to his community through his actions and hard work with youth, sports, agriculture and politics. He was truly a gentleman.

His constituency was Glanbrook, his people were rural. But his presence on regional council for almost a decade and his knack for getting to the meat of an issue had an immeasurable impact.

Etherington didn't feel the need to spout off on every issue that came to regional council, the unwieldy conglomerate of city and suburban politi-

cians that pre-dated the amalgamated city. But when Etherington chose to speak, he clearly had something of substance to say and his colleagues paid attention.

Etherington was a farmer, the opposite of a city slicker, but he was no hayseed when it came to politics. Quiet and watchful, an intent listener, Etherington saved his words to make them count on issues close to his heart. He picked his spots carefully and his comments, when they came, showed depth, thoughtfulness and, more often than not, a wily streak of humour.

His dedication to his community made it a better place to be. We will miss his shoot-from-the-hip approach and the twinkle in his eye.

— Lee Prokaska



County of Simcoe
Clerk's Department
1110 Highway 26,
Midhurst, Ontario L9X 1N6

Main Line (705) 726-9300
Toll Free (866) 893-9300
Fax (705) 725-1285
simcoe.ca



February 2, 2018

City Clerk
City of Hamilton
192 Wentworth St. N
Hamilton, ON L8L 5V7

Attention: City Clerk

Subject: White Paper – Building a Seniors Campus

At its meeting on November 28, 2017, Simcoe County Council approved the following recommendation:

“That Item CCW 17-359, dated November 28, 2017 regarding a White Paper on Simcoe County’s experiences with respect to Building a Seniors Campus, be received; and

That the County of Simcoe’s White Paper entitled, “Building a Seniors Campus: A Sustainable Model to Support Positive Aging and Strengthen our Communities” be disseminated to the Province of Ontario, Municipalities responsible for Long Term Care, Not for Profit organizations and any other agencies or associations who have requested information on Simcoe County’s Georgian Village experience.”

It is requested that this matter be presented to your Council for information.

Thank you for your attention to this matter.

Regards,

A handwritten signature in black ink, appearing to read "John Daly".

John Daly
County Clerk

/ki

Enc.



County of Simcoe
Office of the Chief
Administrative Officer
1110 Highway 26,
Midhurst, Ontario L9X 1N6

Main Line (705) 726-9300
Toll Free (866) 893-9300
Fax (705) 725-1285
simcoe.ca

In 2013, the County of Simcoe introduced Georgian Village, a state-of-the-art seniors' service campus. Our vision was to develop a cost-effective, revenue-generating facility that offers a variety of community-based services, programs and housing types in one location through a continuum of care model and age-at-home philosophy. Georgian Village became so much more than what we could have ever envisioned and since opening our doors it has gone on to receive numerous awards and accolades on a provincial and national level.

This paper provides an insightful and experiential guide for those who seek information about the future of long term care and seniors' services through an informative review of the Georgian Village process.

Written by Jane Sinclair, General Manager of Health and Emergency Services, who led the development of Georgian Village, this paper defines what success in seniors' care and housing can look like. Georgian Village is unlike any other seniors' care facility in the province and perhaps the country. As a campus, it supports the needs of our aging population, offers sustainable housing through a variety of housing types, cultivates local economic growth, and generates revenue opportunities to offset an inadequate funding system for critical services as long-term care and community support programs.

The challenges facing all long term care and seniors services providers - municipal, not-for-profit or private - are significant. Georgian Village, as an industry model, can serve as a solution.

But don't take my word for it, please take time to read the enclosed paper and come and see Simcoe County's Georgian Village first hand to experience this success in person. We look forward to doing anything we can to help you replicate and even build on this achievement.

Mark Aitken

Chief Administrative Officer,
County of Simcoe



February 1, 2018

Association of Municipalities of Ontario (AMO)
200 University Avenue, Suite 801
Toronto, Ontario M5H 3C6
Email: amo@amo.on.ca

Rural Ontario Municipal Association
200 University Avenue, Suite 800
Toronto, Ontario M5H 3C6
Email: roma@roma.on.ca

Ontario Municipalities

Re: Offering School Property to Municipalities

Dear Sir/Madam,

At its regular council meeting of January 15, 2018, Essex Town Council discussed the ongoing issue of school closures throughout Ontario. These school closures in many cases result in properties that are left as vacant and unused for substantial periods of time and this often results in properties that not only become eyesores for the affected communities but as well often have further negative impacts on the social and economic development of that community and its municipality.

Many municipalities might be interested in purchasing these properties for development and sustainment as a hub in their community. However the feasibility of this certainly becomes more daunting and for some municipalities even impossible when municipalities that are interested in purchasing must first (pursuant to current regulations) purchase these properties at fair market value with taxpayer dollars and then may need to spend further taxpayer monies in order to retrofit and/or remediate the building (s) on these properties.

Given the fact that these properties were already originally purchased and developed into schools using taxpayer dollars we ask that consideration be given to the fact that the taxpayers should not again have to purchase these properties at fair market value if the intent



is for the particular Municipality to develop and/or sustain these properties for the betterment of its community.

As a result of the discussion the following resolution was passed by Essex Town Council at its January 15, 2018 regular meeting:

Moved by Councillor Bondy
Seconded by Councillor Voakes

(R18-01-013) That the Town of Essex send a request to the Association of Municipalities of Ontario (AMO), ROMA and all other municipalities in Ontario requesting that when schools boards make decisions to close schools, that they have to offer the building to the local municipality for a dollar.

Carried

Council believes that providing the opportunity to purchase the buildings for a dollar would give municipalities a meaningful opportunity to ensure that these properties remain a key hub for social and economic development in their respective communities.

Should you have any questions or comments regarding this matter, please feel free to contact the undersigned.

Yours truly,

A handwritten signature in black ink, appearing to read "Robert Auger".

Robert Auger, L.L.B.
Clerk, Legal and Legislative Services
Town of Essex
Email: rauger@essex.ca

RA/Im



Office of the City Clerk

February 12, 2018

Via email

To all Municipalities in Ontario with populations greater than 40,000:

Dear Sirs/Madames:

RE: Kingston City Council Meeting, February 6, 2018 – Motion Regarding Cannabis Excise Tax Revenue

At the regular meeting of Kingston City Council held on February 6, 2018, Council approved the following resolution:

Whereas Kingston will be one of the first Ontario communities to have a legal Cannabis Sales outlet, as chosen by the Ontario Government; and

Whereas the Association of the Municipalities of Ontario (AMO) has forecast a substantial increase of cost to Policing, By-Law Enforcement, Public Health, and other Services, with these costs being largely borne by Municipal Taxpayers; and

Whereas the Government of Canada has promised 75% of Federal Revenues derived from the sale of Cannabis shall be shared with Provinces and Territories; and

Whereas the Kingston, Frontenac, Lennox, and Addington Public Health Board on January 24, 2018 passed unanimously the following Motion:

“That the KFL&A Board of Health urge the provincial government to dedicate a portion of the cannabis excise tax revenue from the federal government to local public health agencies in Ontario”;

Therefore Be It Resolved That the City of Kingston fully endorses the Board of Health Motion; and

Be It Further Resolved That the City of Kingston also seeks cannabis excise tax revenues to cover all additional costs of municipal policing and bylaw, and that upon passage this motion be shared with: Kathleen Wynne, Premier of Ontario; Charles Sousa, Provincial Minister of Finance; Mark Gerretsen, MP Kingston and

The Corporation of the City of Kingston

216 Ontario Street, Kingston, ON K7L 2Z3

Phone: (613) 546-4291 ext. 1247

Fax: (613) 546-5232

jbolognone@cityofkingston.ca

the Islands; Sophie Kiwala, MPP Kingston and the Islands; Association of Municipalities of Ontario (AMO); Association of Local Public Health Agencies (ALPHA); and all Ontario Municipalities with a population greater than 40,000.

Should you have any questions, please do not hesitate to contact me.

Yours sincerely,



John Bolognone
City Clerk
/s

**TO: THE MAYOR AND MEMBERS OF CITY COUNCIL
OF THE CITY OF HAMILTON**

FEBRUARY 20, 2018

RE: INTEGRITY COMMISSIONER REPORT – ADVICE RESPECTING THE CITY OF HAMILTON’S CODE OF CONDUCT WITH RESPECT TO “CONFLICT OF INTEREST” IN RELATION TO RENTAL HOUSING SUB-COMMITTEE MATTERS

In my capacity as Integrity Commissioner to the City, I have been reviewing my responsibilities and any outstanding matters arising out of my assigned work for the City.

In the course of this review, I have come across one outstanding matter with respect to which the Council, at its meeting held on August 18, 2017, requested a report, but to which I have not yet responded, which request is the following:

“7.20 Integrity Commissioner – Legal Opinion respecting the Municipal Conflict of Interest Act and the City of Hamilton’s Conflict of Interest (Item 8.9)

That the Integrity Commissioner report back to the Council with a legal opinion on the *Municipal Conflict of Interest Act* and the City of Hamilton’s Conflict of Interest, as it relates to Councillors who own rental properties as well as those tenants in the City of Hamilton in relation to the Rental Housing Sub-Committee matters.”

At the outset, I wish to emphasize to the Council that this report is provided in my capacity only as the City’s Integrity Commissioner, not as a “legal opinion”; that the City must look to its City Solicitor with respect to its own legal interests; and that Members must seek their own legal advice from counsel whom they may retain as individuals, with respect to their own interests, rights and responsibilities.

CONTEXT

Although I have not, until recently, obtained and reviewed the background documents which gave rise to this request, the following would appear to provide a reasonable outline:

-for a number of years, the City has had under consideration the enactment of a Rental Housing By-law;

-the City Council, on September 25, 2013, decided that a permanent Proactive Enforcement Program to enforce rental housing conditions be approved [subject to terms not here relevant], and:

“That a sub-committee be established to work with interested stakeholders to assist with the implementation of an approach to enforcement and legalization of appropriate rental housing including, but not limited to, process, fees, and by-law regulations.”

-the Council, on September 25, 2013, in approving Item 6 of Planning Committee Report 13-014, approved the establishment of a Rental Housing Sub-Committee, whose mandate is **“To work with interested stakeholders to assist with the implementation of an approach to enforcement and legalization of appropriate rental housing including, but not limited to, process, fees, and by-law regulations.”**

-the composition of the Sub-Committee (which I will refer to in this report as the “RHS”), is 9 members, including 3 Members of Council, appointed by Council, and representatives of a number of interested bodies and groups (some public and some representing other interested stakeholders), set out in the By-law, presumably considered by the Council as having interests and responsibilities relevant to rental housing issues in the City.

-the RHS:

- holds its meetings in public;
- receives technical support, including legal services, from designated City staff;
- has its administrative costs of operating meetings and legislative support, provided by the City Clerk’s Division;
- has not been delegated the power to exercise powers of the Council, or to make any orders or decisions binding on the City or on any of the “interested stakeholders”. It appears to have been intended by the Council that the RHS exercise an administrative, facilitative and operational role, and provide information and recommendations to the Council with respect to rental housing matters;
- may propose and recommend amendment to its Terms of Reference, to be “forwarded to the Planning Committee for approval”;
- is required to “follow all procedures established under the City of Hamilton Procedural By-law”.

The Minutes of a City Council meeting held on March 29, 2017, at which the Council had before it a matter involving “a resolution respecting Schedule 5 of Bill 7 – An Act to amend or Repeal Various Acts with respect to Housing and Planning (Property Standards)”, disclose that with respect to that matter, a number of Members of Council “declared a conflict...as they currently own rental units”.

It was this latter action by the Members which led to the request for this report.

APPLICABLE PRINCIPLES

The issues which are the subject-matter of the Council’s request for this opinion, arise out of, and relate to, matters which have already been the subject-matter of legal advice received by the City from its City Solicitor.

I would, first and foremost, emphasize that it is the responsibility of every Member of Council to ensure that he or she complies at all times with applicable law, and, particularly, to be aware of, understand, and comply with, all of the requirements of the Municipal Conflict of Interest Act, as well as the provisions of the Council’s Code of Conduct and to recognize and understand the importance of maintaining both the substance, as well as the appearance, of compliance in every way with such requirements, and the drastic nature of sanctions and other consequences which may follow any contravention.

Both of the laws referred to above, flow from, and are based upon, the important ethical and legal considerations applicable to the role of elected governmental representatives of the public, and the public attention which, more and more in recent times, is being brought to bear on the manner in which they conduct their important work.

Addressing the issues which I have been asked to address, while Hamilton’s Code of Conduct for Members of its Council does not contain a specific prohibition or restriction with respect to “conflict of interest”, it does state, in s. 2.1, as one of the key principles that underlie the Code, that:

“(b) Members of Council shall be committed to performing their functions with integrity and to avoiding the improper use of the influence of their office, and conflicts of interest, both apparent and real;”

The Municipal Conflict of Interest Act, in section 5, prohibits every Member of Council from participating in debate or voting upon any matter in respect of any matter in which the Member has a direct or indirect, or attributed, financial interest, and requires any such Member to disclose the interest and its general nature, and not to attempt in any way to influence the voting on any such question.

It is noted that, under section 4 of that Act:

4. Section 5 does not apply to any pecuniary interest in any matter that a member may have,

(k) by reason only of an interest of the member which is so remote or insignificant in its nature that it cannot reasonably be regarded as likely to influence the member.

CONCLUSION

I conclude, based on the above provisions of the Municipal Conflict of Interest Act and, by analogy, of the Code of Conduct, referred to above, that, subject to the responsibility of every Member to decide for him or herself whether or not he/she should participate or vote with respect to any particular matter, I do not believe that the fact alone that a Member owns a rental property, has one or more tenants in a property, or is a tenant of rental property, would, in itself, result in contravention of the Code in relation to Rental Housing Sub-Committee matters generally.

Of course, every case depends on all of the relevant facts and issues involved in the particular matter before the Council, (or a committee or local board), with the key issues to be determined including the financial impact, if any of the resolution, proposal or decision upon the financial circumstances of the Councillor, and whether or not the Member's interest is so remote or insignificant that it can or cannot, reasonably be regarded as likely to influence the Member.

In my role as Integrity Commissioner to the City, [and I am no longer a lawyer], I am not in a position to give legal advice to Members as to their responsibilities under the Municipal Conflict of Interest Act. I would strongly suggest that any Member in doubt as to how to proceed with respect to any particular matter or vote at Council, seek and follow her or his own legal advice, and, in case of doubt, proceed on the basis that the requirements of the Act should be followed as if a conflict does exist.

I trust that the foregoing will be of assistance to your Council. I will be pleased to provide whatever other or further assistance in this regard, that the Council may require.

George Rust-D'Eye, Integrity Commissioner to The City of Hamilton

Pilon, Janet

Subject: Interval House of Hamilton Mentor Action Be More Than a Bystander

Importance: High

From: awenzowski

Sent: February-21-18 8:52 AM

To: Pilon, Janet

Cc: Cutler, Christopher; Wojewoda, Nikola; Johnson, Aidan; 'Nancy Smith'; 'Sue Taylor'; 'Kevin Matchett'; 'Peggy Chapman'; 'Jennifer Roy'; Sarjeant, Val

Subject: Interval House of Hamilton Mentor Action Be More Than a Bystander

Importance: High

I am contacting you on behalf of Interval House of Hamilton (IHOH) regarding Be More Than a Bystander (BMTAB), a program of Interval House of Hamilton Mentor Action.

Be More Than a Bystander is a community program to end gender-based violence. Be More Than a Bystander started with EVA BC (ending violence association) and the BC Lions. IHOH purchased the rights to bring BMTAB to Hamilton in 2016, and we now have Hamilton's premiere sports organizations on board: Hamilton Bulldogs McMaster Athletics, and the Hamilton Tiger Cats. Hamilton is the only Canadian city to have all the major sports organizations as partners in BMTAB!

Led through Mentor Action, BMTAB is a combination of short videos played on local TV and radio stations, as well as an education program aimed at junior high and high school students. The message comes from male athletes, hockey, football, etc. – sports icons – using their status and public profile to Break the Silence of Violence Against Women. The PSAs and in school component, show ideas on how to communicate that abusive behaviours, words, action, and pictures, are unacceptable, inappropriate and intolerable.

Planning is underway for a major community awareness campaign in 2018-19. As part of this broad-based community awareness campaign we are asking if February 2019 (and beyond) can be designated as Hamilton's Be More Than a Bystander (unofficial) month as Hamilton does not have a proclamation policy. We are respectfully asking if this promotion can be through social media, arranging the flying of flags at City Hall, the lighting of City Hall and/or the new Hamilton Sign in recognition of Be More Than a Bystander month. We are also asking that Be More Than a Bystander communication be placed on an upcoming Council Agenda to provide a strong municipal voice to the importance of Be More Than a Bystander.

If you require further information, please do not hesitate to contact me.

Sincerely,

Allyson Wenzowski

On behalf of Interval House of Hamilton Mentor Action's Be More Than a Bystander

Cc: Nancy Smith, Executive Director Interval House of Hamilton

Sue Taylor, IHOH, Manager of Community Programs

Val Sarjeant, Chair MentorAction

Kevin Matchett, Hamilton Tiger Cats

Peggy Chapman, Hamilton Bulldogs

RE: One Year Pilot Program for Yard Maintenance Related Bylaws in the McMaster Neighbourhoods
To the Planning Committee

Good day most honorable Councilor;

We are writing this letter as a follow up to our delegation to the GIC and in regards to the report on the pilot program of proactive by-law enforcement in the McMaster neighbourhoods. This report confirms the concerns McMaster students have about this program, and it raises significant concerns both to the ethics, and sustainability of the program going forward. We thank Kelly Barnett for her time, and diligence in creating the report. We are concerned for the list of unanswered questions, and critical information that is not provided.

As it stands, this report does not provide an adequate amount of information to inform council and the community about the functioning of this program that has cost residents \$62,943 in non-compliance fees. We are asking council direct city staff to provide additional information before the report is received.

While the report provides a detailed breakdown orders issued by violation, there is no information the breakdown what orders were non-compliant by violation. For instances, of the 226 Long Grass / Weeds orders issued, how many of those were non-compliant and what is the amount of fees charged to these households? This information is vital in order to determine why these households are not complying, to understand the cost of fee for inspection by violation, and to increase education initiatives around the violations with the highest non-compliance rate.

The MSU has also been informed by Kelly Barnett that some of these orders issued do not receive a fee for inspection charge even if not compliant. An example of this would be "Improper Storage of Waste Collection Containers." However, this has never been explicitly stated in any report. Council should agree that the utmost transparency is necessary for this project to be useful and to meet its intended need.

We also believes there should be a breakdown of the orders issued by neighbourhood. This information will allow for more targeted educational efforts in neighbourhoods with a higher non-compliance rate. It will also reveal which households are more likely to be receiving these charges. For instance, it is common knowledge that Westdale has more properties owned by permanent residents as compared to Ainslie Wood, which has a higher percentage of student renters. This information is vital for the MSU to ensure students in these areas are not having the charges unlawfully passed down onto them or that rent is not being increased in these areas as a result of increased likelihood of receiving a charge. While the City has assured us that this program is not targeting student houses, it is still important for us to know if the orders and charges are more commonly being distributed to student houses. Information by neighbourhood will help us to discern this information.



Currently, this program appears to have a \$14,335 surplus. The MSU questions where this surplus is going and if it could be dedicated to increasing education in the neighbourhoods. In our recent budget submission, the MSU requests funding for our Student Community Support Network; a student-run support service funded through McMaster Students Union that is mandated to serve all full-time McMaster students. It provides important content regarding City by-laws, tenant rights, and student housing information through informational and promotional materials. It is currently limited in its outreach due to its small budget funded entirely by student dollars. An investment in this program would work to achieve the same goals of this Student By-Law Enforcement Program at a reduced cost to the City of Hamilton and the community.

Compliance with orders issued has been decreasing over the three terms. We suggest council raise this concern with city staff, who have said the goal of the program is to increase compliance. What are the possibilities for this decrease and are they doing any more proactive education to inform property owners?

We ask council to reflect on if they believe the fees for inspection charges for non-compliant properties are fair. The average fee for inspection charge was up to \$462 with an average of \$262 (See Table 1). While the goal of the program may be to create clean and healthy communities, we ask if it must come with such a heavy burden to those who let their grass grow an inch too long or leave a bulk item at the curb. The fact that 100% of the program is funded by 26% of complaints is deeply troubling and a blueprint for an unsustainable program. This is coupled with the exuberant fee for punishment model that is currently used. Council should consider if this fee is appropriate for the punishment to residents.



Table 1: Alternative presentation of bylaw violations and the enforcement results

Violation	Orders Issued Term 1	Orders Issued Term 2	Orders Issued Term 3	Total
Total Orders Issued	219	435	280	934
Non-compliance rate	33 (15%)	103 (24%)	104 (37%)	240 (26%)
Total Fee for Inspection Charges	\$15,230	\$34,664	\$13,049	\$62,943
Average Fee for Inspection Charge (Non-compliance rate / Total Fee for Inspection Charges)	\$462	\$337	\$125	\$262

A member of council informed us that this increase in by-law enforcement in the neighbourhoods students predominantly live in is a problem that MSU must handle as representatives of students. However, the information presented in this report does not provide us with enough information to adequately move forward in our educational efforts to increase compliance with lawn and yard maintenance by-laws and to decrease the hygiene problem in the community.

Furthermore, we have made recommendations to how this program can protect students. One of such recommendations is that when notices are shared to students, they should be informed of their rights as tenants and should be informed of appropriate channels for arbitration. We ask Barnett to give critical thought to this recommendation through this report. This report does not provide enough direction as to how to improve this program beyond financial concerns.

We thank council for their continual collaboration with the MSU and look forward to hearing the discussion on this issue during the Planning Committee meeting.

Sincerely,

Chukky Ibe
President

Ryan Deshpande
Vice-President Education

Stephanie Bertolo
Associate Vice-President Municipal Affairs



County of Simcoe
Clerk's Department
1110 Highway 26,
Midhurst, Ontario L9X 1N6

Main Line (705) 726-9300
Toll Free (866) 893-9300
Fax (705) 725-1285
simcoe.ca



February 15, 2018

City Clerk
City of Hamilton
192 Wentworth St. N
Hamilton, ON L8L 5V7

Attention: City Clerk,

Subject: Age Friendly Initiative Project Update – Positive Aging Strategy

At its meeting of November 28, 2017, Simcoe County Council approved the following recommendation:

“That Item CCW 17-351, dated November 28, 2017 regarding an Age-Friendly Initiative Project Update – Positive Aging Strategy, be received; and

That the County of Simcoe’s Senior’s Strategy entitled “Positive Aging Strategy: Older Adults Strengthening our Communities” substantively in the form attached to the subject item, be endorsed.”

It is requested that this matter be presented to your Council for information.

Thank you for your attention to this matter.

Regards,

A handwritten signature in black ink, appearing to read "John Daly".

John Daly
County Clerk

/ki

Enc.



County of Simcoe
Office of the Warden
1110 Highway 26,
Midhurst, Ontario L9X 1N6

Main Line (705) 726-9300
Toll Free (866) 893-9300
Fax (705) 725-1285
simcoe.ca

We are pleased to present our Positive Aging Strategy to support regional and municipal governments and businesses in building and strengthening age-friendly communities.

The Age-Friendly Community Initiative is being led by the World Health Organization and endorsed through available funding by the Government of Ontario. Our journey started in 2015 when we embarked on a significant public engagement process. Our efforts generated 3,048 completed Age-Friendly surveys, 12 informant interviews with community leaders, 16 focus groups across our municipalities and 8 public information sessions. This feedback was analyzed by experts in this field and developed into an Age-Friendly Needs Assessment document and ultimately this regional Positive Aging Strategy.

Simcoe County is one of the best places to live in Ontario for residents of all ages. Trends show the percentage of our residents aged 55 and over could jump from 31 per cent today to 41 per cent by 2041. We recognize the importance of this shift in demographics and we have worked with our partners to identify priorities and strategies to ensure that all our residents feel included, respected and have the services and supports to continue living a high quality of life in our region. We are proud of the work and collaborative approach that led to the development of our regional strategy and pleased to present this detailed planning framework and list of recommendations to support our regional and municipal governments and businesses in building and strengthening age-friendly communities here in Simcoe County.

We thank the Ontario Ministry of Seniors Affairs for providing funding support, our Age-Friendly Steering Committee, our municipal partners and our residents for contributing to this vision.

Sincerely,

Gerry Marshall
Warden, County of Simcoe

Niagara Escarpment Commission Commission de l'escarpement du Niagara

232 Guelph St.
Georgetown, ON L7G 4B1
Tel: 905-877-5191
Fax: 905-873-7452
www.escarpment.org

232, rue Guelph
Georgetown ON L7G 4B1
No de tel. 905-877-5191
Télécopieur 905-873-7452
www.escarpment.org



February 9, 2018

Co-ordinator
Planning Committee
City of Hamilton
71 Main Street West, 1st Floor
Hamilton, Ontario L8P 4Y5

Dear Sir/Madam,

Re: Application by Armstrong Planning & Project Management on Behalf of Empire (Red Hill) Ltd. for Zoning By-law Amendment and Draft Plan of Subdivision for Lands Located at 2 Glover Mountain Road, Stoney Creek (Ward 9)

The Niagara Escarpment Commission (NEC) has been made aware that Draft Plan of Subdivision application 25T-201601 is scheduled to be considered at the upcoming meeting of the Planning Committee on February 20th, 2018.

The NEC requests **deferral** of Draft Plan of Subdivision Application 25T-201601, for reasons noted below.

The entirety of the above noted property is subject to NEC Development Control. Section 24.(3) of the *Niagara Escarpment Planning and Development Act* states that:

No building permit, work order, certificate or licence that relates to development shall be issued, and no approval, consent, permission or other decision that is authorized or required by an Act and that relates to development shall be made, in respect of any land, building or structure within an area of development control, unless the development is exempt under the regulations or,

(a) a development permit relating to the land, building or structure has been issued under this Act; and

(b) the building permit, work order, certificate, licence, approval, consent, permission or decision is consistent with the development permit.

The creation of lots sought through the Draft Plan of Subdivision application is not exempt from the requirement for a Niagara Escarpment Development Permit as stated above. As no Development Permit has been issued for lot creation on the subject lands, NEC staff request that the approval of 25T-201601 be deferred, until such time as a Niagara Escarpment Development Permit authorizing the lot creation has been issued.

A Development Permit Application (File W/R/2017-2018/338) has been submitted to the NEC for the creation of lots at 2 Glover Mountain Road. This application, which was received in December of 2017, is currently under review.

Regarding the Zoning By-Law Amendment (File No. ZAC-16-001), the NEC requests to be notified of the adoption of the proposed zoning by-law amendment or the refusal of the request to amend the zoning by-law. Be advised that while the City can proceed to have zoning in place, development of the lands will need to be in accordance with an approved Development Permit from the NEC for lands within Development Control.

The NEC also requests to be notified of the decision of the City of Hamilton in respect of the Proposed Draft Plan of Subdivision, but will write separately to the Director of Planning as directed.

Please call Jim Avram, Senior Planner at 905-877-6370 if you have any questions.

Yours truly,



Debbie Ramsay, MCIP, RPP
Manager

OFFICE OF THE CITY CLERK	
FEB 20 2018	
REF'D TO	<u>Council Feb 20</u>
REF'D TO	_____
REF'D TO	_____
ACTION _____	

Pilon, Janet

Subject: Support of Resolution - Ask Ontario to Better Promote and Support Remediation of Contaminated Properties in Urban Centres

From: DCaskenette@cornwall.ca [mailto:DCaskenette@cornwall.ca]

Sent: February 21, 2018 11:14 AM

Subject: Support of Resolution - Ask Ontario to Better Promote and Support Remediation of Contaminated Properties in Urban Centres

Good morning,

At its regular meeting of September 25, 2017, Cornwall City Council discussed (as a New Business Item) a motion to petition the Ontario Government to create a special tax class within the commercial tax class to promote and support remediation of Brownfield lands. Abandoned contaminated sites are a common problem across municipalities in Ontario. For a landowner or a potential developer, many barriers stand in the way of redevelopment of contaminated sites: the site's environmental condition is unknown; the possibility of unexpected costs; delays that may occur; challenges concerning risk; cross-property movement of contaminants; market challenges; and liability. These uncertainties may lead landowners to abandon the site, paying reduced municipal taxes on the property, and leaving it inactive.

In Ontario, the Ministry that regulates contaminated lands, including Brownfields, is the Ontario Ministry of Environment and Climate Change (MOECC). Through the Environmental Protection Act, the purpose of which is to *protect and conserve the natural environment*, the MOECC (agent) can issue a Control Order to: an owner (or previous owner), a person who is or was in occupation of the source of contaminant; or a person who has or had the charge, management or control of a contaminant.

City Administration presented a report to City Council at the meeting of January 22, 2018 at which time Council endorsed the attached Resolution to request the Ontario Government to implement reforms that would encourage the remediation of abandoned contaminated properties and provide municipalities with additional tools under the Environmental Protection Act and Municipal Act, 2001. The City's Resolution has been forwarded to the Ministry of Finance, Ministry of Municipal Affairs and Housing and AMO for consideration.

The City of Cornwall is seeking the support from Ontario municipalities to petition the Ontario Government to consider and implement reforms that would encourage the remediation of abandoned contaminated properties and provide municipalities with more tools by creating a special tax class within the commercial tax class to enable municipalities to levy taxation on abandoned contaminated properties at a higher tax rate to encourage remediation of these Brownfield lands.

Debbie Caskenette
Deputy Clerk
Clerk's Division / Corporate Services
The Corporation of the City of Cornwall
360, rue Pitt Street, Cornwall ON K6J 3P9



RESOLUTION

The Council of the Corporation of the City of Cornwall

Resolution number: 2018-01
Date: January 22, 2018

Ask Ontario to Better Promote and Support Remediation of Contaminated Properties in Urban Centres

WHEREAS Communities across the province have many abandoned and polluted former dry-cleaning and gasoline-dispensing sites that are concentrated in downtowns and high traffic areas such as street corners;

Communities across the province are struggling to redevelop and revitalize those sites but are severely challenged in their efforts due to the cost of revitalization and the risk of encountering unforeseen contamination that is beyond that anticipated to be present in identified brownfield sites;

The financial resources available to developers through CIP programs are stretched to the limit, and steep up-front costs reduce the attraction of tax-increment funding policies, which are in fact taxpayer-funded mechanisms whereby residential ratepayers pay for the remediation of commercial properties;

Under current property assessment rules, commercial property owners who contaminate their own properties are able to appeal and receive a lower assessment based on that contamination;

In many instances, a corporation responsible for the degradation of a site abandons the site and moves to a new site within the same municipality, without assuming any financial responsibility for cleanup, and with lower taxes on the abandoned property due to the contamination;

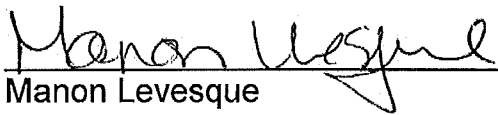
It is necessary to take legislative action to spur intensification and remediation of brownfield sites that occupy valuable urban spaces in the hearts of many communities;

A comprehensive and progressive polluter-pay environment should include policy tools at the provincial and municipal levels that can be used to require a party responsible for introducing contaminants into a shared municipal space environment to remediate that contamination.

THEREFORE, we request the Ontario Government to implement reforms that would encourage the remediation of abandoned contaminated properties and that would provide municipalities with more tools to encourage that remediation, including,

1. Amendments to the *Environmental Protection Act* that extend the circumstances under which a record of site condition is required in respect of a contaminated site, or that otherwise require the remediation of abandoned contaminated properties; and
2. Amendments to the *Municipal Act* that enable municipalities to levy taxation on abandoned properties at rates high enough to encourage remediation and build the resources for effective tax-increment funding programs.

I, Manon Levesque, City Clerk for The Corporation of the City of Cornwall, do hereby certify that the above is a true copy of Resolution Number 2018-01 enacted by Council on Monday, January 22, 2018.

A handwritten signature in black ink, appearing to read "Manon Levesque", is written over a horizontal line.

Manon Levesque
City Clerk

FEB 20 2018

Minister of
Innovation, Science and
Economic Development



Ministre de
l'Innovation, des Sciences et du
Développement économique

Ottawa, Canada K1A 0H5

FEV 15 2018
FEB

His Worship Fred Eisenberger
Mayor of the City of Hamilton
71 Main Street West, 2nd Floor
Hamilton, Ontario L8P 4Y5

Dear Mr. Mayor:

I am pleased to respond to your correspondence, which was forwarded to me by the Honourable Amarjeet Sohi, Minister of Infrastructure and Communities, requesting an extension to the Canada 150 Community Infrastructure Program (CIP 150).

CIP 150 has been delivered by regional development agencies across the country in celebration of the 150th anniversary of Confederation. The Federal Economic Development Agency for Southern Ontario (FedDev Ontario) has been delivering the program in Southern Ontario, with a total allocation of up to \$88.8 million over two years to support the renovation, expansion, and improvement of existing community and cultural infrastructure.

Over 700 projects were approved under CIP 150, some of which were from the City of Hamilton. As no extension is available for the program, all approved projects must be completed by the end date of March 31, 2018. I understand that FedDev Ontario has worked closely with your officials, and I am pleased to learn that the City has confirmed that its projects are now on track for completion by the program end date.

If you have additional questions, I encourage you to contact Ms. Alexia Touralias, Director General of Infrastructure and Business Development at FedDev Ontario, by email at alexia.touralias@canada.ca or by telephone at 416-723-8924.

Please accept my best wishes.

Sincerely,

A handwritten signature in cursive script that reads "N. Bains".

The Honourable Navdeep Bains, P.C., M.P.

Pilon, Janet

Subject: Response from the Minister of Infrastructure

From: Minister.MOI@ontario.ca
Sent: February 22, 2018 1:11 PM
To: Fred.Eisenberger@hamilton.ca
Subject: Response from the Minister of Infrastructure

His Worship Fred Eisenberger
Mayor
City of Hamilton
Fred.Eisenberger@hamilton.ca

Dear Mayor Eisenberger:

Thank you for your correspondence regarding the Community Infrastructure Program (CIP) 150 and the Clean Water Wastewater Fund (CWWF). Please accept my apologies for the delay in responding to your letter.

As the Minister responsible for the CWWF program, I note that you have also written to our federal partners requesting approval of an extension for the substantial completion date for a range of projects. As you may be aware, in September 2017, on behalf of all provincial and territorial ministers of infrastructure, I wrote to the federal government requesting an extension for Phase One of the CWWF program. I am pleased to advise that the federal government has recently approved a CWWF program-wide extension until March 31, 2020, and eliminated the requirement that 60 per cent of expenditures are completed prior to March 31, 2018.

Regarding your request for approval for a revised substantial completion date for certain projects under the CIP 150, this issue falls under the responsibility of my colleague the Honourable Daiene Vernile, Minister of Tourism, Culture and Sport. I have shared a copy of your correspondence with her for consideration, and you may wish to follow up with Minister Vernile directly.

Thank you again for writing and please accept my best wishes.

Sincerely,

[Original signed by]

Bob Chiarelli
Minister

c: The Honourable Daiene Vernile, Minister of Tourism, Culture and Sport

Confidentiality Warning: This e-mail contains information intended only for the use of the individual names above. If you have received this e-mail in error, we would appreciate it if you could advise us through the Minister's website at www.ontario.ca/page/ministry-infrastructure and destroy all copies of this message. Thank you.



February 23rd 2018

To: Mayor Eisenberger
To: Members of City Council
To: City Clerk

Cc: Jason Thorne GM, Planning and Economic Development
Paul Johnson GM, Healthy and Safe Communities
Chris Murray City Manager

Re: Recommendation for Provincial "Development Charge Rebate Program"

Dear Mayor Eisenberger and Members of Council;

We represent members of the Apartment Industry in the greater Hamilton area, including property owners, managers and the many people that support the ongoing operation of rental housing.

We applaud the City for showing an interest in applying for the DCRP. Hamilton has an extreme need for new rental housing in order to attract and house the many people that choose to rent. However, we are gravely concerned that the motion (as amended) and carried last week will exclude Hamilton from participating in any new rental construction that would be encouraged by this Provincial initiative.

The Province intended to create an incentive to build new multi-res buildings that would be for non-luxury mid-market rental housing. This was never invented or proposed for Rent Geared to Income (RGI) or the lowest level of affordability. Knowing that new rental stock is extremely expensive to build in the current economic environment, the DC waiver would help reduce upfront costs of construction, which in turn should help projects that are targeted towards the mid-market achieve viability.

The motion passed at Council on February 14th set a ceiling of 150% of existing market rents, despite the Province using a ceiling of 175%. Although well intentioned, the arbitrary price cap at 150% of existing rentals means that rents will not be high enough to pay for construction. The end result: nothing will be built, because it will be a losing proposition.

For Reference:

Greater Hamilton CMA Average Rents (including Burlington)	\$1,020
Burlington Sub-Market Average Rents (alone)	\$1,351
Provincial CMA Average Rents	\$1,140
Toronto CMA Average Rents (alone)	\$1308

(Source: CMHC Rental Market Surveys October 2017) (E. & O.E.)

490 Nelson Avenue, Burlington Ontario L7S 1X3

P: 289 208 5444 E: info@hamiltonapartmentassociation.ca W: www.hamiltonapartmentassociation.ca



Why are Hamilton rents lower? Hamilton's first construction boom was in the '20s and '30s, and those small brick walk-ups still provide a large proportion of the buildings surveyed for these rents. Compare to Burlington and Oakville, where much of their stock was built in the '70s and '80s with Federal incentives such as the MURB program. Those units are newer, bigger, and have more amenities and therefore higher rents.

Hamilton suffers from a few acute problems that should be noted: Our Land is relatively expensive, yet our rental rates for existing rental stock is relatively inexpensive. Since it costs the same to construct in Hamilton as it does in Toronto, using Hamilton rents as a basis for new construction limits the viability of any new construction. As a result, Hamilton projects will not be financially viable, but projects in Burlington, Oakville and Toronto (as examples) with higher existing rents will go ahead. So, on Plains Rd. in Aldershot it would be viable. Yet down the road on York Boulevard in Hamilton, the project will not be viable.

Accordingly, we request that Council reconsider its motion and change the to read: "...that the unit rental rates be capped at no more than 175% of the present market rent for the Province of Ontario..." This most closely aligns with the Provincial framework of the program and will at least put Hamilton on a level playing field for this vital new rental program. City staff specifically cautioned against reducing the threshold, fearing there would be "no rental housing built and no uptake of the DC Rebate Program in Hamilton." (Feb 12th Memo from Housing Staff pg. 4)

Please accept our suggestion as practical ways that may help Hamilton start building more desperately needed non-luxury mid-market rental housing. This is one very important part of the affordability spectrum and this program will be a meaningful incentive to making this happen. The increase in tax levy from new developments will be a key driver of municipal revenues. and it's free money from the Province.

Yours truly,

Arun Pathak
HDA A President



**PLANNING COMMITTEE
REPORT 18-003
9:30 a.m.
Tuesday, February 20, 2018
Council Chambers
Hamilton City Hall
71 Main Street West**

Present: Councillors A. Johnson (Chair), J. Farr (1st Vice-Chair), M. Green, C. Collins, M. Pearson, D. Skelly, R. Pasuta and J. Partridge

**Absent with
Regrets:** Councillor B. Johnson, City Business
Councillor D. Conley (2nd Vice-Chair) Personal

THE PLANNING COMMITTEE SUBMITS REPORT 18-003 AND RESPECTFULLY RECOMMENDS:

1. **Appeal to the Ontario Municipal Board (OMB) for Lack of Decision on Urban Hamilton Official Plan Amendment Application UHOPA-13-008, Town of Flamborough Zoning By-law No. 90-145-Z Amendment Application ZAC-13-039 and Draft Plan of Subdivision Application 25T-201306 for Lands Located at 111 Parkside Drive (Flamborough) (Ward 15) (PED18037) (Item 5.1)**

That Report PED18037 respecting Appeal to the Ontario Municipal Board (OMB) for Lack of Decision on Urban Hamilton Official Plan Amendment Application UHOPA-13-008, Town of Flamborough Zoning By-law No. 90-145-Z Amendment Application ZAC-13-039 and Draft Plan of Subdivision Application 25T-201306 for Lands Located at 111 Parkside Drive (Flamborough), be received.

2. **Active Official Plan Amendment, Zoning By-law Amendment and Plan of Subdivision Applications (City Wide) (PED18039) (Item 5.2)**

That Report PED18039 respecting Active Official Plan Amendment, Zoning By-law Amendment and Plan of Subdivision Applications, be received.

3. One Year Pilot Program for Yard Maintenance Related By-laws in the McMaster Neighbourhoods (PED16260(a)) (Ward 1) (Outstanding Business List Item) (Item 5.3)

That Report PED16260(a) respecting One Year Pilot Program for Yard Maintenance Related By-laws in the McMaster Neighbourhoods, be received.

4. Expanding Administrative Penalty System (APS) to Include Business Licensing By-law 07-170 and Noise Control By-law 11-285 (PED18047) (City Wide) (Item 5.4)

(a) That the Administrative Penalty By-law 17-225 (APS) be amended to include the General Provisions of the Business Licensing By-law 07-170 (Licensing By-law) by adding Table 10 to Schedule A, and that the amending by-law attached as Appendix "A", which has been prepared in a form satisfactory to the City Solicitor, be enacted by Council;

(b) That the Administrative Penalty By-law 17-225 (APS) be amended to include the Noise Control By-law 11-285 (Noise By-law) by adding Table 11 to Schedule A, and that the amending by-law attached as Appendix "B", which has been prepared in a form satisfactory to the City Solicitor, be enacted by Council.

5. Application for Approval of a Draft Plan of Condominium (Vacant Land) for Lands Located at 231 York Road, Dundas (Ward 13) (PED18043) (Item 6.1)

(a) That Draft Plan of Condominium Application 25CDM-201615, by Recchia Developments, Owner, to establish a Draft Plan of Condominium (Vacant Land) to create a vacant land condominium for six (6) single detached dwellings and a common element road with five (5) visitor parking spaces, sidewalks and landscaping, on lands located at 231 York Road (Dundas), as shown on Appendix "A" to Report PED18043, be APPROVED, subject to the following conditions:

(i) That the approval for Draft Plan of Condominium (Vacant Land) application, 25CDM-201615, prepared by Mathews, Cameron, Heywood – Kerry T. Howe Surveying Limited, certified by Dasha Page O.L.S, dated December 4, 2017, and consisting of six (6) single detached dwellings, a common element condominium road and five (5) visitor parking spaces, sidewalks and landscaping, attached as Appendix "B" to Report PED18043; and,

(ii) That the conditions of Draft Plan of Condominium Approval attached as Appendix "C" to Report PED18043 **be amended** to include the following:

- (1) That the Owner shall agree in the Condominium Agreement, in words satisfactory to Union Gas Limited, to grant to Union Gas Limited any easements that may be required for gas services. Easements may be required subject to final servicing decisions. In the event of any conflict with existing Union Gas Limited facilities or easements, the Owner / Developer shall be responsible for the relocation of such facilities or easements.”
- (2) That the Owner shall agree to include the following notices in the Condominium Agreement to the satisfaction of the Senior Director, Growth Management:

(aa) NOTICE REGARDING MAINTENANCE OF THE STORMWATER MANAGEMENT TANK

A private underground stormwater management tank has been shown on the servicing drawing for this property prepared by Amec Foster Wheeler. The Owner is advised to follow the tank manufacturer’s maintenance recommendations.

(bb) NOTICE REGARDING MAINTENANCE OF THE OIL/GRIT SEPARATOR

The private oil/grit separator is depicted as storm manhole 4 (STC300) on the servicing drawing prepared by Amec Foster Wheeler. The Owner is advised to follow the manufacturer’s maintenance recommendations for this unit. Typically, the unit should be inspected once per year or immediately after an oil, fuel or chemical spill. The long term maintenance frequency can be established based on the maintenance requirements during the first several years of operation if site conditions do not change. The unit is typically maintained using a “vactor” truck. A licensed waste management company should remove captured petroleum waste products from any oil, chemical or fuel spills and dispose responsibly.

and be approved;

- (b) That the public submissions received regarding this matter did not affect the decision.

6. Applications to Amend the City of Stoney Creek Zoning By-law No. 3692-92, the City of Hamilton Zoning By-law No. 05-200, and for Approval of a Draft Plan of Subdivision for Lands Located at 2 Glover Mountain Road, Stoney Creek (Ward 9) (PED18018) (Item 6.2)

- (a) That Zoning By-law Amendment Application ZAC-16-001 by Empire (Red Hill) Ltd., (Owner), for a change in zoning from the Neighbourhood Development “ND” Zone to the Single Residential “R4-34 (H1, H2, H3)” Zone, Modified (Blocks 1 – 4) in order to permit the creation of six (6) lots for single detached dwellings for lands located at 2 Glover Mountain Road (Stoney Creek), as shown on Appendix “A” to Report PED18018 be APPROVED, on the following basis:
- (i) That the draft By-law, attached as Appendix “B” to Report PED18018, which has been prepared in a form satisfactory to the City Solicitor, be enacted by City Council.
 - (ii) That the proposed change in zoning is consistent with the Provincial Policy Statement (2014), conforms to the Growth Plan for the Greater Golden Horseshoe (Places to Grow) and complies with the Urban Hamilton Official Plan.
- (b) That Zoning By-law Amendment Application ZAC-16-001 by Empire (Red Hill) Ltd., (Owner), for a change in zoning from the Neighbourhood Development “ND” Zone to the Conservation / Hazard Land (P5-679) Zone, Modified (Blocks 5 – 8) in order to recognize the Natural Heritage System and provide land for a required pond outfall / spillway for lands located at 2 Glover Mountain Road (Stoney Creek) and to create a specific exception to permit a reduced special setback from any building or structure to the Conservation / Hazard Land (P5-679) Zone, Modified, as shown on Appendix “A” to Report PED18018, be APPROVED, on the following basis:
- (i) That the draft By-law, attached as Appendix “C” to Report PED18018, which has been prepared in a form satisfactory to the City Solicitor, be enacted by City Council.
 - (ii) That the proposed change in zoning is consistent with the Provincial Policy Statement (2014), conforms to the Growth Plan for the Greater Golden Horseshoe (Places to Grow) and complies with the Urban Hamilton Official Plan.
- (c) That Draft Plan of Subdivision Application 25T-201601 by Empire (Red Hill) Ltd., (Owner), to establish a Draft Plan of Subdivision on lands located at 2 Glover Mountain Road (Stoney Creek), as shown in Appendix “A” to Report PED18018 be APPROVED, subject to the following:

- (i) That this approval apply to the Draft Plan of Subdivision “2 Glover Mountain Road” 25T-201601, prepared by Armstrong Planning and Project Management, and certified by Douglas E. Hunt, O.L.S., dated November 6, 2015, showing one block for a maximum of four (4) single detached dwellings (Block 1), three (3) blocks for future residential purposes in conjunction with the abutting lands which will yield a maximum of two (2) single detached dwellings (Blocks 2 – 4), one (1) block for the required 30.0 m buffer from the top of the Niagara Escarpment (Block 5), two (2) blocks for open space purposes (Blocks 6 – 7), one (1) block for a pond outfall / spillway easement (Block 8), and one proposed street, shown as Street “A”, subject to the owner entering into a Standard Form Subdivision Agreement, as approved by City Council, and with the Special Conditions, attached as Appendix “D” to Report PED18018.
- (ii) That payment of Cash-in-Lieu of Parkland will be required, pursuant to Section 51 of the *Planning Act*, prior to the issuance of each building permit. The calculation for the Cash-in-Lieu payment shall be based on the value of the lands on the day prior to the issuance of each building permit. Parkland Credits may be applied on a land value basis to the abutting Draft Plan of Subdivision 25T-2013005R, known as “Red Hill – Phase 3 / 4” in the event of any over-dedication of parkland from the registration of the Draft Plan of Subdivision (25T-201601).
- (iii) There is no City Share for the costs of the servicing works within the draft plan lands.
- (d) That the public submissions received regarding this matter did not affect the decision.

7. Equitable Access to City's Taxi System for All Persons with Disabilities (PED16232(b)) (City Wide) (Item 7.1)

- (a) That 18 accessible taxi plates (ATP) be issued in 2018;
- (b) That, subject to the approval of Recommendation (a) of Report PED16232(b) respecting 18 accessible tax plates (ATP) being issued in 2018, the following be approved:
 - (i) That an accessible priority list (APL) be created;
 - (ii) That an annual fee of \$57 (including applicable HST) to be placed on the APL be approved and added to the User Fee and Charges By-law 17-137;

- (iii) That amendments in the form attached as Appendix “A” to Report PED16232(b), respecting amendments to Schedule 25 (Taxicabs) of the By-law to License and Regulate Various Business, being By-law No. 07-170, which has been prepared in a form satisfactory to the City Solicitor, be enacted by Council;
- (iv) That the implementation schedule as outlined in Report PED16232 which was approved by Council on December 14, 2016, Item 2(b) of the Planning Committee Report 16-021, be amended to permit the release of an additional 18 accessible tax plates (ATP) to qualified licensed drivers within the Hamilton Taxicab Industry, in accordance with the criteria outlined in Appendix “B” attached to Report PED16232(b);
- (v) That the current complaint process be enhanced to include a direct phone line option and solid web complaint portal;
- (vi) That to achieve compliance with the *Accessibility for Ontarians with Disabilities Act, 2005, S.O, 2005, c.11 (AODA)* standards and to support the Advisory Committee for Persons with Disabilities (ACPD) with the on-demand accessible taxicab initiative, any future issuance of accessible taxi plates (ATP) be at the discretion of the Director of Licensing and By-law Services;
- (vii) That Report PED16232(b) respecting Equitable Access to City's Taxi System for All Persons with Disabilities be brought to the next Advisory Committee for Persons with Disabilities (ACPD) Committee Meeting as information only;
- (viii) That 0.25 full-time equivalent (FTE) be approved for program administration and increased enforcement of accessible complaints, to be fully funded from the revenues generated from annual renewals of the accessible plates and Personal Transportation Providers (PTP) revenue;
- (ix) That staff be directed to report back in six months on the status of the accessible taxi plate applications including the number applied for and the number in service.

8. Business Licensing By-law 07-170 – Replacement of Taxicab Tariff / Fares (Appendix 1 of Schedule 25) (PED18045) (City Wide) (Item 7.2)

That the Business Licensing By-law 07-170 be amended by replacing Taxicab Tariff/Fares Meter and By Agreement Rates (Appendix 1 of Schedule 25), and that the amending By-law, attached as Appendix “A” to Report PED18045, which has been prepared in a form satisfactory to the City Solicitor, be enacted by Council.

9. Business Licensing By-law 07-170, Payday Loans Businesses (Schedule 11) (PED16039(a)) (City Wide) (Outstanding Business List Item) (Item 7.3)

That the Business Licensing By-law 07-170 (Licensing By-law) be amended by replacing Payday Loans (Schedule 11) with the draft By-law attached as Appendix "A" to Report PED16039(a), which has been prepared in a form satisfactory to the City Solicitor, and that the draft by-law, be enacted by Council;

10. Comprehensive Review of Discharge of Firearms By-law 05-114 (PED16107(a)) (City Wide) (Outstanding Business List Item) (Item 8.1)

That the Licensing and By-law Services staff be directed to consult with Legal Services to develop and bring forward to the Planning Committee an updated By-law to repeal and replace City of Hamilton Discharge of Firearms By-law 05-114 that incorporates the recent and future urban developments in the City and includes the key aspects generated by the public engagement process as contained in Report PED16107(a).

11. Animal Adoptions for the City of Hamilton (PED18004) (City Wide) (Outstanding Business List Item) (Item 8.2)

- (a) That staff be directed to commence an Animal Adoption Pilot Program and report back to the Planning Committee at the end of an 18 month term regarding the impact on current operations and the City's animal rescue partners;
- (b) That the General Manager of Planning and Economic Development be authorized to execute all necessary documents to implement Recommendation (a), as outlined above, in a form satisfactory to the City Solicitor.

12. Response to the Ministry of Municipal Affairs and Ministry of Housing - Consultation on the Regulatory Content of Bill 7 (Inclusionary Zoning) (PED18063) (City Wide) (Added Item 8.3)

- (a) That Council endorse the comments and recommendations contained in Report PED18063 and that the City Clerk be directed to forward Report PED18063 and Appendix "A" to the Ministry of Municipal Affairs and the Ministry of Housing as formal comments in response to the proposed regulatory content concerning Inclusionary Zoning; and,
- (b) That following the proclamation of Bill 7, the *Promoting Affordable Housing Act*, staff be directed to consult with the community and report back to Planning Committee with a proposed framework for inclusionary zoning in Hamilton.

13. Reduced Road Widening for 84 and 88-96 Lakeview Drive, Stoney Creek (Added Item 10.1)

WHEREAS, the Planning Act and the Urban Hamilton Official Plan state that the City shall reserve or obtain road widenings for rights-of-way as described in Schedule C-2 – Future Road Widenings and daylight triangles;

WHEREAS, Official Plan Amendment and Zoning By-law Amendment applications (UHOPA-17-009 and ZAC-17-020) have been submitted for 84 and 88-96 Lakeview Drive, Stoney Creek, for the development of maisonette and stacked townhouse units; and

WHEREAS, a road widening for North Service Road and a daylight triangle at the intersection at North Service Road and Lakeview Avenue have been identified;

THEREFORE BE IT RESOLVED:

That staff be directed to accept a reduced road widening dedication of 0.99 metres for the northerly portion of the subject lands where there is currently an uneven right-of-way, and an irregular daylight triangle having minimum dimensions of 10 metres by 2.2 metres by 35 metres for 84 and 88-96 Lakeview Drive, Stoney Creek (UHOPA-17-009 and ZAC-17-020).

14. Ontario Municipal Board Appeals of the Commercial Mixed Use Zones (UHOPA 69 and Zoning By-law 17-240) (LS18008/PED18050) (City Wide) (Distributed under separate cover.) (Item 12.2)

That Report LS18008/PED18050 respecting Ontario Municipal Board Appeals of the Commercial Mixed Use Zones (UHOPA 69 and Zoning By-law 17-240) be received and remain confidential.

15. Ontario Municipal Board Appeals of the Commercial Mixed Use Zones (UHOPA 69 and Zoning By-law 17-240) (LS18008(a)) (City Wide) (Distributed under separate cover.) (Item 12.3)

(a) That the City Solicitor be authorized to retain outside experts as described in Report LS18008(a), to be funded through the Tax Stabilization Reserve (110046);

(b) That Report LS18008(a) be received and remain confidential.

FOR INFORMATION:

(a) CHANGES TO THE AGENDA (Item 1)

The Committee Clerk advised of the following changes to the agenda:

1. ADDED DELEGATION REQUEST

- 4.1 Marion Emo, Hamilton/Burlington SPCA respecting animal adoptions for the City of Hamilton, Item 8.2 (For today's meeting.)

2. REPLACEMENT OF APPENDIX TO ITEM 6.2

- 6.2 Appendix "B" attached to Item 6.2 respecting Applications to Amend the City of Stoney Creek Zoning By-law No. 3692-92, the City of Hamilton Zoning By-law No. 05-200, and for Approval of a Draft Plan of Subdivision for Lands Located at 2 Glover Mountain Road, Stoney Creek (Ward 9) (PED18018) is deleted and replaced.

3. DELEGATION WITHDRAWN

- 8.1 Comprehensive Review of Discharge of Firearms By-law 05-114 (PED16107(a)) (City Wide) (Outstanding Business List Item)

Delegation

1. Edmond Rose (**Withdrawn**)

4. ADDED DISCUSSION ITEM

- 8.3 Response to the Ministry of Municipal Affairs and Ministry of Housing - Consultation on the Regulatory Content of Bill 7 (Inclusionary Zoning) (PED18063) (City Wide)

5. REMOVAL OF ITEM 12.4

- 12.4 Appeal to the Ontario Municipal Board (OMB) – Appeal of Non-Decision of Proposed Official Plan Amendment, Zoning By-law Amendment and Draft Plan of Subdivision, 609 and 615 Hamilton Street North, 3 Nisbet Boulevard and 129-137 Truedell Circle, Waterdown, City of Hamilton – UHOPA-17-03, ZAC-17-013 and 25T-201702 (Waterdown) (LS18007/PED18051) (Ward15) (**Report is removed from the agenda.**)

6. ADDED NOTICE OF MOTION

10.1 Reduced Road Widening for 84 and 88-96 Lakeview Drive, Stoney Creek

7. CORRECTION TO APPENDIX "A"

The date indicated in Section 7 on Appendix "A" to Item 7.3 respecting Business Licensing By-law 07-170, Payday Loans Businesses (Schedule 11) (PED16039(a)) (City Wide) should read January 1, 2018 instead of November 1, 2016.

The agenda for the February 20, 2018 meeting was approved, as amended.

(b) DECLARATIONS OF INTEREST (Item 2)

There were none declared.

(c) APPROVAL OF THE MINUTES OF THE PREVIOUS MEETING (Item 3)

(i) February 6, 2018 (Item 3.1)

The Minutes of the February 6, 2018 meeting were approved.

(d) DELEGATION REQUESTS (Item 4)

The following delegation request was approved to address Committee at today's meeting:

- (i) Marion Emo, Hamilton/Burlington SPCA respecting animal adoptions for the City of Hamilton, Item 8.2 (Added Item 4.1)

(e) DELEGATIONS/PUBLIC HEARING (Item 6)

- (i) **Application for Approval of a Draft Plan of Condominium (Vacant Land) for Lands Located at 231 York Road, Dundas (Ward 13) (PED18043) (Item 6.1)**

In accordance with the provisions of the *Planning Act*, Chair A. Johnson advised those in attendance that if a person or public body does not make oral submissions at a public meeting or make written submissions to the Council of the City of Hamilton before Council makes a decision regarding the Draft Plan of Condominium (Vacant Land), the person or public body is not entitled to appeal the decision of the Council of the City of Hamilton to the Ontario Municipal Board and the person or public body may not be

added as a party to the hearing of an appeal before the Ontario Municipal Board unless, in the opinion of the Board, there are reasonable grounds to do so.

No members of the public came forward.

The public meeting was closed.

The staff presentation was waived.

Fernando Recchia, the owner, was in attendance and indicated that he is in support of the staff report.

The conditions of Draft Plan of Condominium Approval attached as Appendix "C" to Report PED18043 were amended to include the following:

- (a) That the Owner shall agree in the Condominium Agreement, in words satisfactory to Union Gas Limited, to grant to Union Gas Limited any easements that may be required for gas services. Easements may be required subject to final servicing decisions. In the event of any conflict with existing Union Gas Limited facilities or easements, the Owner / Developer shall be responsible for the relocation of such facilities or easements."
- (b) That the Owner shall agree to include the following notices in the Condominium Agreement to the satisfaction of the Senior Director, Growth Management:
 - (i) NOTICE REGARDING MAINTENANCE OF THE STORMWATER MANAGEMENT TANK

A private underground stormwater management tank has been shown on the servicing drawing for this property prepared by Amec Foster Wheeler. The Owner is advised to follow the tank manufacturer's maintenance recommendations.

- (ii) NOTICE REGARDING MAINTENANCE OF THE OIL/GRIT SEPARATOR

The private oil/grit separator is depicted as storm manhole 4 (STC300) on the servicing drawing prepared by Amec Foster Wheeler. The Owner is advised to follow the manufacturer's maintenance recommendations for this unit. Typically, the unit should be inspected once per year or immediately after an oil, fuel or chemical spill. The long term maintenance frequency can be established based on the maintenance requirements during the first several years of operation if site

conditions do not change. The unit is typically maintained using a “vactor” truck. A licensed waste management company should remove captured petroleum waste products from any oil, chemical or fuel spills and dispose responsibly.

The recommendations were amended by adding the following subsection (b) and re-lettering the balance:

- (b) That the public submissions received regarding this matter did not affect the decision.

For disposition of this matter refer to Item 5.

(ii) Applications to Amend the City of Stoney Creek Zoning By-law No. 3692-92, the City of Hamilton Zoning By-law No. 05-200, and for Approval of a Draft Plan of Subdivision for Lands Located at 2 Glover Mountain Road, Stoney Creek (Ward 9) (PED18018) (Item 6.2)

In accordance with the provisions of the *Planning Act*, Chair A. Johnson advised those in attendance that if a person or public body does not make oral submissions at a public meeting or make written submissions to the Council of the City of Hamilton before Council makes a decision regarding the Zoning By-law Amendments and the Draft Plan of Subdivision, the person or public body is not entitled to appeal the decision of the Council of the City of Hamilton to the Ontario Municipal Board and the person or public body may not be added as a party to the hearing of an appeal before the Ontario Municipal Board unless, in the opinion of the Board, there are reasonable grounds to do so.

No members of the public came forward.

The public meeting was closed.

The staff presentation was waived.

Mary Filipetto from Armstrong Planning and Project Management was in attendance representing the applicant. Committee had no questions.

The recommendations were amended by adding the following subsection (d):

- (d) That the public submissions received regarding this matter did not affect the decision.

For disposition of this matter refer to Item 6.

(f) **PUBLIC NOTICE (Item 7)**

(i) **Equitable Access to City's Taxi System for All Persons with Disabilities (PED16232(b)) (City Wide) (Item 7.1)**

Registered Speaker

1. Paula Kilburn of the Advisory Committee for Persons with Disabilities Transportation Working Group

Paula Kilburn addressed Committee and advised that there is a shortage of accessible taxis. Tim Nolan, also a member of the Advisory Committee for Persons with Disabilities Transportation Working Group, joined her at the podium and indicated that there is a problem with prime time availability. He requested that all taxis be accessible.

The delegations were received.

2. John Enright, taxi driver

John Enright addressed Committee and indicated that he is a wheel chair accessible taxi driver in the City of Hamilton. He is in support of the staff recommendations.

The delegation was received.

3. Roseanne Wazny

Roseanne Wazny addressed Committee and indicated that she has experience as a taxi driver and has driven people with and without disabilities and she enquired how she can be added to the list to become an accessible taxi driver.

The delegation was received

Tim Nolan was permitted to address Committee a second time.

4. Tim Nolan

Tim Nolan addressed Committee and indicated that this time he is speaking on behalf of himself and not of ACPD Sub-Committee. He outlined why the accessible transportation system does not work.

The following was added as subsection (b)(ix);

- (b)(ix) That staff be directed to report back in six months on the status of the accessible taxi plate applications including the number applied for and the number in service.

For disposition of this matter refer to Item 7.

(ii) Business Licensing By-law 07-170 – Replacement of Taxicab Tariff / Fares (Appendix 1 of Schedule 25) (PED18045) (City Wide) (Item 7.2)

No one came forward to speak to this Item.

For disposition of this matter refer to Item 8.

(iii) Business Licensing By-law 07-170, Payday Loans Businesses (Schedule 11) (PED16039(a)) (City Wide) (Outstanding Business List Item) (Item 7.3)

Registered Speakers

1. Tom Cooper and Jodi Dean from the Hamilton Roundtable for Poverty Reduction

Tom Cooper addressed Committee and indicated that Jodi Dean was unable to attend today's meeting. He provided a copy of her written comments which were distributed. A copy is available for viewing on the City's website.

Tom Cooper addressed Committee with the aid of a PowerPoint presentation. A copy is available for viewing on the City's website. He spoke in support of the proposed by-law amendment and responded to questions from Committee.

The delegation was received.

2. Doug Hoyes, Hoyes, Michalos & Associates Inc.

Doug Hoyes addressed Committee and read from a prepared statement. He indicated that he is a CPA and that he agrees with Tom Cooper's comments. However, in his opinion, debt is the problem, not the payday loans. He advised Committee not to be too restrictive. Educating the payday loan borrowers is important.

The delegation was received.

3. Tony Irwin, President & CEO, Canadian Consumer Finance Association

Tony Irwin addressed Committee and read from a prepared statement. He spoke in support of payday loans.

The delegation was received.

4. Michael Wood, Chair of Hamilton ACORN

Michael Wood addressed Committee and read from a prepared statement. He spoke in support of the staff recommendations and believes the Federal government should be requested to do more to protect vulnerable people.

The delegation was received.

5. Patrick Mahon, Independent Payday Loan Association of Canada

Patrick Mahon addressed Committee and read from a prepared statement. He spoke in support of payday loans and indicated that they provide a necessary service. He responded to questions from Committee.

The delegation was received.

6. Jane Cardinal

Jane Cardinal addressed Committee and indicated that people who go to these loan agencies or pawn shops do not have any other options due to poverty and social assistance is not enough.

The delegation was received.

Staff were directed to work with the affected Ward Councillors prior to the Council meeting to review the inclusion of the City of Hamilton Downtown and former Town of Flamborough as excluded areas under the by-law and to prepare amendments as required for Council's consideration.

For disposition of this matter refer to Item 9.

(g) DISCUSSION ITEMS (Item 8)

- (i) Comprehensive Review of Discharge of Firearms By-law 05-114 (PED16107(a)) (City Wide) (Outstanding Business List Item) (Item 8.1)**

Robert Ustrzycki, Senior Project Manager, Municipal Law Enforcement, addressed Committee with the aid of a PowerPoint presentation and provided an overview of the report. Copies of the hand-out were distributed and a copy is available for viewing on the City's website. He responded to questions from Committee.

Delegation

1. Edmond Rose (Approved November 15, 2016)

As indicated under the changes to the agenda, Mr. Rose did not attend today's meeting as he is satisfied with the staff report.

For disposition of this matter refer to Item 10.

(ii) Animal Adoptions for the City of Hamilton (PED18004) (City Wide) (Outstanding Business List Item) (Item 8.2)

Sue Russell, Project Manager, Animal Control, addressed Committee with the aid of a PowerPoint presentation and provided an overview of the report. Copies of the hand-out were distributed and a copy is available for viewing on the City's website.

The staff presentation was received.

Delegation

1. Margie Goold (Approved March 31, 2015)

Margie Goold addressed Committee and asked that the catch and release program in the Sherman Hub area be expanded City wide. She indicated that not all cats can be pets and feral cats can live in the community successfully.

The delegation was received.

2. Marion Emo, Hamilton/Burlington SPCA

Marion Emo addressed Committee with the aid of a PowerPoint presentation outlining the services provided by the SPCA and provided brochures which were distributed. A copy is available for viewing on the City's website.

The delegation was received.

Chair A. Johnson indicated that he wished to be recorded as OPPOSED to this Item.

For disposition of this matter refer to Item 11.

(iii) Response to the Ministry of Municipal Affairs and Ministry of Housing - Consultation on the Regulatory Content of Bill 7 (Inclusionary Zoning) (PED18063) (City Wide) (Added Item 8.3.)

Edward John, Senior Project Manager, Urban Renewal, addressed Committee with the aid of a PowerPoint presentation and provided an overview of the report. A copy is available for viewing on the City's website. He responded to questions from Committee.

The staff presentation was received.

For disposition of this matter refer to Item 12.

(h) MOTIONS (Item 11)

(i) Parking Regulations on a 'Through Street'

WHEREAS, most major Ontario municipalities restrict parking overnight on major roadways;

WHEREAS, staff are currently undertaking a review of Hamilton Parking By-law 01-218, and

WHEREAS, members of the public have, from time to time, expressed concern with the rationale for overnight parking restrictions on 'through streets' and the method of informing motorists where such regulations apply;

THEREFORE BE IT RESOLVED:

That staff be directed to review the rationale for overnight parking restrictions on 'through streets' and that this review include a review/summary of overnight parking regulations in other large Ontario municipalities and how they inform motorists of such regulations, and report back to the Planning Committee with recommendations to optimize the effectiveness of the through street system.

(i) NOTICES OF MOTION (Item 10)

(i) Reduced Road Widening for 84 and 88-96 Lakeview Drive, Stoney Creek (Added 10.1)

Councillor Pearson introduced a notice of motion respecting Reduced Road Widening for 84 and 88-96 Lakeview Drive, Stoney Creek

The rules of order were waived in order to allow the introduction of a motion respecting Reduced Road Widening for 84 and 88-96 Lakeview Drive, Stoney Creek.

For disposition of this matter refer to Item 13.

(j) GENERAL INFORMATION/OTHER BUSINESS (Item 11)

(i) Outstanding Business List (Item 11.1)

(a) The following new due dates were approved:

Item “E” – Request to Designate 437 Wilson Street East (Ancaster)
Under Part IV of the Ontario Heritage Act (PED12166)

Due date: February 20, 2018

New due date: July 10, 2018

Item “F” – Staff to consult with property owners & Councillors re: HMHC Report 14-009 recommendations to include 206, 208 and 210 King Street East in the Register of Property of Cultural Heritage Value or Interest and staff’s designation work program and report back.

Due date: February 20, 2018

New due date: July 10, 2018

Item “I” – Report back with Terms of Reference for Community Energy Plan(i.e. renewable such as solar energy)

Due date: February 20, 2018

New due date: April 17, 2018

(b) The following Items were identified as complete and were removed:

Item “G” – The Feasibility of Establishing a City Animal Adoption Service in Partnership with the HBSPCA.

(Item 8.2 on this agenda)

Item “J” - Staff to report back with recommendations to update Discharge of Firearms By-law

(Item 8.1 on this agenda)

Item “Q” – That Licensing Division staff review Schedule 11 of Business Licensing By-law 07-170 – Payday Loans, and develop a model By-law addressing minimum distances, concentration and

hours of operation with respect to Payday Loans businesses, and report back.

(Item 7.3 on this agenda)

Item "R" - That staff report back before the end of the 12 month pilot program for enforcement of yard maintenance related by-laws in the McMaster neighbourhoods with the results and recommendations for permanent by-law enforcement resource requirements for the McMaster neighbourhoods

(Item 5.3 on this agenda)

(k) PRIVATE AND CONFIDENTIAL (Item 12)

Committee approved the following Items without moving into Closed Session:

(i) Private and Confidential Minutes of the February 6, 2018 Meeting (Distributed under separate cover.) (Item 12.1)

The Private and Confidential Minutes of the February 20, 2018 Meeting were approved:

(ii) Ontario Municipal Board Appeals of the Commercial Mixed Use Zones (UHOPA 69 and Zoning By-law 17-240) (LS18008/PED18050) (City Wide) (Distributed under separate cover.) (Added Item 12.2)

For disposition of this matter refer to Item 14.

(iii) Ontario Municipal Board Appeals of the Commercial Mixed Use Zones (UHOPA 69 and Zoning By-law 17-240) (LS18008(a)) (City Wide) (Distributed under separate cover.)

For disposition of these matters, refer to Item 15.

(l) ADJOURNMENT (Item 13)

There being no further business, the Planning Committee adjourned at 1:44 p.m.

Respectfully submitted,

Councillor A. Johnson
Chair, Planning Committee

Ida Bedioui
Legislative Co-ordinator
Office of the City Clerk



GENERAL ISSUES COMMITTEE REPORT 18-005

9:30 a.m.

Wednesday, February 21, 2018
Council Chambers
Hamilton City Hall
71 Main Street West

Present: Mayor F. Eisenberger, Deputy Mayor T. Jackson (Chair),
Councillors D. Skelly, C. Collins, S. Merulla, M. Green, J. Farr,
A. Johnson, M. Pearson, B. Johnson, L. Ferguson, A. VanderBeek, R.
Pasuta

**Absent with
Regrets:** Councillors D. Conley, T. Whitehead, J. Partridge – Personal

THE GENERAL ISSUES COMMITTEE PRESENTS REPORT 18-005 AND RESPECTFULLY RECOMMENDS:

**1. Capital Projects Work-in-Progress Review Sub-Committee, Report 18-001,
January 29, 2018 (Item 5.1)**

**Public Works - Capital Projects Status Report as of September 30, 2017
(FCS17076(a)) (City Wide) (Item 8.1)**

- (a) That the Capital Projects Status Report, Public Works Tax Supported Projects, as of September 30, 2017, attached as Appendix “A” to Report FCS17076(a), be received; and,
- (b) That the Capital Project Status Report, Public Works Rate Supported Projects, as of September 30, 2017, attached as Appendix “B” to Report FCS17076(a), be received.

**2. Concession Street Business Improvement Area (BIA) Revised Board of
Management (PED14242(f)) (Wards 6 and 7) (Item 5.2)**

That the following individual be appointed to the Concession Street Business Improvement Area (BIA) Board of Management:

- (i) James Knott

3. Transit (HSR) Passenger Information Technology (PW18018) (City Wide) (Item 5.3)

That Report PW18018, respecting the Transit (HSR) Passenger Information Technology, be received.

4. Vic Djurdjevic, Nikola Tesla Educational Corporation, respecting the 120th Anniversary of Hamilton's "Power Turned On" (Item 6.1)

(a) That the presentation, respecting the 120th Anniversary of Hamilton's "Power Turned On", be referred to the Director of Culture & Tourism to assist in the promotion of the event and to offset the costs from within the existing 2018 operating budget; and,

(b) That the fees for the event being held at the Hamilton Museum of Steam and Technology and the reception at City Hall, by the Nikola Tesla Educational Corporation, respecting the 120th Anniversary of Hamilton's "Power Turned On" be waived.

5. Amendments to the Environmental Remediation and Site Enhancement (ERASE) Community Improvement Plan (CIP) (PED18030) (City Wide) (Item 7.1)

(a) That Report PED18030, respecting the proposed amendments to the Environmental Remediation and Site Enhancement (ERASE) Community Improvement Plan (CIP), be received;

(b) That staff be directed to bring forward to the Planning Committee for a statutory public meeting, in accordance with Section 17 (15) (d) of the *Planning Act*, the following recommended revisions to the Environmental Remediation and Site Enhancement (ERASE) Community Improvement Plan (CIP);

(i) That the Environmental Remediation and Site Enhancement (ERASE) Community Improvement Project Area, as set out in Report PED18030, and that the By-law attached to Report PED18030 to amend the Environmental Remediation and Site Enhancement (ERASE) Community Improvement Project Area as Appendix "A" be enacted;

(ii) That the City's maximum contribution as part of the Environmental Remediation and Site Enhancement (ERASE) Study Grant Program be increased from \$25K to \$35K for two studies per property / project be approved;

- (iii) That the Environmental Remediation and Site Enhancement (ERASE) Study Grant Program date, for maximum of two studies per property, be reset to July 1, 2011;
- (iv) That additional administrative requirements regarding submission and enactment of Environmental Remediation and Site Enhancement (ERASE) Study Grant applications, be approved;
- (v) That additional eligible costs be added to the Environmental Remediation and Site Enhancement (ERASE) Study Grant and Redevelopment Grant Program to cover Designated Substances and Hazardous Material Survey and Industrial / Office Reuse Feasibility Study and their removal and abatement in the Older Industrial Area, be approved;
- (vi) That additional eligible costs be added to the Environmental Remediation and Site Enhancement (ERASE) Study Grant and Redevelopment Grant Program to cover Designated Substances and Hazardous Material Survey and their removal and abatement applicable to current / closed Institutional uses as an eligible cost across the Community Improvement Project Area (CIPA), be approved;
- (vii) That additional eligible costs be added to the Environmental Remediation and Site Enhancement (ERASE) Study Grant and Environmental Remediation and Site Enhancement (ERASE) Redevelopment Grant Program to cover Designated Substances and Hazardous Material Survey and their removal and abatement applicable to designated Heritage Buildings as an eligible cost across the Community Improvement Project Area (CIPA), be approved;
- (viii) That staff be authorized to implement and administer the Environmental Remediation and Site Enhancement (ERASE) Redevelopment Grant Program, including the additional eligible costs, once the amendment has come into force and effect;
- (ix) That the Environmental Remediation and Site Enhancement (ERASE) Tax Assistance Program includes Environmental Insurance Premiums as an eligible cost, be approved;
- (x) That the interest rate for the Downtown Hamilton / West Harbourfront Remediation Loan Program (RLP) be decreased from prime minus 1% to 0% and the loan repayment period be reduced from ten years to five years;
- (xi) That the Community Improvement Plan (CIP) titled Environmental Remediation and Site Enhancement (ERASE) Community

Improvement Plan (October 2017), as amended, and attached as Appendix “B” to Report PED18030 be approved; and,

- (xii) That any changes to the program description and terms be by way of Council resolution.

6. Business Improvement Area Commercial Property Improvement Grant Program and Commercial Property Improvement Grant Program - Amendment to Program Descriptions and Terms (PED18044) (Wards 1, 2, 3, 4, 6, 7, 8, 9, 11, 12, 13 and 15) (Item 8.1)

- (a) That Appendix “C” to the Downtown and Community Renewal Community Improvement Plan, being the Program Description and Terms of the Business Improvement Area Commercial Property Improvement Grant Program, be deleted and replaced with the Program Description and Terms attached as Appendix “A” to Report 18-005; and,
- (b) That Appendix “G” to the Downtown and Community Renewal Community Improvement Plan, being the Program Description and Terms of the Commercial Property Improvement Grant Program, be deleted and replaced with the Program Description and Terms, attached as Appendix “B” to Report 18-005.

7. Hamilton-Wentworth Catholic District School Board Liaison Committee Report 18-001, January 29, 2018 (Item 8.2)

(a) Location of Cannabis Retail Outlets (Item 8.1)

That the “Declaration from Canadian School Boards regarding the Impact of Cannabis Legalization on Schools”, attached as Appendix “A” to the HWCDSB Liaison Committee Report 18-001, be received.

(b) West Harbour Growth Accommodation in Schools (Item 8.2)

That the General Issues Committee be advised that the HWCDSB Liaison Committee has considered the matter respecting West Harbour Growth Accommodation in Schools (as referred from the General Issues Committee at the November 2, 2016 meeting), and both the City and HWCDSB are aware of future needs.

8. Corporate Strategic Growth Initiatives – Long Term Sustainability (CM16013(b)) (City Wide) (Item 8.3)

That Report CM16013(b), respecting the Corporate Strategic Growth Initiatives – Long Term Sustainability, be received.

9. Canadian Country Music Week 2019 (PED18058) (City Wide) (Item 8.4)

- (a) That staff be directed to secure the 2019 Canadian County Music Week event and within a project budget of \$850,000;
- (b) That the \$550,000, previously approved by Council to host the 2019 JUNO Awards, be reallocated to support the 2019 Canadian Country Music Week event;
- (c) That staff be directed to secure the balance of \$300,000 from other levels of government and the private sector to support the 2019 Canadian Country Music Week event and, if staff is successful in raising in excess of the project budget, any excess funds be used to reduce the municipal contribution; and,
- (d) That the Mayor and City Clerk be authorized and directed to execute the 2019 Canadian Country Music Association (CCMA) Contract, between the CCMA and the City of Hamilton, together with all necessary ancillary documents, with the content acceptable to the Director of Tourism, Culture and in a form satisfactory to the City Solicitor.

10. Affordable Housing Site Selection Sub-Committee Report 18-001, February 15, 2018 (Item 8.5)

Transfer of City of Hamilton Sites to CityHousing Hamilton for Development (Item 9.1)

WHEREAS, the City of Hamilton's Strategic Plan recognizes and supports the need for new affordable housing units as one of the City's top priorities;

WHEREAS, the Access to Housing waitlist continues to grow at an alarming rate with an estimated 6,200 families, seniors and individuals currently on the list;

WHEREAS, the City's Housing and Homelessness Action Plan targets an aggressive 50% reduction in the Access to Housing Waitlist by 2023;

WHEREAS, the City's Housing and Homelessness Action Plan emphasizes the need to provide new affordable housing units;

WHEREAS, the rising cost of real estate presents a significant challenge to social housing providers;

WHEREAS, the City of Hamilton has an inventory of properties that could facilitate the construction of new affordable housing units;

WHEREAS, City of Hamilton staff has met with CityHousing staff and Board representatives to discuss opportunities related to utilizing underperforming City of Hamilton parking lots: Park Lot #66 located at 106 Bay Street Northland Park; and, Lot #73 located at 253 King William Street (see attached map), as a means to support the construction of new affordable housing units;

WHEREAS, City of Hamilton staff has also identified an unused portion of 701 Upper Sherman Ave., which interlocks with an existing CityHousing Hamilton Corporation site on Macassa Ave. (see attached map), as a potential City owned site for building new affordable housing units;

WHEREAS, CityHousing Hamilton Corporation has begun a revitalization process that requires the acquisition of land for the rebuilding of 100 units of social housing, following an approved sale of poor performing single and semi-detached housing units, as well as for the possible relocation of residents from the Jamesville social housing community in the West Harbour during its redevelopment; and,

WHEREAS, CityHousing Hamilton Corporation has completed financial modelling for the utilization of the above mentioned three sites as part of its revitalization process;

THEREFORE BE IT RESOLVED:

- (a) That the Real Estate Section of the Planning and Economic Development Department be authorized and directed to sell, at nominal price of \$2.00, Car Park Lot #66 (106-104 Bay Street North) to CityHousing Hamilton Corporation on such other terms and conditions deemed appropriate by the General Manager, Planning and Economic Development;
- (b) That the Real Estate Section of the Planning and Economic Development Department be authorized and directed to sell, at nominal price of \$2.00 Car Park Lot #73 (253-257 King William Street) to CityHousing Hamilton Corporation on such other terms and conditions deemed appropriate by the General Manager, Planning and Economic Development;
- (c) That the Real Estate Section of the Planning and Economic Development Department be authorized and directed to sell, at nominal price of \$2.00, the unused portion of 701 Upper Sherman Avenue that interlocks with an existing CityHousing Hamilton Corporation owned site on Macassa Avenue to CityHousing Hamilton Corporation on such other terms and conditions deemed appropriate by the General Manager, Planning and Economic Development;

- (d) That the transfer of Car Park Lot #66, Car Park Lot#73, and the unused portion of 701 Upper Sherman Avenue be subject to any requisite requirements to protect for servicing, utilities and road widenings, as determined by new reference plans to be completed by Geomatics and Corridor Management Section of the Public Works Department;
- (e) That the City Solicitor complete the transfers of Car Park Lot #66, Car Park Lot #73, and the unused portion of 701 Upper Sherman Avenue pursuant to the terms and conditions of the agreement negotiated by the Planning and Economic Development Department and in a form satisfactory to the City Solicitor;
- (f) That the General Manager, Planning and Economic Development be authorized and directed to execute all required documents on behalf of the City of Hamilton to transfer Car Park Lot #66, Car Park Lot #73, and the unused portion of 701 Upper Sherman Avenue, in a form satisfactory to the City Solicitor;
- (g) That \$4,500 be charged to Account No. 500005-22018 (City of Hamilton Payable) and credited to Account No. 45408-3560150200 (Property Purchases and Sales) for Legal and Real Estate fees;
- (h) That all other expenses associated with the transfer of Car Park Lot #66, Car Park Lot #73, and the unused portion of 701 Upper Sherman Avenue be charged to Account No. 500005-220; and,
- (i) That Car Park Lots #66 (106-104 Bay Street North) and #73 (253-257 King William Street) be permitted to continue operations until new development begins.

11. Funding to Complete the Renovations and Accessibility Features at the Hamilton Public Library - Locke Branch (Item 9.2)

- (a) That \$30,000, to be funded through 2018 Ward 1 area rating fund be provided to the Hamilton Public Library to complete the renovations and accessibility features at the Locke Branch; and,
- (b) That the Mayor and City Clerk be authorized and directed to execute any required agreement(s) and ancillary documents, respecting the funding to complete the renovations and accessibility features at the Hamilton Public Library - Locke Branch, with such terms and conditions in a form satisfactory to the City Solicitor.

12. Legal Services Staffing (LS18011) (City Wide) (Item 12.2)

- (a) That the City Solicitor be authorized and directed to extend the current temporary contracts, for the positions shown below, beyond the completed

24 months, with no impact to the levy, as the positions are currently funded through the 2018 Legal Services operating budget:

- (i) Two (2) Solicitors – to be extended from August 2018 to project completion;
 - (ii) One (1) Law Clerk – to be extended from August 2018 to project completion; and,
 - (iii) One (1) Legal Assistant – to be extended from August 2018 to project completion; and,
- (b) That Report LS18011, respecting Legal Services Staffing, remain confidential until approved by Council.

13. Hamilton Street Railway TransCab Service (HUR18004) (City Wide) (Item 12.3)

That Report HUR18004, respecting the Hamilton Street Railway TransCab Service, be referred to the February 28, 2018 meeting of Council for consideration.

FOR INFORMATION:

(a) CHANGES TO THE AGENDA (Item 1)

The Committee Clerk advised of the following changes to the agenda:

1. DELEGATION REQUESTS (Item 4)

- 4.3 Barry Conway, CUPE Local 5167, respecting Report CM18003/PW18010 – Stadium Event Booking Function (Pilot) (For March 21, 2018)
- 4.4 Anthony Marco, Hamilton District Labour Council, respecting Report CM18003/PW18010 – Stadium Event Booking Function (Pilot) (For March 21, 2018)
- 4.5 Mary Love, Council of Canadians, Hamilton Chapter, to Appear before Committee on March 21st, International Day for the Elimination of Racial Discrimination, to ask City Council to take a Formal Stand Indicating its Intention to Deny the Use of City Parks and Public Places to Hate Groups (For March 21, 2018)

2. DELEGATIONS (Item 6)

- 6.1 Vic Djurdjevic, Nikola Tesla Educational Corporation, respecting the 120th Anniversary of Hamilton's "Power Turned On" (no copy)

Although the delegate had previously requested to be moved to the March 21, 2018 General Issues Committee agenda, Mr. Djurdjevic has since requested to appear on February 21st instead.

3. DISCUSSION ITEMS (Item 8)

- 8.5 Affordable Housing Site Selection Sub-Committee Report 18-001, February 15, 2018

4. PRIVATE & CONFIDENTIAL (Item 12)

- 12.2 Legal Services Staffing (LS18011) (City Wide)

Pursuant to Section 8.1, Sub-sections (b) and (d) of the City's Procedural By-law 14-300, and Section 239(2), Sub-sections (b) and (d) of the *Ontario Municipal Act*, 2001, as amended, as the subject matter pertains to personal matters about an identifiable individual, including City employees; and, labour relations or employee negotiations.

- 12.3 Hamilton Street Railway TransCab Service (HUR18004) (City Wide)

Pursuant to Section 8.1, Sub-section (d) of the City's Procedural By-law 14-300, and Section 239(2), Sub-section (d) of the *Ontario Municipal Act*, 2001, as amended, as the subject matter pertains to labour relations or employee negotiations.

The agenda for the February 21, 2018 General Issues Committee meeting was approved, as amended.

(b) DECLARATIONS OF INTEREST (Item 2)

Councillor Ferguson asked staff if Item 12.3, Report HUR18004, respecting Hamilton Street Railway TransCab Service involved the taxi industry to determine whether or not he may have a conflict. Staff advised that the matter was not related to the taxi industry.

(c) APPROVAL OF MINUTES OF PREVIOUS MEETING (Item 3)

(i) February 7, 2018 (Item 3.1)

The Minutes of the February 7, 2018 General Issues Committee meeting were approved, as presented.

(d) DELEGATION REQUESTS (Item 4)

(i) Ken Stone, Community Coalition Against Racism, to Appear before Committee on March 21st, International Day for the Elimination of Racial Discrimination, to ask City Council to take a Formal Stand Indicating its Intention to Deny the Use of City Parks and Public Places to Hate Groups (For the March 21st GIC) (Item 4.1)

The delegation request, submitted by Ken Stone, Community Coalition Against Racism, to appear before Committee on March 21st, International Day for the Elimination of Racial Discrimination, to ask City Council to take a formal stand indicating its intention to deny the use of City parks and public places to hate groups, was approved to appear before the General Issues Committee on March 21, 2018.

(ii) Evelyn Myrie, Afro Canadian Caribbean, to Appear before Committee on March 21st, International Day for the Elimination of Racial Discrimination, to ask City Council to take a Formal Stand Indicating its Intention to Deny the Use of City Parks and Public Places to Hate Groups (For the March 21st GIC) (Item 4.2)

The delegation request, submitted by Evelyn Myrie, Afro Canadian Caribbean, to appear before Committee on March 21st, International Day for the Elimination of Racial Discrimination, to ask City Council to take a formal stand indicating its intention to deny the use of City parks and public places to hate groups, was approved to appear before the General Issues Committee on March 21, 2018.

(iii) Barry Conway, CUPE Local 5167, respecting Report CM18003/PW18010 – Stadium Event Booking Function (Pilot) (For March 21, 2018) (Item 4.3)

The delegation request, submitted by Barry Conway, CUPE Local 5167, respecting Report CM18003/PW18010 – Stadium Event Booking Function, was approved to appear before the General Issues Committee on March 21, 2018.

- (iv) **Anthony Marco, Hamilton District Labour Council, respecting Report CM18003/PW18010 – Stadium Event Booking Function (Pilot) (For March 21, 2018) (Item 4.4)**

The delegation request, submitted by Anthony Marco, Hamilton District Labour Council, respecting Report CM18003/PW18010 – Stadium Event Booking Function (Pilot), was approved to appear before the General Issues Committee on March 21, 2018.

- (v) **Mary Love, Council of Canadians, Hamilton Chapter, to Appear before Committee on March 21st, International Day for the Elimination of Racial Discrimination, to ask City Council to take a Formal Stand Indicating its Intention to Deny the Use of City Parks and Public Places to Hate Groups (For March 21, 2018) (Item 4.5)**

The delegation request, submitted by Mary Love, Council of Canadians, Hamilton Chapter, to appear before Committee on March 21st, International Day for the Elimination of Racial Discrimination, to ask City Council to take a formal stand indicating its intention to deny the use of City parks and public places to hate groups, was approved to appear before the General Issues Committee on March 21, 2018.

(e) **CONSENT ITEMS (Item 5)**

- (i) **Hamilton-Wentworth Catholic District School Board Liaison Committee Minutes 17-001, June 29, 2017 (Item 5.4)**

The Hamilton-Wentworth Catholic District School Board Liaison Committee Minutes 17-001, June 29, 2017, were received.

(f) **PUBLIC HEARINGS / DELEGATIONS (Item 6)**

- (i) **Vic Djurdjevic, Nikola Tesla Educational Corporation, respecting the 120th Anniversary of Hamilton's "Power Turned On" (Item 6.1)**

Vic Djurdjevic, Nikola Tesla Educational Corporation, addressed Committee respecting the 120th Anniversary of Hamilton's "Power Turned On".

The presentation provided by Vic Djurdjevic, Nikola Tesla Educational Corporation, respecting the 120th Anniversary of Hamilton's "Power Turned On", was received.

A copy of the presentation is available on the City's website at www.hamilton.ca or through the Office of the City Clerk.

For disposition of this matter, please refer to Item 4.

(g) PRESENTATIONS (Item 7)

(i) Amendments to the Environmental Remediation and Site Enhancement (ERASE) Community Improvement Plan (CIP) (PED18030) (City Wide) (Item 7.1)

Edward John, Senior Project Manager, Urban Renewal Section, addressed Committee and provided a PowerPoint respecting Report PED18030, Amendments to the Environmental Remediation and Site Enhancement (ERASE) Community Improvement Plan (CIP).

The presentation, respecting Report PED18030 – Amendments to the Environmental Remediation and Site Enhancement (ERASE) Community Improvement Plan (CIP), was received.

A copy of the presentation is available on the City's website at www.hamilton.ca or through the Office of the City Clerk.

For disposition of the above matter, please refer to Item 5.

(h) MOTIONS (Item 9)

(i) Inventory of Brownfield Lands (Item 9.1)

That staff be directed to report back with an inventory of the brownfields areas, over the past ten years, factoring in the Province backstopping the clean-up of the Stelco lands.

(i) NOTICES OF MOTION (Item 10)

(i) Funding to Complete the Renovations and Accessibility Features at the Hamilton Public Library - Locke Branch (Item 10.1)

Councillor A. Johnson introduced a Notice of Motion respecting funding to complete the renovations and accessibility features the Hamilton Public Library – Locke Branch.

The Rules of Order were waived to allow for the introduction of a Motion respecting funding to complete the renovations and accessibility features at Hamilton Public Library – Locke Branch.

For disposition of this matter, please refer to Item 11.

(j) GENERAL INFORMATION / OTHER BUSINESS (Item 11)

(i) Amendments to the Outstanding Business List (Item 11.1)

The following Items were considered complete and removed from the General Issues Committee's Outstanding Business List:

- (i) Expression of Interest for a Professional Soccer League at the City's Tim Horton's Field (No longer required by the Councillor)
- (ii) State of the City Comparative Study – Amalgamation to Now (Addressed at the January 19, 2018 GIC Budget meeting, Report CM18001)
- (iii) Corporate Strategic Growth Initiatives – Long Term Sustainability (Addressed on today's agenda as Item 5.2 – Report CM16013(b))

(k) PRIVATE & CONFIDENTIAL (Item 12)

As Committee determined that discussion of Items 12.1, 12.2 and 12.3 was not required in Closed Session; those items were addressed in Open Session, as follows:

(i) February 7, 2018 – Closed Session Minutes (Item 12.1)

- (a) The Closed Session Minutes of the February 7, 2018 General Issues Committee meeting, were approved; and,
- (b) The Closed Session Minutes of the February 7, 2018 General Issues Committee meeting shall remain confidential.

(ii) Legal Services Staffing (LS18011) (City Wide) (Item 12.2)

For disposition of this matter, please refer to Item 12.

(iii) Hamilton Street Railway TransCab Service (HUR18004) (City Wide) (Item 12.3)

For disposition of this matter, please refer to Item 13.

(I) ADJOURNMENT (Item 9)

There being no further business, the General Issues Committee adjourned at 11:01 a.m.

Respectfully submitted,

T Jackson, Deputy Mayor
Chair, General Issues Committee

Stephanie Paparella
Legislative Coordinator
Office of the City Clerk



Planning and Economic Development Department
Urban Renewal Section
71 Main Street West, 7th Floor
Hamilton, Ontario L8P 4Y5
Phone: (905) 546-2424 Ext. 2755
Fax: (905) 546-2693

BUSINESS IMPROVEMENT AREA COMMERCIAL PROPERTY IMPROVEMENT GRANT PROGRAM

PROGRAM DESCRIPTION

The Business Improvement Area Commercial Property Improvement Grant Program is intended to provide financial assistance for commercial property owners / authorized tenants within active* City-wide Business Improvement Areas as identified within the Downtown and Community Renewal Community Improvement Project Area By-law. The Program aims to improve upon the appearance of commercial properties, support commercial property / business owners with limited rehabilitation of interior space and assist in creating a barrier free and accessible environment. It is understood that smaller scale commercial activities contribute greatly to the economic vitality and health of the commercial sector within the City of Hamilton. This Program seeks to build upon these successes, resulting in long lasting physical improvements to the assets of commercial property owners / authorized tenants, to assist business development within the commercial areas as defined by the Business Improvement Areas, and to broadly improve commerce within the entire City.

*An active BIA is not considered dormant as defined by the Dormant Business Improvement Area Status Procedure as approved by City Council at its meeting held November 11, 2009.

PROGRAM TERMS

1. Commercial property owners / authorized tenants are eligible for a maximum grant per property during a five-year period (i.e. multiple applications or one application could be submitted however the sum of the grant amounts approved will be no more than the maximum amount allowed for each property). Exceptions may be made at the sole discretion of the General Manager of Planning and Economic Development if:
 - i) a new tenant / owner is occupying the property and applies for new signage; or
 - ii) *the property has been damaged due to fire, vandalism or a natural*

disaster such as a flood, earthquake or hurricane.

Eligible items under the Program when a property has been damaged for one of the aforementioned reasons shall be capital costs only as follows:

Façade Improvements: windows, doors, storefronts, awnings, signage, surveillance cameras or other items deemed eligible at the sole discretion of the General Manager of Planning and Economic Development.

Limited Interior Improvements: barrier-free washrooms or commercial kitchen cooking exhaust / ventilation systems (the grant will be no more than 50% of the maximum grant per property for interior improvements).

Fees: Architectural, engineering, lawyer's, BCIN designer, building permit, sign permit, site plan application, road occupancy permit, street occupancy permit and encroachment agreement application fees are eligible up to 100% of the cost to a maximum of \$3,000 per application as part of the total grant awarded for completed construction.

Ineligible items shall be: business interruption expenses, equipment, sewer/drain repair and other items deemed ineligible at the sole discretion of the General Manager of Planning and Economic Development.

Assisting commercial property owners / authorized tenants to repair property damage due to fire, vandalism or a natural disaster such as a flood, earthquake or hurricane will help mitigate some of the capital improvements costs involved during the recovery phase. The grant is not intended to replace property insurance claims, rather, it is to assist a property owner / authorized tenant with eligible costs under the CPIG that are not covered by their insurer due to the deductible amount or due to limits set by their insurance policy.

In recognition that a property owner / authorized tenant may have work completed within hours or days of the damage to the property for safety reasons or in order to prevent further damage to the property i.e. replacement of broken windows, an exception to the requirement that applications be submitted prior to works commencing will be allowed only in the instance when a property has been damaged due to fire, vandalism or a natural disaster such as a flood, earthquake or hurricane. If the work has commenced or has been completed, applications must be submitted within seven days of the date the damage to the property occurred. Completed works must meet the requirements of the City of Hamilton By-law 07-170 being a by-law to license and regulate various businesses dictating when a contractor must be licensed with the City of Hamilton to complete works i.e. a contractor must hold a valid Building Repair license

with the City of Hamilton to replace a window with a window frame however if the glazing only is being replaced the contractor is not required to be licensed with the City of Hamilton. All quotes / invoices submitted with the application will be reviewed by a Building Inspector to ensure the cost is at the industry standard.

All grants are subject to the availability of funding.

Where funding is requested for property that has been damaged due to fire, vandalism or a natural disaster such as a flood, earthquake or hurricane earthquake or hurricane, each applicant shall provide the following documentation to support the application:

- a) *Evidence of property insurance coverage for the subject property in force as of the date of the damage. Evidence shall be provided by way of a copy of the Declaration Page of the property insurance policy or a Certificate of Insurance. Evidence shall include the following information: subject property address, deductible amount.*
 - b) *Copy of Proof of Loss (or other proof of settlement) from the applicant's Insurer, along with supporting damage estimate / invoices to support their application.*
 - c) *At the City's discretion, a police report may also be required.*
2. Buildings that have a linear foot street frontage greater than twenty-five feet (25'), grants will be paid on a matching basis of \$400 per linear foot of street frontage up to a maximum of \$20,000 for eligible work under the Program.
 3. Buildings that have a linear foot street frontage of 25 feet or less, grant amounts will be paid on a matching basis to a maximum of \$10,000 for eligible work under the Program.
 4. As a further incentive for corner properties the City will increase the maximum grant amount to \$25,000, on a similar matching basis for eligible work under the Program to recognize the importance of flankage facades. The grant amount will be determined by the measurement of the street frontage and the measurement of the corner / exposed wall multiplied by \$400 per linear foot.
 5. Commercial properties are to be identified by municipal address to identify multiple and separate commercial units with separate ground floor street entrances.

6. Commercial uses must be in conformity with applicable policy documents of the City including but not limited to Official Plans, the provisions of the applicable Zoning By-law and any other applicable City by-laws.
7. Performance measures are to be applied to the payment of grants.
8. Eligibility requirements for the Program relating to the work to be funded will be specifically identified. Two separate cost estimates for the work are to be provided. Please note a contractor licensed with the City of Hamilton may be required to undertake the work. For more information on work that requires a licensed contractor please refer to the Application Form or contact Building Department at (905) 546-2424 Ext. 2720.

An owner who is proposing to undertake the work and not hire a contractor may present an estimate based on material only.

Grants will be calculated based upon lowest cost estimate.

In the case where the applicant is the owner of a contracting company and wishes to utilize their company to undertake the improvements on their property, one (1) cost estimate from an arms-length contractor will also be required.

A Building Inspector will review all estimates provided for the purpose of ensuring competitiveness.

9. Restoration / conservation of heritage features on commercial properties designated under the *Ontario Heritage Act* are not eligible under this grant program, however, improvements other than those on heritage features are eligible subject to the approval of a City heritage permit. Urban Renewal staff will work closely with Development Planning staff on all applications received that are designated under the *Ontario Heritage Act*.
10. Relative to the proposed improvements, a building inspector will perform an initial and final inspection / investigation to confirm compliance with various Acts, Regulations and City Bylaws including the Ontario Building Code, Property Standards By-Law, Trade Licencing By-Law, Sign By-law etc.
11. Approval of the grant is at the sole discretion of the General Manager of Planning and Economic Development and subject to the availability of funds.
12. Proposed improvements to be completed within one year to be eligible for payment. A one year extension can be authorized by the Manager of

Urban Renewal if an applicant has extenuating circumstances which would warrant an extension.

13. Work completed must be consistent with estimates, and work proposed and identified within the application unless previously discussed and approved by the Urban Renewal Section.
14. At the sole discretion of the Manager of Urban Renewal, partial payments for works completed can be processed consistent with the payment process described above.
15. At the sole discretion of the Manager of Urban Renewal, the grant cheque can be made jointly payable to the applicant and the contractor if such a request has been received from the applicant.
16. An application fee of \$406.80 for grants greater than \$12,500, \$259.90 for grants less than or equal to \$12,500 but greater than \$5,000, and \$96.05 for grants \$5,000 or less, must be submitted at the time of application. The fee will be authorized through a by-law passed by City Council. The rate of the fee may be changed from time to time as approved by City Council.
17. Approval of the grant application is at the absolute discretion of the City and subject to the availability of funds.
18. Without limiting the discretion as set out in paragraph 17 herein, the City, Council, may reject any application received from an applicant, whether or not an Applicant satisfies the requirements of the Program, where, in the opinion of Council, the commercial relationship between the City and the Applicant has been impaired by, but not limited to, the applicant being involved in litigation with the City. Applicants shall include but not be limited to the following: the Applicant identified on the application form and if a corporation any person or entity with an interest in the corporation as determined by the City in its sole, absolute and unfettered discretion.
19. Without limiting the discretion as set out in paragraph 17 herein, the City Council, whether or not an Applicant satisfies the requirements of the Program, may reject any application received from an applicant where there are property tax arrears owed on the subject property or on other properties owned by the Applicant within the City of Hamilton.
20. Works commenced prior to submitting an application are ineligible for funding under the Program. Works commenced after submitting an application but prior to approval of an application may be eligible for funding under the Program and eligibility will be determined by the GM in his sole, absolute and unfettered discretion. An applicant shall assume the

risk of paying for work commenced after an application has been submitted but prior to approval.

21. A successful applicant will enter into an agreement with the City containing the terms and conditions (but not limited to) set out in the program description.

22. *The grant shall exclude any damage that is caused by the property owner or occupant (i.e. a tenant) of that property. For example, costs incurred because of self-inflicted damage such as vandalism or arson would not be covered by this Program.*

A refund of any grant under this Program to the City of Hamilton would be required if it is determined after the grant has been paid that the damage was caused by the property owner and/or the tenant(s) of the property.

23. *The grant cannot be used to pay the costs resulting from any damage or vandalism where those costs are also reimbursed to the tenant or owner because such costs are covered under any insurance policy. A refund of any grant under this Program to the City of Hamilton would be required if it is determined after the grant has been paid that such a reimbursement has been received.*

ARTS COMPONENT:

An additional matching grant to a maximum of \$10,000 may be available for artfully designed façade improvements or art pieces placed on private property that can be viewed by the public.

The applicant will provide an adequate brief and rendering of the proposed art piece.

A jury will be established and may comprise a selection of the following: Urban Renewal Section, urban designer, Business Improvement Area member. The Director of Culture or representative will be on the jury.

The selection jury will review, evaluate and approve all proposed art projects.

The jury will reserve the right to deem what is eligible for funding under the arts component.

Note: Murals must be appropriate for public display; must not fall under the definition of a “sign”; and, must not be subject to royalty rights.

ELIGIBILITY REQUIREMENTS

- Property owners and authorized tenants are eligible;
- Property taxes must be paid current;
- The proposed work to be pre-inspected by the City Building Inspector;
- The improvements shall be in accordance with Property Standards and the Ontario Building Code and in compliance with all applicable City by-laws, official plans, zoning regulations, design guidelines and site plan approvals;
- Commercial properties must be located within one of the City’s active Business Improvement Areas and be within the corresponding Community Improvement Project Area; and,
- Existing use must be in conformity with the applicable Zoning By-law regulations, and other relevant planning controls.

ELIGIBLE IMPROVEMENTS

Exterior Improvements:

- Replacement or repairing of storefronts;
- Improvements / replacement to doors, cornices, parapets, soffit, fascia;
- Addition of new lighting and upgrading of existing fixtures, on exterior of the façade and within the storefront area normally associated with the display area;
- Awning replacements and / or additions;
- Brick repairs and / or pointing;
- Painting and façade treatments;
- Installation or improvement of signage (Signage must comply with Sign By-law 10-197);
- Barrier free entrance to property (ramps, doors and automatic door openers);
- Permanent landscape features only such as flagstone and natural stones / rocks, statuary, irrigation, containers ;
- Permanent Fencing;
- Front-yard decks / patios or side yard decks / patios that abut a street; and,
- Surveillance cameras affixed to the exterior of the property (must comply to the Fortification By-law 10-122).

Interior Improvements:

Note: The maximum grant for interior improvements is 50% of the maximum grant per property

- Barrier-free washrooms;
- Ramps to access barrier-free washrooms;
- Interior signage to meet *Accessibility for Ontarians with Disabilities Act* (AODA) requirements;
- Commercial kitchen cooking exhaust / ventilation systems;
- Sprinkler systems; and,
- Widening of doors to meet AODA requirements.

Fees:

- Architectural, engineering, lawyer's, BCIN designer, building permit, site plan application, road occupancy permit, street occupancy permit and encroachment agreement application fees may be eligible for up to 100% of the cost to a maximum of \$3,000 per application as part of the total grant awarded for completed construction.

Other improvements deemed health, safety and accessible issues eligible at the sole discretion of the General Manager of Planning and Economic Development.

In-Eligible: (this list is not intended to be exclusive)

- Trees, shrubbery, perennials, annuals, soil, mulch, grass;
- Roofing (apart from mansard roofs above the eligible frontage);
- Sandblasting;
- Paving of parking lots;
- Interior furniture, display cases, equipment;
- Outdoor patio furniture; and,
- Tools.



Planning and Economic Development Department
Urban Renewal Section
71 Main Street West, 7th Floor
Hamilton, Ontario L8P 4Y5
Phone: (905) 546-2424 Ext. 2755
Fax: (905) 546-2693

COMMERCIAL PROPERTY IMPROVEMENT GRANT PROGRAM

PROGRAM DESCRIPTION

The Commercial Property Improvement Grant Program (CPIGP) is intended to provide financial assistance for commercial property owners/authorized tenants within Downtown Hamilton, Community Downtowns, the Mount Hope/Airport Gateway and the commercial corridors as identified in the Downtown and Community Renewal Community Improvement Project Area. The Program aims to improve upon the physical appearance of properties within the areas, achieve quality façade improvements, support commercial property/business owners with limited rehabilitation of interior space and assist in creating a barrier-free and accessible environment. Spurring the preservation, revitalization and reinvestment of commercial properties within these areas will assist in creating a welcoming environment for people to live, work, play and learn.

PROGRAM TERMS

1. Commercial property owners / authorized tenants are eligible for a maximum grant per property during a five-year period (i.e. multiple applications or one application could be submitted however the sum of the grant amounts approved will be no more than the maximum amount allowed for each property). Exceptions may be made at the sole discretion of the General Manager of Planning and Economic Development if:
 - i) a new tenant / owner is occupying the property and applies for new signage; or
 - ii) *the property has been damaged due to fire, vandalism or a natural disaster such as a flood, earthquake or hurricane.*

Eligible items under the Program when a property has been damaged for one of the aforementioned reasons shall be capital costs only as follows:

Façade Improvements: windows, doors, storefronts, awnings, signage, surveillance cameras or other items deemed eligible at the sole discretion of the General Manager of Planning and Economic Development.

Limited Interior Improvements: barrier-free washrooms or commercial kitchen cooking exhaust / ventilation systems (the grant will be no more than 50% of the maximum grant per property for interior improvements).

Fees: Architectural, engineering, lawyer's, BCIN designer, building permit, site plan application, road occupancy permit, street occupancy permit and encroachment agreement application fees are eligible up to 100% of the cost to a maximum of \$3,000 per application as part of the total grant awarded for completed construction.

Ineligible items shall be: business interruption expenses, equipment, sewer/drain repair and other items deemed ineligible at the sole discretion of the General Manager of Planning and Economic Development.

Assisting commercial property owners / authorized tenants to repair property damage due to fire, vandalism or a natural disaster such as a flood, earthquake or hurricane will help mitigate some of the capital improvements costs involved during the recovery phase. The grant is not intended to replace property insurance claims, rather, it is to assist a property owner / authorized tenant with eligible costs under the CPIG that are not covered by their insurer due to the deductible amount or due to limits set by their insurance policy.

In recognition that a property owner / authorized tenant may have work completed within hours or days of the damage to the property for safety reasons or in order to prevent further damage to the property i.e. replacement of broken windows, an exception to the requirement that applications be submitted prior to works commencing will be allowed only in the instance when a property has been damaged due to fire, vandalism or a natural disaster such as a flood, earthquake or hurricane. If the work has commenced or has been completed, applications must be submitted within seven days of the date the damage to the property occurred. Completed works must meet the requirements of the City of Hamilton By-law 07-170 being a by-law to license and regulate various businesses dictating when a contractor must be licensed with the City of Hamilton to complete works i.e. a contractor must hold a valid Building Repair license with the City of Hamilton to replace a window with a window frame however if the glazing only is being replaced the contractor is not required to be licensed with the City of Hamilton. All quotes / invoices submitted with the application will be reviewed by a Building Inspector to ensure the cost is at the industry standard.

All grants are subject to the availability of funding.

Where funding is requested for property that has been damaged due to fire, vandalism or a natural disaster such as a flood, earthquake or hurricane earthquake or hurricane, each applicant shall provide the following documentation to support the application:

- a) *Evidence of property insurance coverage for the subject property in force as of the date of the damage. Evidence shall be provided by way of a copy of the Declaration Page of the property insurance policy or a Certificate of Insurance. Evidence shall include the following information: subject property address, deductible amount.*
 - b) *Copy of Proof of Loss (or other proof of settlement) from the applicant's Insurer, along with supporting damage estimate / invoices to support their application.*
 - c) *At the City's discretion, a police report may also be required.*
2. Maximum grant amount will be paid on a matching basis (50%-50%) to a maximum of \$10,000 per property for eligible work under the Program. As a further incentive for corner properties, the City will increase the maximum grant amount to \$12,500 on a similar matching basis for eligible work under the Program to recognize the importance of flankage facades.
 3. Commercial property owners and tenants authorized in writing by the owner, are eligible to apply for a grant under the Program.
 4. Commercial properties are to be identified by municipal address to identify multiple and separate commercial units with separate ground floor street entrances.
 5. Commercial uses must be in conformity with: all policy documents of the City including but not limited to official plans; the provisions of the Zoning By-laws; and any other City by-laws.
 6. Performance measures are to be applied to the payment of grants.
 7. Eligibility requirements for the Program relating to the work to be funded will be specifically identified. Two separate cost estimates for the work are to be provided. Please note a contractor licensed with the City of Hamilton may be required to undertake the work. For more information on work that requires a licensed contractor please refer to the Application Form or contact Building Department at (905) 546-2424 Ext. 2720.

An owner may present an estimate based on material only.

In the case where the applicant is the owner of a contracting company and wishes to utilize their company to undertake the improvements, one cost estimate from an arms-length contractor will also be required.

Grants will be calculated based upon lowest cost estimate.

A Building Inspector will review all estimates provided for the purpose of ensuring competitiveness.

8. Restoration/conservation of heritage features on commercial properties designated under the *Ontario Heritage Act* are not eligible under this grant program, however, improvements other than those on heritage features are eligible subject to the approval of a City heritage permit. Urban Renewal staff will work closely with Development Planning staff on all applications received that are designated under the *Ontario Heritage Act*.
9. Relative to the proposed improvements, a building inspector will perform an initial and final inspection/investigation to confirm compliance with various Acts, Regulations and City By-laws, but not limited to including the Ontario Building Code, Property Standards By-Law, Trade Licencing By-Law and Sign By-law.
10. Approval of the grant is at the sole discretion of the General Manager of Planning and Economic Development Department and subject to the availability of funds.
11. Proposed improvements to be completed within one year to be eligible for payment. A one-year extension can be authorized by the Manager of Urban Renewal if an applicant has extenuating circumstances which would warrant an extension.
12. Work completed must be consistent with estimates, and work proposed and identified within the application unless previously discussed and approved by the Urban Renewal Section.
13. The Applicant shall provide to the City's Urban Renewal Section copies of paid invoices for all work undertaken on the property for which the grant is applicable. This documentation is to be provided prior to the final inspection.
14. A City Building Inspector's final inspection report confirming all works have been carried out satisfactorily must be provided prior to release of any grant monies.
15. At the sole discretion of the Manager of Urban Renewal, partial payments for works completed can be processed consistent with the payment process described above.

16. At the sole discretion of the Manager of Urban Renewal, the grant cheque can be made jointly payable to the applicant and the contractor if such a request has been received from the applicant.
17. An application fee of \$259.90 is payable upon submission of application for grants greater than \$5,000 or \$96.05 for grants \$5,000 or less. The fee will be authorized through a by-law passed by City Council. The rate of the fee may be changed from time to time as approved by City Council.
18. The grant may also be received by an owner in conjunction with any other available City program in support of the redevelopment/development of the property with the exception of the BIA Commercial Property Improvement Grant Program available within Business Improvement Areas.
19. Without limiting the discretion as set out in paragraph 10 herein, City Council, whether or not an Applicant satisfies the requirements of the Program, may reject any application received from an applicant where, in the opinion of Council, the commercial relationship between the City and the Applicant has been impaired by, but not limited to, the applicant being involved in litigation with the City. Applicants shall include but not be limited to the following: the Applicant identified on the application form and if a corporation any person or entity with an interest in the corporation as determined by the City in its sole, absolute and unfettered discretion.
20. Without limiting the discretion as set out in paragraph 10 herein, City Council, whether or not an Applicant satisfies the requirements of the Program, may reject any application received from an applicant where there are property tax arrears owed on the subject property or on other properties owned by the Applicant within the City of Hamilton.
21. Works commenced prior to submitting an application are ineligible for funding under the Program. Works commenced after submitting an application but prior to approval of an application may be eligible for funding under the Program and eligibility will be determined by the GM in his sole, absolute and unfettered discretion. An applicant shall assume the risk of paying for work commenced after an application has been submitted but prior to approval.
22. A successful applicant will enter into an agreement with the City containing the terms and conditions (but not limited to) set out in the program description.
23. *The grant shall exclude any damage that is caused by the property owner or occupant (i.e. a tenant) of that property. For example, costs incurred because of self-inflicted damage such as vandalism or arson would not be*

covered by this Program.

A refund of any grant under this Program to the City of Hamilton would be required if it is determined after the grant has been paid that the damage was caused by the property owner and/or the tenant(s) of the property.

24. *The grant cannot be used to pay the costs resulting from any damage or vandalism where those costs are also reimbursed to the tenant or owner because such costs are covered under any insurance policy. A refund of any grant under this Program to the City of Hamilton would be required if it is determined after the grant has been paid that such a reimbursement has been received.*

ELIGIBILITY REQUIREMENTS

- Property owners and authorized tenants are eligible;
- Property taxes must be paid current;
- Pre-inspection by the City Building Inspector;
- Commercial properties must be located within Downtown Hamilton, Community Downtowns, the Mount Hope/Airport Gateway or, a commercial corridor as identified in the Downtown and Community Renewal Community Improvement Project Area By-law; and,
- The improvements shall be in accordance with Property Standards and the Ontario Building Code and in compliance with all applicable City by-laws, official plans, zoning regulations, design guidelines and site plan approvals.

ELIGIBLE IMPROVEMENTS

- Replacement or repairing of storefronts;
- Improvements and or upgrades to windows, doors, cornices and parapets;
- Barrier-free entrances to property (ramps, doors and automatic door openers);
- Addition of new lighting and upgrading of existing fixtures, on exterior of the façade;
- Awning replacements and/or additions;
- Brick repairs and/or pointing;
- Painting and façade treatments;
- Installation or improvement of signage (signage must comply to Sign By-law 10-197, as amended or replaced);
- Paving of parking lots;

- Permanent landscape features such as flagstone and natural stones/rocks, statuary, irrigation, containers;
- Fencing;
- Front-yard decks/patios or side-yard decks/patios that abut a street; and,
- Surveillance cameras affixed to the exterior of the property (must comply to the Fortification By-law 10-122).

ELIGIBLE INTERIOR IMPROVEMENTS:

Note: The maximum grant for interior improvements is \$5 K

- Barrier-free washrooms;
- Ramps to access barrier-free washrooms;
- Widening of doors to meet *Accessibility for Ontarians with Disabilities Act(AODA)* requirements;
- Interior signage to meet *AODA* requirements;
- Commercial kitchen cooking exhaust/ventilation systems; and,
- Sprinkler systems.

Fees:

- Architectural, engineering, lawyer's, BCIN designer, building permit, site plan application, road occupancy permit, street occupancy permit and encroachment agreement application fees may be eligible for up to 100% of the cost to a maximum of \$3,000 per application as part of the total grant awarded for completed construction.

Other improvements deemed health, safety and accessible issues eligible at the sole discretion of the General Manager of Planning and Economic Development.

IN-ELIGIBLE IMPROVEMENTS:

- Trees, shrubbery, perennials, annuals, soil, mulch, grass;
- Roofing (apart from mansard roofs above the eligible frontage);
- Sandblasting;
- Interior furniture, display cases equipment;
- Outdoor patio furniture; and,
- Tools.



**City of Hamilton
PUBLIC WORKS COMMITTEE
Clerk's Report 18-003
9:30 a.m.
Thursday, February 22, 2018
Council Chambers
Hamilton City Hall
71 Main Street West**

Pursuant to Section 3.6(4) of the City of Hamilton's Procedural By-law 14-300 at 10:01 a.m. the Committee Clerk advised those in attendance that quorum had not been achieved within 30 minutes after the time set for the Public Works Committee, therefore, the Clerk noted the names of those in attendance and the meeting stood adjourned.

Present:

Councillor L. Ferguson (Chair)
Councillor S. Merulla
Councillor C. Collins

Also Present:

Councillor D. Skelly

Respectfully submitted,

Lauri Leduc
Legislative Coordinator
Office of the City Clerk

Council – February 28, 2017



BOARD OF HEALTH REPORT 18-002

1:30 p.m.

Thursday, February 22, 2018

Council Chambers

Hamilton City Hall

Present: Mayor F. Eisenberger, Councillor T. Jackson (Deputy Mayor)
Councillors A. Johnson, M. Green, S. Merulla, C. Collins, D. Skelly, B. Johnson, L. Ferguson and J. Partridge

Absent with regrets: Councillors J. Farr – City Business, T. Whitehead, D. Conley, M. Pearson, A. VanderBeek and R. Pasuta – Personal

THE BOARD OF HEALTH PRESENTS REPORT 18-002 AND RESPECTFULLY RECOMMENDS:

1. Financial Controls Checklist (BOH18008) (City Wide) (Item 5.1)

That Report BOH18008, respecting Financial Controls Checklist, be received.

2. Bay Area Climate Change Partnership (BOH18009) (City Wide) (Item 5.2)

That Report BOH18009, respecting the Bay Area Climate Change Partnership, be received.

3. OPHS Modernization - Annual Service Plan & Budget (BOH17010(e)) (City Wide) (Item 7.1)

That Appendix "A" attached to BOH Report 18-002 respecting the City of Hamilton Public Health Services 2018 Annual Service Plan and Budget be approved for submission to the Ministry of Health and Long-Term Care.

4. Food Strategy Implementation Plan (BOH13001(f)) (City Wide) (Item 8.1)

That Report BOH13001(f), respecting a Food Strategy Implementation Plan, be received.

5. Food Strategy Implementation Plan (BOH13001(g)) (City Wide) (Item 8.2)

That Report BOH13001(g), respecting a Food Strategy Implementation Plan, be received.

6. Amendment to the City of Hamilton's Food Strategy (Revised) (Item 9.1)

WHEREAS, the Emergency Food Providers' Network, in addition to providing emergency food to the most vulnerable citizens in our community, member agencies are multi-service organizations that also provide a wide-array of social programs and services designed to improve the overall health and quality of life of people living in poverty

THEREFORE BE IT RESOLVED:

- (a) That Public Health Services' staff work with the Emergency Food Providers' Network to amend the City of Hamilton Food Strategy Report language pertaining to Emergency Food Provision on pages 42-43, attached hereto as Appendix "B" to BOH Report 18-002, of the Food Strategy document;
- (b) That the Board of Health recognizes the valuable work of the Emergency Food Providers' Network and its member agencies as assets in our community, and be promoted and supported as an integral part of Hamilton's Food Strategy; and
- (c) That the Board of Health encourages and welcomes the Emergency Food Providers' Network to identify and put forward a representative from the Network for consideration of service on the City's Food Advisory Committee during its next term.

7. Correspondence from the Minister of Health and Long-Term Care respecting a Base Funding Increase to Support the Delivery of the Needle Exchange Program Initiative for the City of Hamilton. (Item 11.1)

That the Board of Health authorize and direct the Medical Officer of Health to receive, utilize, and report on the increased funding from the Ministry of Health and Long-Term Care to support the delivery of the Needle Exchange/Syringe Program and services.

FOR INFORMATION:

(a) CHANGES TO THE AGENDA (Item 1)

The Clerk advised the Board of the following changes:

1. ADDED DELEGATION REQUEST (Item 4)

4.2 Don McLean, Hamilton 350 Committee, respecting Item 5.2, Climate Change Partnership (BOH18009)

2. REPLACEMENT MOTION (Item 9)

9.1 Amendment to the City of Hamilton's Food Strategy (Revised)

The agenda for the January 15, 2018 Board of Health was approved, as amended.

(b) DECLARATIONS OF INTEREST (Item 2)

None.

(c) APPROVAL OF MINUTES OF PREVIOUS MEETING (Item 3)

(i) January 15, 2018 (Item 3.1)

The Minutes of the January 15, 2018 meeting of the Board of Health were received, as presented.

(d) DELEGATION REQUESTS (Item 4)

(i) Sandi Stride, Mohawk College, respecting Item 5.2, Climate Change Partnership (BOH18009), and to provide an update on the Centre for Climate Change Management, and the March 7/8th Climate Change Summit (for today's meeting) (Item 4.1)

The delegation request from Sandi Stride, Mohawk College, respecting Item 5.2, Climate Change Partnership (BOH18009), and to provide an update on the Centre for Climate Change Management, and the March 7/8th Climate Change Summit, was approved, for the February 22, 2018 meeting.

(ii) Don McLean, Hamilton 350 Committee, respecting Item 5.2, Climate Change Partnership (BOH18009) (for today's meeting) (Added Item 4.2)

That the delegation request from Don McLean, Hamilton 350 Committee, respecting Item 5.2, Climate Change Partnership (BOH18009), was approved, for the February 22, 2018 meeting.

(e) DELEGATIONS (Item 6)

(i) Lynn Gates, Food Advisory Committee, respecting the Food Strategy Implementation Plan (Item 6.1)

The delegation from Lynn Gates, Food Advisory Committee, respecting the Food Strategy Implementation Plan, was withdrawn.

(ii) Sandi Stride, Mohawk College, respecting Item 5.2, Climate Change Partnership (BOH18009), and to provide an update on the Centre for Climate Change Management, and the March 7/8th Climate Change Summit (Item 6.2)

Sandi Stride addressed the Board of Health respecting Item 5.2, Climate Change Partnership (BOH18009), and to provide an update on the Centre for Climate Change Management, and the March 7/8th Climate Change Summit with the aid of a PowerPoint Presentation. A copy of the presentation has been included in the official record.

The delegation from Sandi Stride, Mohawk College respecting Item 5.2, Climate Change Partnership (BOH18009), and to provide an update on the Centre for Climate Change Management, and the March 7/8th Climate Change Summit, was received.

For further disposition, refer to Item 2.

A copy of the presentation is available at www.hamilton.ca

(iii) Don McLean, Hamilton 350 Committee, respecting Item 5.2, Climate Change Partnership (BOH18009) (Added Item 6.3)

Don McLean, Hamilton 350 Committee, addressed the Board of Health respecting Item 5.2, Climate Change Partnership (BOH18009), with the aid of a PowerPoint presentation. A copy of the presentation has been included in the official record.

The delegation from Don McLean, Hamilton 350 Committee, respecting Item 5.2, Climate Change Partnership (BOH18009), was received.

For further disposition, refer to Item 2.

A copy of the presentation is available at www.hamilton.ca

(f) DISCUSSION ITEMS (Item 8)

(i) Food Strategy Implementation Plan (BOH13001(f)) (City Wide) (Referred from the December 8, 2017 Council meeting) (Item 8.1)

Report BOH13001(f), respecting a Food Strategy Implementation Plan, was LIFTED from the table.

For disposition of this matter, refer to Item 4.

(ii) Food Strategy Implementation Plan (BOH13001(g)) (City Wide) (Referred from the December 8, 2017 Council meeting) (Item 8.2)

Report BOH13001(g), respecting a Food Strategy Implementation Plan, was LIFTED from the table.

For disposition of this matter, refer to Item 5.

(g) GENERAL INFORMATION / OTHER BUSINESS (Item 11)

(i) Amendments to the Outstanding Business List (Item 11.2)

Items to be marked as completed and removed:

Item M - Food Strategy Priority Actions 4 & 5 (August 11, 2016, Item 7.1)
Addressed in Item 8.1

Item N - Food Strategy Priority Actions Implementation Plan
(August 11, 2016, Item 7.1)
Addressed in Item 8.2

Item S - Review of the City of Hamilton Public Health Services School Program
(January 16, 2017, Item 9.1)

Item AA - Review of Heart & Stroke Position Statement on Sugar, Heart Disease and Stroke (BOH17022)
(June 19, 2017)

Item JJ - Correspondence from the Association of Local Public Health Agencies (ALPHA) dated July 18, 2017, respecting the Council of Medical Officers of Health Recommendations for the Immunization of School Pupils Act (ISPA) and the Child Care and Early Years Act (CCEYA)
(November 13, 2017, Item 11.2)
Mailed February 9, 2018

Items with revised due dates:

Item A - Staff to report on Food Waste Management (Motion from Councillor Merulla)

(January 12, 2015, Item 10)

Due Date: December 4, 2017

Revised Date: March 19, 2018

Item G - Review of the City of Hamilton's Pest Control By-law

(November 16, 2015, Item 9.1)

Due Date: March 19, 2018

Revised Date: ON HOLD – with Legal Services

Item I - Pilot-Project to Eliminate Sales of Products with Peanuts or Tree Nuts in four City of Hamilton Facilities

(June 13, 2016, Item 8.2)

Due Date: Q1 2018

Revised Date: March 19, 2018

Item P - Contaminated Sites Management Plan

(December 5, 2016, Item 5.1)

Due Date: --

Revised Due Date: Q4 2018

Item CC - Mill grove Public School respecting a Food Recovery Program from Stores and Farmers for the Benefit of the Food Bank (June 19, 2017, Added Item 6.3)

Due Date: --

Revised Due Date: March 19, 2018

Item DD - Stock Epinephrine Auto Injector Expansion in Restaurants (BOH13040(c))

(June 19, 2017, Item 7.1)

Due Date: --

Revised due date: March 19, 2018

Item EE - Reduction of Airborne Particulate in Hamilton

(July 13, 2017, Added Item 9.1)

Due Date: Q1 2018

Revised Due Date: April 16, 2018

(h) ADJOURNMENT (Item 13)

There being no further business, the Board of Health was adjourned at 3:07 p.m.

Respectfully submitted,

Mayor F. Eisenberger
Chair, Board of Health

Loren Kolar
Legislative Coordinator
Office of the City Clerk

Ministry of Health and Long-Term Care

2018 Annual Service Plan and Budget Submission

To be completed by
Board of Health for the City of Hamilton, Public Health Services

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Part 1 - Introduction and Instructions

1.1 Introduction

The Annual Service Plan and Budget Submission (the "Annual Service Plan") is prepared by boards of health to communicate their program plans and budgeted expenditures for a given year. Information provided in the Annual Service Plan will describe the programs and services boards of health are planning to deliver in accordance with the Ontario Public Health Standards: Requirements for Programs, Services, and Accountability (the "Standards"), based on local needs and budgets at the program level. It is expected that the Annual Service Plan include board of health generated objectives and measures for monitoring achievements. The Annual Service Plan must reflect the requirements in the Standards.

As part of the Annual Service Plan, boards of health will describe the needs of the population they serve using the most recent available data. There is an opportunity for boards of health to provide high-level indices of the population they serve along with more specific data for unique sub-populations with common indicators of risk. This information is critical to prioritizing programs and services for the community as a whole and ensuring identified populations receive tailored support as required. The knowledge gained from implementation of the Foundational Standards will inform the preparation, implementation, and monitoring of the Annual Service Plan.

The Standards allow for greater flexibility in program delivery in several program standards including, but not limited to, Chronic Disease Prevention and Well-Being; Healthy Growth and Development; School Health; and, Substance Use and Injury Prevention. In the Annual Service Plan, boards of health will identify local priorities within each individual program area, and provide a summary of the data used to support their assessment of community need and their program delivery decisions, while also meeting all requirements under the Standards.

Please note that boards of health are required to include budget information and program plans on Ministry of Health and Long-Term Care (the ministry) funded programs only (both cost-shared and 100% funded programs), and must include 100% of budgeted expenditures (municipal and provincial portions) for these programs. Additionally, details provided in the Annual Service Plan should be based on the board of health's existing funding/budget and assume no change to the provincial base allocation (see Schedule A of your board of health's most recent Accountability Agreement). Any funding required over the existing provincial allocation must be requested in the Base and/or One-Time Requests worksheets provided in the Annual Service Plan.

The deadline to submit the 2018 Annual Service Plan and Budget Submission is March 1, 2018.

In order to assist boards of health in completing the Annual Service Plan, instructions and a glossary of terms have been provided in this worksheet.

1.2 Instructions

The Annual Service Plan is organized according to the order of the Foundational and Program Standards in the Standards. Boards of health are required to provide details on all programs and services planned under each Standard. Beginning in 2018, the Annual Service Plan template replaces the Program-Based Grants Budget Submission template, and now require that boards of health provide both narrative program plan details and budgeted financial data. For a list of admissible expenditures that can be included in the budget, refer to the current Public Health Funding and Accountability Agreement.

The Annual Service Plan includes multiple worksheets that have been colour-coded. In each worksheet, cells that require input have been colour-coded blue. Cells that are pre-populated with data previously inputted are colour-coded white.

The Annual Service Plan worksheets are organized as follows:

Table of Contents - The Table of Contents is organized according to the order of the Standards, followed by budget worksheets, base and one-time request worksheets, board of health membership, and key contacts and certification by the board of health. Each heading has been linked to the appropriate worksheet.

Part 1 - Introduction and Instructions - Provides an overview of the intent of the Annual Service Plan, instructions on how to complete the worksheets, a glossary to ensure consistency in the definition of specific terms, and sample examples of programs and public health interventions.

Part 2 - Community Assessment - Boards of health are required to provide a high-level description/overview of the community(ies) within their public health unit. Length of inputted content has been limited to the space provided (up to 4,000 characters).

Part 1 - Introduction and Instructions

Part 3 - Program Plans - This group of worksheets requires boards of health to provide a narrative and a summary budget for each program the board of health plans to deliver under each Standard.

The Program Plan worksheets are organized as follows:

3.0 - List of Programs - Boards of health are required to list all programs planned under each Program Standard before completing the Program Plan worksheets. The program names inputted on this form will pre-populate onto each Program Plan worksheet and applicable Budget worksheets. Boards of health can list up to ten (10) programs under each Program Standard, with the exception of Chronic Disease Prevention and Well-Being, which has space for twenty (20) programs. The number column to the left of the program name has been linked to the section of the program plan applicable to that program.

The List of Programs must also include any ministry funded "related" public health programs and services that support a specific Standard(s), with the exception of the MOH / AMOH Compensation Initiative. Related programs include, but are not limited to: the Chief Nursing Officer Initiative, *Electronic Cigarettes Act: Protection and Enforcement*, Enhanced Food Safety and Enhanced Safe Water Initiatives, Harm Reduction Program Enhancement, Healthy Smiles Ontario Program, Infection Prevention and Control Nurses, Infectious Diseases Control Initiative, Needle Exchange Program Initiative, Small Drinking Water Systems, Smoke-Free Ontario Strategy: Prosecution, Smoke-Free Ontario Strategy: Protection and Enforcement, Smoke-Free Ontario

Some public health programs, including related programs, may support all or multiple Standards. Boards of health are required to allocate these programs across all of the applicable Standards. If there is duplication of narrative details in the program plans, boards of health may avoid duplication in the narrative details by indicating the location in the Annual Service Plan where the information has already been provided.

If a related program is budgeted entirely as a funding source under Foundational Standards (e.g., Social Determinants of Health Nurses) in the Allocation of Expenditures worksheet, boards of health are required to provide a narrative description of their activities for that related program in the applicable Foundational Standards worksheets.

3.1 to 3.13 Program Plans - There is a worksheet for each Standard and sub-Section of a Standard, where appropriate. In each Program Plan worksheet, boards of health are required to provide summary narrative details on community needs/priorities, key partners/stakeholders, and programs/services that boards of health plan to deliver in 2018, including a list and descriptions of all public health interventions within each program (space for up to 10 public health interventions has been provided).

Each program includes a summary budget and sources of funding. Boards of health are not required to input data in these summaries as this data will pre-populate from budget data inputted by the board of health in the Budget worksheets. As noted above, boards of health must identify any ministry funded "related" program as a Program under the appropriate Program Standard and include a list and descriptions of all public health interventions within that "related" program.

Part 4 - Budget Allocation and Summaries - Includes a set of worksheets to allocate staffing and other expenditures for each Standard and program identified in the program plans, including "related" programs. Boards of health are required to identify sources of funding in the allocation of expenditures worksheet. This includes mandatory programs (cost-shared) as well as provincially funded "related" programs. Please see the Budget Summary worksheet for a list of provincially funded programs that are required to be reflected as programs and funding sources (or Schedule A of your most recent Accountability Agreement).

The Budget worksheets are organized as follows:

4.1 Staff Allocation to Standards - Boards of health are required to input the total number of full-time equivalents (FTEs) and total budget for each position in the blue coloured cells. Boards of health will then be required to allocate these FTEs to the applicable Standard until all unallocated FTEs have been allocated and there is no validation error in the Unallocated FTEs column. Cells across a position row will remain yellow until the total FTE amount for that position has been allocated correctly. Boards of health are also required to input the total FTEs and total budget for the medical officer of health position and each administrative position in this worksheet. Note that boards of health are not required to allocate the medical officer of health position and administrative positions across the Standards.

4.2 Staff Allocation to Programs - Total FTEs per position will pre-populate from worksheet 4.1 for each Standard. Boards of health are required to input the total FTEs for each program in that Standard.

4.3 Allocation of Expenditures - No data input is required for salaries/wages as this data will pre-populate from worksheet 4.2. Boards of health are required to enter a total percentage (%) of benefits for the entire organization (entered once under Foundational Standards). This % amount will calculate a portion of benefits for each program under each Standard automatically. All other expenditure categories require the input of data to allocate expenditures across each program as appropriate. Costs associated with the office of the medical officer of health, administration and other overhead/organizational costs are to be input into a table at the end of this worksheet as an indirect cost and are not to be allocated across the Standards or Programs. Formula cells related to benefits have been left unlocked should boards of health need to adjust the proportion of benefits per program to be more reflective of the actual costs.

4.4 Budget Summary - This worksheet summarizes budget data at 100% (municipal and provincial portions) and the provincial share. The budget summary is not a budget request for additional funding. Any requests for additional base or one-time funding must be included in the Base and/or One-Time Requests worksheets.

Part 1 - Introduction and Instructions

Part 5 - Base and One-Time Funding Requests - Any requests for additional base and/or one-time funding must be identified in the base and one-time funding requests worksheets in this Workbook. Each worksheet includes a limit of 10 requests each for base and one-time. A Summary worksheet automatically populates total base and one-time funding requested.

Funding requests for the MOH/AMOH Compensation Initiative and one-time funding requests for capital and infrastructure improvement projects should **not** be included in the Annual Service Plan.

Part 6 - Board of Health Membership - Details on board of health membership.

Part 7 - Key Contacts and Certification by the Board of Health - Details on key contacts and signatures required for the Annual Service Plan and Budget Submission template.

1.3 Glossary

Standard - The categories used in the Standards to describe the full range of public health programs and services that are required to be delivered by boards of health in Ontario.

Section - A sub-section of a Standard. Used only for those Standards where appropriate.

Program - A logical grouping of public health interventions related to a specific program. May be disease specific, topic specific, or population/age specific, or other.

Public Health Intervention - An organized set of public health actions to deliver a program or service. May be delivered in single or multiple locations.

Examples of a possible intervention per Program and per Standard are provided as follows:

Standard - Health Equity
Section - N/A
Program - Social Determinants of Health Nurses
Public Health Intervention - Modifying programs to address health equity

Standard - Chronic Disease Prevention and Well-Being
Section - N/A
Program - Healthy Living
Public Health Intervention - Healthy living workshops and education

Standard - Food Safety
Section - N/A
Program - Food Handler Certification
Public Health Intervention - Food-handler training courses

Standard - Healthy Environments
Section - N/A
Program - Health Hazards
Public Health Intervention - Engagement and advocacy

Standard - Healthy Growth and Development
Section - N/A
Program - Healthy families
Public Health Intervention - Prenatal education

Standard - Immunization
Section - N/A
Program - HPV Immunization
Public Health Intervention - Vaccine distribution

Standard - Infectious and Communicable Diseases Prevention and Control
Section - N/A
Program - Communicable Diseases
Public Health Intervention - Follow up on all reportable communicable diseases

Standard - Safe Water
Section - N/A
Program - Enhanced Safe Water
Public Health Intervention - Surveillance of recreational water facilities

Standard - School Health
Section - Oral Health
Program - Healthy Smiles Ontario
Public Health Intervention - Oral health screening

Standard - Substance Use and Injury Prevention
Section - Substance Use
Program - Alcohol and Substance Misuse
Public Health Intervention - Health promotion, communication and education

Board of Health for the City of Hamilton, Public Health Services

Part 2 - Community Assessment

Please use this section to provide a high-level description of the community(ies) within your public health unit. This information should provide sufficient detail to enable the ministry to understand program and service delivery decisions and appreciate unique priorities, opportunities, and challenges. This will provide the broad context in which all programs and services are delivered. Program specific contextual factors including priority population considerations may be provided here and/or within the individual program sections. This section may include information regarding local population health issues, priority populations (including Indigenous populations), community assets and needs, political climate, and public engagement.

Also, please include discussion of any unique challenges, issues or risks faced by your community(ies) which are influencing the work of your board of health.

Maximum 4,000 characters

Length = 3491

Hamilton is an urban-rural area of 536,000 people. Hamilton is ethnically and socially diverse, but challenged by a high concentration of urban poverty and extreme health inequities. The following **local priorities** have been identified through population health assessment: **Mental health and addictions: Suicide** is the leading cause of death for those under 45; self-harming behaviours among young Hamiltonians are high and increasing. **Opioid overdoses** are increasing and half of Hepatitis C cases report injection drug use. Working-age males and low income households share the bulk of these issues. **Youth sexual health:** While teen pregnancy is declining in Hamilton it is still higher than Ontario. STBBI cases are increasing in Hamilton. Chlamydia is high in younger females while HIV and syphilis are higher in MSM. **Health Equity:** Hamilton has high concentrations of people with low income, seniors living alone, and lone parent families. Many of these populations have poorer health outcomes and are concentrated in the lower city. **Indigenous Health:** The census counted 17,665 Indigenous people in Hamilton, of whom 78% live in poverty and 69% receive OW. They face higher rates of infectious and chronic diseases, 68% smoke daily, 19% use opioids, and 11% are heavy ER users. **Oral Health:** 185,000 Hamiltonians lack dental insurance. This leads to stark health inequities with low income seniors having the worst access to dental care. **Obesity:** 2 in 3 adults are overweight or obese. Men, middle-aged adults, and low income households report more sedentary behaviour and poorer nutrition. These health behaviours reflect the significant burden of chronic diseases in all local morbidity and mortality data. **Environmental Health:** Air pollution, radon, UV radiation, and extreme weather are top environmental hazards impacting the health of Hamiltonians. Radon and UV alone are linked to 77 local deaths per year. **Community Assets and Engagement:** PHS assets include: central physical location; structure as a municipal department; organizational adoption of Results Based Accountability; and strong local commitment to health and social equity. PHS is developing a community-wide population health approach alongside core health sector and community leaders through the HBHB LHIN Hamilton Sub-region Anchor Table. PHS leads, convenes, and contributes to collaborative community-wide initiatives, for example : Urban Indigenous Strategy, Drug Strategy, Poverty Reduction Strategy, Food Strategy, Youth Sexual Health Strategy, Population Health Assessment and Surveillance Strategy; and maternal-child health service integration initiatives.

Political Climate: Hamilton's elected city council is the region's Board of Health. City Council and City of Hamilton Strategic Plan 2016-2025 set out priorities that align with Public Health goals, including community engagement, healthy communities, cultural diversity and built environment. City budget pressures that result from heavy reliance on the residential tax base require difficult decisions to manage significant infrastructure and community needs. Provincial and municipal elections in 2018 could influence priorities and resource allocation. In 2018, Hamilton Public Health Services will merge with Community and Emergency Services to form an integrated department within the City of Hamilton's organizational structure that will focus on creating a Healthy and Safe Community and developing administrative efficiencies.

Board of Health for the City of Hamilton, Public Health Services

Part 3 - Program Plans			
3.0 - List of Programs			
Chronic Disease Prevention and Well-Being			
#	Program Name	#	Program Name
1	Tobacco Control, Prevention and Cessation	11	Smoke Free Ontario - Tobacco Control Area Network - Prevention
2	Cancer Prevention	12	Smoke Free Ontario - Tobacco Control Coordination
3	Built Environment	13	Smoke Free Ontario - Youth Tobacco Use Prevention
4	Healthy Food Systems	14	
5	Mental Health Promotion	15	
6	Substance Use Prevention	16	
7	Harm Reduction	17	
8	Smoke Free Ontario - Prosecution	18	
9	Smoke Free Ontario - Protection and Enforcement	19	
10	Smoke Free Ontario - Tobacco Control Area Network - Coordination	20	
Food Safety		Healthy Environments	
#	Program Name	#	Program Name
1	Food Safety	1	Health Hazards
2	Enhanced Food Safety Initiative	2	Air Quality and Climate Change
3		3	
4		4	
5		5	
6		6	
7		7	
8		8	
9		9	
10		10	
Healthy Growth and Development		Immunization	
#	Program Name	#	Program Name
1	Child Health	1	Vaccine Inventory Management
2	Reproductive Health	2	
3		3	
4		4	
5		5	
6		6	
7		7	
8		8	
9		9	
10		10	
Infectious and Communicable Diseases Prevention and Control		Safe Water	
#	Program Name	#	Program Name
1	Vector Borne Diseases	1	Safe Water
2	Infectious Disease Program	2	Enhanced Safe Water Initiative
3	Mental Health Promotion	3	Small Drinking Water Systems
4	Substance Use Prevention	4	
5	Harm Reduction	5	
6	Sexual Health	6	
7	Infection Prevention and Control Nurses Initiative	7	
8	Infectious Diseases Control Initiative	8	
9		9	
10		10	
School Health			
School Health - Oral Health		School Health - Vision	
#	Program Name	#	Program Name
1	Oral Health Assessment	1	Child Visual Health and Vision Screening
2	Healthy Smiles Ontario	2	
3		3	
4		4	
5		5	
6		6	
7		7	
8		8	
9		9	
10		10	
School Health - Immunization		School Health - Other	
#	Program Name	#	Program Name
1	Immunization of School Pupils	1	School Health
2		2	Tobacco Control, Prevention and Cessation
3		3	Injury Prevention
4		4	Chronic Disease Prevention
5		5	Mental Health Promotion
6		6	Substance Use Prevention
7		7	Harm Reduction
8		8	Sexual Health
9		9	
10		10	
Substance Use and Injury Prevention			
Substance Use		Injury Prevention	
#	Program Name	#	Program Name
1	Tobacco Control, Prevention and Cessation	1	Injury Prevention
2	Harm Reduction	2	
3	Substance Use Prevention	3	
4	Electronic Cigarettes Act - Protection and Enforcement	4	
5	Harm Reduction Program Enhancement	5	
6	Needle Exchange Program Initiative	6	
7		7	
8		8	
9		9	
10		10	

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

Foundational Standards

3.1 Population Health Assessment

A. Description

Length = 1721

Please describe how the board of health plans to implement this Standard. This should include descriptions of the activities the board of health will undertake to access, develop and interpret data, prepare reports, work with internal and external stakeholders, and what the board of health expects to achieve through these activities (maximum characters of 1,800).

The Epidemiology & Evaluation (E&E) Program supports and delivers Population Health Assessment (PHA) and Surveillance services to all Program Areas within Hamilton PHS. The E&E Program has developed a PHA and Surveillance (PHAS) Strategy. The PHAS Strategy has 4 Priorities: 1. Understand the health of Hamiltonians: Use data to measure, monitor and report on the status of our population's health, including determinants of health and health inequities, by developing PHA products, including presentations, reports, PHA Indicator Inventory, Story Maps, Community Health Profiles, Village of 100 and Life Course Model. Design/maintain surveillance systems. Produce surveillance products to communicate information on risks. Implement a process for identifying public health priorities, including priority populations. Collaborate with PHS programs and key partners/stakeholders to understand their data needs and to access additional data that will advance our understanding of population health. 2. Share intelligence with our partners: Share PHAS products with PHS programs, key partners/stakeholders and the public in order to take appropriate action. 3. Focused Investment: Engage PHS programs and key partners/stakeholders so that they use PHAS intelligence to inform action, ensuring resources are allocated to reflect public health priorities. Examples include change management planning, identifying synergies and opportunities to collaborate, conducting information sessions and promoting PHAS information products for evidence-informed decision making. 4. Strengthen our Community: Develop Results-Based Accountability frameworks that measure the impact our services have on health outcomes in the community

B. Objectives

Length = 413

Please describe the objectives and what the board of health expects to achieve through the delivery of this Standard. Only describe those objectives that will not also be reflected in other program plans in this template (maximum characters of 1,800).

Compliance with the Population Health Assessment Standard, including all required protocols
Population Health Assessment & Surveillance (PHAS) information used to understand the health of Hamiltonians
Information shared with PHS programs and key partners/stakeholders to guide the planning and delivery of programs and services.
Implementation of the 4 Priorities in the PHAS Strategy (described in Section A.)

C. Key Partners/Stakeholders

Length = 774

Provide information on the internal (e.g., board of health program areas) and external partners (e.g. LHINs, municipalities, etc.) the board of health will collaborate with to carry out programs/services under this Standard (maximum characters of 1,800).

The E&E Program collaborates with multiple internal and external partners. The purpose of these networks includes: 1. Create awareness of what PHA information is, why it is important and how it can be used to inform action; 2. Better understand our partner's PHA data needs and how they use PHA data to inform action; 3. Share PHA data sources in order to generate comprehensive information products; 4. Share PHA information products so that partners can 'see it and use it' to inform action; 5. Provide leadership and guidance so that partners understand how to use PHA information to inform action. E&E's network includes: Internal Partners (PHS Programs; City of Hamilton Departments); External Partners (LHIN; Health Systems Partners; School Boards; Community Partners)

D. Indicators of Success

Length = 172

List the indicators or data elements that the board of health will be using to monitor activities related to delivering on this Standard (maximum characters of 1,800).

% of projects where Population Health Assessment information was provided by the Epidemiology & Evaluation team and was used to inform program planning and decision-making

E. Description of Related Programs

Length = 14

If a related program(s) is budgeted entirely as a funding source under Foundational Standards please describe the program(s) below including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Not applicable

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

Foundational Standards

3.2 Health Equity

A. Description

Length = 1567

Please describe how the board of health plans to implement this Standard related to addressing health inequities (maximum characters of 1,800).

The Health Strategy and Equity Program aims to support all public health programs in achieving the Health Equity Standard through: **The Population Health Assessment and Surveillance Strategy**, focusing on analysis and dissemination of local determinants of health and health inequities; **Training and mentoring** all staff on a standardized department-wide process for identifying priority populations and interventions to target root causes of inequities based on explicit analysis and interpretation of population health data, determinants of health, and social inequities; **Building common understanding**, among staff and partners, of effective local strategies and methods to address health and social inequities; **Engaging stakeholders** to strengthen and evaluate strategic approaches to addressing root causes of health and social inequities, including a review of current stakeholders engaged in health equity work and alignment with public health strategic priorities; Determining stakeholder partners and networks to engage or deepen collaboration to address identified equity priorities; **Engaging priority populations** using engagement best practices; **Using program evaluation and performance measurement** (where applicable) to determine whether current and planned health equity interventions are effective in meeting specific objectives and whether inequities and their causes are impacted; **Developing relationships and fostering partnerships** with local Indigenous organizations and communities, including contribution to City of Hamilton Urban Indigenous Strategy.

B. Objectives

Length = 821

Please describe the objectives and what the board of health expects to achieve through delivery of this Standard. Only describe those objectives that will not also be reflected in other program plans in this template (maximum characters of 1,800).

Improved reporting and dissemination of health equity information within health unit and broader community to deepen shared understanding of inequities and effective strategies to address them.
Increased department-wide capacity to identify systemic health and social inequities and priority populations through population health assessment and strategic community engagement.
Increased capacity for developing and evaluating effectiveness of evidence-based collaborative strategies to address root causes of inequity by applying Effective Public Health Practice and best practices for engaging stakeholders and priority populations.
Increased multi-sectoral collaboration, system integration, and engagement of priority populations to ensure strategies and interventions address local needs, strengths, and priorities.

C. Key Partners/Stakeholders

Length = 1769

Provide information on the internal (e.g., board of health program areas) and external partners (e.g., LHINs, municipalities, etc.) the board of health will collaborate with to carry out programs/services under this Standard (maximum characters of 1,800).

Internal staff will be engaged to build capacity for identifying and developing effective collaborative interventions through effective public health practice and stakeholder engagement.
The Hamilton Community Health Work Group, made up of leaders from core health and community organizations, is aimed at building a population health approach to health and social equity in Hamilton.
The LHIN Sub-Region Anchor Table, made up of health system leaders, will be engaged to build an integrated system of health and social supports while supporting cross-sectoral planning and priority-setting.
Hamilton Executive Directors Aboriginal Coalition (HEDAC) and the Hamilton Urban Indigenous Strategy leaders are engaged to identify opportunities for partnership and collaboration to advance goals of Truth and Reconciliation and Indigenous health equity.
Hamilton Roundtable for Poverty Reduction is a cross-sector collaborative of community leaders and people with lived experience of poverty. The Roundtable is a core partner in developing and implementing strategies to target systemic and structural causes of poverty and related health inequities.
Partners from all sectors (including healthcare, community organizations, education, and residents) are engaged for a range of strategic priorities and equity initiatives with specific priority populations, including: Hamilton Immigration Partnership Council facilitates community partnerships to coordinate and enhance delivery of services to newcomers; Hamilton Trans Health Coalition is composed of family physicians, other health care and service providers, and trans Hamiltonians collaborating to increase capacity of Hamilton's primary healthcare system to deliver high-quality healthcare to trans Hamiltonians.

D. Indicators of Success

Length = 396

List the indicators or data elements that the board of health will be using to monitor activities related to delivering on this Standard (maximum characters of 1,800).

% of staff who complete required training
% of end-users (pop health data) who reported increased understanding and knowledge about health trends
% of projects where information provided by E&E was used to inform program planning and decision-making
Additional Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

E. Description of Related Programs

Length = 408

If a related program(s) is budgeted entirely as a funding source under Foundational Standards please describe the program(s) below including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Social Determinants of Public Health Nurse Initiative: Two Public Health Nurses (PHNs) are funded by the MOHLTC to act on social determinants of health and advance health equity. These two PHNs support Hamilton PHS in addressing the Health Equity Standard, including strategies with and for identified priority populations as determined by Departmental population health assessment and community engagement.

2018 Public Health Program Plans and Budget Summaries

Foundational Standards

3.3 Effective Public Health Practice

A. Description

Length = 1788

Please describe how the board of health plans to implement this Standard related to the following under Effective Public Health Practice (maximum characters of 1,800):

- a) Program Planning, Evaluation, and Evidence-Informed Decision-Making;
- b) Research, Knowledge Exchange, and Communication; and,
- c) Quality and Transparency

a) The Health Strategy and Equity program supports the achievement of the Effective Public Health Practice Standard through: **a)** Engaging staff in continuous learning to enhance foundational knowledge and practice: EIDM, PHA, change management, equity assessment, and systems planning through application of the Health Impact Pyramid and Results Based Accountability; Implementing systematic planning & reporting across all program areas; ensuring consistent application of performance measures, EIDM tools, PHA; developing an evaluation strategy to prioritize program evaluations relative to CQI and performance measurement. **b)** Continuing to foster diverse multi-sectoral partnerships to advance public health knowledge and research into practice; ensuring measureable collective impact via implementation of Stakeholder Engagement Plan; enhancing awareness of public health's role, expertise, and achievements through: BOH presentations, evaluation and surveillance reports, and collaboration; strengthening emphasis on evidence in BOH orientation and self-evaluation; conducting evidence review on effective knowledge mobilization with policy-makers; developing outcome and impact indicators to measure quality and effectiveness of knowledge exchange activities. **c)** Complying with all monitoring and reporting requirements, including: AA indicators, MOHLTC Funding Guidelines, reports to BOH and public on program activities and outcomes; ensuring public reporting of all inspections on website; implementing Population Health Assessment and Surveillance Strategy, including review of best practices on data analysis, interpretation, and reporting; expanding innovative use of multiple communication methods to ensure timely, relevant, and easily understandable information products.

B. Objectives

Length = 841

Please describe the objectives and what the board of health expects to achieve through the delivery of this Standard. Only describe those objectives that will not also be reflected in other program plans in this template (maximum characters of 1,800).

A standardized process is developed to use all forms of evidence to inform program and strategic planning and decision making. CQI is implemented consistently across all programs. Program evaluations are considered and conducted in a consistent and systematic manner. Improved capacity to impact determinants of health and health inequities through PHS and collaborative partnerships. Improved awareness of the importance of evidence and understanding of population health approach among policy makers and stakeholders. Enhanced impact of PHS knowledge exchange activities. Community and stakeholder experience is measured and considered in decision making and program planning. All inspection results are publicly disclosed and easily accessible. Improved public access and understanding of population health and surveillance information.

C. Key Partners/Stakeholders

Length = 818

Provide information on the internal (e.g., board of health program areas) and external partners (e.g., LHINs) the board of health will collaborate with to carry out programs/services under this Standard (maximum characters of 1,800).

PHS continues to forge diverse multi-sectoral partnerships toward advancing public health, with partnerships ranging from academic institutions, healthcare providers, community organizations, school boards, municipal partners, and the private sector. National Collaborating Centre for Methods and Tools is a core partner in building staff capacity and McMaster University offers many opportunities for research collaboration and knowledge mobilization. PHS engages in knowledge exchange activities with a variety of stakeholders regarding factors that determine the health of the population. This is accomplished through a number of initiatives including (but not limited to): Tobacco control training for HCPs, Rabies interagency meetings, BOH – reports, presentations, Hamilton sub-region anchor table of the LHIN

D. Indicators of Success

Length = 396

List the indicators or data elements that the board of health will be using to monitor activities related to delivering on this Standard (maximum characters of 1,800).

% of staff who complete required training
 % of end-users (pop health data) who reported increased understanding and knowledge about health trends
 % of projects where information provided by E&E was used to inform program planning and decision-making
 Additional Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

E. Description of Related Programs

Length = 651

If a related program(s) is budgeted entirely as a funding source under Foundational Standards please describe the program(s) below including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Chief Nursing Officer Initiative: This initiative provides funding for the Nursing Practice Advisor (NPA) position that supports the health unit's senior nursing leader appointed as the Chief Nursing Officer (CNO). The CNO is responsible for ensuring a high quality of nursing practice throughout the organization. The CNO and NPA positions support the 150 nursing staff who provide direct and indirect services to the population. Activities include supporting the organization and individual programs in the areas of workforce planning, quality assurance, continuous quality improvement, evaluation, practice innovation, professional development.

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

Foundational Standards

3.4 Emergency Management

A. Description

Length = 661

Please describe how the board of health plans to implement this Standard related to emergency management (maximum characters of 1,800).

The Emergency Management program supports the achievement of the Emergency Management Standard. In the absence of the forthcoming policy for a Ready and Resilient Health System, implementation of the Standard will occur through ongoing emergency preparedness work consistent with the requirements in the old standard and protocol. This includes training, planning, hazard identification and risk assessment, and business continuity initiatives.

In addition to preparedness work, response and recovery operations consistent with the Incident Management System (IMS) will be implemented when any emergency situation arises with a potential public health impact.

B. Objectives

Length = 340

Please describe the objectives and what the board of health expects to achieve through the delivery of this Standard. Only describe those objectives that will not also be reflected in other program plans in this template (maximum characters of 1,800).

Compliance with the Emergency Management Standard, including all required protocols
The board of health is ready to respond to and recover from new and emergency events or emergencies with public health impacts.
Reduced negative health impacts to Hamilton residents
Decreased operational impacts on service delivery during surge events.

C. Key Partners/Stakeholders

Length = 954

Provide information on the internal (e.g., board of health program areas) and external partners (e.g., LHINs) the board of health will collaborate with to carry out programs/services under this Standard (maximum characters of 1,800).

Internal: Collaboration may occur within all PHS programs for continuity planning and response to emerging threats. Examples include:

Infectious Disease Program: ID outbreak response, IPAC lapses, influenza planning

Health Hazards: Chemical spill planning, heat/cold response

Nursing Practice Development Committee: PHN role during emergencies (hotlines, reception centres, immunization clinics)

External

Emergency Management Advisory Committee (EMAC)- City planning with all community partners on the EMAC (City Emergency Management Coordinators, Police, Fire, EMS, Hospitals, Public Works, Community and Emergency Services, etc.).

Health Sector Emergency Management Committee (Hospitals, CHCs, Family Health Teams, LHIN, etc.)- Health system planning and emergency response collaborations.

Ontario Public Health Emergency Managers Network- Resource sharing amongst health units to aid in the continued advancement of emergency management programs.

D. Indicators of Success

Length = 289

List the indicators or data elements that your board of health will be using to monitor your activities related to delivering on this Standard (maximum characters of 1,800).

Indicators to be developed upon the release of the Ready and Resilient Health System Policy. The forthcoming Policy will provide detailed outcomes for compliance with the Standard.

Program indicators have been developed previously but most were related to previous Standard requirements.

E. Description of Related Programs

Length = 14

If a related program(s) is budgeted entirely as a funding source under Foundational Standards please describe the program(s) below including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Not applicable

Program Budget Summary

Object of Expenditure	Amount
Salaries and Wages	100,060
Benefits	25,450
Travel	730
Professional Services	4,280
Expenditure Recoveries & Offset Revenues	(6,590)
Other Program Expenditures	28,620
Total	\$152,550

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary

Funding Source	Amount
Mandatory Programs (Cost-Shared)	152,550
Total	\$152,550

Funding sources are populated with budget data provided in the budget worksheets

2018 Public Health Program Plans and Budget Summaries
3.5 Chronic Disease Prevention and Well-Being

A. Community Need and Priorities

Length = 1729

Please provide a short summary of the following (maximum characters of 1,800):
a) The key data and information which demonstrates your communities' needs for public health interventions to address risk and protective factors for chronic disease prevention and well-being; and
b) Your board of health's determination of the local priorities for programs of public health interventions that addresses risk and protective factors for chronic disease prevention and well-being with consideration to the required list of topics identified in the Standards.

Chronic Diseases: Top five reasons for emergency department visits are related to chronic conditions including circulatory and other forms of heart diseases for ages 25 years plus. Ischemic heart disease as a cause of death, in the top five as early as the 25-34 age group and progresses to the number one cause of death for the 45-54 age group through to the 85+ age group. **Obesity:** 67.8% of Hamilton adults 18+ self-reporting overweight or obese. Males are more overweight or obese than females in Hamilton. 27.0% of youth age 12-17 self-reporting overweight or obese. Only 26.4% of residents (12+), 47.6% (12-19) of adolescents reported that they were active during their leisure time. **Nutrition:** 37.4% of people 12+ years of age and 38.8% of adolescents 12-19 years of age consume vegetables or fruit five or more times per day. **Tobacco:** 78% of Hamiltonians smoked their first whole cigarette between the age of 12 to 19; About 10% of Hamilton moms reported smoking at time of newborn's birth. Of those that have ever smoked a whole cigarette, 78% smoked their first cigarette between the age of 12 to 19. The adult current smoking rate (aged 20 and over) for Hamilton is 21%. **(b) Tobacco:** prevention; promote quitting among young people and adults; eliminate exposure to environmental tobacco smoke; Healthy Kids Community Challenge focused on reducing screen time and sedentary behaviour in children. Hamilton Food Strategy to ensure availability of healthy, sustainable, and just food for all. Healthy Development Assessment in Hamilton which measures the health-promoting potential of a planning or development proposal. Moving Hamilton Initiative: Provide physical literacy training to stakeholders in Hamilton.

B. Key Partners/Stakeholders

Length = 1557

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Food: Food Advisory Committee: to support and advise the implementation of the Hamilton Food strategy and other food-related City initiatives; Interdepartmental Food Strategy Steering Committee – representatives from City of Hamilton Departments to develop, implement and support Food Strategy;
Physical Activity: Hamilton Burlington Trails Council: To promote the health benefits of recreational trail use to residents and visitors while conserving our valuable natural ecosystems; Smart Commute Hamilton Advisory Committee: To work with local organizations to provide programs and initiatives that encourage the use of active and sustainable transportation; Healthy Kids Community Challenge Workgroup and Steering Committee: To develop plans to address healthy eating and physical activity in children ages 0-12 years. Built Environment: Transportation Master Plan Technical Advisory Committee: Internal cross-departmental committee providing input to the TMP review. **Cancer Prevention:** Ontario Sun Safety Working Group: To reduce the impact of solar and artificial ultraviolet (UV) radiation (including indoor tanning equipment) on human health, such as skin cancer and eye diseases; **Tobacco:** The Hamilton Family Health Team; McMaster Family Practice; Smokers' Helpline; St. Joseph's Health Care Hamilton; Hamilton Health Sciences; Juravinski Cancer Centre ; De dwa da dehs nyees- Aboriginal Centre; Centre de Sante ; Good Shepherd; Hamilton District Pharmacy Association ; North Hamilton Community Health Centre; McMaster University; School Boards;

C. Programs and Services

Program: **Tobacco Control, Prevention and Cessation**

Description

Length = 1538

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program aims to prevent the initiation of tobacco; promoting quitting among young people and adults; eliminating exposure to environmental tobacco smoke; and identifying and eliminating disparities related to tobacco use and its societal outcomes among different populations groups. The current smoking, age 12+ (past 30 days), in Hamilton is 18.8% (89,200) which is similar to Ontario. Over the years, there was no observed change overtime in the adult smoking rate for both Hamilton and Ontario. In Ontario 30% of youth (Gr 7-12) are susceptible to smoking. Over the 3 reporting cycles (2009/10-13/14), 7% of Hamiltonians aged 12-19 are current cigarette smokers. In Hamilton 87.1% youth (age 12-18) have "never smoked a cigarette". In Hamilton, 10% of non-smokers aged 12 years and over are regularly exposed to tobacco smoke in their home. Approximately 1/3 of Hamilton residents live in rental units; over 80 per cent of residents are non-smokers (18.8% are daily and occasional smokers), yet there are smoke free city housing options. In Hamilton, 14.3% (781/5447) women reported smoking at time of newborn's birth which is significantly higher when compared to Ontario 10.7%. City of Hamilton By-law #11-080 came into effect in May 31, 2012 to prohibit smoking in all City of Hamilton Parks and recreation properties. City of Hamilton enacted a retail licensing and ECA vendor licence schedule to ensure greater compliance with the SFOA. In addition to local description, please see CW TCAN 3.5.10 and 3.5.11 description.

Objective

Length = 395

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Increased access to cessation services for priority populations to stimulate and support quit attempts.
Increased support for current smokers 12+ years who make one or more quit attempts annually.
Brief interventions promoted to clients that aim to protect non-smokers, especially children and pregnant women.

In addition to local objectives, please see CW TCAN 3.5.10 and 3.5.11 objectives.

Indicators of Success

Length = 382

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program (maximum of 1,800 characters).

% of tobacco vendors in compliance with youth access legislation at the time of last inspection
% of tobacco retailers in compliance with display, handling and promotion sections of the SFOA at time of last inspection
Cessation rate at 3 and 6 months (PHS Tobacco Cessation Clinic)
In addition to local indicators, please see below intervention CW TCAN objectives 3.5.10 – 3.5.12.

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	505,840
Benefits	133,800
Travel	2,340
Professional Services	8,350
Expenditure Recoveries & Offset Revenues	(90,910)
Other Program Expenditures	133,640
Total	\$693,060

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	693,060
Total	\$693,060

Funding sources are populated with budget data provided in the budget worksheets

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.5 Chronic Disease Prevention and Well-Being

Public Health Intervention	Description
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Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

<p style="text-align: right;"><i>Length = 86</i></p> <p>Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)</p> <p style="text-align: right;"><i>Length = 54</i></p>	<p style="text-align: right;"><i>Length = 678</i></p> <p>Contribute to the CW Tobacco Control Area Network (TCAN) Regional 2018 Work plan. Please reference the City of Hamilton Annual Service Plan section SFO – TCAN program plans. Tobacco Licence reform: Work with licencing for capping or zoning of tobacco retailers Multi-Unit Housing Smoke-Free Policies: Work with housing sector to provide smoke free options in social housing in Hamilton Revise as per new legislative requirements re. prohibition of smoking within all City of Hamilton parks and recreation properties as per City of Hamilton By-law #11-080 Develop smoke-free policies in CHH MUDs. Reform licencing to decrease the amount of tobacco licences available</p> <p style="text-align: right;"><i>Length = 702</i></p>
<p>Promotion, Awareness, Education, Knowledge Translation</p> <p style="text-align: right;"><i>Length = 49</i></p>	<p>Hamilton Quits Smoking: Cessation Care Pathway: Provide training to increase Health Care Providers (HCP) and community capacity to systematize best practices in tobacco use. Monitor and evaluate success through portal to track cessation outcomes and HCP capacity and performance; deliver community wide campaign to support and promote the care pathway as a strategy to engage and help navigate the system. Minimal Contact Intervention Policies: Support all staff to continue to implement policy and to evaluate implementation rate. Communicate new legislation and deliver signage to local officials, community leaders, CoH employees and businesses to increase compliance with the new legislation.</p> <p style="text-align: right;"><i>Length = 207</i></p>
<p>Screening/Assessment/Intervention/Case Management</p>	<p>Intensive Cessation Intervention (clinics and workshops): Offer 1-2 workshops/month for up to 50 participants/workshop; 1 .5 days/week- intensive one-on-one counselling and weekly group (includes Newcomers)</p>

Program:

Description *Length = 324*

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program aims to reduce incidence, morbidity, and mortality from cancers of the breast, cervix, colon/rectum and skin. The program addresses risk factors for other diseases of Public Health importance such as cardiovascular disease and Type 2 Diabetes. The priority populations are low income and immigrant populations.

Objective *Length = 677*

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Increased capacity of community members to identify and address health needs and healthy living behaviours.
Increased awareness of cancer screening and risk factors for chronic disease among priority populations.
Increased capacity and collaboration with community partners to provide cancer prevention services that are appropriate and accessible taking into consideration local demographics.
Increased proportion of shade in built environment.
100% of complaints response under the Skin Cancer Prevention Act (Tanning Beds) 2013.
Increased operator compliance with the Skin Cancer Prevention Act.
Reduced exposure to Ultraviolet Radiation (UVR) in target populations.

Indicators of Success *Length = 134*

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	590,080
Benefits	147,090
Travel	260
Professional Services	4,350
Expenditure Recoveries & Offset Revenues	(70)
Other Program Expenditures	159,100
Total	\$900,810

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	900,810
Total	\$900,810

Funding sources are populated with budget data provided in the budget worksheets

Program: Cancer Prevention

Public Health Intervention	Description
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Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 661

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.5 Chronic Disease Prevention and Well-Being

<p>Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)</p> <p style="text-align: right;"><i>Length = 56</i></p>	<p>Collaborate with partners to improve health system navigation. Advocate for healthy policies such as Shade policy in land use planning and development applications Use peer support model to promote healthy lifestyle behaviours (eg. with ESLs, Screen For Life Coach, Neighbourhood Planning Teams, Neighbour to Neighbour Food Centre) Work with neighborhood hubs and associations to address identified health needs specifically in the Sherman, Riverdale, Crown Point, South Mountain and Rolston neighbourhoods. Provide consultation and input on land use planning and development applications to increase proportion of shade in work related to Built Environment.</p> <p style="text-align: right;"><i>Length = 1122</i></p>
<p>Promotion, Awareness, Education, Knowledge Translation</p> <p style="text-align: right;"><i>Length = 49</i></p>	<p>CASTLE (Creating Access to Screening and Training in the Living Environment): promote chronic disease risk factors and healthy living behaviours to vulnerable populations via a peer to peer model Community Health Workers: using a peer to peer model, provide education and awareness activities focused on healthy eating, physical activity, tobacco cessation, and cancer screening. Provide CDP messaging at Local Planning Teams in priority neighbourhoods Consult with internal programs/divisions to align initiatives and ensure appropriate referral linkages (eg. internal cross-divisional working group). Use a neighbour to neighbour and student to student approach for healthy lifestyle messaging dissemination Provide education and support to new tanning salon operators on the Skin Cancer Prevention Act. Promote Low Risk Drinking Guidelines through Cancer Matters Campaign "Rethink Your Drink" in partnership with the Canadian Cancer Society aimed at adults age 25-44 years Develop and implement integrated chronic disease prevention messaging to reduce exposure to Ultraviolet Radiation (UVR) in target populations</p> <p style="text-align: right;"><i>Length = 567</i></p>
<p>Screening/Assessment/Intervention/Case Management</p> <p style="text-align: right;"><i>Length = 10</i></p>	<p>Community Health Workers support under and never screened individuals to make cancer screening appointments (eg at the Regional Juravinski Centre, Mobile Screening Co ach)Service is provided in English, Chinese, Hindi, Punjabi and Urdu Collaborate with Tobacco Control Program to provide newcomer smoking cessation clinics Implement Healthy Kids Community Challenge (HKCC) Theme 4, which will address screen time and physical activity (a risk factor for obesity and chronic disease). Work with the Neighbourhood Leadership Institute in HKCC targeted neighbourhoods.</p> <p style="text-align: right;"><i>Length = 78</i></p>
<p>Inspection</p>	<p>Respond to complaints under the Skin Cancer Prevention Act (Tanning Beds) 2013</p>

Program:

Description *Length = 296*
Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program aims to prevent chronic disease by increasing physical activity through influencing public policy development and addressing design of the built environment. Focus areas include: Land use planning; Park, trails and open space; Active sustainable transportation; Schools; Workplaces

Objective *Length = 349*
Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Increased capacity through advocacy for environmental and policy changes to support physical activity in the city of Hamilton.
Physical activity opportunities and evidence based built environment design are promoted to key stakeholders
Best practices for addressing sedentary behaviour and increase physical activity promoted to key stakeholders.

Indicators of Success *Length = 134*
List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	573,650
Benefits	147,170
Travel	280
Professional Services	4,250
Expenditure Recoveries & Offset Revenues	(70)
Other Program Expenditures	146,010
Total	\$871,290

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	871,290
Total	\$871,290

Funding sources are populated with budget data provided in the budget worksheets

Program: Built Environment

Public Health Intervention	Description
<p>Input a title for each public health intervention under this Program (maximum of 100 characters)</p> <p style="text-align: right;"><i>Length = 85</i></p>	<p>Briefly describe the public health intervention (maximum of 1,800 characters)</p> <p style="text-align: right;"><i>Length = 1000</i></p>

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries	
3.5 Chronic Disease Prevention and Well-Being	
Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)	<p>Advocate for Health in All Policies through regular input into development, zoning, planning applications, secondary and master plans (eg. application of Healthy Development Assessment to greenfield development).</p> <p>Collaborate with partners and school boards to implement the tenets of the Active and Sustainable School Transportation Charter.</p> <p>Pilot a standing classroom within the HWCDSB.</p> <p>Partner with internal departments (eg. Public Works, Planning and Economic Development) and external partner organizations (eg. Sport-Hamilton, New Hope, CivicPlan, school boards) to advocate for activity friendly communities such that the active choice is the easy choice.</p> <p>Strengthen partnerships and networks to promote, advocate for and implement physical activity strategies and initiatives that will reduce the risk for chronic diseases (eg. Healthy Kids Community Challenge, Theme 4: Power off and Play; Hamilton Moves, Sedentary Behaviour Phase 2, outdoor space (eg parks) design, School Travel Planning).</p>
Length = 55	Length = 322
Promotion, Awareness, Education, Knowledge Translation	<p>Build capacity of community and partners for long lasting health behaviours by raising awareness of healthy behaviours (eg. Move More Sit Less messaging; Take The Stairs: Use Active Transportation).</p> <p>In addition to population health approaches, education and awareness messaging is provided in targeted way to newcomers.</p>
Length = 0	Length = 0
Length = 0	Length = 0

Program: **Healthy Food Systems**

Description Length = 652

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program aims to move the City of Hamilton toward community food security in which all residents obtain a safe, culturally appropriate, nutritious diet through an economically and environmentally sustainable food system that maximizes healthy choices, community self-reliance, and social justice. Specifically, the program supports food friendly neighbourhoods to improve access to healthy food for all residents; increase food literacy to promote healthy eating and empower all residents; support local food and help grow the agri-food sector; advocate for a healthy, sustainable and just food system with partners and at all levels of government

Objective Length = 492

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Increased amount of healthy, local food in publicly owned facilities to make the healthy choice the easy choice.
 Increased physical access to healthy, local food in all neighbourhoods.
 Increased children and youth skills and knowledge pertaining to the food system
 Increased quantity and quality City-Farm relationships to enhance the growth and development of local food
 Increased opportunities for people to grow food in urban landscapes and participate in urban agriculture activities.

Indicators of Success Length = 134

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	795,330
Benefits	207,400
Travel	380
Professional Services	4,320
Expenditure Recoveries & Offset Revenues	(90)
Other Program Expenditures	201,760
Total	\$1,209,100

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	1,209,100
Total	\$1,209,100

Funding sources are populated with budget data provided in the budget worksheets

Program: **Healthy Food Systems**

Public Health Intervention	Description
<p>Input a title for each public health intervention under this Program (maximum of 100 characters)</p> <p style="text-align: right;">Length = 87</p>	<p>Briefly describe the public health intervention (maximum of 1,800 characters)</p> <p style="text-align: right;">Length = 839</p>
<p>Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)</p> <p style="text-align: right;">Length = 56</p>	<p>Participate with Implementation of the Food Strategy—10 year plan— 5 priority actions 2017-2018.</p> <ul style="list-style-type: none"> - Funding criteria, - Food Literacy: - Local food Promotion - Infrastructure support gardens/kitchens/markets; . - Food skills & employability. <p>Promote public awareness of community food security and healthy food systems</p> <p>Participate in the Food Literacy Network; Healthy Corner Stores Initiative</p> <p>Promote Corporate Healthy Food and Beverage Policy; School Food and Beverage Policy</p> <p>Scan availability of kitchens and recommend infrastructure development in new builds – i.e. schools and recreation</p> <p>Support Community gardens and urban agriculture; Edible Education and Community Garden network;</p> <p>Advocate for basic income, living wage, social assistance reform to improve individual and household food security (Nutritious Food Basket (NFB))</p> <p style="text-align: right;">Length = 713</p>

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries	
3.5 Chronic Disease Prevention and Well-Being	
Promotion, Awareness, Education, Knowledge Translation	Promote supportive environments for physical access to healthy food and beverages, including built environment Provide Community Food Advisor (CFA) Program Food skills in priority populations in Hamilton Provide Food-bearing Landscaping toolkit in collaboration with Planning & Economic Development; gardening toolkits, school garden, community garden Train the trainer, curriculum development for food programs, recreation, community partners, food literacy network members; Local Farm Map (online/story map) Integrate food literacy and food systems training and education where residents live, learn, work, and play. Promote a culture that values healthy, local food to reduce food waste through food literacy
Length = 0	Length = 0

Program:

Description Length = 311
Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).
Please refer to Program Plan 3.12.4.5 Mental Health Promotion for focus on school health; This program supports a comprehensive health promotion approach to create or enhance supportive environments to address mental well-being. The program focused on workplace settings under the previous OPHS Standards.

Objective Length = 122
Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).
Local needs and priorities identified for mental health promotion in the Chronic Disease Prevention and Wellbeing Standard

Indicators of Success Length = 134
List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).
Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	108,850
Benefits	28,360
Travel	40
Professional Services	50
Expenditure Recoveries & Offset Revenues	(10)
Other Program Expenditures	26,310
Total	\$163,600

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	163,600
Total	\$163,600

Budget Summary is populated with budget data provided in the budget worksheets

Funding sources are populated with budget data provided in the budget worksheets

Program: Mental Health Promotion

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 94

Length = 54

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 377

Length = 233

Length = 54

Length = 233

Program:

Description Length = 62
Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).
Please refer to Program Plan 3.13.1.3 Substance Use Prevention

Objective Length = 1
Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Indicators of Success Length = 0
List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries
3.5 Chronic Disease Prevention and Well-Being

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	49,810
Benefits	14,440
Travel	10
Professional Services	70
Expenditure Recoveries & Offset Revenue	(10)
Other Program Expenditures	22,810
Total	\$87,130

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	87,130
Total	\$87,130

Funding sources are populated with budget data provided in the budget worksheets

Program: Substance Use Prevention

Public Health Intervention	Description
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Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Program:

Description

Length = 52

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Please refer to Program Plan 3.13.1.2 Harm Reduction

Objective

Length = 0

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Indicators of Success

Length = 0

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	32,130
Benefits	8,720
Travel	10
Professional Services	20
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	13,700
Total	\$54,580

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	54,580
Total	\$54,580

Funding sources are populated with budget data provided in the budget worksheets

Program: Harm Reduction

Public Health Intervention	Description
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Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Program:

Description

Length = 437

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program aims to meet the requirements of the Smoke Free Ontario – Prosecution. In 2017, there were over 1251 SFOA inspections and 424 ECA inspections. In 2017, 107 resulted in charges and 39 convictions. A progressive enforcement approach is applied. If charges result in prosecution, the program will publicly disclose all inspection data including compliant inspections, warnings, charges, convictions, HPPA orders and/or APs.

Objective

Length = 139

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Prevention of the sale of tobacco products to youth under 19 years
Successful prosecution of 100% of SFO charges issues by the health unit

Indicators of Success

Length = 77

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.5 Chronic Disease Prevention and Well-Being

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

See 3.5.1 Chronic Disease Prevention - Tobacco Use, Prevention and Cessation

Program Budget Summary

Object of Expenditure	Amount
Salaries and Wages	-
Benefits	-
Travel	-
Professional Services	10,000
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	-
Total	\$10,000

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary

Funding Source	Amount
Smoke-Free Ontario Strategy: Prosecution (100%)	10,000
Total	\$10,000

Funding sources are populated with budget data provided in the budget worksheets

Program: Smoke Free Ontario - Prosecution

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Provision of Evidence to Courts
 Length = 31

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Provide court documents and evidence to the courts
 Prepare court packages and provide to courts before trial
 Tobacco enforcement officers and test shoppers testify in court
 Length = 173

Program: **Smoke Free Ontario - Protection and Enforcement**

Description

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program uses a compliance strategy that combines a balance of inspection, education and progressive enforcement. Enforcement activities include inspections and re-inspections, education visits, and inquiries into complaints. Enforcement of the SFOA occurs at all places regulated under the SFOA, including, but not limited to: tobacco vendors, schools, residential care facilities, hospitals, bars and restaurants, places of entertainment, tobacconists, and other prescribed places.

Objective

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Decreased exposure to second hand smoke in overall general population
 Decreased youth access to tobacco products at point of retail
 90% compliance or greater to youth access compliance at point of last inspection
 100% compliance with mandated ministry inspection targets
 100% response to all SFOA complaints received
 Length = 320

Indicators of Success

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

% of tobacco vendors in compliance with youth access legislation at the time of last inspection
 % of tobacco retailers in compliance with display, handling and promotion sections of the SFOA at time of last inspection
 Please refer to SFO - CW TCAN indicators
 Length = 258

Program Budget Summary

Object of Expenditure	Amount
Salaries and Wages	289,660
Benefits	77,090
Travel	-
Professional Services	590
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	35,730
Total	\$403,070

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary

Funding Source	Amount
Smoke-Free Ontario Strategy: Protection and Enforcement (100%)	403,070
Total	\$403,070

Funding sources are populated with budget data provided in the budget worksheets

Program: Smoke Free Ontario - Protection and Enforcement

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 86

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 62

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries	
3.5 Chronic Disease Prevention and Well-Being	
Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy) <i>Length = 12</i>	CW Tobacco Control Area Network (TCAN) Regional 2018 Work plan <i>Length = 660</i>
Enforcement <i>Length = 11</i>	Enforce the SFOA at all places regulated under the SFOA to ensure 100% compliance with all Ministry directives. Conduct one annual inspection per year for each secondary school; hospital; RCF & LTC facilities; hookah/shisha lounges. Conduct second (of two) inspections of controlled smoking areas where applicable Conduct complaint-based inspections for hospitals Apply Progressive Enforcement Activities: Include inspections and re-inspections, education visits, and inquiries into complaints to ensure 100% compliance with all Ministry directives. Distribute vendor resources to increase compliance with legislation regulation, including SFOA-training.com <i>Length = 283</i>
Inspection <i>Length = 27</i>	Conduct two annual inspections per retailer for compliance with SFOA regulation re: youth access Conduct one annual inspection per retailer for compliance with re: display and promotion Provide the Youth Test Shoppers program Inspect signage provisions for compliance under the SFOA <i>Length = 781</i>
Investigation and Response	Act on all tobacco and e cigarette-related complaints to determine the appropriate enforcement activity Respond to 100% of complaints re. smoking occurring in restaurants & bars, hospitals, and workplaces & public places Conduct two annual inspections per retailer for compliance with SFOA regulation re: youth access Conduct one annual inspection per retailer for compliance with re: display and promotion Inspect all premises subject to legislation and regulation as required for SFOA signage requirements and promotion prohibitions Inform the Minister of Health and Long-Term Care when a Notice of Prohibition is required. Serve and enforce the Notice of Prohibition; ensure retail vendor is informed of responsibilities for posting the signs by the date the AP is in effect.

Program: Smoke Free Ontario - Tobacco Control Area Network - Coordination

Description

Length = 723

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

TCANs major functions include:
Maintaining ongoing communication among public health departments and other local tobacco control stakeholders within the region.
Identifying and helping address local and regional needs, including training/capacity building needs;
Ensuring two way communication between the local and provincial levels; and
Coordinating and implementing tobacco control action in their regions.
Central West Regions (CW) population is 2,337,200 of which 1,141,700 males and 1,195,500 females. 492,100 tobacco users age 12+ living in the CW (22% prevalence rate) of which the majority (61%) are male. 298,600 are males age 12+ (27.5% prevalence rate) and 193,600 are females age 12+ (17.3% prevalence rate)

Objective

Length = 452

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

By Dec 31 2018 increase by 19,515 (9%) current smokers 12+ in CW who make one or more quit attempts annually. Note: Baseline CCHS 2013 = 204,900 (47% current smokers 12+ in CW made one of more quit attempts.)
By Dec 31 2018, advance the goals of the SFO strategy by providing support to local officials, community leaders and businesses to increase by 45 new MUHS smoke-free policies beyond the SFOA to further protect the health of people across CW.

Indicators of Success

Length = 40

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Please refer to SFO - CW TCAN indicators

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	191,310
Benefits	49,680
Travel	3,380
Professional Services	-
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	64,200
Total	\$308,570

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Smoke-Free Ontario Strategy: Tobacco Control Area Network - Coordination (100%)	308,570
Total	\$308,570

Funding sources are populated with budget data provided in the budget worksheets

Program: Smoke Free Ontario - Tobacco Control Area Network - Coordination

Public Health Intervention	Description
Input a title for each public health intervention under this Program (maximum of 100 characters) <i>Length = 88</i>	Briefly describe the public health intervention (maximum of 1,800 characters) <i>Length = 1132</i>

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries	
3.5 Chronic Disease Prevention and Well-Being	
Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)	<p>Collaborate with the "You Can Make It Happen" provincial committee to use common materials and website to support health care providers (HCPs) systematically provide one of more of the 5As (Ask, Advise, Assess, Assist, Arrange) through "Ask Here" promotional and clinical support materials distribution, consultations and trainings;</p> <p>Support HCP cessation champions through seven local Communities of Practice; Explore cannabis and vaping and tobacco cessation implications as well as equity focused interventions;</p> <p>Collaborate with the Smoke Free Housing Ontario Coalition to use common materials and website to support housing providers to make their properties smoke free;</p> <p>Document new policies across CW as well as the number of inquiries made to CW Public Health Units about SF-MUH;</p> <p>Partner with local fire departments to promote the smoke free housing message;</p> <p>Conduct outreach to housing providers & tenants through material distribution, consultations and local/regional/provincial events;</p> <p>Explore partnerships with Service Area Managers to collaborate in 2019; develop a targeted education campaign to launch in 2019.</p>

Program: Smoke Free Ontario - Tobacco Control Area Network - Prevention

Description

Length = 649

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program coordinates Tobacco activities across Central West region (CW). Please refer to SFO – TCAN 3.5.10
 Please refer to SFO – TCAN 3.5.10
 30% of Ontario youth (Gr 7-12) are susceptible to smoking (YSS 2010/11). Currently, lifetime abstinence decreases by grade 9 (89%) to grade 11 (69%) with past year smoking increasing in grade 9 (8%) to grade 11 (21%).
 In 2013, 309 teens (n=117 in CW) were surveyed in 2013 across the CW & SW TCANs of which teens influenced by the alternative (n=82) or hip hop (N=28) peer crowd were 2.3 times more likely to use of tobacco products than teens who were not influenced by these peer crowds. (RSCG 2013)

Objective

Length = 490

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Each PHU with CW will increase by 2 percentile points or sustain 100% sales to minor compliance to reduce youth access to tobacco products by Dec 31 2018.
 5-10% increase in the number of alternative youth aged 13-18 years surveyed in SW/CW ON who intend to remain smoke-free by Dec 31 2019.
 All newly released youth-rated movies in Ontario are smoke-free by Dec 31, 2019.
 Reduced past 30 day smoking among Central West young adults (18-29) by 3% (513 of 17,100 people in CW by Dec 31 2021)

Indicators of Success

Length = 40

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Please refer to SFO - CW TCAN indicators

Program Budget Summary		Funding Sources Summary	
Object of Expenditure	Amount	Funding Source	Amount
Salaries and Wages	-	Smoke-Free Ontario Strategy: Tobacco Control Area Network - Prevention (100%)	278,910
Benefits	-		
Travel	6,660		
Professional Services	4,270		
Expenditure Recoveries & Offset Revenues	-		
Other Program Expenditures	267,980		
Total	\$278,910	Total	\$278,910

Budget Summary is populated with budget data provided in the budget worksheets

Funding sources are populated with budget data provided in the budget worksheets

Program: Smoke Free Ontario - Tobacco Control Area Network - Prevention

Public Health Intervention	Description
<p>Input a title for each public health intervention under this Program (maximum of 100 characters)</p> <p>Length = 87</p> <p>Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)</p> <p>Length = 54</p>	<p>Briefly describe the public health intervention (maximum of 1,800 characters)</p> <p>Length = 854</p> <p>Collaborate with the Ontario Coalition for Smoke Free Movies through contributing and using common materials and activities that promotes www.smokefreemovies.ca; continue to increase public awareness and/or support for smoke free youth rated movies including the Hey Parent Campaign and engaging youth and the community local events. Collaborate with the Provincial Youth Adult Prevention Advisory Group on next steps and feasibility for addressing strategic components within best practice comprehensive approach to young adult prevention; contribute to the development, implementation and/or enforcement of progressive tobacco control policies at post-secondary campuses (college & universities); Support Unfiltered Facts McMaster & Mohawk chapters in Hamilton; promote LTPB "Party without the Smoke" campaign to prevent escalation to daily smoking;</p> <p>Length = 559</p>
<p>Promotion, Awareness, Education, Knowledge Translation</p> <p>Length = 54</p>	<p>Implement Uprise, a social branding strategy with alternative youth across Ontario through culturally relevant anti-tobacco messages, event and social influencers; disseminate the 2017 Uprise impact evaluation results; plan 2019 Uprise impact evaluation. Encourage young adult males 25-34 to make quit attempts through monthly First Week Challenge and LTPB Would U Rather contest and Make Quit Memorable NRT supports. Educate vendors through distributing age stickers, factsheets, business cards that promote the website SFO-Training.com and ECA-Training.com</p>

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries
3.5 Chronic Disease Prevention and Well-Being

Length = 0

Length = 0

Program: **Smoke Free Ontario - Tobacco Control Coordination**

Description

Length = ###

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program functions as coordinator to achieve the objectives of the programs:
Tobacco Control, Prevention and Cessation
Smoke Free Ontario - Prosecution
Smoke Free Ontario - Protection and Enforcement
Smoke Free Ontario - Tobacco Control Area Network - Coordination
Smoke Free Ontario - Tobacco Control Area Network - Prevention
Smoke Free Ontario - Tobacco Control Coordination
Smoke Free Ontario - Youth Tobacco Use Prevention

Objective

Length = 879

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Dedicated administration of the tobacco program and the following Smoke Free Ontario work:
• Smoke Free Ontario - Prosecution
• Smoke Free Ontario - Protection and Enforcement
• Smoke Free Ontario - Tobacco Control Area Network - Coordination
• Smoke Free Ontario - Tobacco Control Area Network - Prevention
• Smoke Free Ontario - Tobacco Control Coordination
• Smoke Free Ontario - Youth Tobacco Use Prevention

Indicators of Success

Length = 71

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Refer to CW Tobacco Control Area Network (TCAN) Regional 2018 Work plan

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	80,310
Benefits	19,690
Travel	-
Professional Services	-
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	-
Total	\$100,000

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Smoke-Free Ontario Strategy: Tobacco Control Coordination (100%)	100,000
Total	\$100,000

Funding sources are populated with budget data provided in the budget worksheets

Program: **Smoke Free Ontario - Tobacco Control Coordination**

Public Health Intervention	Description
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Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 87

Length = 700

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Contribute to the CW Tobacco Control Area Network (TCAN) Regional 2018 Work plan
Tobacco Control, Prevention and Cessation
Smoke Free Ontario - Prosecution
Smoke Free Ontario - Protection and Enforcement
Smoke Free Ontario - Tobacco Control Area Network - Coordination
Smoke Free Ontario - Tobacco Control Area Network - Prevention
Smoke Free Ontario - Tobacco Control Coordination
Smoke Free Ontario - Youth Tobacco Use Prevention

Length = 0

Length = 0

Program: **Smoke Free Ontario - Youth Tobacco Use Prevention**

Description

Length = 293

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program focuses on Youth. In Ontario 30% of youth (Gr 7-12) are susceptible to smoking (YSS 2010/11) Over the 3 reporting cycles (2009/10-13/14), 7% of Hamiltonians aged 12-19 are current cigarette smokers. In Hamilton 87.1% youth (age 12-18) have "never smoked a cigarette" (CCHS 2013).

Objective

Length = 67

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Decreased tobacco use in youth.
Prevention of tobacco use in youth

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries
 3.5 Chronic Disease Prevention and Well-Being

Indicators of Success

Length = 40

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Please refer to SFO - CW TCAN indicators

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	-
Benefits	-
Travel	9,520
Professional Services	-
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	71,780
Total	\$81,300

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Smoke-Free Ontario Strategy: Youth Tobacco Use Prevention (100%)	81,300
Total	\$81,300

Funding sources are populated with budget data provided in the budget worksheets

Program: Smoke Free Ontario - Youth Tobacco Use Prevention

Public Health Intervention	Description
Input a title for each public health intervention under this Program (maximum of 100 characters) Length = 87 Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)	Briefly describe the public health intervention (maximum of 1,800 characters) Length = 471 Youth led community engagement that build capacity for a community development; Increase knowledge among community advocates about tobacco control issues; Retrospective study of Tobacco Use Program impacts; engage in projects that target young people most at risk for tobacco use; improve tobacco control policies affecting youth Contribute to the development, implementation and/or enforcement of progressive tobacco control policies on local post-secondary campuses
Length = 54 Promotion, Awareness, Education, Knowledge Translation	Length = 109 Increase knowledge among community advocates about tobacco control issues Maintain UFF social media channels

2018 Public Health Program Plans and Budget Summaries

3.6 Food Safety

Length = 1026

A. Community Need and Priorities

Please provide a short summary of the following (maximum characters of 1,800):

- a) The key data and information which demonstrates your communities' needs for public health interventions to address food safety; and,
 b) Your board of health's determination of the local priorities for a program of public health interventions that addresses food safety.

(a) Hamilton residents were more likely to report that they thought food-borne illness was more likely to occur in restaurants (33.3% ±3.2), followed by special events (26.9% ±3.0), food vending carts (17.6% ±2.6), and a private home (12.8%±2.3). An estimated 100,000 cases of foodborne illnesses occur each year in Ontario (PHO, 2014). Among those, 42% of reported foodborne illnesses were contracted in a private home setting. Only 13% (12.8%±2.3) of Hamilton residents reported that they thought food-borne illness was more likely to occur in a private home (12.8%±2.3). Increasing variation in food service models in the community including sharing economy (i.e. food sales/service from private homes) and business out of a box (i.e. temporary/transient seasonal food premises).
 (b) Local priorities include reducing foodborne illness in food-handling at home, especially among higher-risk populations: Families – children are more likely to be diagnosed with foodborne illness and Newcomers to Canada

Length = 103

B. Key Partners/Stakeholders

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Other public health units – to consult and collaborate on challenging food safety issues e.g. Dog Cafes

C. Programs and Services

Program:

Description

Length = 571

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The Food Safety program inspects food premises, manages and responds to food-borne illness and outbreaks 24/7, increases food handler and public awareness of safe food handling practices, responds to food recalls, consumer complaints and other food related issues, reports food safety data to the Province and provides information to the public on food premise compliance

There are 3000 fixed food premises: # of food premises by risk-level: Unassessed = 88; Low = 1122; Moderate = 1110; High = 680
 285 special events
 40 transient food premises and 12 farmers markets

Objective

Length = 233

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

100% compliance with Public disclosure of Food Safety Program data elements in accordance with the Food Safety Protocol, 2016 (or as current).
 Completed evaluation of the food safety and food handling certification by December 2018

Indicators of Success

Length = 190

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

of cases of foodborne illness (MOHLTC indicator)
 % of reported cases of foodborne illness attributed to exposure settings (i.e., food premises, daycares, homes, etc.) (MOHLTC indicator)

2018 Public Health Program Plans and Budget Summaries

3.6 Food Safety

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	1,363,490
Benefits	352,600
Travel	29,000
Professional Services	12,770
Expenditure Recoveries & Offset Revenues	(353,150)
Other Program Expenditures	419,790
Total	\$1,824,500

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	1,824,500
Total	\$1,824,500

Funding sources are populated with budget data provided in the budget worksheets

Program: Food Safety

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 85

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Length = 55

Promotion, Awareness, Education, Knowledge Translation

Length = 27

Monitoring and Surveillance

Length = 28

Investigation and Response

Length = 10

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 105

Plan a pre-test and post-test evaluation of the Food Safety & Food Handling Certification program in 2018

Length = 451

Food Safety & Food Handling Certification
 - 33 self-study exams offered annually
 - 11 courses offered annually
 - Courses and self-study exams outside of those regularly offered are available to organizations upon request
 Provide on-site education and consultations on food handling practices
 Determine the top 3 food handling issues in Hamilton annually to focus health promotion messages that increase awareness about safe food handling

Length = 538

Collect reportable disease case data via iPHIS (suspected and confirmed foodborne illnesses) as well as food premise inspection data via Hedgehog. PHS has access to other multiple sources of data provided by the MOHLTC (e.g. IntelliHealth, CCHS) and partnerships (e.g., Canadian Food Inspection Agency) to support this program area.
 Monitor, analyze and interpret food premise inspection data to inform public health action.
 Continue to ensure the systematic monitoring of trends over time, emerging trends, and priority populations.

Length = 469

Receive and respond to reports on a 24/7 basis using the on-call system
 Respond and act on food related complaints within 24 hours of notification
 Respond to public inquiries through Customer Contact Centre via direct phone extensions, emails, and walk-ins at PHS reception
 Support MOHLTC food-recalls
 Respond to and provide case management of reportable diseases associated with foodborne illness
 Respond and act on reported suspect or confirmed foodborne outbreaks

Length = 564

2018 Public Health Program Plans and Budget Summaries

3.6 Food Safety

<p>Inspection</p>	<p>Maintain an inventory of food premises Conduct routine inspections of all fixed food premises Conduct inspections of: special events; transient / temporary food premises; farmers markets Conduct pre-opening and liquor licence inspections Conduct re-inspections as required Conduct risk assessments of: food premises; farmers markets; special events Assist owners/operators of new food premises in becoming compliant with food safety legislation Conduct inspections, re-inspections (as required) and risk assessments of special events within the City of Hamilton.</p>
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Length = 26

Length = 553

<p>Investigation and Response</p>	<p>Receive and respond to reports on a 24/7 basis using the on-call system Respond and act on food related complaints within 24 hours of notification Respond to public inquiries through Customer Contact Centre via direct phone extensions, emails, and walk-ins at PHS reception Support MOHLTC food-recalls Respond to and provide case management of reportable diseases associated with foodborne illness Respond and act on reported suspect or confirmed foodborne outbreaks Continue to ensure 24/7 availability to receive reports of and respond to complaints</p>
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Program: Enhanced Food Safety Initiative

Description Length = 590

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The Enhanced Food Safety – Haines Initiative was established to augment the Board of Health’s capacity to deliver the Food Safety Program as a result of the provincial government’s response to Justice Haines’ recommendations in his report “Farm to Fork: A Strategy for Meat Safety in Ontario”. Local issues include: increasing variation in food service models including sharing economy (i.e. food sales/service from private homes) and business out of a box (i.e. temporary/transient seasonal food premises); increased frequency for requests for food handler training in various languages.

Objective Length = 436

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

100% compliance with food safety programs and mandated inspection frequency targets for food premises inspections, re-inspections and special events (Food Safety Protocol Section 1 (b)(c)(d)(e)(f)(g)(h)) with completion of additional:

- 250 inspections of fixed premises, food truck and farmers markets;
- 180 high and moderate and low risk fixed premises inspections; and
- 150 food premises inspections and re-inspections planned

Indicators of Success Length = 440

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

-# of cases of foodborne illness (MOHLTC indicator)
 -% of reported cases of foodborne illness attributed to exposure settings (i.e., food premises, daycares, homes, etc.)
 -completed additional 250 inspections of fixed premises, food truck and farmers markets in 2018
 -completed additional 180 high and moderate and low risk fixed premises inspections in 2018
 -completed additional 150 food premises inspections and re-inspections in 2018

2018 Public Health Program Plans and Budget Summaries

3.6 Food Safety

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	-
Benefits	-
Travel	-
Professional Services	-
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	78,550
Total	\$78,550

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Enhanced Food Safety - Haines Initiative (100%)	78,550
Total	\$78,550

Funding sources are populated with budget data provided in the budget worksheets

Program: Enhanced Food Safety Initiative

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 10

Inspection

Length = 0

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 386

Complete risk assessments, consultations and inspections of fixed premises, food trucks, farmers markets and re-inspections as necessary.
 Provide additional inspections and necessary re-inspections of high risk food premises (long-term care facilities; day nurseries; hospitals)
 Provide afterhours high, moderate and low risk fixed premises inspections and re-inspections as necessary.

Length = 0

2018 Public Health Program Plans and Budget Summaries

3.7 Healthy Environments

Length = 1765

A. Community Need and Priorities

Please provide a short summary of the following (maximum characters of 1,800):

- a) The key data and information which demonstrates your communities' needs for public health interventions to address healthy environments; and,
 b) Your board of health's determination of the local priorities for a program of public health interventions that addresses healthy environments with consideration of the required list of topics identified in the Standards.

(a) Five reasons for hospital admittance and mortality are influenced by chronic lower respiratory diseases across the life span. Chronic lower respiratory diseases, which includes bronchitis, emphysema, chronic obstructive pulmonary disease (COPD), and asthma are in the top five across the younger & older age groupings. Mortality data also shows the impact of chronic lower respiratory diseases along with cancers of the lung and bronchus amongst the top five for age groups 45 years and older. **Radiation exposure:** Surveillance shows 13.6% of lung cancer deaths in Ontario can be attributed to radon. Mortality rates due to lung or bronchus cancer in Hamilton are significantly higher compared to Ontario. **Air Quality:** Studies of the City of Hamilton's outdoor air quality has shown a higher 98th percentile 24 hour fine particulate matter concentration, a higher 50th percentile 24 hour fine particulate matter concentration, a higher maximum 8 hour ozone concentration, and a higher 50th percentile 8 hour ozone concentration compared to the City of Toronto. **Climate change and Extreme weather:** In Ontario, a crude rate of 17.7 visits per 100,000 population in 2012 was seen for ED visits related to extreme weather (heat or cold). Males, those living in more deprived neighbourhoods, and those living in neighbourhoods with the most dependency (i.e., neighbourhoods with more children and seniors) experienced the highest rates of extreme weather-related ED visits. (b) **Local priorities:** Climate Change and Population Health demands - increasing capacity to respond to rising demands posed by climate change. Action to address air pollution including health outcome modelling, risk communication and enforcement of by-law(s) to reduce pollutants

Length = 1316

B. Key Partners/Stakeholders

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Hamilton Community Heat/Cold Response Committee: City and community partners who inform/educate about hazards with extreme temperatures (heat and cold). Take Action on Radon (TAOR)- The Lung Association and Scout Environmental with support from Health Canada. City of Hamilton Building Department- building code enforcement. Terrapure SCRF Environmental Assessment Group – City of Hamilton, MOECC staff, Terrapure staff and consultants (GHD) are reviewing plans assoc. with the Stoney Creek Regional Facility landfill. Clean Air Hamilton: advise on improving local air quality. Includes academics, citizens, industry, non-profits, consultants, federal, provincial and municipal gov't. Bay Area Climate Change Partnership – will begin in 2018 with academia, utilities, Indigenous populations, non-government organizations and industry to work on climate change and the economy. Environmental NGOs (e.g., Environment Hamilton, Green Venture, Sustainable Hamilton-Burlington) – address local air quality or climate change actions. TRAPs Working Group - The Traffic Related Air Pollutants working group consists of PH professionals from GTHA Health Units focused on assessing better quality evidence, health impacts and identifying solutions with respect to on-road sources of air emission related to human health.

C. Programs and Services

Program:

Description

Length = 899

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The program is aimed at promoting healthy environments through decreasing radiation exposure, decreasing air pollutant exposure and addressing climate change and extreme weather amongst, males, those living in more deprived neighbourhoods, and those living in neighbourhoods with the most dependency (children and seniors). Air pollutants and radiation exposure are both in the top two for magnitude of need and impact on health outcome among residents of the City of Hamilton. This program uses a 24/7 health hazard management system to identify, assess and manage health hazards in the environment in collaboration with the lead government agencies with primary responsibility for the environmental issue and/or other relevant agencies or experts. Health hazards include: asbestos, pest control, Diogenes, environmental lead, mould pesticides, needles, chemical contaminants, sewage and others.

Objective

Length = 103

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Identification of health hazard risk priorities at a local scale to implement intervention strategies

Indicators of Success

Length = 134

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

2018 Public Health Program Plans and Budget Summaries

3.7 Healthy Environments

Program Budget Summary

Object of Expenditure	Amount
Salaries and Wages	798,630
Benefits	210,180
Travel	15,810
Professional Services	24,640
Expenditure Recoveries & Offset Revenues	(4,910)
Other Program Expenditures	220,200
Total	\$1,264,550

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary

Funding Source	Amount
Mandatory Programs (Cost-Shared)	1,264,550
Total	\$1,264,550

Funding sources are populated with budget data provided in the budget worksheets

Program: Health Hazards

Public Health Intervention	Description
<p>Input a title for each public health intervention under this Program (maximum of 100 characters)</p> <p style="text-align: right;"><i>Length = 29</i></p> <p>Monitoring and Surveillance</p> <p style="text-align: right;"><i>Length = 12</i></p>	<p>Briefly describe the public health intervention (maximum of 1,800 characters)</p> <p style="text-align: right;"><i>Length = 337</i></p> <p>Collect reportable disease case data via iPHIS (suspected and confirmed illnesses), as well as inspection data via Hedgehog. PHS has access to other multiple sources of data provided by the MOHLTC (e.g. IntelliHealth, CCHS) and partnerships to support this program area. The program uses surveillance data to inform public health action</p> <p style="text-align: right;"><i>Length = 64</i></p>
<p>Inspection</p> <p style="text-align: right;"><i>Length = 28</i></p>	<p>Inspect arenas for compliance with indoor air quality guidelines</p> <p style="text-align: right;"><i>Length = 292</i></p>
<p>Investigation and Response</p>	<p>Respond to Complaints/ Inquiry about – Indoor air quality, Mould, Odours, Asbestos, Radon, Sewage, Pesticides, Housing, and Diogenes. 7 Major Investigations related to EMF, Outdoor Air Quality, Blood Lead, Fugitive Dust, Brownfields and chemical exposure assessment, cancer cluster reports;</p>

Program:

Description *Length = 780*

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The program is aimed at promoting healthy environments through decreasing air pollutant exposure and addressing climate change and extreme weather amongst, males, those living in more deprived neighbourhoods, and those living in neighbourhoods with the most dependency (children and seniors). Air pollutants and radiation exposure are both in the top two for magnitude of need and impact on health outcome among residents of the City of Hamilton. The program promotes a coordinated effort in governance to address climate change and take action to address air pollution through health outcome modelling, risk communication and enforcement of by-laws to reduce pollutants. Experiencing need to increase public health capacity to respond to rising demands posed by climate change.

Objective *Length = 242*

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Identification and execution of projects that mitigate impacts of climate change through the Bay Area Climate Change Partnership within the City of Hamilton's Climate Adaptation Plan
Estimation of health outcomes based on airshed modelling

2018 Public Health Program Plans and Budget Summaries

3.7 Healthy Environments

Indicators of Success

Length = 135

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	78,130
Benefits	19,640
Travel	510
Professional Services	3,290
Expenditure Recoveries & Offset Revenues	(10)
Other Program Expenditures	16,700
Total	\$118,260

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	118,260
Total	\$118,260

Funding sources are populated with budget data provided in the budget worksheets

Program: Air Quality and Climate Change

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 87

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 1678

Implement strategic community actions to address climate change in the Hamilton community using the Community Climate Change Action Plan Provide consultation regarding corporate climate change actions and coordinates policy responses and programs amongst departments of the City of Hamilton to respond to climate change.
 Coordinate and manage the biannual Upwind Downwind Conference for Clean Air Hamilton and the City to educate, inform policy, develop partnerships and collaborations regarding air quality, public health, climate change, and planning using the latest science and policy
 Provide input into local municipal planning documents regarding air quality (reducing exposure) and climate change (reducing emissions, preparing for climate impacts) in Secondary Plans, Site Plans, Transportation Master Plan, Stormwater Master Plan, and individual Site Plan Applications for development including schools, big box stores, and sports parks.
 Provide input around dust management and requested inclusion of dust management plans in construction and demolition site permits to reduce outdoor PM2.5 and PM10 exposure to local residents.
 Lead collaborative action on climate change through the Bay Area Climate Change Partnership to identify and execute projects that mitigate impacts of climate change and the Building Adaptive and Resilient Cities initiative to identify the likelihood and impact of extreme weather events to inform a City of Hamilton Climate Adaptation Plan.
 Collaborate with Public Health Ontario and other public health units in the Greater Toronto-Hamilton Area to develop best practices for estimating health outcomes based on local airshed model data

2018 Public Health Program Plans and Budget Summaries

3.7 Healthy Environments

<p style="text-align: right;"><i>Length = 56</i></p>	<p style="text-align: right;"><i>Length = 1575</i></p>
<p>Promotion, Awareness, Education, Knowledge Translation</p>	<p>Support and coordinate the work of Clean Air Hamilton- a multi-stakeholder advisory group of the community of Hamilton on improving local air quality. Representation includes academics, citizens, industry, non-profits, consultants, federal, provincial and municipal gov't. Coordinate, support and maintain the Climate Change Hamilton website - http://www.climatechangehamilton.ca/ that provides community information regarding climate change information and action in Hamilton including programs, events, reports and the Community Climate Change Action Plan. Promote information and raise awareness regarding the City's Idling By-law for vehicles through installed signage in public facilities including parks, recreation centres and parking lots. Lead the community and corporate work on climate change risk management and adaptation planning. PHS has led workshops on climate change risk with corporate and community members to inform them of projected climate changes and discuss risk associated with local impacts. Report annually on the progress of the community in addressing climate change, the GHG emissions reductions and the risks of climate impacts and adaptation actions. Support the Business Energy and Emissions Profile (BEEP) developed in 2017 that examines and provides the related energy usage and GHG emissions from small and medium sized business sectors in the community of Hamilton to inform the business community of their related emissions. https://sustainablehamiltonburlington.ca/city-hamilton-business-energy-emissions-profile-beep-dashboard/</p>
<p style="text-align: right;"><i>Length = 26</i></p>	<p style="text-align: right;"><i>Length = 176</i></p>
<p>Investigation and Response</p>	<p>Respond to community enquiries and complaints regarding air emissions or climate change concerns that were forwarded by City Call line, Council office or direct calls to staff.</p>

2018 Public Health Program Plans and Budget Summaries

3.8 Healthy Growth and Development

Length = 1774

A. Community Need and Priorities

Please provide a short summary of the following (maximum characters of 1,800):

- a) The key data and information which demonstrates your communities' needs for public health interventions to address healthy growth and development; and,
- b) Your board of health's determination of the local priorities for a program of public health interventions that addresses healthy growth and development with consideration of the required list of topics identified in the Standards.

(a) Almost one-quarter of children < 6 live in low income households. 30.7% of children start school with a developmental vulnerability; children in the lowest income quartile show double the vulnerability of children in the highest. The Early Development Instrument shows decreasing resilience in social competency and emotional maturity. Steady decline in exclusive breastfeeding rates from intention to 6 months postpartum. Although overall teen pregnancy rates are declining, rates remain higher than provincial norm. 45.8% of pregnant women in Hamilton gained weight above the recommended amount; 18.4% gained below recommended amount. 20% of women identified at least one mental health concern during pregnancy. Hamilton has significantly higher rates of prenatal smoking and drug consumption compared to Ontario. Both provincial and local data show increased prenatal alcohol consumption. 25% of 5 year olds consume the recommended daily servings of fruits and vegetables; Sleep related deaths are the leading cause for Canadian children 0-6. Alcohol, tobacco and substance misuse, and unsafe sexual practices are linked to mental wellness and resilience in the early years and can be risk factor for preconception health, which is critical for healthy birth and growth and development outcomes. (b) **Local Priorities:** For magnitude of need, based on a prevalence assessment: Breastfeeding; Preconception; Physical activity; Childhood nutrition; Parenting ; Oral health; Healthy Pregnancies; Early childhood development and mental well-being. Given the impact of early childhood experiences on lifelong mental health wellbeing, this is an opportune time for us to focus for the specific needs of infants and young children ages 0-6 as well as their families.

Length = 1375

B. Key Partners/Stakeholders

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Collaborate with broad range of community and health sector partners to advance healthy growth and development by building on existing resources and engaging families and caregivers, service professionals working with infants and young children and whole communities in decision-making about systemic, programmatic and policy initiatives. The aim is to create a more integrated system of programs and services that provides an opportunity for all partners to work together to achieve collective impact for the benefit of children and families. This process includes collaborative planning and strategy development and consists of the development of key products, projects and recommendations for the system. Key internal stakeholders include: Ontario Works, Housing, Recreation, Child Care and the Early Years System, Children's Mental Health Services, School Program, Tobacco Control Program, Dental Program, Epidemiology and Evaluation Program; as well as external partners including local hospitals, primary care, midwives, Boards of Education, Children's Aid Societies, McMaster University, Hamilton Police Services, Hamilton Health Sciences Ron Joyce Centre, Aboriginal Services and Supports, Newcomer Services, Addiction and Violence Prevention Services, Mental Health Services, Youth and Young Parent Services , Hamilton Community Foundation and relevant Ministries.

C. Programs and Services

Program:

Description

Length = 1087

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program is designed to enable all maternal, newborn, child, youth, and families to attain and sustain optimal lifelong health and developmental potential. Programming is aimed at effectively managing the different life stages and their transitions for families with children aged 0-6 years. This is achieved through public health interventions that reflect diverse work at both the individual and population levels with a focus on prevention, upstream interventions and societal factors that influence health. For 2018, we will continue to provide services to support the following priorities: breastfeeding, preconception, physical activity, childhood nutrition, parenting, healthy pregnancies, early childhood development and mental well-being. We will continue to utilize local population health assessment data to prioritize targeted populations with greater social and systemic barriers (for example: lower SES, lone parent households, young parents, newcomers, Indigenous, LGBTQ+) and evidence informed decision making in program development, implementation and evaluation.

Objective

Length = 1360

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Achieve compliance with the Healthy Growth and Development Standard, including all required protocols.
 Children* at risk of poor health and developmental outcomes are supported and referred to services prior to school entry.
 Priority populations are linked to child/family health information, programs and services as early as possible.
 Breastfeeding initiation rates are maintained at 75% or above.
 Increased rate of exclusive breastfeeding at hospital discharge and at 6 months above 2016 baseline.
 Breastfeeding women have improved knowledge and skills.
 Increased community partner knowledge about resources and effective programs for the promotion of healthy growth and development.
 Families are aware of community resources and tools available to assess children's health and development.
 Increased collaboration among network of health and social service providers and families in the planning, development, implementation and evaluation of comprehensive public health programs, services and policies which positively impact healthy families and communities.
 Individuals and families have increased knowledge, skills and access to local resources related to healthy growth and development to effectively manage the different life stages and their transitions.
 *The use of the term "children" in the objectives refers to children aged 0-6 years of age.

2018 Public Health Program Plans and Budget Summaries

3.8 Healthy Growth and Development

Indicators of Success

Length = 300

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission
% of women screened (HBHC) during pregnancy above 2017 baseline
% of first time pregnant youth (< 21 years of age) who access the Nurse Family Partnership Program

Program Budget Summary

Object of Expenditure	Amount
Salaries and Wages	2,305,320
Benefits	619,790
Travel	14,500
Professional Services	900
Expenditure Recoveries & Offset Revenues	(990)
Other Program Expenditures	556,790
Total	\$3,496,310

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary

Funding Source	Amount
Mandatory Programs (Cost-Shared)	3,496,310
Total	\$3,496,310

Funding sources are populated with budget data provided in the budget worksheets

Program: Child Health

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 87

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Length = 56

Promotion, Awareness, Education, Knowledge Translation

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 1564

Build capacity across the community to enhance system planning and integration through development of shared tools/policies, screening, assessment and cross-sector education. Continuous quality improvement activities are developed and prioritized in response to local need, client feedback, partner engagement, and opportunities for enhanced efficiency and effectiveness.
Our 2018 priorities include leading:
Safe Transitions an intersectoral collaborative working to develop and implement a strategy to enhance services offered to new parents and newborns that are integrated, high quality and comprehensive aimed at building parental confidence and access to resources to achieve optimal maternal and newborn health. Some of the products that will be developed through these collaboratives include: shared key messages, care path development with streamlined criteria, universal prenatal screening and a reduction in the duplication of services across the health and social services system.
The Families First program will be developed and piloted in 2018 and involves collaboration to offer lone parent families 0-6 year of age integrated supports between home visiting, child care, Ontario Works, employment and recreation in order to improve timely access to service. Participate in: key Committee and networks aimed at bringing diverse early years system champions (providers and contributors) together, share knowledge and perspectives to mobilize change within individual organizations and the broader system, and inform system planning and evaluation.

Length = 1465

Promotion, awareness, education and knowledge translation strategies are implemented via various platforms to ensure a broad reach tailored to meet specific audiences.
For 2018 we will continue to provide services via our Healthy Families Hamilton Facebook page, Health Connections phone line and the City of Hamilton website. On these platforms staff provide key messages and opportunities for clients to connect with peers; respond to questions about pregnancy, breastfeeding, parenting, child safety, growth and development, healthy eating, and self-care.
Increase community partner knowledge about resources and effective programs for the promotion of healthy growth and development through education sessions for internal and external professionals. In 2018, we will provide education for Family Health Team staff, EarlyON CFC's staff, CAS/CAS staff and foster parents, child care supervisors and other relevant health and social service providers.
Attend 2 community expos and weekly attendance at EarlyON CFC's to: educate about child health, nutrition, and development; distribute resources; promote PHS services and identify community needs.
Collaborate with local hospitals to create shared educational videos and print resources for expectant and new parents in response to local needs. As a result of strategic and system initiatives, other promotion, awareness, education and knowledge translation interventions will be developed and implemented.

2018 Public Health Program Plans and Budget Summaries

3.8 Healthy Growth and Development

<p style="text-align: right; color: red;">Length = 51</p> <p>Screening/Assessment/Intervention/Case Management</p>	<p style="text-align: right; color: red;">Length = 1044</p> <p>Screening and assessment includes tailored education to meet individual and group needs for families with children 0-6. Services offered by the child health program include: the Nurse-Family Partnership Enhancement, an intensive homevisiting program for at risk parents 21 and under; breastfeeding home visits and telephone support; Health Connections phone line (screening and assessment; information, education, and referrals to community resources); secondment of PHN to Hamilton Family Health Team; Parenting groups and discussion topics; car seat clinics; 36 Check It Out interprofessional Drop-In sessions for parents offers access to PHNs, speech and language pathologists, mental health workers, resource teachers, E.C.E.'s, dental hygienists, to screen, assess and refer children at risk for poor growth and developmental outcomes. PHNs weekly attendance at Early ON CFCs to increase access to PHN screening, assessment and referral. 9 weekly Canada Prenatal Nutrition Program and Prenatal Education Early ON Child and Family Centres</p>
<p style="text-align: right; color: red;">Length = 27</p> <p>Monitoring and Surveillance</p>	<p style="text-align: right; color: red;">Length = 225</p> <p>Population Health Assessment data is provided through the support of the Epi and Evaluation team. Program indicator, surveillance and monitoring will continue to be refined through a results based accountability lens in 2018.</p>

Program: Reproductive Health

Description Length = 685

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The Reproductive Health Program contributes to optimal health outcomes for pregnant women and their newborn children through system planning and service delivery. Current universal and targeted interventions prioritize: reducing teen pregnancies; promoting exclusive breastfeeding; supporting the transition to parenting; supporting healthy preconception, sexuality, pregnancies, and birth outcomes. Priority populations are informed by population health assessment data and reflect those who face the greatest social and modifiable risk factors which impact pregnancy and birth outcomes (for example: lower SES, lone parent households, young parents, newcomers, Indigenous, LGBTQ+).

Objective Length = 1217

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Achieve compliance with the Healthy Growth and Development Standard, including all required protocols.
 Pregnant individuals and families at risk of poor preconception and pregnancy outcomes are supported and referred to services.
 Priority populations are linked to reproductive health information, programs and services.
 Increased awareness among youth and emerging adults about contraception and healthy pregnancies.
 Expectant parents are aware of the benefits and mechanics of breastfeeding as well as where to access breastfeeding supports.
 Increased community partner knowledge about resources and effective programs for the promotion of preconception and healthy pregnancies.
 Families are aware of community resources and tools available to assess reproductive health.
 Increased collaboration among network of health and social service providers and families in the planning, development, implementation and evaluation of comprehensive public health programs, services and policies which positively impact healthy families and communities.
 Individuals and families have increased knowledge, skills and access to local resources related to preconception, healthy pregnancies, birth and transition to parenting.

Indicators of Success Length = 514

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission
 % of pregnant women who reported being more confident in their ability to breastfeed after attending PHS prenatal class
 % of pregnant women in Hamilton (from birth cohort) who registered for PHS prenatal classes
 % of women screened (HBHC) during pregnancy above 2017 baseline
 % of first time pregnant youth (< 21 years of age) who access the Nurse Family Partnership Program.

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	865,250
Benefits	233,910
Travel	4,850
Professional Services	1,310
Expenditure Recoveries & Offset Revenues	(12,290)
Other Program Expenditures	237,350
Total	\$1,330,380

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	1,330,380
Total	\$1,330,380

Funding sources are populated with budget data provided in the budget worksheets

2018 Public Health Program Plans and Budget Summaries

3.8 Healthy Growth and Development

Program: Reproductive Health

Public Health Intervention	Description
<p>Input a title for each public health intervention under this Program (maximum of 100 characters)</p> <p style="text-align: right;"><i>Length = 87</i></p> <p>Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)</p> <p style="text-align: right;"><i>Length = 56</i></p>	<p>Briefly describe the public health intervention (maximum of 1,800 characters)</p> <p style="text-align: right;"><i>Length = 1699</i></p> <p>Build capacity across the community to enhance system planning and integration through development of shared tools/policies, screening, assessment and cross-sector education. Continuous quality improvement activities are developed and prioritized in response to local need, client feedback, partner engagement, and opportunities for enhanced efficiency and effectiveness. Our 2018 priorities include leading: Safe Transitions an intersectoral collaborative working to develop and implement a strategy to enhance services offered to new parents and newborns that are integrated, high quality and comprehensive aimed at building parental confidence and access to resources to achieve optimal maternal and newborn health. Some of the products that will be developed through these collaboratives include: shared key messages, care path development with streamlined criteria, universal prenatal screening and a reduction in the duplication of services across the health and social services system. As part of the Healthy Birthweight Strategy evaluation and sustainability plan: evaluate and revise the Youth Pregnancy Care Pathway and Young Parent Resource Tool and continue to develop a comprehensive Youth Sexual Health Collaborative. Initiate planning for a preconception health promotion approach, collaborating with internal and external partners (locally and provincially) to identify best and promising practices. Participate in: key Committee and networks aimed at bringing diverse s system champions (providers and contributors) together, share knowledge and perspectives to mobilize change within individual organizations and the broader system, and inform system planning and evaluation.</p> <p style="text-align: right;"><i>Length = 1274</i></p>
<p>Promotion, Awareness, Education, Knowledge Translation</p> <p style="text-align: right;"><i>Length = 51</i></p>	<p>Promotion, awareness, education and knowledge translation strategies are implemented via various platforms to ensure a broad reach tailored to meet specific audiences. For 2018 we will continue to provide services via our Healthy Families Hamilton Facebook page, Health Connections and the City of Hamilton website. On these platforms staff provide key messages and opportunities for clients to connect with peers; respond to questions about pregnancy, breastfeeding, parenting, child safety, growth and development, healthy eating, and self-care. Increase community partner knowledge about resources and effective programs for the promotion of healthy pregnancies education sessions for internal and external professionals. In 2018, we will provide education for Family Health Team staff, Young Parent Centres and other relevant health and social service providers. Collaborate with local hospitals to create shared educational videos and print resources for expectant and new parents in response to local needs. Continue to distribute prenatal books to primary care, obstetricians and midwives in Hamilton. As a result of strategic and system initiatives, other promotion, awareness, education and knowledge translation interventions will be developed and implemented.</p> <p style="text-align: right;"><i>Length = 938</i></p>
<p>Screening/Assessment/Intervention/Case Management</p> <p style="text-align: right;"><i>Length = 27</i></p>	<p>Screening and assessment include tailored education to meet individual and group needs for expectant parents. Services offered by the reproductive and child health programs include: the Nurse-Family Partnership Enhancement, an intensive home visiting program for at risk parents 21 years and under; Health Connections phone line (screening and assessment; information, education, and referrals to community resources); secondment of PHN to Hamilton Family Health Team; universal prenatal in-person and online classes and targeted programs at Young Parent Centres. PHNs attend weekly sessions at Early ON Child and Family Centres to increase access to prenatal information, screening, assessment and referral. Continue to provide 9 weekly Canada Prenatal Nutrition Program groups. Continue with Minimal Contact Intervention policy and referral to Prenatal Smoking Cessation Incentive Program (in partnership with Tobacco Control Program).</p> <p style="text-align: right;"><i>Length = 224</i></p>
<p>Monitoring and Surveillance</p> <p style="text-align: right;"><i>Length = 27</i></p>	<p>Population Health Assessment data is provide through the support of the Epi and Evaluation team. Program indicator, surveillance and monitoring will continue to be refined through a results based accountability lens in 2018.</p>

2018 Public Health Program Plans and Budget Summaries

3.9 Immunization

Length = 1752

A. Community Need and Priorities

Please provide a short summary of the following (maximum characters of 1,800):

- a) The key data and information which demonstrates your communities' needs for public health interventions to address immunization; and,
 b) Your board of health's determination of the local priorities for a program of public health interventions that addresses immunization with consideration of the required list of topics identified in the Standards.

(a) Refrigerator Inspection: 430 pharmacist & physician sites provide BOH funded vaccines. In 2016, 447 refrigerators were in operation and inspected Vaccine Inventory: In 2016, PHS distributed 312,681 publicly funded vaccines throughout Hamilton. **Record Assessment:** PHS monitors immunization status of enrollees at 78 childcare sites in Hamilton. Annually, more than 54,000 people have their immunization records assessed through childcare centres and schools. There is currently a 3 year backlog in vaccine reporting, in response, the program has prioritized addressing the backlog with children entering school. **Clinics:** 496 clinics held in 2016-17 school year, resulting in 27,221 immunizations (excluding those at sexual health and harm reduction clinics). **Adverse Events:** From 2012-2016, the annual number of confirmed adverse events following immunization fluctuated from a low of 20 in 2015 to a high of 31 in 2012, with an annual average of 26.8 **Outbreak Response Plan:** The outbreak Response Plan has been implemented 4 times from 2015-2017. Nursing staff have been redeployed related to measles twice (to either (a) staff hotline, or (b), assist in contact tracing). **Incidence Rates for Vaccine Preventable Diseases:** From 2012-2016 Hamilton had higher rates per 100,000 population than Ontario (0.7, 76.0, 8.0 respectively) for Hepatitis B (1.6), Influenza (117.4), and Streptococcus pneumoniae Invasive (10.5) **(b) Local Priorities:** Populations with low vaccine uptake and/or reporting rates as determined through local surveillance and Vaccine Program Review. Research literature suggests vaccine hesitancy in middle to upper class populations and lower reporting among populations with language barriers and lower socio-economic status

Length = 726

B. Key Partners/Stakeholders

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Health care providers (individuals) – collaborating with providers who administer vaccine to ensure compliance with legislation and best practice
 Healthcare sites housing and administering vaccines –provide vaccines, cold chain storage, and protocol
 School Boards and School Principals; Daycare Providers –liaison to ensure effective records management and education around immunization policy; promotion of suspension clinics
 Parents –education of parents seeking non-medical exemption; opportunities for parents to contact staff for reporting and information purposes
 Medical Advisories –released to partners and public as required to update on changes to legislation and/or provide education on risk and protective factors

C. Programs and Services

Program: Vaccine Inventory Management

Description

Length = 455

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Achieve compliance with the Immunization Standard, including all required protocols.
 Review relevant Guidelines to determine approach for meeting requirements
 Vaccine Inventory Management aims to prevent and control the spread of communicable disease in Hamilton, enacting and enforcing provincial legislation related to vaccination. The program provides immunizations, health education, case management, clinical services, and inspection services.

Objective

Length = 924

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Assessment, maintenance and reports completed on all records, a) Child Care Centre children immunization and b) immunizations administered at BOH clinics on an annual basis.
 Epidemiological analysis of vaccine preventable diseases, vaccine coverage, and adverse events following immunization
 Education provided to HCPs that store publicly funded vaccine to promote optimal vaccine inventory management resulting in decreased vaccine wastage.
 Proper ordering, storage and distribution of publicly funded vaccines to all HCPs to ensure compliance with Storage and Handling guidelines thus reducing excess vaccine in community and resulting wastage.
 Reporting, monitoring, investigation, and documentation of all adverse events following immunization in accordance with the Health Protection and Promotion Act
 Provision and management of orders of exclusion for an outbreak or risk of an outbreak of a designated disease

Indicators of Success

Length = 460

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

% of doses wasted of publicly funded vaccine annually – MOHLTC indicator
 % of immunization providers of publicly funded vaccines indicating they have adequate information to support optimal immunization practices – MOHLTC indicator
 % of inspected vaccine storage locations that meet storage and handling requirements – MOHLTC indicator
 % of refrigerators storing publicly funded vaccines that have received a completed routine annual cold chain inspection

2018 Public Health Program Plans and Budget Summaries

3.9 Immunization

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	555,260
Benefits	158,880
Travel	4,240
Professional Services	560
Expenditure Recoveries & Offset Revenues	(1,990)
Other Program Expenditures	215,740
Total	\$932,690

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	932,690
Total	\$932,690

Funding sources are populated with budget data provided in the budget worksheets

Program: Vaccine Inventory Management

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 56

Promotion, Awareness, Education, Knowledge Translation

Length = 51

Screening/Assessment/Intervention/Case Management

Length = 20

Inventory Management

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 535

Provide annual recommendations to operators of child care centres with respect to immunizations required for client enrollment and attendance, including: information on accessing immunization services, the immunization schedule, and resources to follow-up for further information. Provide parents and guardians with information letters for all new enrollments, clarifying: why BOH collects immunization information; and PHS role ensuring access to publicly funded vaccines through community healthcare providers or community clinics.

Length = 403

Receive, screen, and manage vaccination records for all children under 18, through child care centres and schools (in line with ISPA), and enter into Panorama. Notify parents when children are overdue; maintain admission and withdrawals of each facility; enter affidavits and exemptions for clients. Run and administer publicly funded vaccine clinics as need identified through community surveillance.

Length = 450

Panorama is used for vaccine inventory management on an ongoing basis, including reports to inform decisions. Enhance inventory monitoring for vaccines internal and external to the board of health, including: physical inventory counts; rotation, distribution, filling orders; and removing vaccines based on expiration dates. Review of historical orders from Physicians and Pharmacies to address challenges in maintaining a two month vaccine supply.

2018 Public Health Program Plans and Budget Summaries

3.10 Infectious and Communicable Diseases Prevention and Control

A. Community Need and Priorities

Length = 1716

Please provide a short summary of the following (maximum characters of 1,800):

- a) The key data and information which demonstrates your communities' needs for public health interventions to address infectious and communicable diseases; and,
- b) Your board of health's determination of the local priorities for a program of public health interventions that addresses infectious and communicable diseases.

(a) Infection Control: approx 200 daycare and 750 Personal Service Setting (PSS) sites, with routine annual inspections required, additional inspections as required for complaint response or non-compliance. **Diseases of Public Health Significance:** Close to 3500 confirmed cases of reportable diseases and 85 outbreaks (79 institutional; 6 community) reported in Hamilton in 2016. Top 6 disease burdens include: Chlamydia, influenza, gonorrhoea, Hep B, Hep C, and Campylobacter. List of priority diseases identified based on the disease burden and importance: TB (~20 TB cases/yr), Hep B, STI (~2,000 cases/yr). Chlamydia is the most common type of STI diagnosed in teens 15-19. Syphilis is the most frequently reported STI in Ontario, with the highest rates seen among 20-24 and greater among females than males. **Rabies and Lyme Disease:** Rabies investigations continue to rise, reaching ~1400/year in 2017. Local black legged ticks are increasing as are human Lyme Disease cases. **West Nile Cases:** 23 mosquito pools and less than 5 cases in 2016; 32 mosquito pools and 6 human cases in 2017. **Teen Pregnancy:** Hamilton's teen pregnancy rate of 22.7 per 1000 females aged 15-19 is decreasing yet still higher than Ontario-wide. **(b) Local Priorities:** Rabies: the outbreak in Hamilton and Ontario is expected to continue for 3 or more years. Chlamydia is the highest of all reportable infectious diseases in Hamilton. Infectious syphilis is also high (3rd highest health unit in Ontario), as is Gonorrhoea –which is becoming resistant to antibiotics. Rat, bed bug, and cockroach complaints are increasing. Hamilton is an identified estimated risk area for Lyme disease and more human cases of Lyme Disease are expected.

B. Key Partners/Stakeholders

Length = 1787

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Regional Infection Prevention and Control Committee: promote a regional approach for effective prevention and control of infections across hospital community health care partners. **Hamilton Region Long-Term Care Homes and Community Sector Infection Prevention and Control Committee:** collaborate on infection prevention and control issues associated with LTCHs and their community partners; **Wilson Medical Centre:** ensure appropriate follow-up of clients placed under immigration medical surveillance; **Youth Sexual Health Strategy:** internal and external partners address youth mental, physical, and social well-being; **AIDS Network:** provide harm reduction services on the Mobile Needle Exchange VAN; promote anonymous point of care testing of Hep C and HIV. **Special Immunology Services Clinic:** provide services and use pre-exposure prophylaxis with MSM population. **Elizabeth Fry:** connects with street workers, supports the VAN, and distributes condoms; **Rabies: City of Hamilton Animal Services:** collect bats involved in human exposures for testing; collect dead or sick wildlife to support raccoon rabies surveillance; confine cats and dogs. **Ontario Association of Veterinary Technicians:** coordinate and prepare animals involved in human exposures for submission to CFIA. **Ontario Ministry of Natural Resources and Forestry:** conduct provincial raccoon rabies surveillance and control measures. **Canadian Food Inspection Agency:** conduct rabies testing. **Canadian Wildlife Health Centre:** conduct preliminary non-animal, non-human exposure animal testing. **Ontario Ministry of Health and Long-Term Care:** consult with veterinarians re: human exposures and related animal confinement, release, testing. **Ontario Ministry of Agriculture, Food, and Rural Affairs:** coordinate animal to animal exposures.

C. Programs and Services

Program:

Description

Length = 1335

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program provides vector-borne disease surveillance and management, including: West Nile virus monitoring and control activities; 24/7 rabies investigations; tick surveillance for Lyme disease, and other VBDs as they emerge. Priorities established through local surveillance include:
Rabies: About 1400 animal bite investigations per year with increasing rabies PEP follow-up. There is currently a rabies outbreak with >260 rabid animals reported within Hamilton since 2015. Raccoon rabies outbreak in Hamilton and Ontario is expected to continue for another three or more years. A local Rabies Contingency Plan has been enacted and an evaluation framework developed.
One Health: Developing approach (in line with global trend) for public health to work more closely with the medical community and veterinary/animal health.
Lyme Disease: Active tick surveillance in 2017 determined Hamilton is an estimated risk area for black legged ticks with expectation of increased occurrence of human cases. Other tick borne diseases may increase in Ontario, including Powassan and Rocky Mountain Spotted fever.
Mosquito Borne Disease Monitoring: In 2017, 32 positive mosquito pools and 6 human cases of WNV were reported in Hamilton; PHS continues to monitor West Nile and potential development of other emerging mosquito borne diseases.

Objective

Length = 451

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Compliance with the Infectious and Communicable Diseases Prevention and Control Standard, including all required protocols.
 Reduced risk of vector borne disease (VBD) transmission to Hamiltonians, including:
 Identification, monitoring, and mitigation of Lyme disease risk areas in Hamilton
 Identification, control, and reduced mosquito breeding sites in Hamilton
 Surveillance, investigation, and public education about rabies to prevent human death

Indicators of Success

Length = 372

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

of potential rabies exposures investigated by PHS annually – MOHLTC indicator
 # of animals investigated that are current on their rabies vaccinations – MOHLTC indicator
 # of persons given rabies post-exposure prophylaxis (PEP) – MOHLTC indicator
 % of suspected rabies exposures reported with investigation initiated within one day of public health unit notification

2018 Public Health Program Plans and Budget Summaries
3.10 Infectious and Communicable Diseases Prevention and Control

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	637,230
Benefits	159,480
Travel	27,300
Professional Services	82,530
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	110,940
Total	\$1,017,480

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Vector-Borne Diseases Program (Cost-Shared)	1,017,480
Total	\$1,017,480

Funding sources are populated with budget data provided in the budget worksheets

Program: Vector Borne Diseases

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 86

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Length = 28

Monitoring and Surveillance

Length = 27

Investigation and Response

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 383

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy) A local Rabies Contingency Plan has been enacted and a framework developed to evaluate the raccoon rabies program, 2017 through March, 2018. MOHLTC has approved a request to fund this evaluation. City of Hamilton Tick and Lyme Disease Strategy underway and expected to launch in spring of 2018.

Length = 568

Implement a WNV monitoring plan informed by an evaluation and internal audit. This plan includes: a weekly risk assessment from May to October; a semi-annual update on tick surveillance to Board of Health; two annual reports to MOHLTC outlining actions and outcomes of West Nile Virus and Lyme Disease management and related program cost breakdown. Surveillance of rabies locally, regionally, and provincially to anticipate and respond to increased risk and trends. Identify and monitor Lyme disease risk areas in Hamilton Identify mosquito breeding sites in Hamilton

Length = 894

Rabies: Investigate 100% of reported rabies exposures (average 1200-1500 /yr). Annual rabies reports include basic information such as: victim, pet owner, date of exposure, etc. Files are coded chronologically. QA checks performed for completeness of investigations (manager) and PEP files (IPHS admin) and corrections made. Risk assessment is completed for each report. Rabies exposures follow P&Ps, Canadian Immunization Guidelines, and MOHLTC Rabies guidance documents. PEP delivered on 24 hour basis. Ensure after hours response provided by a rotating team for weeknights, weekends, and holidays (as per protocols). On-call schedules are made annually and unexpected vacancies filled same day to ensure 100% coverage. After hours P&Ps and Guidelines have been developed to ensure effective and immediate after-hours response for reportable diseases, MBTA, outbreaks, and rabies exposure.

Program: Infectious Disease Program

Description

Length = 516

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The infectious disease program provides case, contact and outbreak management programs, as well as health education, to prevent or reduce the spread, morbidity and mortality of infectious diseases.

The program completes infection control inspections of settings associated with risk of infectious diseases of public health importance. The ID program also investigates infection prevention and control complaints in practices of regulated health professionals and in settings for which no regulatory bodies exist.

Objective

Length = 837

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Achieve compliance with the Infectious and Communicable Diseases Prevention and Control Standard, including all required protocols. Review relevant Guidelines to determine approach for meeting requirements. Case investigation, contact follow-up and outbreak management for diseases of public health significance is conducted as per Ministry protocols. Routine infection control inspections in Personal Services Settings and Licensed Child Care Centres are conducted annually. Investigation of infection prevention and control complaints completed in the practices of regulated health professionals or settings for which there are no regulatory bodies. Infection and the spread of diseases of public health significance is prevented through health promotion, and education to the public, clients, community partners and stakeholders.

2018 Public Health Program Plans and Budget Summaries
3.10 Infectious and Communicable Diseases Prevention and Control

Indicators of Success Length = 201

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

% of settings inspected by type
Results-Based Accountability (RBA) indicators/measures for the Infectious Disease Program are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	2,846,160
Benefits	763,390
Travel	32,790
Professional Services	76,320
Expenditure Recoveries & Offset Revenues	(144,970)
Other Program Expenditures	754,420
Total	\$4,328,110

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	4,328,110
Total	\$4,328,110

Funding sources are populated with budget data provided in the budget worksheets

Program: Infectious Disease Program

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 55

Promotion, Awareness, Education, Knowledge Translation

Length = 49

Screening/Assessment/Intervention/Case Management

Length = 11

Inspection

Length = 26

Investigation and Response

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 907

Provide education to institutions (hospitals, LTCFs, daycares) on IPAC (including hand hygiene and respiratory etiquette.) PHIs or infectious Disease Prevention Specialist sit on IC committees at all LTCFs and acute care infection control committees.
Other participation as requested on other institutional IC committees, including but not limited to LDNs, Hamilton Wentworth Detention Centre
Offer 1/2 day workshop targeting aesthetic service provider re: infection control practices. Inservice offered annually since 2011 and well received based on operator feedback.
Hand hygiene presentations are provided to schools by the School Program staff and/or to public at events by Infectious Disease staff (e.g. Safe Water Festival).
Education sessions offered to community groups as requested if request is specific to IPAC issues; Bi-annual education sessions provided to co-op high school students.

Length = 516

All reported infectious diseases cases are followed-up, as per Protocols, to limit secondary cases through investigation of sources of infection and contact tracing as applicable. Further, program P&Ps and/or Guidelines are developed and maintained in conjunction with Appendix A&B of the Infectious Disease Protocol, and are utilized to ensure case, contact and outbreak management is in line with Protocols. In addition, IPHIS cleansing reports ensure required elements for surveillance and reporting are captured.

Length = 391

The program conducts inspections as per protocol in personal service settings, licensed childcare settings. Hedgehog inspection reports and program P&Ps have been developed which ensure consistent approach to inspecting for required Infection Control compliance elements as per MOHLTC PSS Best Practices document, PHS Child Care Facilities Manual, and/or PIDAC Best Practices, as applicable.

Length = 1570

100% of all reported outbreaks investigated. Work with infection control and/or administrative staff in affected institution in order to recommend and implement outbreak control measures in institutional settings. Settings include but are not limited to hospitals, long-term care homes, retirement homes, schools, licensed day nurseries and residential care facilities. All reported outbreaks managed in order to prevent transmission of infection and further cases.
Collaborate with facility IPAC and administrative staff. Settings include acute and LTC settings. Ensure appropriate IPAC measures are in place during all CDI outbreaks in order to reduce or prevent morbidity and mortality associated with CDI outbreaks. Realize ongoing effective partnerships with IPAC staff at affected facility in order to prevent or mitigate future outbreaks as a result of early reporting and ongoing communication resulting in decreased numbers of cases of CDI.
Investigate 100% of all reported gastrointestinal outbreaks in community settings including food poisoning investigations. Implement outbreak control measures in the event of a possible foodborne illness outbreak. Identify source of outbreak.
On-call schedules are made annually and unexpected vacancies filled same day to ensure 100% coverage. After hours response, as per protocols is provided by a rotating team for weeknights, weekends and holidays. After hours Policies & Procedures and Guidelines have been developed which identify required after hours response for reportable diseases, MBTA, outbreaks

2018 Public Health Program Plans and Budget Summaries

3.10 Infectious and Communicable Diseases Prevention and Control

Program: **Mental Health Promotion**

Description

Length = 48

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Please refer to 3.12.4.5 Mental Health Promotion

Objective

Length = 208

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Achieve compliance with the Infectious and Communicable Diseases Prevention and Control Standard, including all required protocols.
Review relevant Guidelines to determine approach for meeting requirements

Indicators of Success

Length = 0

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	98,870
Benefits	27,930
Travel	110
Professional Services	800
Expenditure Recoveries & Offset Revenues	(10)
Other Program Expenditures	41,290
Total	\$168,990

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	168,990
Total	\$168,990

Funding sources are populated with budget data provided in the budget worksheets

Program: Mental Health Promotion

Public Health Intervention

Description

Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Program: **Substance Use Prevention**

Description

Length = 49

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Please refer to 3.13.1.3 Substance Use Prevention

Objective

Length = 207

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Achieve compliance with the Infectious and Communicable Diseases Prevention and Control Standard, including all required protocols.
Review relevant Guidelines to determine approach for meeting requirements

Indicators of Success

Length = 0

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	81,620
Benefits	22,150
Travel	20
Professional Services	70
Expenditure Recoveries & Offset Revenues	(10)
Other Program Expenditures	25,490
Total	\$129,340

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	129,340
Total	\$129,340

Funding sources are populated with budget data provided in the budget worksheets

2018 Public Health Program Plans and Budget Summaries
3.10 Infectious and Communicable Diseases Prevention and Control

Program: Substance Use Prevention

Public Health Intervention	Description
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Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Program:

Description Length = 39
Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Please refer to 3.13.1.2 Harm Reduction

Objective Length = 207
Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Achieve compliance with the Infectious and Communicable Diseases Prevention and Control Standard, including all required protocols.
Review relevant Guidelines to determine approach for meeting requirements

Indicators of Success Length = 0
List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	109,940
Benefits	29,530
Travel	220
Professional Services	1,450
Expenditure Recoveries & Offset Revenues	(10)
Other Program Expenditures	34,390
Total	\$175,520

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	175,520
Total	\$175,520

Funding sources are populated with budget data provided in the budget worksheets

Program: Harm Reduction

Public Health Intervention	Description
----------------------------	-------------

Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 0

Length = 0

Program:

Description Length = 468
Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The sexual health program offers prevention, case management and harm reduction services to prevent or reduce the spread, morbidity and mortality of infectious diseases. At risk populations that are priority areas of focus include: youth sexual health (up to 24 years), MSM and individuals who are HIV+ with detectable VL. In addition, the sexual health program works to educate physicians to provide appropriate treatment for gonorrhea, HIV and staging of syphilis.

Objective Length = 481
Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Achieve compliance with the Infectious and Communicable Disease Prevention and Control Standard, including all required protocols.
Prevention of infection and spread of sexual transmitted infections through health promotion, and education to the public, clients, community partners and stakeholders
Prevention of the spread, morbidity and mortality of sexual transmitted infections through provision of clinical services
Case investigation conducted as per Ministry protocols

2018 Public Health Program Plans and Budget Summaries

3.10 Infectious and Communicable Diseases Prevention and Control

Indicators of Success

Length = 215

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

of Ceftriaxone prescriptions distributed for treatment of gonorrhea annually
Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	1,497,030
Benefits	401,870
Travel	9,700
Professional Services	173,030
Expenditure Recoveries & Offset Revenue:	(152,480)
Other Program Expenditures	485,590
Total	\$2,414,740

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	2,414,740
Total	\$2,414,740

Funding sources are populated with budget data provided in the budget worksheets

Program: Sexual Health

Public Health Intervention

Description

Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)
Length = 86

Develop a Youth Sexual Health Strategy in collaboration with community partners including School Boards in alignment with work under the School Health Standard
Conduct quality improvement project focused on syphilis case management by care providers
Work with AIDS network for on-site STI testing and outreach to priority populations
Work with infectious disease physician regarding HIV treatment and prevention (Prep)
Length = 421

Promotion, Awareness, Education, Knowledge Translation
Length = 54

Knowledge Transfer to community physicians on treatments for Chlamydia, HIV, syphilis (staging of syphilis), gonorrhea (antibiotic resistance and appropriate treatment)
Educate health care providers to ensure STI cases are managed according to guidelines following distribution of medical advisories
Conduct an HIV testing awareness campaign targeted to high-risk populations
Conduct a condom campaign targeted at school-aged youth
Length = 433

Screening, Assessment, Intervention, Case Management
Length = 53

Provide health teaching on safe practices for high-risk individuals
Provide immunization for risk groups (hepatitis A, B, HPV)
Provide free Emergency Contraceptive Pill
Provide free condoms, free STI medications, low-cost contraception
Investigate cases as per protocols and best evidence
Investigation timeline for Gonorrhea cases within 48 hours
Provide testing for CT, GC, syphilis, HIV (all methods), hepatitis
Provide treatment for CT, GC, syphilis; Liquid nitrogen for anogenital HPV and molluscum
Length = 508

Monitoring and Surveillance
Length = 28

Provide reports in compliance with the Health Protection and Promotion Act and current protocols
Provide reports monthly, quarterly and yearly of infectious disease reports to internal and external audiences
Use surveillance and epidemiological analysis to monitor ongoing and emerging trends to inform planning
Length = 314

Program: Infection Prevention and Control Nurses Initiative

Description

Length = 329

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The Infection Prevention and Control Nurses Initiative support infection prevention and control services. Refer to 3.10.2 Infectious Disease Prevention and Control Program Plan for further details. This resource acts at the Infection Control content expert for the Infectious Disease Program and Hamilton Public Health Services.

2018 Public Health Program Plans and Budget Summaries

3.10 Infectious and Communicable Diseases Prevention and Control

Objective

Length = 941

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Achieve compliance with the Infectious and Communicable Diseases Prevention and Control Standard, including all required protocols. Program staff manage all program-specific outbreaks, infectious disease and TB cases (suspect and confirmed) and contacts of public health importance to minimize public health risk in accordance with the OPHS as current and the MOHLTC Infectious Disease Protocol, as current. Program staff ensure all latent tuberculosis infection (LTBI) and immigration medical surveillance (IMS) clients are managed as per the OPHS as current and the MOHLTC Infectious Disease Protocol, 2013 or as current. Infection Prevention and Control (IPAC) consultation and support provided for Infectious Disease program, other programs as needed/requested. IPAC lapse investigations are conducted in practices of regulated health professionals upon receipt of complaints or referrals. Risk assessment of IPAC lapses completed.

Indicators of Success

Length = 191

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures for Infection Prevention and Control Nurses Initiative are currently in development and will be included in the ASP&B 2019 submission.

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	72,470
Benefits	17,630
Travel	-
Professional Services	-
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	-
Total	\$90,100

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Infection Prevention and Control Nurses Initiative (100%)	90,100
Total	\$90,100

Funding sources are populated with budget data provided in the budget worksheets

Program: Infection Prevention and Control Nurses Initiative

Public Health Intervention

Description

Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 13

Length = 289

Consultation

Provide Infection Prevention and Control (IPAC) support/consultation for Infectious Disease program, other programs as needed/requested. Provides consultation on development of departmental and program IPAC policies and procedures. Provide consultation for risk assessment of IPAC lapses.

Program: Infectious Diseases Control Initiative

Description

Length = 575

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The 100% funded infectious disease initiative supports a number of PH programs aimed at infectious disease control, specifically increased activities related to outbreak management, including providing support to other health units during infectious disease outbreaks. Staff support management of outbreaks and increase the system's surge capacity. These include sexual health case/contact management, communicable disease case/contact management and infectious disease surveillance. Please refer to 3.10.2 Infectious Disease Prevention and Control; 3.10.6 Sexual Health

Objective

Length = 136

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Achieve compliance with the Infectious and Communicable Diseases Prevention and Control Standard, including all required protocols.

2018 Public Health Program Plans and Budget Summaries

3.10 Infectious and Communicable Diseases Prevention and Control

Indicators of Success

Length = 135

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	858,460
Benefits	231,600
Travel	100
Professional Services	-
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	84,800
Total	\$1,174,960

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Infectious Diseases Control Initiative (100%)	1,174,960
Total	\$1,174,960

Funding sources are populated with budget data provided in the budget worksheets

Program: Infectious Diseases Control Initiative

Public Health Intervention

Description

Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

2018 Public Health Program Plans and Budget Summaries

3.11 Safe Water

Length = 1127

A. Community Need and Priorities

Please provide a short summary of the following (maximum characters of 1,800):

- a) The key data and information which demonstrates your communities' needs for public health interventions to address safe water; and,
- b) Your board of health's determination of the local priorities for a program of public health interventions that addresses safe water.

(a) Incidence of the following diseases (per 100,000 population per year) where water is the source of illness, combined: Cryptosporoidosis = 0.4; Giardiasis = 0; VTEC = 0
 Estimate 10,000 Hamilton residences that operate their own wells, cisterns, and rain or lake water systems; only 14% submitted water samples in 2016. A total of 2359 private well & cistern water samples were submitted.
 Between 2006 – 2016, the # of private well water samples tested decreased by 52%
 4960 tests in 2006; 2359 tests in 2016
 In comparison, at the provincial-level, the # of private well water samples decreased by 38% (PHO)
 There are a total of 233 recreational water facilities (including non-regulated facilities) in Hamilton. The % of recreational water facilities with an infraction in 2016: 31.3% of Class A public pools; 44.7% of Class B public pools; 14.7% of inspected public spas
 (b) Local priority includes: Increase the number of water samples submitted by Hamilton residences that operate their own wells, cisterns and rain or lake water systems;
 Training program for owners/operators of recreational water facilities

Length = 470

B. Key Partners/Stakeholders

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

To comply with the board of health's obligations to liaise with agencies and ministries in the Safe Drinking Water and Fluoride Monitoring Protocol (2018) and the Recreational Water Protocol (2018), the Safe Water program works with the following stakeholders:
 City of Hamilton, Public Works Department; Hamilton Water and Parks Maintenance
 Ministry of Environment and Climate Change
 Environment Canada
 Bay Area Restoration Council
 Hamilton Harbour Remedial Action Plan

C. Programs and Services

Program:

Description

Length = 172

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program provides inspection and promotion interventions designed to prevent or reduce the burden of water-borne illness and injury related to recreational water use

Objective

Length = 332

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Multi-Year Business/Strategic Plan Priority
 Compliance with provincial legislation and regulation to ensure water safety
 Implementation of the municipal Watermain Disinfection Procedure with the requirement for Hamilton Water to assess and report watermain breaks to local Medical Officer of Health when specified criteria are met

Indicators of Success

Length = 58

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

% of days per season beaches are posted – MOHLTC indicator

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	777,720
Benefits	208,090

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	1,190,780

2018 Public Health Program Plans and Budget Summaries

3.11 Safe Water

Travel	15,430		
Professional Services	12,500		
Expenditure Recoveries & Offset Revenues	(7,040)		
Other Program Expenditures	184,080		
Total	\$1,190,780	Total	\$1,190,780

Budget Summary is populated with budget data provided in the budget worksheets

Funding sources are populated with budget data provided in the budget worksheets

Program: Safe Water

Public Health Intervention	Description
<p>Input a title for each public health intervention under this Program (maximum of 100 characters)</p> <p style="text-align: right;"><i>Length = 85</i></p> <p>Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)</p>	<p>Briefly describe the public health intervention (maximum of 1,800 characters)</p> <p style="text-align: right;"><i>Length = 321</i></p> <p>Participate in Harbour Beach Water Quality Improvement Projects as implemented by CCIV, Hamilton Harbour RAP, BARC, Public Works Department (City of Hamilton) Assess impact and implement changes from Lead in Schools and Child Care Centres Regulation with new requirement to test all drinking taps throughout facilities;</p>
<p style="text-align: right;"><i>Length = 54</i></p> <p>Promotion, Awareness, Education, Knowledge Translation</p>	<p style="text-align: right;"><i>Length = 631</i></p> <p>Communicate with partner agencies to provide timely and clear information to the public regarding the potential risks associated with the use of public beaches; warnings re dangerous water quality (post signs, website, Twitter). Conduct public education and outreach activities at the Children's Water Festival and World Water Day; Annual World Water Day Disclose public health inspection results on-line Provide educational material and/or information to owners/operators regarding the health and safety-related operational procedures applicable to public beaches. Provide education materials to owner/operators on regulations;</p>
<p style="text-align: right;"><i>Length = 27</i></p> <p>Monitoring and Surveillance</p>	<p style="text-align: right;"><i>Length = 751</i></p> <p>Collect reportable disease data, well water testing data and inspection data for drinking water systems, public beaches, and recreational water. Relevant morbidity, mortality, and risk factor/behaviour data from IntelliHEALTH, CCHS, etc. to support this standard area. PHS collects some sociodemographic and risk factor data for infectious diseases through iPHIS. Pools and Spas: Maintain an inventory of regulated and non-regulated recreational water facilities; Beaches: Conduct pre-season environmental surveys of Hamilton beaches; routine beach surveillance activities including: collection of water samples, preparation of layouts of the public beach area, conduct inspections of regulated public pools and spas, and non-regulated RW facilities</p>
<p style="text-align: right;"><i>Length = 10</i></p> <p>Inspection</p>	<p style="text-align: right;"><i>Length = 489</i></p> <p>Pools and Spas: Inspect pools and spas prior to opening or reopening; Inspect pools and spas at least 2 times per year and no less than once every 3 months while operating. Reinspect pools and spas to address non-compliance; investigate complaints or reports of illness or injury. Non-Regulated Recreational Water Facilities: Inspect non-regulated recreational water facilities at least two times per year and no less than once every three months while operating. Reinspect as necessary.</p>
<p style="text-align: right;"><i>Length = 26</i></p> <p>Investigation and Response</p>	<p style="text-align: right;"><i>Length = 425</i></p> <p>Act on complaints and reports related to recreational water use at beaches. Respond to reports of the water-related incidents, illnesses, injuries, or outbreaks; and conduct outbreak investigations. Establish spill response and other adverse event procedure. Address non-compliance with the HPPA and take action where such action may be warranted to reduce the risk of illness or injury to the public using a public beach.</p>

Program:

Description *Length = 141*

2018 Public Health Program Plans and Budget Summaries

3.11 Safe Water

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

(Enhance) activities to prevent or reduce water-borne illness or injury related to recreational water use. Refer to 3.11.1 Safe Water Program

Objective

Length = 83

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

100% compliance with Safe Water Program Standard including all relevant protocols

Indicators of Success

Length = 34

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Refer to 3.11.1 Safe Water Program

Program Budget Summary		Funding Sources Summary	
Object of Expenditure	Amount	Funding Source	Amount
Salaries and Wages	6,100	Enhanced Safe Water Initiative (100%)	42,850
Benefits	1,420		
Travel	1,000		
Professional Services	-		
Expenditure Recoveries & Offset Revenues	-		
Other Program Expenditures	34,330		
Total	\$42,850	Total	\$42,850

Budget Summary is populated with budget data provided in the budget worksheets

Funding sources are populated with budget data provided in the budget worksheets

Program: Enhanced Safe Water Initiative

Public Health Intervention	Description
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Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 55

Promotion, Awareness, Education, Knowledge Translation

Length = 26

Investigation and Response

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 27

Refer to Safe Water Program

Length = 352

Refer to Safe Water Program
Promptly determine whether or not algae blooms at public beaches (or other recreational water use areas) contain toxin producing cyanobacteria as per Recreational Water Protocol (2018)
Ensure staff are available on a 24/7 basis to respond to demands of Safe Water Program during after normal business hours and on weekends

Program: **Small Drinking Water Systems**

Description

Length = 351

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program conducts new and ongoing site-specific risk assessments of all small drinking water systems within the oversight of the Board of Health; ensure system compliance with the regulation governing the small drinking water systems; and, ensure the provision of education and outreach to the owners/operators of the small drinking water systems.

2018 Public Health Program Plans and Budget Summaries

3.11 Safe Water

Objective

Length = 154

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Completion of Risk Assessments and Compliance Inspections of ~185 Small Drinking Water Systems according to the frequency for the assigned risk category.

Indicators of Success

Length = 564

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

of days that fluoride levels were below recommended levels at municipal drinking water systems that add fluoride – MOHLTC indicator
 % of SDWS where risk categories change from high risk to moderate or low risk indicating improvement in system performance
 % of adverse drinking water incidents that are resolved within 1 month
 % of high-risk Small Drinking Water Systems (SDWS) inspections completed for those that are due for re-inspection
 # of drinking water advisories and boil water advisories issued by days advisories were in effect – MOHLTC indicator

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	42,780
Benefits	10,470
Travel	1,000
Professional Services	-
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	5,870
Total	\$60,120

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Small Drinking Water Systems Program (Cost-Shared)	60,120
Total	\$60,120

Funding sources are populated with budget data provided in the budget worksheets

Program: Small Drinking Water Systems

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 85

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Length = 54

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 903

Watermain Disinfection Procedure: develop policy and staff training.
 Advocate for healthy public policy for safe water supplies related to the effects of climate change such as severe weather events and droughts.
 Engage in activities that increase the safety of drinking water and decrease potential for adverse effects on health, including but not limited to participation on technical committees and assistance in the identification of vulnerable areas and threats to drinking water systems
 Meet semi-annually and collaborate with MOE on drinking water safety matters.
 Participate in local steering groups for the purpose of developing drinking water-related emergency response plans
 Engage in activities to ensure the sustainability and safety of source water and water supplies through collaboration with stakeholders such as local conservation authorities, community groups and municipalities.

Length = 677

2018 Public Health Program Plans and Budget Summaries

3.11 Safe Water

<p>Promotion, Awareness, Education, Knowledge Translation</p>	<p>Increase public awareness for safe water supplies related to the effects of climate change such as severe weather events and droughts. Provide information RE safe drinking water practices to private citizens (sample bottles/forms), water haulers, and owners and operators of SDWS's. Assist with lab test result interpretation; provide guidance on potential health effects and appropriate corrective actions. Provide the Safe water information line; Adverse water test result line (labs / SDWS owners) Conduct public education and outreach activities at the Children's Water Festival and World Water Day Rural Well Water Quality Report updated every 5 years (completed in 2017)</p>
<p><i>Length = 11</i></p>	<p><i>Length = 390</i></p>
<p>Inspection</p>	<p>Conduct new and ongoing site-specific risk assessments of all small drinking water systems within the oversight of the Board of Health; ensure system compliance with the regulation governing the small drinking water systems Inspect drinking water haulage vehicles once annually Fluoride: Review water reports provided by Hamilton Water (Public Works) on a monthly basis for fluoride levels</p>
<p><i>Length = 26</i></p>	<p><i>Length = 799</i></p>
<p>Investigation and Response</p>	<p>Address complaints and reports of water quality concerns and issues Respond to drinking water related incidents, illnesses, injury, and outbreak Respond to and report potentially hazardous spills and other adverse events at public beaches Investigate suspected waterborne illnesses or outbreaks Report drinking water advisories to DWARS (MOHLTC) Address and take action with the non-compliance of the HPPA and related regulations Watermain Disinfection Procedure will come into effect in 2017 with the requirement for Hamilton Water to assess and report watermain breaks to local Medical Officer of Health when specified criteria are met in the guideline. It is anticipated that most main break reports including need to issue a drinking water advisory will happen during afterhours or on weekends.</p>

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.1 Oral Health

Length = 1259

A. Community Need and Priorities

Please provide a short summary of the following (maximum characters of 1,800):

- a) The key data and information which demonstrates your communities' needs for public health interventions to address oral health; and,
b) Your board of health's determination of the local priorities for a program of public health interventions that addresses oral health.

(a) 1 in 10 (10.8%) students require dental care and 4,168 untreated decayed teeth were observed among students in the 2016-2017 school year. There were 26,400 HSO eligible children in Hamilton in 2016-2017; but nearly 1 in 3 (n=8,100) did not enroll in the Healthy Smiles Ontario program and nearly 60% (n=15,400) did not use the service. Priority populations in schools – 24% of those <6 years old live in low income in Hamilton
In total, across the 17,537 students (JK-8) screened in 2016/2017 in Hamilton:
• 6,039 (34.4%) were eligible for preventative services (either one or more of PATF, PFS, or Scaling).
• 4,870 (27.8%) were eligible for PATF, 1,147 (6.5%) eligible for PFS, and 1,646 (9.4%) eligible for scaling.
• 22,420 decayed, missing/extracted, or filled teeth were observed.
(b) Local priority focuses on children living in low income families in Hamilton. The program screened 17,537 students at 134 elementary schools in the City of Hamilton in the 2016-2017 school year. There were 5,300 Grade 2 students screened in Hamilton in 2016/2017. Nine of the 134 schools (6.7%) were high intensity facilities (≥14% of students had multiple decayed teeth) in 2016-2017. 6 of the 9 high intensity schools (66.7%) were located in Lower Hamilton.

Length = 497

B. Key Partners/Stakeholders

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Children's Aid Societies – to ensure children receive the oral health care they need through HSO EESS
Public health programs for children 0-17
Partnerships with school boards
Alternative Schools: St. Martin's Manor, Grace Haven to promote uptake of HSO and promote good oral health
Community services – System Planning Collaborative, Early Years – OEYC to promote uptake of HSO and promote good oral health
Partnerships with Primary care to promote uptake of HSO and promote good oral health

C. Programs and Services

Program:

Description

Length = 140

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Children and youth with dental needs are identified by dental screening. They are offered the Healthy Smiles Ontario program if eligible.

Objective

Length = 364

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Compliance with the School Health - Oral Health Standard, including all required protocols.
Increased proportion of children who have optimal oral health
Provision of timely and effective detection and identification of children at risk of poor oral health outcomes, their associated risk factors and emerging trends
Oral health data elements reported annually

Indicators of Success

Length = 226

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

% of all JK, SK and Grade 2 students screened in all publicly funded schools - Oral Health
Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary

Object of Expenditure	Amount
Salaries and Wages	177,800

Funding Sources Summary

Funding Source	Amount
Mandatory Programs (Cost-Shared)	315,890

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.1 Oral Health

Benefits	54,000		
Travel	4,500		
Professional Services	180		
Expenditure Recoveries & Offset Revenues	(30)		
Other Program Expenditures	79,440		
Total	\$315,890	Total	\$315,890

Budget Summary is populated with budget data provided in the budget worksheets

Funding sources are populated with budget data provided in the budget worksheets

Program: Oral Health Assessment

Public Health Intervention	Description
<p>Input a title for each public health intervention under this Program (maximum of 100 characters)</p> <p style="text-align: right;"><i>Length = 86</i></p> <p>Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)</p> <p style="text-align: right;"><i>Length = 54</i></p> <p>Promotion, Awareness, Education, Knowledge Translation</p> <p style="text-align: right;"><i>Length = 49</i></p> <p>Screening/Assessment/Intervention/Case Management</p> <p style="text-align: right;"><i>Length = 27</i></p> <p>Monitoring and Surveillance</p>	<p>Briefly describe the public health intervention (maximum of 1,800 characters)</p> <p style="text-align: right;"><i>Length = 57</i></p> <p>Partner with schools to deliver programs within schools</p> <p style="text-align: right;"><i>Length = 94</i></p> <p>Promote and provide oral health assessments at community events/locations throughout Hamilton.</p> <p style="text-align: right;"><i>Length = 736</i></p> <p>Visit all publicly-funded elementary schools and any private and/or high schools (on request) in Hamilton to conduct oral health assessments. Assign risk rating (screening intensity) to each school based on MOHLTC calculation from surveillance results for grade 2 students from previous academic year. Select elementary grades to assess based on risk level rating. Identify children with urgent dental treatment needs and preventive needs. Follow up children who have been identified with urgent dental needs or would benefit from preventive oral health care. Initiate case management on all Child Urgent Care cases. Contact parents whose children would benefit from preventive services and offer HSO to clinically eligible children.</p> <p style="text-align: right;"><i>Length = 485</i></p> <p>Conduct surveillance, oral screening, and report data and information in accordance with the Oral Health Protocol, 2018 (or as current) and the Population Health Assessment and Surveillance Protocol, 2018 (or as current). Identify and monitor oral health status in children ages 0-17 annually. Monitor emerging trends related to poor oral health outcomes and, their associated risk factors, and emerging trends. Collect and report on oral health surveillance data in OHISS for MOHLTC.</p>

Program:

Description *Length = 421*

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Healthy Smiles Ontario provides preventive, routine, and emergency dental services for children and youth 17 years old and under from low-income households. In Hamilton, HSO dental services are provided through 3 public health unit community clinics and community dental providers. Children and youth with dental needs are identified by dental screening. They are offered the Healthy Smiles Ontario program if eligible.

Objective *Length = 557*

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.1 Oral Health

Compliance with the School Health - Oral Health Standard, including all required protocols.
 Provision of the the Healthy Smiles Ontario (HSO) Program in accordance with the Oral Health Protocol, 2018 (or as current).
 Increased proportion of children who have optimal oral health
 Priority populations are linked to child/family health information, programs and services
 Children from low income families have access to oral health care
 Increased public awareness of the importance of good oral health through provincial, local communication strategies

Indicators of Success

Length = 139

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	992,250
Benefits	263,750
Travel	8,920
Professional Services	-
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	295,380
Total	\$1,560,300

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Healthy Smiles Ontario Program (100%)	1,560,300
Total	\$1,560,300

Funding sources are populated with budget data provided in the budget worksheets

Program: Healthy Smiles Ontario

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 86

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Length = 55

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 625

Collaborate with community partners such as EarlyON CFCs system collaborative, newcomer groups, school events, C/CAS, OW, alternative schools, to provide outreach to priority populations to link them to oral health and HSO information, programs and services.
 Work with the Hamilton Academy of Dentistry and other community partners to increase uptake of Health Smiles Ontario clients by dentists.
 Review and improve the referral process to Healthy Smiles Ontario program to increase enrollment and utilization.
 Develop partnerships with primary care to raise awareness of HSO and promote oral health and access to services

Length = 867

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.1 Oral Health

Promotion, Awareness, Education, Knowledge Translation

Length = 49

Promote good oral health by increasing access and reducing barriers to dental care.
 Promote regular preventive and treatment dental care by assisting families to find a dental home.
 Target communication/education strategies to priority populations.
 Develop and distribute newsletters, emails and promotional items to the public.
 Distribute Teacher Resource Kits (curriculum based).
 Deliver oral health presentations (formal & informal), workshops and demonstrations
 Seek & maintain internal and external (e.g. community) contacts/partners
 Distribute dental materials to community partners
 Support Facebook – Healthy Families page with information on oral health behaviours and promotion of HSO
 Target health promotion campaign to high needs areas identified through mapping
 Increase awareness of good oral health and the HSO program through the Oral Health Navigator

Length = 517

Screening/Assessment/Intervention/Case Management

Length = 27

Identify children with urgent dental treatment needs who are eligible for HSO.
 Enroll children in the HSO program
 Preventive Dental Clinics: Provide oral health assessments and anticipatory guidance concerning oral health resources and programs; Provide preventive dental services (e.g. fluoride, scaling, sealants and instructions in oral self-care); Provide counseling in diet, tobacco cessation and oral self-exam (as needed)
 Dental Treatment Clinic: Provide direct client services for treatment and prevention

Length = 95

Monitoring and Surveillance

Monitor relevant program stats to inform and direct continuous quality improvement activities.

2018 Public Health Program Plans and Budget Summaries
3.12 School Health
3.12.2 Vision

Length = 704

A. Community Need and Priorities

Please provide a short summary of the following (maximum characters of 1,800):
 a) The key data and information which demonstrates your communities' needs for public health interventions to address vision; and,
 b) Your board of health's determination of the local priorities for a program of public health interventions that addresses vision.

(a) It is estimated that 16% of Hamilton children have a visual impairment. Presently, only 14% of Ontario children under 6 get an eye exam by an optometrist. There are 5,506 potential Senior Kindergarten and 5,405 potential Junior Kindergarten children that need to be screened. The Ministry protocol workgroup has yet to establish the target audience. The Ministry protocol workgroup has yet to establish the target audience.
 (b) The best model for conducting early childhood vision screening remains unclear; but there are 'good practices' reported by screening programs. Risk factors for vision problems: family history, premature birth or low birth weight, and maternal smoking during pregnancy.

Length = 1102

B. Key Partners/Stakeholders

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Given PHS is responsible for screening in schools through other programs (i.e. Dental), we plan to leverage and coordinate existing infrastructure, processes and community resources for vision screening in schools (i.e. oral health screening).
 Vision Works is a privately run company already providing service in The City of Hamilton. PHS had a role in getting Vision Works started. The VisionWorks program mandate is to provide comprehensive eye exams and treatment to students in need. VisionWorks currently provides comprehensive eye exams to students Kindergarten to grade 12, in inner city schools located in Hamilton, Ontario. The program also provides low-cost eyewear to students in need. Though there is not a formal partnership between PHS and VisionWorks, the VisionWorks program providers have agreed to accept informal referrals of families from PHNs and principals of Health Promoting Partnership Schools. Kindergarten students in schools located outside of the inner city and/or who are identified as moderate or low priority schools are currently not receiving vision screening.

C. Programs and Services

Program:

Description

Length = 483

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).
 As information is shared from the Ministry through 2018 related to the protocol and relevant reference documents a comprehensive vision screening program will be developed. PH will use 2018 as a planning and training year to engage with school board partners and relevant community stakeholders and coordinate with existing PH programs within schools to establish a program that is tailored to local needs. This approach will enable us to implement the program in 2019 and establish

Objective

Length = 1066

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).
 We are awaiting the release of the protocol prior to articulating program objectives. Below are some process objectives to support the development of a new vision screening program.
 Development of a vision-screening program that includes identification of required FTE and is in compliance with the implementation of the protocol that includes the development of relevant internal policies, guidelines and training.
 Existing clinic space used for operating an alternative vision screening location.
 Existing infrastructure, processes and community resources for vision screening in schools (i.e. oral health screening) is leveraged and coordinated.
 Community partners will be engaged to develop a client-centred referral and communication pathway in Hamilton with clearly articulated roles and responsibilities.
 Educational and health promotional materials disseminated that are developed by the Ministry and are appropriate for the local context.
 Communication is tailored to parents/caregivers and disseminated based on Ministry-provided protocol pathway.

Indicators of Success

Length = 114

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).
 No program indicators identified as Child Visual Health and Vision Screening Protocol, 2018 has not been released.

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	20,860
Benefits	4,940
Travel	10
Professional Services	-
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	3,890
Total	\$29,700

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	29,700
Total	\$29,700

Funding sources are populated with budget data provided in the budget worksheets

Program: Child Visual Health and Vision Screening

Public Health Intervention	Description
Input a title for each public health intervention under this Program (maximum of 100 characters) Length = 51	Briefly describe the public health intervention (maximum of 1,800 characters) Length = 367
Screening/Assessment/Intervention/Case Management	The development of vision screening program that includes staffing, infrastructure, processes and leveraging of community resources requires more information from the Ministry in order to accurately forecast. Based on data from the Oral Health Screening program it is clear that a passive consent process will maximize the number of students that will be screened

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.3 Immunization

Length = 1495

A. Community Need and Priorities

Please provide a short summary of the following (maximum characters of 1,800):

- The key data and information which demonstrates your communities' needs for public health interventions to address school health immunization; and,
- Your board of health's determination of the local priorities for a program of public health interventions that addresses school health immunization with consideration of the required list of topics identified in the Standards.

(a) Record Assessment: PHS monitors immunization status of enrollees at 78 childcare sites in Hamilton. Annually, more than 54,000 people have their immunization records assessed through childcare centres and schools. There is currently a 3 year backlog in vaccine reporting; in response, the program has prioritized addressing the backlog with children entering school. School: There were 82,772 students enrolled in Hamilton elementary and secondary schools in 2016-17. Of these, 1,400 had philosophical vaccine exemptions (1.7% of those enrolled). From 2016-17, PHS provided immunizations to 19,000 students across 125 schools. From Dec 8, 2016 to Jan 18, 2017, 2600 students received overdue vaccination letters, resulting in 1858 students who received vaccines, and 742 who reported their previous vaccination to PHS (28%). **Vaccine Coverage:** From 2011/12-2013/14 the overall vaccine (HepB, HPV, Menactra) coverage rate for schools in Hamilton ranged from 70% to 75%, with a three year annual average coverage rate of 72.7%. Over the three schools years, HPV has consistently had the lowest coverage rate, with a three year annual average coverage of 57.7% **(b) Local Priorities:** Populations with low vaccine uptake and/or reporting rates as determined through local surveillance and Vaccine Program Review. Research literature suggests vaccine hesitancy in middle to upper class populations and lower reporting among populations with language barriers and lower socio-economic status

Length = 726

B. Key Partners/Stakeholders

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Health care providers (individuals) – collaborating with providers who administer vaccine to ensure compliance with legislation and best practice
 Healthcare sites housing and administering vaccines –provide vaccines, cold chain storage, and protocol
 School Boards and School Principals; Daycare Providers –liaison to ensure effective records management and education around immunization policy; promotion of suspension clinics
 Parents –education of parents seeking non-medical exemption; opportunities for parents to contact staff for reporting and information purposes
 Medical Advisories –released to partners and public as required to update on changes to legislation and/or provide education on risk and protective factors

C. Programs and Services

Program:

Description

Length = 420

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program aims to be compliant with the Immunization of School Pupils Act which requires assessment of the immunization status of all children and youth attending licensed child care centres and schools. In collaboration with school boards, the program also aims to promote and improve confidence in immunizations, maintain current vaccine records, and ensure access to vaccines for children and youth.

Objective

Length = 871

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Compliance with the School Health - Immunization Standard, including all required protocols.
 Recommendations from vaccine program review implemented to improve service delivery, vaccine utilization, and compliance with vaccine legislation and mandates.
 Immunization education sessions facilitated for parents who request a non-medical vaccine exemption to fulfill new education amendment to the Immunization of School Pupils Act.
 Implementation of priorities of Immunization 2020: Modernizing Ontario's Publicly Funded Immunization Program to improve access to immunization, connect system partners, inform the public, protect health through continuous quality improvement, and reduce inequities.
 Promotion and provision of immunizations at school –based clinics in order to improve overall vaccine coverage rates and reduce the burden of vaccine preventable diseases

Indicators of Success

Length = 387

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

% of 7 and 17 year olds vaccinated for all ISPA designated diseases
 % of students with a valid religious or conscience exemption by ISPA designated disease annually
 % of school-aged children who have completed immunizations for hepatitis B
 % of school-aged children who have completed immunizations for HPV
 % of school-aged children who have completed immunizations for meningococcus

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.3 Immunization

Program Budget Summary		Funding Sources Summary	
Object of Expenditure	Amount	Funding Source	Amount
Salaries and Wages	1,270,110	Mandatory Programs (Cost-Shared)	1,942,200
Benefits	347,890		
Travel	8,730		
Professional Services	1,060		
Expenditure Recoveries & Offset Revenues	(109,800)		
Other Program Expenditures	424,210		
Total	\$1,942,200	Total	\$1,942,200

Budget Summary is populated with budget data provided in the budget worksheets

Funding sources are populated with budget data provided in the budget worksheets

Program: Immunization of School Pupils

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 56

Promotion, Awareness, Education, Knowledge Translation

Length = 49

Screening/Assessment/Intervention/Case Management

Length = 26

Investigation and Response

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 397

Send letters annually to childcare centre operators and schools, providing vaccine information and education. Lead mandatory education sessions for all parents who want non-medical exemption for their children, as per ISPA
Provide Immunization program info line and manage online immunization reporting tool (ICON) to enable parent and youth access to reporting and education around immunization.

Length = 1026

Assess immunization records for all registered students (including those: at international schools, new to Ontario, and up to 17 years old) as part of PHS screening and suspension process.
Send screening letters (x2) to parents prior to suspension day advising them to report immunization status
Provide multiple avenues for public to report immunizations and receive information, including: a phone line open from 8:30-4:30 daily, an online reporting tool (ICON), faxes, and post mail.
Conduct suspension clinics day before, day of, day after elementary school suspension dates.
Launch suspension clinics through high schools to address high number (4500) of secondary students who are non-compliant.
Ensure all children have access to publicly funded vaccines through community healthcare providers. If child does not have OHIP or IFH, PHS provides the vaccines via community clinics.
Document exemption records for students (both medical and non-medical) documented in Panorama. Follow up incomplete exemption records

Length = 220

Issue order of exclusion for an outbreak or risk of an outbreak of a designated disease managed through relevant policies and procedures. An exclusion order would be documented in Panorama in the instance of an outbreak.

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.4 Other

A. Community Need and Priorities

Length = 1772

Please provide a short summary of the following (maximum characters of 1,800):

- The key data and information which demonstrates your communities' needs for public health interventions to address school health; and,
- Your board of health's determination of the local priorities for a program of public health interventions that addresses school health with consideration of the required list of topics identified in the Standards.

High risk schools identified School Boards align with priority wards identified using student health indicators. In high priority wards, inequities among students include: 29% are from low income homes, 23% are from families with no employment income, 31% are from single parent families, and 28% of kindergarten students experience unstable housing (frequent moving). The percentage of recent immigrants in priority wards is double the city average (60% are from Asia, primarily Syria, Iraq, Philippines, and India). **Hamilton student health priorities:** Suicide Prevention: self-harm ED visits have doubled for female students since 2006 (primary cause is poisoning with drugs). Suicide is the leading cause of death under age 45; Substance Use: recent 5x increase in drug-related disorders among 18-year-old females (primary cause is opioids and methamphetamines/amphetamines); Immunization: very low vaccine compliance for cancer-causing viruses Hepatitis B and HPV, despite local increase in Hepatitis B cases and rise in HPV-linked cancer in males; Healthy Eating: 30% of students in lower Hamilton do not eat breakfast and 70-80% of students do not eat fruit and vegetables daily; Physical Activity: over 1 in 5 students in priority wards in lower Hamilton watch TV very frequently (>4 hrs/day) and are less likely to play outdoors on a daily basis; Healthy Sexuality: local teen pregnancy rate is higher than provincial average and disproportionate clustering of STIs and teen pregnancy in priority wards. Significant gaps in student health data limits the scope of population health assessment. (b) **Local Priorities:** mental health promotion (inclusive of suicide risk and prevention), healthy eating, physical activity, sedentary behaviour, and healthy sexuality.

Length = 1334

B. Key Partners/Stakeholders

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Collaboration with key internal and external partners using a comprehensive health promotion approach, to influence the development and implementation of healthy policies, and the creation or enhancement of supportive environments within School communities. Key internal partners include: Dental Program, Vaccine Preventable Disease Program, Vision Screening Program, Child Health and Reproductive Health Programs, Tobacco Control Program, Alcohol and Substance Misuse Program, Harm Reduction Program, Child and Adolescent Services, Sexual Health Program, Epidemiology and Evaluation Program, Chronic Disease Prevention Program, Recreation Department, Child Care and the Early Years System and Neighbourhood and Community Initiatives. Key external partners include: Hamilton Wentworth District School Board (HWDSB); Hamilton Wentworth Catholic District School Board (HWCDSB); Conseil scolaire Viamonde (French School Board); Conseil Scolaire MonAvenir (French Catholic School Board), LHIN (Community Care Access Centre –MHANs), Vision Works, McMaster University, Mohawk College, Banyan Community Services, Francophone Community Interagency Round Table, Youth and Young Parent Services, Neighbourhood Planning Tables, Ontario Healthy Schools Coalition, YMCA, students and their parents/caregivers, and locally engaged private citizens.

C. Programs and Services

Program:

Description

Length = 1330

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Schools are a critical setting to build important relationships, promote a positive sense of self, and therefore promote and protect the health and well-being of children and youth. The School Program service delivery model strengthens partnerships between PHS and local school boards. Every school is responsible for producing an annual school improvement plan with clear health related indicators. Public Health school program staff collaborate with school leads to identify key indicators and produce communication products on population health data. This data critically informs student health and wellbeing at a local level and is used to collaboratively identify key needs and priorities within schools. The program includes universal services for all publicly funded schools as well as targeted and more intensive services for 50 identified priority schools with the highest level of need. Public health staff work with school staff, students, and parents/caregivers to implement programs and services to address identified local needs. Staff engage other partners and services who assist the school in key areas. PHS collaborates with schools to monitor the work and outcomes to ensure the services are making a difference for the students and school community in applying a results based accountability framework.

Objective

Length = 886

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Compliance with the School Health - Other Standard, including all required protocols.
Hamilton School Boards and Schools are aware of relevant and current population health needs impacting students in their school.
Hamilton School Boards and Schools are meaningfully engaged in the planning, development, implementation and evaluation of public health programs and services relevant to children and youth.
Public Health school based initiatives relevant to healthy living behaviours are informed by effective partnerships between the Board of Health, Hamilton School Boards and Schools.
Children, youth, and emerging adults have increased knowledge about and skills for healthy growth and development.
Increased adoption of healthy living behaviours amongst Hamilton children and youth.
Increased awareness among youth and emerging adults about contraception and healthy pregnancies.

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.4 Other

Indicators of Success

Length = 134

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	1,193,810
Benefits	313,120
Travel	11,950
Professional Services	460
Expenditure Recoveries & Offset Revenues	(29,470)
Other Program Expenditures	339,010
Total	\$1,828,880

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	1,828,880
Total	\$1,828,880

Funding sources are populated with budget data provided in the budget worksheets

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 85

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Length = 54

Promotion, Awareness, Education, Knowledge Translation

Length = 27

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 1210

Public Health Services (PHS) has established a leadership committee with Hamilton Wentworth District School Board and Hamilton Catholic District School Board senior leadership that supports implementation of the standard. PHS continues to secure the commitment from this leadership committee to partner with PHS in order to achieve the outcomes as outlined in the Public Health Program Plan. This committee shares relevant health and education data and respective strategic plans to identify mutual priorities, goals, success indicators, and processes for evaluation.
PHS leads the development of a joint PHS\School Board working group to identify population health data indicators to determine current population health needs impacting students in Hamilton schools. Based on the population health data, PHS collaborates with school boards to plan for intensive and universal resource allocation, inclusive of service coordination of other school based PHS services (e.g. School PHNs, Immunization Services, Dental Services, Vision Screening Services). PHS will further liaise with other relevant internal and external stakeholders to achieve the outcomes as outlined in the School Health – Other standard.

Length = 1424

In collaboration with Hamilton school boards, PHS will use population health data to allocate universal services to all Hamilton schools, while focusing intensive support to 50 high priority schools. Resources will be allocated using a "family of schools" model – in alignment with school board structure, and to facilitate collaboration.
Universal services will include the sharing of population health data, facilitating linkages with community resources, consultation on emerging health priorities, facilitation of other school based PHS services (e.g. immunization, dental and vision screening), and the development of web based and health curriculum resources. All schools will also receive support in the promotion, knowledge translation, and implementation of a Hamilton wide mental wellbeing campaign.
PHS will utilize a comprehensive school health approach within identified priority schools. These school communities will receive PHS consultation with school administrators to identify school health priorities. PHS will engage the school community (students, parents/care givers, school staff) in the development, implementation, and evaluation of an evidence informed Annual School Plan related to school health priorities. PHS will facilitate community networks and partnerships to best meet the identified school health priorities. PHS will also advise and support implementation of healthy school policies.

Length = 192

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.4 Other

Monitoring and Surveillance

In 2018 we will be piloting the use of board school improvement plans to develop shared goal, objectives and indicators of success for monitoring progress on desired goals at targeted schools.

Program: **Tobacco Control, Prevention and Cessation**

Description

Length = 170

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Described in more detail under 3.5.1 Chronic Disease Prevention – Tobacco Use, Prevention and Cessation and 3.5.13 Chronic Disease - SFO – Youth Tobacco Use Prevention

Objective

Length = 0

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Indicators of Success

Length = 0

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	50,860
Benefits	14,400
Travel	-
Professional Services	80
Expenditure Recoveries & Offset Revenues	(10)
Other Program Expenditures	19,010
Total	\$84,340

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	84,340
Total	\$84,340

Funding sources are populated with budget data provided in the budget worksheets

Program: Tobacco Control, Prevention and Cessation

Public Health Intervention	Description
----------------------------	-------------

Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Program: **Injury Prevention**

Description

Length = 42

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Please refer to 3.13.2.1 Injury Prevention

Objective

Length = 0

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.4 Other

Indicators of Success

Length = 0

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	93,260
Benefits	25,710
Travel	580
Professional Services	90
Expenditure Recoveries & Offset Revenues	(1,430)
Other Program Expenditures	32,240
Total	\$150,450

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	150,450
Total	\$150,450

Funding sources are populated with budget data provided in the budget worksheets

Program: Injury Prevention

Public Health Intervention

Description

Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Program:

Description

Length = 103

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Please refer to 3.5.2 Chronic Disease Prevention; 3.5.3 Built Environment; 3.5.4 Healthy Food Systems;

Objective

Length = 0

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Indicators of Success

Length = 0

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	190,810
Benefits	50,440

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	294,590

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.4 Other

Travel	1,920		
Professional Services	90		
Expenditure Recoveries & Offset Revenues	(4,750)		
Other Program Expenditures	56,080		
Total	\$294,590	Total	\$294,590

Budget Summary is populated with budget data provided in the budget worksheets

Funding sources are populated with budget data provided in the budget worksheets

Program: Chronic Disease Prevention

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Program: **Mental Health Promotion**

Description

Length = 323

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The mental health promotion program aims to promote mental well-being through increasing awareness, providing education, and making policy changes. Significant effort is put into collaboration with community partners across the health and social sector to support mental health promotion with a focus on school-aged youth.

Objective

Length = 149

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Increased adoption of 5 Ways to Wellbeing to promote positive mental health
Reduction of preventable injury or death due to self-harm and suicide

Indicators of Success

Length = 137

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary

Object of Expenditure	Amount
Salaries and Wages	510,290
Benefits	133,360
Travel	3,390
Professional Services	190
Expenditure Recoveries & Offset Revenues	(8,100)
Other Program Expenditures	144,190
Total	\$783,320

Funding Sources Summary

Funding Source	Amount
Mandatory Programs (Cost-Shared)	783,320
Total	\$783,320

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.4 Other

Budget Summary is populated with budget data provided in the budget worksheets

Funding sources are populated with budget data provided in the budget worksheets

Program: Mental Health Promotion

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 86

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Length = 54

Promotion, Awareness, Education, Knowledge Translation

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 544

Engage the community in the "5 Ways to Mental Well-being" with a focus on mental health and well-being of children and youth in schools in alignment with the School Health Standard
Collaborate with Hamilton Police Service on bullying prevention
Participate on the Suicide Prevention Community Council of Hamilton and provide data for ongoing implementation of the Hamilton Suicide Prevention Strategy
Engage with the Hamilton Committee on Collaborative Management of Youth Suicide comprised of community partners to inform a suicide protocol

Length = 258

Build on the strengths, and capacity of students, fostering resilience among students, creating a supportive environment and where appropriate, assist in referral to needed services
Provide ASIST-training and mental health first-aid to public health staff

Program: Substance Use Prevention

Description

Length = 49

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Please refer to 3.13.1.3 Substance Use Prevention

Objective

Length = 0

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Indicators of Success

Length = 0

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	144,440
Benefits	37,560
Travel	820
Professional Services	1,410
Expenditure Recoveries & Offset Revenues	(1,440)
Other Program Expenditures	40,930
Total	\$223,720

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	223,720
Total	\$223,720

Funding sources are populated with budget data provided in the budget worksheets

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.4 Other

Program: Substance Use Prevention

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Program:

Description

Length = 39

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Please refer to 3.13.1.2 Harm Reduction

Objective

Length = 0

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Indicators of Success

Length = 0

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Program Budget Summary

Object of Expenditure	Amount
Salaries and Wages	14,240
Benefits	3,920
Travel	190
Professional Services	1,370
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	5,600
Total	\$25,320

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary

Funding Source	Amount
Mandatory Programs (Cost-Shared)	25,320
Total	\$25,320

Funding sources are populated with budget data provided in the budget worksheets

Program: Harm Reduction

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Program:

Description

Length = 582

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

PHS staff work with schools, school, board staff, and other key community partners to address youth sexual health through system planning and service delivery. Current focus of work is on supporting the development of a Youth Sexual Health Strategy in Hamilton, where both universal and targeted services and supports will be identified, implemented and evaluated. Key areas of focus will be on identifying strategies and interventions that will support building health relationships among the youth population, as well as the reduction of teen pregnancy and STI rates in Hamilton.

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.4 Other

Objective

Length = 247

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Compliance with the School Health Standard.
 School-aged children, youth, and their families are aware of factors for healthy growth and development.
 Increased awareness among youth and emerging adults about contraception and healthy pregnancies.

Indicators of Success

Length = 305

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development are currently being developed through the development of the Youth Sexual Health Strategy. Will be available in 2019.

Current population health indicators being considered in Hamilton are teen pregnancy and STI rates.

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	164,910
Benefits	43,380
Travel	1,920
Professional Services	60
Expenditure Recoveries & Offset Revenues	(4,750)
Other Program Expenditures	47,630
Total	\$253,150

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	253,150
Total	\$253,150

Funding sources are populated with budget data provided in the budget worksheets

Program: Sexual Health

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 85

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Length = 54

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 725

Build capacity across the community and within schools and school boards, to enhance system planning and service delivery related to youth sexual health.
 Develop continuous quality improvement activities and prioritize in response to local need, client feedback, partner engagement, and opportunities for enhanced efficiency and effectiveness.
 The 2018 priority will be focused on the development of the Youth Sexual Health Strategy, which will include the identification of:
 Vision, Mission, Goals/Objectives, Interventions, Indicators/Measure of Success, Evaluation
 PHS staff will support this work through the Youth Sexual Health Collaborative, working with both internal and external stakeholders on system planning.

Length = 617

2018 Public Health Program Plans and Budget Summaries

3.12 School Health

3.12.4 Other

Promotion, Awareness, Education, Knowledge Translation

Length = 27

Currently PHS staff support schools and school boards with youth sexual health through supporting the Ontario Health & Physical Education Curriculum. This is primarily done through supporting teacher competence and confidence in delivering the curriculum as the need arises, and through providing supportive classroom sessions to youth as needed. Focus of these sessions is on healthy relationships, pregnancy prevention or STI prevention.
Support to schools and school boards to assist with the implementation of health curricula, and support identified health needs in schools, as it relates to healthy sexuality.

Length = 192

Monitoring and Surveillance

Length = 0

A results based accountability approach will continue to be applied in the development of indicators on collaborative initiative to monitor and evaluate impact of collective impact strategies.

Length = 0

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.1 Substance Use

Length = 1718

A. Community Need and Priorities

Please provide a short summary of the following (maximum characters of 1,800):

- a) Data and information which demonstrates your communities' needs for public health interventions to address substance use; and,
 b) Your board of health's determination of the local priorities for a program of public health interventions that addresses substance use with consideration of the required list of topics identified in the Standards.

Alcohol: Over 40% of Hamilton residents (19+) exceed one or both of the LRADG, differences in gender (males) age (19-24) and income; Almost 25% of Hamilton adolescents (12-18) have had an alcoholic beverage in the past 12 months; **Illicit Drugs:** 12.3% of Hamilton residents (18+) have used an illicit drug in the past 12 months. Marijuana was the most commonly used illicit drug (11.6-%). The hospital admission rate for drug-related mental and behavioural disorders was 16.2 per 100,000. More Hamilton moms (3%) reported 1 or more drug or substance exposures during pregnancy, compared to Ontario moms. **Mental Well-Being:** Hamilton residents are most likely to speak to a Family Doctor about emotional or mental health; Hospitalization rates for intentional self-harm were 60.5 per 100,000 population. Mortality rates for intentional self-harm (suicide) have remained relatively stable (rate: 8.2 per 100,000 population) difference in sex (males) and age (45-64) **Sexual Health:** The average age of sexual debut is 18; About 42% of Hamiltonians with more than 1 partner did not use a condom last time they had sexual intercourse; Chlamydia (274 cases in 2015) is the most common STI diagnosed. It is highest among adolescent females (15-19); **(b) Local Priorities:** Poisoning by drugs and/or intentional harm are in the top 5 causes of hospital admission, discharge and death for 15-24 years. Illicit drug use, alcohol and tobacco use tend to impact more vulnerable populations (e.g., low income). The priority assessment has determined a focus on youth (school-age to 24 years), mental wellness and resilience in order to address downstream issues of alcohol, tobacco and substance misuse and unsafe sexual practices.

Length = 786

B. Key Partners/Stakeholders

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Opioid Summit Stakeholders in development of City Drug Strategy: The AIDS Network; Alternatives for Youth; City of Hamilton (City Housing Hamilton, City Housing Services, Hamilton Fire Department, Hamilton Paramedic Service); Primary Care; Hamilton & District Pharmacists' Association; Hamilton Addiction & Mental Health Collaborative; Hamilton Addiction Systems Collaborative; Hospitals; HNHBLHIN; Hamilton Police Services; Hamilton Wentworth Detention Centre; McMaster University Department of Family Medicine; Ontario Addiction Treatment Centres; Regional Coroner; Wayside House of Hamilton; Wesley Urban Ministries; McMaster University; Mohawk College

Other Stakeholders:

Boards of Education - Hamilton and Catholic boards;
 Community physicians
 Pharmacies
 College of Physicians

C. Programs and Services

Program: **Tobacco Control, Prevention and Cessation**

Description

Length = 906

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Please refer to

- 3.5.1 Tobacco Control, Prevention and Cessation
- 3.5.8 Smoke Free Ontario - Prosecution
- 3.5.9 Smoke Free Ontario - Protection and Enforcement
- 3.5.10 Smoke Free Ontario - Tobacco Control Area Network - Coordination
- 3.5.11 Smoke Free Ontario - Tobacco Control Area Network - Prevention
- 3.5.12 Smoke Free Ontario - Tobacco Control Coordination
- 3.5.13 Smoke Free Ontario - Youth Tobacco Use Prevention

Objective

Length = 0

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.1 Substance Use

Indicators of Success

Length = 0

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	-
Benefits	-
Travel	-
Professional Services	-
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	-
Total	-

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	-
Total	-

Funding sources are populated with budget data provided in the budget worksheets

Program: Tobacco Control, Prevention and Cessation

Public Health Intervention	Description
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Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Program:

Description

Length = 431

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The Harm Reduction program aims to reduce the health and social harms related to substance misuse and focuses on reducing the spread of communicable diseases, preventing overdose deaths and increasing access to safe supplies. Harm reduction work is supported through promotion, education and awareness of the risks associated with substance misuse, distribution of harm reduction supplies and collaboration with community partners.

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.1 Substance Use

Objective

Length = 581

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Compliance with the Substance Use and Injury Prevention Standard, including all required protocols.
 Promotion of opioid and other substance-associated risks and how to prevent overdose
 Increased knowledge of naloxone (accessibility and use)
 Maintenance of surveillance systems to monitor opioid use in the community
 Development, implementation, and evaluation of a community Drug Strategy in Hamilton
 Provision of safe harm reduction supplies in the community to prevent blood borne infections such as HIV and hepatitis infections
 Improved access to harm reduction supplies

Indicators of Success

Length = 130

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

% of needles distributed that are returned to the harm reduction program
 % of naloxone kits distributed that were used by clients

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	236,020
Benefits	64,100
Travel	1,520
Professional Services	11,150
Expenditure Recoveries & Offset Revenues	(30)
Other Program Expenditures	82,440
Total	\$395,200

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	395,200
Total	\$395,200

Funding sources are populated with budget data provided in the budget worksheets

Program: Harm Reduction

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 86

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Length = 55

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 470

Support and inform the development of a community-wide Drug Strategy in collaboration with community partners across the health sector
 Coordinate the development of an opioid response plan that collates the plans of partner organizations to differing levels of risk related to new opioids in the community. By documenting plans in a single location, organizations can be aware of the plans of others, coordination of services can be better managed and gaps identified.

Length = 1196

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.1 Substance Use

Promotion, Awareness, Education, Knowledge Translation

Continue opioid overdose campaign 4 C's providing facts related to the significance of opioid overdose and information on how to prevent and respond to opioid overdoses
 Increase awareness of blood borne infections, harm reduction, program services through offering education sessions, promotional materials and online ads targeted to at risk populations
 Provide education to the public to raise awareness of the effects and risks of alcohol in support of the recently released Community Alcohol Report
 Promote awareness of overdose risks through participation in OD Awareness Day
 Develop education material for safe injection practices
 Create educational video for public on how to respond to an overdose situation with a focus on the administration of naloxone
 Create educational video for public in collaboration with the Hamilton AIDS Network on needle litter including health teaching on risks and reduction of fear related to sharps injuries as well as how to safely contain and get support for safe needle disposal
 Promote the availability of naloxone through services delivered by public health as well as local pharmacies, Hepatitis C team and the Hamilton Wentworth Detention Centre

Length = 53

Length = 1012

Screening, Assessment, Intervention, Case Management

Distribute harm reduction supplies
 Distribute Safer Crack Kits via existing needle syringe sites and mobile Van
 Collect used safe injection supplies via mobile outreach and fixed sites
 Provide effective outreach to clients who use substances through IDU outreach worker
 Provide street health/harm reduction focused clinic services at various locations: Wesley, Urban Core CHC, Womankind, Notre Dame, Karl's Spa for Men, Central Spa for Men
 Offer and conduct POC & anonymous HIV testing in priority populations (persons from endemic countries, MSM, Aboriginal persons, women at risk)
 Run Community Points program for safe disposal of needle litter in the community
 Development of a care pathway for the creation of a SBIRT tool to identify poly substance misuse and subsequent referral to appropriate treatment
 Deliver naloxone overdose prevention program through the distribution of naloxone and education on use to people who use opioids or former users at risk of relapse and their friends and family.

Length = 28

Length = 433

Monitoring and Surveillance

Maintain Hamilton Opioid Information System, weekly surveillance reports related to opioid overdose on the City of Hamilton website so that the public and organizations working with people misusing opioids can be better informed of the current situation
 Monitor long-term trends for planning, evaluation and continuous quality improvement purposes.
 Collect stats and report on distribution and collection of safe injection supplies

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.1 Substance Use

Program: Substance Use Prevention

Description

Length = 226

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

This program aims to reduce the negative impact of social determinants that contribute to health inequities and subsequent substance misuse, to prevent uptake of harmful substance use and to prevent substance-related injuries

Objective

Length = 683

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Compliance with the Substance Use and Injury Prevention Standard, including all required protocols.
 Activities conducted that raise public awareness of substance misuse effects, resources, and ways to limit associated risks
 Increased actionable knowledge and skill capacity of youth, parents and the public and to provide opportunities that lead to healthier behaviours
 Increased awareness for supportive resources in the community
 Policies and programs developed that will safeguard the community from the harms of substance use
 Determination of substance use baseline so that trends over time can be understood and planning and delivery of services can be responsive to needs

Indicators of Success

Length = 137

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	157,840
Benefits	41,220
Travel	1,340
Professional Services	9,620
Expenditure Recoveries & Offset Revenues	(20)
Other Program Expenditures	43,060
Total	\$253,060

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	253,060
Total	\$253,060

Funding sources are populated with budget data provided in the budget worksheets

Program: Substance Use Prevention

Public Health Intervention

Description

Input a title for each public health intervention under this Program (maximum of 100 characters)

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 86

Length = 913

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.1 Substance Use

<p>Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)</p>	<p>Support and inform the development of a community-wide Drug Strategy in collaboration with community partners across the health sector Review current City of Hamilton cannabis policies and prepare relevant proposals and alignment for new policies Advocate for provincial alcohol strategy Work collaboratively with youth and other community partners to create a youth engagement strategy Co-develop and support substance misuse supportive policies for the workplace and communal dwelling facilities (e.g. apartment buildings) Collaborate with school boards and schools to develop whole school interventions for supportive environments and assist with the implementation of health-related curricula related to substance misuse prevention in alignment with School Health Standard Collaborate with Mental Health Promotion program and incorporate 5 ways to mental well-being into substance prevention framework</p>
<i>Length = 54</i>	<i>Length = 1223</i>
<p>Promotion, Awareness, Education, Knowledge Translation</p>	<p>Increase public awareness on use and risks related to opioids and other substances as previous campaigns have focused on harm reduction / overdose prevention. Distribute posters to increase opioid awareness for public and sub-groups such as school-aged youth and parents of school-aged youth Develop and conduct parent information substance misuse information sessions and support parent-led initiatives to prevent harmful substance use Provide educational opportunities/workshops to parents on how to create supportive home environments Use social media to increase awareness and provide education on substance misuse Provide substance misuse programming/resource support to priority populations including Indigenous populations Produce knowledge translation material such as infographics to communicate to stakeholders the current state of substance use in Hamilton Support youth, parent and community-led initiatives that raise awareness about issues related to substance misuse Lead community events (& create linkages) for both Overdose Awareness Day and National Addictions Awareness week Revise and disseminate information from the Community Alcohol Report Communicate policy changes (e.g. good Samaritan law)</p>
<i>Length = 52</i>	<i>Length = 204</i>
<p>Screening, Assessment, Intervention, Case Management</p>	<p>Plan, implement, monitor and evaluate the SBIR program Update or create policies to support SBIR internal uptake Develop relationships with stakeholders with goal of implementing SBIR throughout city</p>
<i>Length = 27</i>	<i>Length = 374</i>
<p>Monitoring and Surveillance</p>	<p>Collect pre-post cannabis data and understand different sources for obtaining information Utilize information from Hamilton Opioid Information System to inform Health Promotion programming Monitor and evaluate substance misuse prevention campaigns and SBIR through piloting, process evaluations and outcome evaluations Solicit feedback from Harm Reduction outreach team</p>

Program: Electronic Cigarettes Act - Protection and Enforcement

Description *Length = 612*

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

An effective compliance strategy employs a balance of inspection, education and progressive enforcement. Progressive enforcement means the use of more stringent charging options to reflect the frequency and severity of the level of non-compliance. Boards of health are responsible for enforcement of the ECA at all e-cigarette retail locations. In 2016, 544 inspections were completed; and responded to 5 ECA related complaints. There are 265 of e-cigarette retailers in Hamilton (2016); 11 vapour lounges (2016); 22.6% of Ontario youth (grades 7 – 12) reported using an e-cigarette at least once (OSDUS, 2015).

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.1 Substance Use

Objective

Length = 184

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Decreased youth access to electronic cigarette products at point of retail
 100% compliance with mandated ministry inspection targets
 Response to 100% of all SFOA complaints received

Indicators of Success

Length = 66

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

% of ECA retailers in compliance with the Electronic Cigarette Act

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	6,360
Benefits	1,770
Travel	750
Professional Services	-
Expenditure Recoveries & Offset Revenues	-
Other Program Expenditures	43,360
Total	\$52,240

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Electronic Cigarettes Act: Protection and Enforcement (100%)	52,240
Total	\$52,240

Funding sources are populated with budget data provided in the budget worksheets

Program: Electronic Cigarettes Act - Protection and Enforcement

Public Health Intervention	Description
Input a title for each public health intervention under this Program (maximum of 100 characters) Length = 86 Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)	Briefly describe the public health intervention (maximum of 1,800 characters) Length = 80 Contribute to the CW Tobacco Control Area Network (TCAN) Regional 2018 Work plan
Length = 55 Promotion, Awareness, Education, Knowledge Translation	Length = 66 Deliver health promotion and education to vendors, TEOs and public
Length = 28 Monitoring and Surveillance	Length = 293 Collect and maintain up-to-date inspection and enforcement data using the Tobacco Inspection System. Maintain an inventory of active E- Cigarette vendors located in Hamilton; ensure semi-annual / annual TIS reporting requirements to MOHLTC and; semi-annual ID/Health Hazards report to BOH
Length = 10 Inspection	Length = 904 Enforce the ECA at all e-cigarette retail locations. One annual inspection per retailer for compliance with ECA regulation re: youth access Conduct inspections annually on all e-cigarette retailers to assess compliance with youth access restrictions under the ECA. Youth Test Shoppers program; youth test shoppers that are less than 19 years of age to attempt a purchase of e-cigarette Inspect for compliance with the signage provisions applicable under the ECA. One annual inspection per retailer for compliance with ECA regulation re: youth access; all premises subject to legislation and regulation are inspected as required for ECA signage (age restriction) requirements Progressive enforcement activities include inspections and re-inspections, education visits, and inquiries into
Length = 26	Length = 136

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.1 Substance Use

Investigation and Response	Act on all e-cigarette-related complaints to determine the appropriate enforcement activity Respond to complaints re ECA Youth access
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Program: **Harm Reduction Program Enhancement**

Description

Length = 939

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The Harm Reduction Program Enhancement program focuses on the local opioid response, naloxone distribution and training as well as opioid overdose early warning and surveillance. Hamilton Public Health Services is working with a range of community partners across the health sector to ensure the local opioid response is coordinated and that partners are engaged in the development of a community Drug Strategy in Hamilton. Through the Harm Reduction Program Enhancement, Hamilton Public Health Services will increase access to naloxone in the community with distribution of naloxone to eligible community organizations. Hamilton Public Health Services continues to ensure ongoing monitoring and surveillance of opioid activity in the community through the Hamilton Opioid Information System. Regular reporting on data is provided to internal and external stakeholders to take action as needed, as well as made available to the public.

Objective

Length = 429

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Development, implementation, and evaluation of a community Drug Strategy in Hamilton
Increased naloxone access to naloxone in the community by building capacity through community partners to distribute naloxone to clients
Development of an inventory control system for tracking harm reduction supplies including needles, naloxone, safer inhalation kits
Maintenance of surveillance systems to monitor opioid use in the community

Indicators of Success

Length = 57

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

% of naloxone kits distributed that were used by clients

Program Budget Summary		Funding Sources Summary	
Object of Expenditure	Amount	Funding Source	Amount
Salaries and Wages	195,660	Harm Reduction Program Enhancement (100%)	250,000
Benefits	51,060		
Travel	-		
Professional Services	-		
Expenditure Recoveries & Offset Revenues	-		
Other Program Expenditures	3,280		
Total	\$250,000	Total	\$250,000

Budget Summary is populated with budget data provided in the budget worksheets

Funding sources are populated with budget data provided in the budget worksheets

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.1 Substance Use

Program: Harm Reduction Program Enhancement

Public Health Intervention	Description
<p>Input a title for each public health intervention under this Program (maximum of 100 characters)</p> <p style="text-align: right;"><i>Length = 86</i></p> <p>Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)</p> <p style="text-align: right;"><i>Length = 54</i></p>	<p>Briefly describe the public health intervention (maximum of 1,800 characters)</p> <p style="text-align: right;"><i>Length = 553</i></p> <p>Develop a community Drug Strategy for Hamilton focused on the four pillars of prevention, treatment, harm reduction and enforcement in collaboration with community stakeholder group which includes representation from organizations across the health sector Engage with community partners and public to inform the community Drug Strategy Create process and supporting policies for distribution of naloxone to community partners Develop an inventory control system for tracking harm reduction supplies including needles, naloxone, safer inhalation kits</p> <p style="text-align: right;"><i>Length = 138</i></p>
<p>Promotion, Awareness, Education, Knowledge Translation</p> <p style="text-align: right;"><i>Length = 52</i></p>	<p>Train community organization staff on naloxone administration Train community staff on naloxone eligibility Promote naloxone availability</p> <p style="text-align: right;"><i>Length = 128</i></p>
<p>Screening, Assessment, Intervention, Case Management</p> <p style="text-align: right;"><i>Length = 27</i></p>	<p>Expand access to naloxone in the community through implementation of process for distribution of naloxone to community partners</p> <p style="text-align: right;"><i>Length = 191</i></p>
<p>Monitoring and Surveillance</p>	<p>Maintain Hamilton Opioid Information System data Report regularly trends in Hamilton Opioid Information System data to both internal public health work group and community stakeholder group</p>

Program:

Description *Length = 733*

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

The Needle Exchange Program Initiative supports the purchase of needles and syringes, and associated disposal costs, for Hamilton Public Health Services' Needle Syringe Programs. Hamilton Public Health Services offers needle syringe programs where individuals can pick up or have delivered free needles or related harm reduction supplies. Sharps containers are also offered and safe disposal of needles are facilitated by the needle syringe program. Hamilton Public Health Services offers needle syringe services in a variety of locations across the community including street health clinics, sexual health clinics and through the Van Needle Syringe Program. Needle syringe services are offered seven days a week including evenings.

Objective *Length = 175*

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

Provision of safe harm reduction supplies in the community to prevent blood borne infections such as HIV and hepatitis infections
Improved access to harm reduction supplies

Indicators of Success *Length = 73*

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

% of needles distributed that are returned to the harm reduction program

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	-

Funding Sources Summary	
Funding Source	Amount
Needle Exchange Program Initiative (100%)	217,500

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.1 Substance Use

Benefits	-		
Travel	-		
Professional Services	-		
Expenditure Recoveries & Offset Revenues	-		
Other Program Expenditures	217,500		
Total	\$217,500	Total	\$217,500

Budget Summary is populated with budget data provided in the budget worksheets

Funding sources are populated with budget data provided in the budget worksheets

Program: Needle Exchange Program Initiative

Public Health Intervention	Description
Input a title for each public health intervention under this Program (maximum of 100 characters)	Briefly describe the public health intervention (maximum of 1,800 characters)
Length = 54 Promotion, Awareness, Education, Knowledge Translation	Length = 152 Promote needle syringe programs in community including those offered by the Hamilton AIDS Network, Wesley Urban Ministries and other community partners
Length = 52 Screening, Assessment, Intervention, Case Management	Length = 64 Distribute harm reduction supplies through needle syringe sites

Board of Health for the City of Hamilton, Public Health Services

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.2 Injury Prevention

Length = 1596

A. Community Need and Priorities

Please provide a short summary of the following (maximum characters of 1,800):

- a) The key data and information which demonstrates your communities' needs for public health interventions to address injury prevention; and,
b) Your board of health's determination of the local priorities for a program of public health interventions that addresses injury prevention with consideration to the required list of topics identified in the Standards.

(a) Local surveillance shows top five reasons for emergency department visits are various injuries to the body across the life span. **Physical injuries** predominate in the age groups 5-9, 10-14, 15-19 and 20-24 years. Injuries to the head predominate in the oldest age group of 85+ years. Mortality data for the City of Hamilton identifies falls as the fifth leading cause of death amongst the 85+ year age group. Transport related injuries present in the top three causes of injury and death for the younger age groups 15-19, 20-24 and 25-34. **Concussions:** Head injuries are among the top five causes leading to unscheduled emergency department visits across most age groups. The crude emergency department visit rate for concussions (with an associated external cause) was 202.2 per 100,000 population in the City of Hamilton. **Falls:** Falls was found to be the number one external cause for hospital admittance for all age groups except 15-19 year olds where it is number three and 20-24 year olds where it is number two. **Road and Off-Road:** Motor vehicle collisions (traffic and non-traffic) account for a crude rate of 660.5 per 100,000 population. ED visits classified as land transport injuries related to motor vehicle collisions are most prominent in older youth, young adults, followed by adults aged 25-44 years. **(b) Local Priorities:** Intervening with programs, services and policies aimed at reducing the burden of injuries resulting in and related to concussions, falls, road safety, and off-road safety amongst key age groups (youth, young adults and older adults) and males.

Length = 619

B. Key Partners/Stakeholders

Please provide a high level summary of the key internal and external partners you will collaborate with to deliver on this Standard. Please also describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under this Standard (maximum characters of 1,800).

Falls Prevention in the Built Environment Codes Advocacy and Research Coalition
Canada Codes Centre-National Research Council of Canada and resulting committees and task groups
Hamilton Age Friendly Home Adaptations Task Group
Hamilton Council on Aging
Seniors Advisory Council
Brain Smart Hamilton (and workgroups)
Hamilton Helmet Initiative
Primary Care Providers in the City of Hamilton
Family Health Teams- Hamilton and McMaster
Community Health Centers- North Hamilton and Urban Core
Hamilton Academy of Medicine
Hamilton Pharmacists Partnership for Falls Prevention
Hamilton Health Sciences
McMaster University

C. Programs and Services

Program:

Description

Length = 739

Describe the program including the population(s) to be served. If a priority population has been identified for this program, please provide data and informational details that informed your decision, unless previously reported (maximum of 1,800 characters).

Based on the needs of the Hamilton community, the injury prevention program focuses on providing services focused on fall-related injuries, transportation-related injuries and concussions. Work to reduce the number of preventable injuries is focused on increasing awareness and providing education to the community and target populations such as youth in amateur sports or low-income populations. Significant effort is put into collaboration with community partners across the health and social sector to support increased awareness of injuries and prevention education. In addition, the injury prevention program works to influence policy at all levels to create safer environments for all individuals to prevent injuries from occurring.

Objective

Length = 176

Describe the expected objectives of the program and what you expect to achieve, within specific timelines (maximum of 1,800 characters).

100% compliance with the Substance Use and Injury Prevention Standard, including all required protocols.
Reduction of the number of preventable injuries in city of Hamilton

Indicators of Success

Length = 135

List the indicators or data elements you will be using to monitor your program and understand its impact. Also use this section to identify if a formal evaluation will be conducted at this time for this program. (maximum of 1,800 characters).

2018 Public Health Program Plans and Budget Summaries

3.13 Substance Use and Injury Prevention

3.13.2 Injury Prevention

Results-Based Accountability (RBA) indicators/measures are currently in development and will be included in the ASP&B 2019 submission

Program Budget Summary	
Object of Expenditure	Amount
Salaries and Wages	290,680
Benefits	77,410
Travel	4,020
Professional Services	4,890
Expenditure Recoveries & Offset Revenues	(30)
Other Program Expenditures	83,830
Total	\$460,800

Budget Summary is populated with budget data provided in the budget worksheets

Funding Sources Summary	
Funding Source	Amount
Mandatory Programs (Cost-Shared)	460,800
Total	\$460,800

Funding sources are populated with budget data provided in the budget worksheets

Program: Injury Prevention

Public Health Intervention

Input a title for each public health intervention under this Program (maximum of 100 characters)

Length = 86

Strategic and System Initiatives (Policy, CQI, Collaboration, Partnerships, Advocacy)

Length = 55

Promotion, Awareness, Education, Knowledge Translation

Length = 52

Screening, Assessment, Intervention, Case Management

Description

Briefly describe the public health intervention (maximum of 1,800 characters)

Length = 1031

Advocate for improved injury prevention codes for Canadian homes to reduce burden of injury including stair falls, pediatric window falls, radon gas
 Inform policy development of Canadian National Building Codes
 Support international advocacy with other public health professionals and code experts
 Collaborate with Hamilton Council on Aging and Seniors Advisory Council to support and implement falls prevention aspects of Hamilton's Plan for an Age Friendly City.
 Support the work of the Community Coalition for Falls Prevention in the over 65 population.
 Support a "complete streets" approach to enhance safety for all road users through advocacy for infrastructure changes such as bike lanes, proper street lighting, and paved surfaces.
 Policy work in partnership with local schools and amateur sports organizations
 Support the City of Hamilton's implementation of Vision Zero by achieving zero fatalities or serious injuries on roadways 2025, a global movement transforming the way we use, interact and travel on our roads.

Length = 736

Knowledge translation on the importance of carrying out Medscheck with over 65 population for Hamilton Pharmacists Partnership and encourage the addition of key screening questions to their assessment as well as an information package to share with clients (Active for Life)
 Provide education and awareness around home adaptations for aging in place; falls prevention
 Conduct drinking and driving campaign Impaired is Impaired in partnership with Hamilton Police Services
 Increase concussion awareness within various stakeholders and community partners
 Promote helmet use in all ages
 Deliver road safety education for drivers, cyclists, and safe pedestrian measures.
 Investigate ways to increase awareness of injuries due to violence

Length = 261

Collaborate with various community stakeholders to distribute subsidized helmets
 Provide tools for falls prevention screening and referral for practitioners
 Develop and support of consistent implementation plan for Return to Learn and Return to Play policies

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.1 Staff Allocation to Standards

Position Code	Position Titles	Total Public Health Unit		Emergency Management		Other Foundational Standards		Chronic Disease Prevention and Well-Being		Food Safety		Healthy Environments		Healthy Growth and Development		Immunization			
		F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$		
1	Medical Officer of Health	1.00	254,790			0.10	20,860	0.10	20,860	-	-	-	-	0.20	41,720	-	-		
2	Associate Medical Officer of Health	2.00	417,220	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
3	Chief Nursing Officer	1.00	97,180	-	-	1.00	97,180	-	-	-	-	-	-	-	-	-	-		
4	Program Director	2.90	414,090	0.00	-	0.15	21,400	0.60	84,700	0.40	59,040	0.25	36,730	0.70	97,760	-	-		
5	Program Manager/Supervisor	27.00	2,948,090	0.00	-	0.17	19,280	2.34	230,000	3.22	357,750	1.00	113,420	0.90	102,080	3.00	340,250		
6	Project Officer	8.25	766,470	(0.00)	-	-	-	1.50	140,230	1.75	153,150	0.25	25,000	0.75	78,880	0.25	21,880		
7	Public Health Nurse	89.66	7,945,270	-	-	-	-	3.00	257,380	9.00	743,090	-	-	25.66	2,083,130	-	-		
8	Registered Nurse	10.00	728,410	-	-	-	-	-	-	-	-	-	-	-	-	2.00	144,950		
9	Registered Practical Nurse	1.00	64,440	-	-	-	-	-	-	-	-	-	-	-	-	0.50	32,220		
10	Nurse Practitioner	1.10	121,290	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
11	Public Health Inspector	42.66	3,561,940	(0.00)	-	0.25	21,150	-	-	12.81	1,052,460	6.55	544,930	-	-	-	-		
12	Dentist	1.00	132,350	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
13	Dental Hygienist	7.70	499,140	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
14	Dental Assistant	1.20	70,250	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
15	Health Promoter	18.00	1,413,380	-	-	-	-	-	-	12.40	978,590	0.25	20,370	0.72	52,230	-	-		
16	Nutritionist	3.00	278,250	-	-	-	-	-	-	2.00	185,500	-	-	1.00	92,750	-	-		
17	Dietitian	6.00	473,730	-	-	-	-	-	-	3.00	236,600	-	-	3.00	237,130	-	-		
18	ECA Inspector	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
19	Epidemiologist	4.00	346,920	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
20	Program Coordinator	3.00	280,970	-	-	-	-	1.75	163,880	-	-	-	-	-	-	-	-		
21	Program Support Staff	52.60	3,031,840	(0.00)	-	0.30	17,370	6.65	448,780	3.82	206,890	1.60	85,240	0.96	52,050	2.86	159,640		
22	SFOA Inspector	3.00	193,320	0.00	-	-	-	-	-	2.90	186,980	-	-	-	-	-	-		
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
27	Other SFO staff	0.58	15,380	-	-	-	-	-	-	0.58	15,380	-	-	-	-	-	-		
28	Student	2.03	84,820	(0.00)	-	-	-	-	-	-	-	0.11	6,070	0.10	5,520	-	-		
29	Other Program Staff	4.20	306,470	0.00	-	-	-	0.33	28,730	1.63	94,020	0.10	7,670	0.43	36,400	0.53	44,080		
Total Program Staff:		292.88	23,748,000	(0.00)	-	0.97	100,060	17.27	1,471,520	40.70	3,216,970	16.27	1,363,490	10.19	876,760	37.92	3,170,570	8.72	555,260
30	Director/Business Administrator	0.60	75,630	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
31	Manager/Supervisor	0.50	50,790	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
32	Secretarial/Admin Staff	2.20	162,550	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
33	Financial Staff	6.00	414,560	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
34	I & IT Staff	3.00	270,750	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
35	Communications Manager/Media Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
36	Volunteer Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
37	Human Resources Staff/Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
38	Maintenance/Caretaker/Custodian/Security	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
39	Other Administrative Staff	0.85	41,530	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Total Administrative Staff:		13.15	1,005,810	-	-	0.97	100,060	17.27	1,471,520	40.70	3,216,970	16.27	1,363,490	10.19	876,760	37.92	3,170,570	8.72	555,260
Total Staffing:		306.03	24,753,810	-	-	0.97	100,060	17.27	1,471,520	40.70	3,216,970	16.27	1,363,490	10.19	876,760	37.92	3,170,570	8.72	555,260

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.1 Staff Allocation to Standards

Position Code	Position Titles	Infectious and Communicable Diseases Prevention and Control		Safe Water		School Health						Substance Use and Injury Prevention					
		F.T.E #	\$	F.T.E #	\$	Oral Health		Vision		Immunization		Other		Substance Use		Injury Prevention	
						F.T.E #	\$	F.T.E #	\$	F.T.E #	\$	F.T.E #	\$	F.T.E #	\$	F.T.E #	\$
1	Medical Officer of Health	0.90	187,760	-	-	0.10	20,860	0.20	41,720	0.10	41,720	0.10	20,860	0.10	20,860	-	
2	Associate Medical Officer of Health	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
4	Program Director	0.30	42,900	0.15	21,960	-	-	-	-	0.20	27,930	-	-	-	-	-	
5	Program Manager/Supervisor	6.61	684,630	1.23	135,960	1.50	158,230	-	-	2.00	197,190	2.66	277,610	1.36	136,990	0.21	
6	Project Officer	1.40	126,830	0.35	34,150	-	-	-	-	0.30	27,850	0.20	17,500	1.20	113,750	0.10	
7	Public Health Nurse	26.15	2,142,490	-	-	-	-	-	-	2.00	150,640	21.00	1,755,280	0.35	24,480	2.50	
8	Registered Nurse	-	-	-	-	-	-	-	-	8.00	593,460	-	-	-	-	-	
9	Registered Practical Nurse	-	-	-	-	-	-	-	-	0.50	32,220	-	-	-	-	-	
10	Nurse Practitioner	1.10	121,290	-	-	-	-	-	-	-	-	-	-	-	-	-	
11	Public Health Inspector	16.45	1,364,400	6.60	549,000	-	-	-	-	-	-	-	-	-	-	-	
12	Dentist	-	-	-	-	1.00	132,350	-	-	-	-	-	-	-	-	-	
13	Dental Hygienist	-	-	-	-	7.70	499,140	-	-	-	-	-	-	-	-	-	
14	Dental Assistant	-	-	-	-	1.20	70,250	-	-	-	-	-	-	-	-	-	
15	Health Promoter	0.85	67,690	0.25	20,370	0.28	20,310	-	-	-	-	1.20	94,640	1.80	138,810	-	
16	Nutritionist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
17	Dietitian	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
18	ECA Inspector	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
19	Epidemiologist	4.00	346,920	-	-	-	-	-	-	-	-	-	-	-	-	-	
20	Program Coordinator	1.00	95,470	-	-	0.25	21,820	-	-	-	-	-	-	-	-	-	
21	Program Support Staff	15.52	922,770	1.10	59,190	4.95	267,950	-	-	4.20	229,360	3.05	167,940	1.76	96,300	0.61	
22	SFOA Inspector	-	-	-	-	-	-	-	-	-	-	-	-	0.10	6,360	-	
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
27	Other SFO staff	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
28	Student	1.71	67,160	0.11	6,070	-	-	-	-	-	-	-	-	-	-	-	
29	Other Program Staff	0.41	31,570	-	-	-	-	-	-	0.10	7,670	-	-	0.67	58,330	-	
Total Program Staff:		76.40	6,201,780	9.79	826,600	16.88	1,170,950	0.10	20,860	17.30	1,270,110	28.51	2,862,620	7.94	595,880	3.52	290,980
30	Director/Business Administrator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
31	Manager/Supervisor	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
32	Secretariat/Admin Staff	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
33	Financial Staff	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
34	I & IT Staff	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
35	Communications Manager/Media Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
36	Volunteer Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
37	Human Resources Staff/Coordinator	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
38	Maintenance/Caretaker/Custodian/Security	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
39	Other Administrative Staff	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Administrative Staff:		76.40	6,201,780	9.79	826,600	16.88	1,170,950	0.10	20,860	17.30	1,270,110	28.51	2,862,620	7.94	595,880	3.52	290,980
Total Staffing:		76.40	6,201,780	9.79	826,600	16.88	1,170,950	0.10	20,860	17.30	1,270,110	28.51	2,862,620	7.94	595,880	3.52	290,980

Program Staff

Administrative Staff

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	Chronic Disease Prevention and Well-Being			Tobacco Control, Prevention and Cessation		Cancer Prevention		Chronic Disease		
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
2	Associate Medical Officer of Health	-	-	-	-	-	-	-	-	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-	-
4	Program Director	0.40	59,040	-	-	0.20	29,740	0.05	7,440	0.05	7,440
5	Program Manager/Supervisor	3.22	357,750	-	-	0.13	9,650	0.58	65,780	0.58	65,780
6	Project Officer	1.75	153,150	-	-	-	-	0.25	21,880	0.25	21,880
7	Public Health Nurse	9.00	743,090	-	-	2.00	168,640	2.40	196,950	2.30	188,750
8	Registered Nurse	-	-	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-	-	-
11	Public Health Inspector	-	-	-	-	-	-	-	-	-	-
12	Dentist	-	-	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-	-	-
15	Health Promoter	12.40	978,590	-	-	3.00	236,600	1.00	78,870	3.50	277,490
16	Nutritionist	2.00	185,500	-	-	-	-	1.25	115,940	-	-
17	Dietitian	3.00	236,600	-	-	-	-	0.50	39,440	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-	-	-
21	Program Support Staff	3.82	206,890	-	-	0.99	53,540	0.10	6,160	0.22	12,310
22	SFOA Inspector	2.90	186,960	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-	-
27	Other SFO staff	0.58	15,380	-	-	-	-	-	-	-	-
28	Student	-	-	-	-	-	-	-	-	-	-
29	Other Program Staff	1.63	94,020	-	-	0.10	7,670	1.20	57,620	-	-
Total Program Staff:		40.70	3,216,970	-	-	6.42	505,840	7.33	590,080	6.90	573,650

Program Staff

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City of Hamilton, Public Health Services

at Allocation and Summaries

Allocation to Programs

Use Prevention and Well-Being

Healthy Food Systems		Mental Health Promotion		Substance Use Prevention		Harm Reduction		Smoke Free Ontario - Prosecution		Smoke Free Ontario - Protection and Enforcement		Smoke Free Ontario - Tobacco Control Area Network - Coordination		Total	
F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
0.05	7,440	-	-	-	6,980	-	-	-	-	-	-	-	-	0.40	59,040
0.59	66,910	0.34	36,210	-	-	-	-	-	-	0.29	33,110	-	-	3.22	357,750
0.25	21,880	-	-	-	-	-	-	-	-	-	-	1.00	87,510	1.75	153,150
2.30	188,750	-	-	-	-	-	-	-	-	-	-	-	-	9.00	743,090
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
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-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3.00	235,950	0.50	39,270	0.20	15,770	0.20	15,770	-	-	-	-	1.00	78,870	12.40	976,590
0.75	69,560	-	-	-	-	-	-	-	-	-	-	-	-	2.00	185,500
2.50	197,160	-	-	-	-	-	-	-	-	-	-	-	-	3.00	236,600
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
0.13	7,680	0.09	4,640	0.63	34,040	0.16	9,380	-	-	1.00	54,210	0.50	24,930	3.82	206,890
-	-	-	-	-	-	-	-	-	-	2.90	186,960	-	-	2.90	186,960
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
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-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	0.58	15,380	-	-	0.58	15,380
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	0.33	28,730	-	-	-	-	-	-	-	-	-	-	-	-
9.57	795,330	1.26	108,850	0.83	49,810	0.41	32,130	-	-	4.77	289,660	2.50	191,310	40.70	3,216,970

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	Chronic Disease Prevention and Well-Being				Smoke Free Ontario - Tobacco Control Area Network - Prevention		Smoke Free Ontario - Tobacco Control Coordination		Chronic Disease Pre	
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
2	Associate Medical Officer of Health	-	-	-	-	-	-	-	-	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-	-
4	Program Director	0.40	59,040	-	-	-	-	-	-	-	-
5	Program Manager/Supervisor	3.22	357,750	-	-	-	-	0.71	80,310	-	-
6	Project Officer	1.75	153,150	-	-	-	-	-	-	-	-
7	Public Health Nurse	9.00	743,090	-	-	-	-	-	-	-	-
8	Registered Nurse	-	-	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-	-	-
11	Public Health Inspector	-	-	-	-	-	-	-	-	-	-
12	Dentist	-	-	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-	-	-
15	Health Promoter	12.40	978,590	-	-	-	-	-	-	-	-
16	Nutritionist	2.00	185,500	-	-	-	-	-	-	-	-
17	Dietitian	3.00	236,600	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-	-	-
21	Program Support Staff	3.82	206,890	-	-	-	-	-	-	-	-
22	SFOA Inspector	2.90	186,960	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-	-
27	Other SFO staff	0.58	15,380	-	-	-	-	-	-	-	-
28	Student	-	-	-	-	-	-	-	-	-	-
29	Other Program Staff	1.63	94,020	-	-	-	-	-	-	-	-
Total Program Staff:		40.70	3,216,970	-	-	-	-	0.71	80,310	-	-

Program Staff

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	Food Safety			Food Safety			Enhanced Food Safety Initiative			
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
2	Associate Medical Officer of Health	-	-	-	-	-	-	-	-	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-	-
4	Program Director	0.15	21,860	-	-	-	21,860	-	-	-	-
5	Program Manager/Supervisor	1.00	113,420	-	-	-	113,420	-	-	-	-
6	Project Officer	0.25	25,400	-	-	-	25,400	-	-	-	-
7	Public Health Nurse	-	-	-	-	-	-	-	-	-	-
8	Registered Nurse	-	-	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-	-	-
11	Public Health Inspector	12.81	1,082,460	-	-	-	1,082,460	-	-	-	-
12	Dentist	-	-	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-	-	-
15	Health Promoter	0.25	20,370	-	-	-	20,370	-	-	-	-
16	Nutritionist	-	-	-	-	-	-	-	-	-	-
17	Dietitian	-	-	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-	-	-
21	Program Support Staff	1.60	86,240	-	-	-	86,240	-	-	-	-
22	SFOA Inspector	-	-	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-	-	-
28	Student	0.11	6,070	-	-	-	6,070	-	-	-	-
29	Other Program Staff	0.10	7,670	-	-	-	7,670	-	-	-	-
Total Program Staff:		16.27	1,363,490	-	-	-	1,363,490	16.27	-	-	-

Program Staff

Board of Health for the C
Part 4 - Budget
4.2 Staff

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Position Code	Position Titles	Healthy Environments			Health Hazards		Air Quality and Climate Change		F.T.E. #	\$
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #		
2	Associate Medical Officer of Health	-	-	-	-	-	-	-	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-
4	Program Director	0.25	36,730	-	-	0.15	21,860	0.10	14,870	-
5	Program Manager/Supervisor	0.90	102,060	-	-	0.60	66,050	0.30	34,030	-
6	Project Officer	0.75	78,680	-	-	0.75	78,680	-	-	-
7	Public Health Nurse	-	-	-	-	-	-	-	-	-
8	Registered Nurse	-	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-	-
11	Public Health Inspector	6.55	544,930	-	-	6.55	544,930	-	-	-
12	Dentist	-	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-	-
15	Health Promoter	0.25	20,370	-	-	0.25	20,370	-	-	-
16	Nutritionist	-	-	-	-	-	-	-	-	-
17	Dietitian	-	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-	-
21	Program Support Staff	0.96	52,050	-	-	0.95	51,550	0.01	500	-
22	SFOA Inspector	-	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-	-
28	Student	0.10	5,520	-	-	0.10	5,520	-	-	-
29	Other Program Staff	0.43	36,400	-	-	0.10	7,670	0.33	28,730	-
Total Program Staff:		10.19	876,760	-	-	9.45	798,630	0.74	78,130	-

Program Staff

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	Healthy Growth and Development			Child Health		Reproductive Health		Healthy	
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #		\$
2	Associate Medical Officer of Health	0.20	41,720	-	-	0.10	20,860	0.10	20,860	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-
4	Program Director	0.70	97,760	-	-	0.50	69,830	0.20	27,930	-
5	Program Manager/Supervisor	3.00	340,250	-	-	2.00	226,830	1.00	113,420	-
6	Project Officer	0.25	21,880	-	-	0.25	21,880	-	-	-
7	Public Health Nurse	25.66	2,083,130	-	-	17.90	1,470,760	7.76	612,370	-
8	Registered Nurse	-	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-	-
11	Public Health Inspector	-	-	-	-	-	-	-	-	-
12	Dentist	-	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-	-
15	Health Promoter	0.72	52,230	-	-	0.50	36,270	0.22	15,960	-
16	Nutritionist	1.00	92,750	-	-	1.00	92,750	-	-	-
17	Dietitian	3.00	237,130	-	-	3.00	237,130	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-	-
21	Program Support Staff	2.86	159,640	-	-	1.65	92,600	1.21	67,040	-
22	SFOA Inspector	-	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-	-
28	Student	-	-	-	-	-	-	-	-	-
29	Other Program Staff	0.53	44,080	-	-	0.43	36,410	0.10	7,670	-
Total Program Staff:		37.92	3,170,570	-	-	27.33	2,305,320	10.59	865,250	-

Program Staff

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	Immunization			Vaccine Inventory Management			-			
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
2	Associate Medical Officer of Health	-	-	-	-	-	-	-	-	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-	-
4	Program Director	-	-	-	-	-	-	-	-	-	-
5	Program Manager/Supervisor	0.80	76,370	-	-	0.80	76,370	-	-	-	-
6	Project Officer	0.20	18,300	-	-	0.20	18,300	-	-	-	-
7	Public Health Nurse	-	-	-	-	-	-	-	-	-	-
8	Registered Nurse	2.00	144,950	-	-	2.00	144,950	-	-	-	-
9	Registered Practical Nurse	0.50	32,220	-	-	0.50	32,220	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-	-	-
11	Public Health Inspector	-	-	-	-	-	-	-	-	-	-
12	Dentist	-	-	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-	-	-
15	Health Promoter	-	-	-	-	-	-	-	-	-	-
16	Nutritionist	-	-	-	-	-	-	-	-	-	-
17	Dietitian	-	-	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-	-	-
21	Program Support Staff	5.22	283,420	-	-	5.22	283,420	-	-	-	-
22	SFOA Inspector	-	-	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-	-	-
28	Student	-	-	-	-	-	-	-	-	-	-
29	Other Program Staff	-	-	-	-	-	-	-	-	-	-
Total Program Staff:		8.72	555,260	-	-	8.72	555,260	-	-	-	-

Program Staff

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	Infectious and Communicable Diseases Prevention and Control			Vector Borne Diseases		Infectious Disease Program		Mental Health Promotion		
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
2	Associate Medical Officer of Health	0.90	187,760	-	-	-	-	0.40	83,450	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-	-
4	Program Director	0.30	42,800	-	-	-	-	0.15	21,850	-	-
5	Program Manager/Supervisor	6.61	684,630	-	-	0.50	51,630	3.60	368,410	0.27	25,130
6	Project Officer	1.40	126,830	-	-	-	-	0.75	69,150	-	-
7	Public Health Nurse	26.15	2,142,490	-	-	-	-	12.65	1,041,340	-	-
8	Registered Nurse	-	-	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-	-	-
10	Nurse Practitioner	1.10	121,290	-	-	-	-	-	38,220	-	-
11	Public Health Inspector	16.45	1,364,400	-	-	4.90	410,500	11.55	953,900	-	-
12	Dentist	-	-	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-	-	-
15	Health Promoter	0.85	67,690	-	-	-	-	0.35	28,260	0.20	15,770
16	Nutritionist	-	-	-	-	-	-	-	-	-	-
17	Dietitian	-	-	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-	-	-
19	Epidemiologist	4.00	346,920	-	-	-	-	-	-	-	-
20	Program Coordinator	1.00	95,470	-	-	-	-	-	-	-	-
21	Program Support Staff	15.52	922,770	-	-	1.60	114,010	4.02	219,280	1.05	57,970
22	SFOA Inspector	-	-	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-	-	-
28	Student	1.71	67,160	-	-	1.60	61,090	0.11	6,070	-	-
29	Other Program Staff	0.41	31,570	-	-	-	-	0.21	16,230	-	-
Total Program Staff:		76.40	6,201,760	-	-	8.60	637,230	33.79	2,846,160	1.52	98,870

Program Staff

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	Safe Water			Safe Water			Enhanced Safe Water Initiative		Small Drinking Water Systems	
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
2	Associate Medical Officer of Health	-	-	-	-	-	-	-	-	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-	-
4	Program Director	0.15	21,860	-	-	0.15	21,860	-	-	-	-
5	Program Manager/Supervisor	1.23	135,960	-	-	1.23	135,960	-	-	-	-
6	Project Officer	0.35	34,150	-	-	0.35	34,150	-	-	-	-
7	Public Health Nurse	-	-	-	-	-	-	-	-	-	-
8	Registered Nurse	-	-	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-	-	-
11	Public Health Inspector	6.60	549,000	-	-	6.00	500,120	0.07	6,100	0.53	42,760
12	Dentist	-	-	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-	-	-
15	Health Promoter	0.25	20,370	-	-	0.25	20,370	-	-	-	-
16	Nutritionist	-	-	-	-	-	-	-	-	-	-
17	Dietitian	-	-	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-	-	-
21	Program Support Staff	1.10	59,190	-	-	1.10	59,190	-	-	-	-
22	SFOA Inspector	-	-	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-	-	-
28	Student	0.11	6,070	-	-	0.11	6,070	-	-	-	-
29	Other Program Staff	-	-	-	-	-	-	-	-	-	-
Total Program Staff:		9.79	826,600	-	-	9.19	777,720	0.07	6,100	0.53	42,760

Program Staff

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	School Health - Oral Health			Oral Health Assessment		Healthy Smiles Ontario		Schc
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #	
2	Associate Medical Officer of Health	-	-	-	-	-	-	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-
4	Program Director	-	-	-	-	-	-	-	-
5	Program Manager/Supervisor	1.50	158,230	-	-	-	158,230	1.50	-
6	Project Officer	-	-	-	-	-	-	-	-
7	Public Health Nurse	-	-	-	-	-	-	-	-
8	Registered Nurse	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-
11	Public Health Inspector	-	-	-	-	-	-	-	-
12	Dentist	1.00	132,350	-	-	-	132,350	1.00	-
13	Dental Hygienist	7.70	499,140	-	-	1.00	69,380	6.70	429,760
14	Dental Assistant	1.20	70,250	-	-	-	-	1.20	70,250
15	Health Promoter	0.28	20,310	-	-	-	-	0.28	20,310
16	Nutritionist	-	-	-	-	-	-	-	-
17	Dietitian	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-
20	Program Coordinator	0.25	21,820	-	-	-	-	0.25	21,820
21	Program Support Staff	4.95	267,950	-	-	2.00	108,420	2.95	159,530
22	SFOA Inspector	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-
28	Student	-	-	-	-	-	-	-	-
29	Other Program Staff	-	-	-	-	-	-	-	-
Total Program Staff:		16.88	1,170,050	-	-	3.00	177,800	13.88	992,250

Program Staff

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	School Health - Vision			Child Visual Health and Vision Screening			F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$						
2	Associate Medical Officer of Health	0.10	20,860	-	-	0.10	20,860	-	-	-	-	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-	-	-	-
4	Program Director	-	-	-	-	-	-	-	-	-	-	-	-
5	Program Manager/Supervisor	-	-	-	-	-	-	-	-	-	-	-	-
6	Project Officer	-	-	-	-	-	-	-	-	-	-	-	-
7	Public Health Nurse	-	-	-	-	-	-	-	-	-	-	-	-
8	Registered Nurse	-	-	-	-	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-	-	-	-	-
11	Public Health Inspector	-	-	-	-	-	-	-	-	-	-	-	-
12	Dentist	-	-	-	-	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-	-	-	-	-
15	Health Promoter	-	-	-	-	-	-	-	-	-	-	-	-
16	Nutritionist	-	-	-	-	-	-	-	-	-	-	-	-
17	Dietitian	-	-	-	-	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-	-	-	-	-
21	Program Support Staff	-	-	-	-	-	-	-	-	-	-	-	-
22	SFOA Inspector	-	-	-	-	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-	-	-	-	-
28	Student	-	-	-	-	-	-	-	-	-	-	-	-
29	Other Program Staff	-	-	-	-	-	-	-	-	-	-	-	-
Total Program Staff:		0.10	20,860	-	-	0.10	20,860	-	-	0.10	20,860	-	-

Program Staff

Sc

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	School Health - Immunization				Immunization of School Pupils		Schoc	
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #	\$
2	Associate Medical Officer of Health	0.20	41,720	-	-	0.20	41,720	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-
4	Program Director	-	-	-	-	-	-	-	-
5	Program Manager/Supervisor	2.00	197,190	-	-	2.00	197,190	-	-
6	Project Officer	0.30	27,850	-	-	0.30	27,850	-	-
7	Public Health Nurse	2.00	150,640	-	-	2.00	150,640	-	-
8	Registered Nurse	8.00	583,460	-	-	8.00	583,460	-	-
9	Registered Practical Nurse	0.50	32,220	-	-	0.50	32,220	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-
11	Public Health Inspector	-	-	-	-	-	-	-	-
12	Dentist	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-
15	Health Promoter	-	-	-	-	-	-	-	-
16	Nutritionist	-	-	-	-	-	-	-	-
17	Dietitian	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-
21	Program Support Staff	4.20	229,360	-	-	4.20	229,360	-	-
22	SFOA Inspector	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-
28	Student	-	-	-	-	-	-	-	-
29	Other Program Staff	0.10	7,670	-	-	0.10	7,670	-	-
Total Program Staff:		17.30	1,270,110	-	-	17.30	1,270,110	-	-

Program Staff

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	School Health - Other			School Health		Tobacco Control, Prevention and Cessation		Injury Prevention		
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
2	Associate Medical Officer of Health	0.20	41,720	-	-	0.10	20,860	-	-	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-	-
4	Program Director	0.20	27,990	-	-	0.20	27,990	-	-	-	-
5	Program Manager/Supervisor	2.66	277,610	-	-	1.40	154,000	0.21	18,330	0.10	11,000
6	Project Officer	0.20	17,500	-	-	0.20	17,500	-	-	-	-
7	Public Health Nurse	21.00	1,735,280	-	-	11.00	906,990	-	-	0.50	41,230
8	Registered Nurse	-	-	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-	-	-
11	Public Health Inspector	-	-	-	-	-	-	-	-	-	-
12	Dentist	-	-	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-	-	-
15	Health Promoter	1.20	94,640	-	-	-	-	-	-	-	-
16	Nutritionist	-	-	-	-	-	-	-	-	-	-
17	Dietitian	-	-	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-	-	-
21	Program Support Staff	3.05	167,940	-	-	1.20	66,530	0.60	32,530	0.75	41,030
22	SFOA Inspector	-	-	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-	-	-
28	Student	-	-	-	-	-	-	-	-	-	-
29	Other Program Staff	-	-	-	-	-	-	-	-	-	-
Total Program Staff:		28.51	2,362,620	-	-	14.10	1,193,810	0.81	50,860	1.35	93,260

Program Staff

City of Hamilton, Public Health Services

at Allocation and Summaries

Allocation to Programs

School Health - Other

Chronic Disease Prevention		Mental Health Promotion		Substance Use Prevention		Harm Reduction		Sexual Health						Total	
F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
-	-	0.10	20,860	-	-	-	-	-	-	-	-	-	-	0.20	41,720
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.20	27,930
0.21	18,330	0.64	64,950	0.10	11,000	-	-	-	-	-	-	2.66	277,610	0.20	17,500
-	-	-	-	-	-	-	-	-	-	-	-	-	-	21.00	1,735,280
2.00	164,910	4.00	331,690	1.50	125,550	-	-	2.00	164,910	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
0.15	7,570	0.25	13,930	-	-	0.10	6,350	-	-	-	-	-	-	3.05	167,940
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2.36	190,810	5.99	510,290	1.70	144,440	0.20	14,240	2.00	164,910	-	-	-	-	28.51	2,362,620

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	Substance Use			Tobacco Control, Prevention and Cessation		Harm Reduction		Substance Use Prevention		
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
2	Associate Medical Officer of Health	0.10	20,860	-	-	-	-	0.10	20,860	-	-
3	Chief Nursing Officer	-	-	-	-	-	-	-	-	-	-
4	Program Director	-	-	-	-	-	-	-	-	-	-
5	Program Manager/Supervisor	1.36	136,990	-	-	-	-	0.85	84,640	0.51	52,350
6	Project Officer	1.20	113,750	-	-	-	-	0.10	9,540	0.10	8,750
7	Public Health Nurse	0.35	24,480	-	-	-	-	-	-	-	-
8	Registered Nurse	-	-	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-	-	-
11	Public Health Inspector	-	-	-	-	-	-	-	-	-	-
12	Dentist	-	-	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-	-	-
15	Health Promoter	1.80	138,810	-	-	-	-	0.40	31,540	0.40	31,550
16	Nutritionist	-	-	-	-	-	-	-	-	-	-
17	Dietitian	-	-	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-	-	-
21	Program Support Staff	1.76	96,300	-	-	-	-	1.65	89,440	0.11	6,860
22	SFOA Inspector	0.10	6,360	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-	-	-
28	Student	-	-	-	-	-	-	-	-	-	-
29	Other Program Staff	0.67	58,330	-	-	-	-	-	-	0.67	58,330
Total Program Staff:		7.34	595,880	-	-	-	-	3.10	236,020	1.79	157,840

Program Staff

City of Hamilton, Public Health Services

at Allocation and Summaries

Allocation to Programs

Substance Use

Electronic Cigarettes Act - Protection and Enforcement		Harm Reduction Program Enhancement		Needle Exchange Program Initiative										Total	
F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$	F.T.E. #	\$
-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.10	20,860
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	1.00	95,460	-	-	-	-	-	-	-	-	-	-	1.36	136,990
-	-	0.35	24,480	-	-	-	-	-	-	-	-	-	-	1.20	113,750
-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.35	24,480
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	1.00	75,720	-	-	-	-	-	-	-	-	-	-	1.80	138,810
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
0.10	6,360	-	-	-	-	-	-	-	-	-	-	-	-	0.67	58,330
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
0.10	6,360	2.35	195,660	-	-	-	-	-	-	-	-	-	-	7.34	595,880

Board of Health for the C
Part 4 - Budget
4.2 Staff

Position Code	Position Titles	Injury Prevention		Injury Prevention		Injury Prevention		Injury Prevention	
		F.T.E. #	\$	Unalloc. FTE #	Unalloc. \$	F.T.E. #	\$	F.T.E. #	\$
2	Associate Medical Officer of Health	0.10	20,860	-	-	0.10	20,860	0.10	20,860
3	Chief Nursing Officer	-	-	-	-	-	-	-	-
4	Program Director	-	-	-	-	-	-	-	-
5	Program Manager/Supervisor	0.21	18,330	-	-	0.21	18,330	0.21	18,330
6	Project Officer	0.10	8,750	-	-	0.10	8,750	0.10	8,750
7	Public Health Nurse	2.50	208,780	-	-	2.50	208,780	2.50	208,780
8	Registered Nurse	-	-	-	-	-	-	-	-
9	Registered Practical Nurse	-	-	-	-	-	-	-	-
10	Nurse Practitioner	-	-	-	-	-	-	-	-
11	Public Health Inspector	-	-	-	-	-	-	-	-
12	Dentist	-	-	-	-	-	-	-	-
13	Dental Hygienist	-	-	-	-	-	-	-	-
14	Dental Assistant	-	-	-	-	-	-	-	-
15	Health Promoter	-	-	-	-	-	-	-	-
16	Nutritionist	-	-	-	-	-	-	-	-
17	Dietitian	-	-	-	-	-	-	-	-
18	ECA Inspector	-	-	-	-	-	-	-	-
19	Epidemiologist	-	-	-	-	-	-	-	-
20	Program Coordinator	-	-	-	-	-	-	-	-
21	Program Support Staff	0.61	33,960	-	-	0.61	33,960	0.61	33,960
22	SFOA Inspector	-	-	-	-	-	-	-	-
23	Tobacco Control Coordinator	-	-	-	-	-	-	-	-
24	TCAN Coordinator	-	-	-	-	-	-	-	-
25	Youth Development Specialist	-	-	-	-	-	-	-	-
26	Youth Engagement Coordinator	-	-	-	-	-	-	-	-
27	Other SFO staff	-	-	-	-	-	-	-	-
28	Student	-	-	-	-	-	-	-	-
29	Other Program Staff	-	-	-	-	-	-	-	-
Total Program Staff:		3.52	290,680	-	-	3.52	290,680	3.52	290,680

Program Staff

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Direct Program Costs

Expenditures	Emergency Management	Other Foundational Standards	Foundational Standards
Salaries and Wages	100,060	1,471,520	1,571,580
Benefits	25,450	385,720	411,170
Travel	730	310	1,040
Professional Services	4,280	6,040	10,320
Expenditure Recoveries & Offset Revenues	(6,590)	(140)	(6,730)
Other Program Expenditures	28,620	370,900	399,520
Total Expenditures:	152,550	2,234,350	2,386,900

Funding Sources	Emergency Management	Other Foundational Standards	Foundational Standards
Mandatory Programs (Cost-Shared)	152,550	1,932,350	2,084,900
Chief Nursing Officer Initiative (100%)		121,500	121,500
Social Determinants of Health Nurses Initiative (100%)		180,500	180,500
			-
			-
			-
Total Funding Sources	152,550	2,234,350	2,386,900
Under / (Over) Allocated			

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Chronic Disease Prevention and Well-Being

Expenditures	Tobacco Control, Prevention and Cessation	Cancer Prevention	Built Environment	Healthy Food Systems	Mental Health Promotion	Substance Use Prevention	Harm Reduction	Smoke Free Ontario - Prosecution	Smoke Free Ontario - Protection and Enforcement	Smoke Free Ontario - Tobacco Control Area Network - Coordination	Sub-Total Chronic Disease Prevention and Well-Being
Salaries and Wages	505,840	590,080	573,850	795,330	108,850	49,810	32,130	-	289,660	191,310	3,136,660
Benefits	133,800	147,090	147,170	207,400	28,360	14,440	8,720	-	77,090	49,680	813,750
Travel	2,340	260	280	360	40	10	10	-	-	3,380	6,700
Professional Services	8,350	4,350	4,250	4,320	50	70	20	10,000	590	-	32,000
Expenditure Recoveries & Offset Revenues	(90,910)	(70)	(70)	(90)	(10)	(10)	-	-	-	-	(91,160)
Other Program Expenditures	133,640	159,100	146,010	201,760	26,310	22,810	13,700	-	35,730	64,200	803,260
Total Expenditures:	693,060	900,810	871,290	1,209,100	163,800	87,130	54,580	10,000	403,070	308,570	4,701,210
Funding Sources											Total
Mandatory Programs (Cost-Shared)	693,060	900,810	871,290	1,209,100	163,800	87,130	54,580				3,979,570
Smoke-Free Ontario Strategy: Prosecution (100%)								10,000			10,000
Smoke-Free Ontario Strategy: Protection and Enforcement (100%)									403,070		403,070
Smoke-Free Ontario Strategy: Tobacco Control Area Network - Coordinate										308,570	308,570
Total Funding Sources	693,060	900,810	871,290	1,209,100	163,800	87,130	54,580	10,000	403,070	308,570	4,701,210
Under / (Over) Allocated											

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Chronic Disease Prevention and Well-Being (Continued)

Expenditures	Smoke Free Ontario - Tobacco Control Area Network - Prevention	Smoke Free Ontario - Tobacco Control Coordination	Smoke Free Ontario - Youth Tobacco Use Prevention	Chronic Disease Prevention and Well-Being (Continued)	Sub-Total Chronic Disease Prevention and Well-Being
Salaries and Wages	-	80,310	-	-	80,310
Benefits	-	19,690	-	-	19,690
Travel	6,660	-	9,520	-	16,180
Professional Services	4,270	-	-	-	4,270
Expenditure Recoveries & Offset Revenues	-	-	-	-	-
Other Program Expenditures	267,980	-	71,780	-	339,760
Total Expenditures:	278,910	100,000	81,300	-	460,210
Funding Sources					Total
Smoke-Free Ontario Strategy: Tobacco Control Area Network - Preventi	278,910	-	-	-	278,910
Smoke-Free Ontario Strategy: Tobacco Control Coordination (100%)	-	100,000	-	-	100,000
Smoke-Free Ontario Strategy: Youth Tobacco Use Prevention (100%)	-	-	81,300	-	81,300
					-
					-
					-
Total Funding Sources	278,910	100,000	81,300	-	460,210
Under / (Over) Allocated					

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Food Safety

Expenditures	Food Safety	Enhanced Food Safety Initiative	Food Safety	Food Safety	Food Safety	Food Safety	Food Safety	Food Safety	Food Safety	Food Safety
Salaries and Wages	1,363,490	-	-	-	-	-	-	-	-	1,363,490
Benefits	352,600	-	-	-	-	-	-	-	-	352,600
Travel	29,000	-	-	-	-	-	-	-	-	29,000
Professional Services	12,770	-	-	-	-	-	-	-	-	12,770
Expenditure Recoveries & Offset Revenues	(353,150)	-	-	-	-	-	-	-	-	(353,150)
Other Program Expenditures	419,790	78,550	-	-	-	-	-	-	-	498,340
Total Expenditures:	1,824,500	78,550	-	-	-	-	-	-	-	1,903,050
Funding Sources										
Mandatory Programs (Cost-Shared)	1,824,500	-	-	-	-	-	-	-	-	1,824,500
Enhanced Food Safety - Haines Initiative (100%)	-	78,550	-	-	-	-	-	-	-	78,550
Total Funding Sources	1,824,500	78,550	-	-	-	-	-	-	-	1,903,050
Under / (Over) Allocated										

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Healthy Environments

Expenditures	Health Hazards	Air Quality and Climate Change	Healthy Environments	Healthy Environments
Salaries and Wages	798,630	78,130	-	876,760
Benefits	210,180	19,640	-	229,820
Travel	15,810	510	-	16,320
Professional Services	24,640	3,290	-	27,930
Expenditure Recoveries & Offset Revenues	(4,910)	(10)	-	(4,920)
Other Program Expenditures	220,200	16,700	-	236,900
Total Expenditures:	1,264,550	118,260	-	1,382,810

Funding Sources

Mandatory Programs (Cost-Shared)	1,264,550	118,260	-	-	1,382,810
					-
					-
					-
					-
					-
Total Funding Sources	1,264,550	118,260	-	-	1,382,810
Under / (Over) Allocated					

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Healthy Growth and Development

Expenditures	Child Health	Reproductive Health							Healthy Growth and Development
Salaries and Wages	2,305,320	865,250	-	-	-	-	-	-	3,170,570
Benefits	619,790	233,910	-	-	-	-	-	-	853,700
Travel	14,500	4,850	-	-	-	-	-	-	19,350
Professional Services	900	1,310	-	-	-	-	-	-	2,210
Expenditure Recoveries & Offset Revenues	(690)	(12,290)	-	-	-	-	-	-	(13,280)
Other Program Expenditures	556,790	237,350	-	-	-	-	-	-	794,140
Total Expenditures:	3,496,310	1,330,380	-	-	-	-	-	-	4,826,690

Funding Sources

Mandatory Programs (Cost-Shared)	3,496,310	1,330,380	-	-	-	-	-	-	4,826,690
									-
									-
									-
									-
									-
Total Funding Sources	3,496,310	1,330,380	-	-	-	-	-	-	4,826,690
Under / (Over) Allocated									

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Immunization

Expenditures	Vaccine Inventory Management											Immunization
Salaries and Wages	555,260											555,260
Benefits	158,880											158,880
Travel	4,240											4,240
Professional Services	560											560
Expenditure Recoveries & Offset Revenues	(1,990)											(1,990)
Other Program Expenditures	215,740											215,740
Total Expenditures:	932,690											932,690

Funding Sources

Mandatory Programs (Cost-Shared)	932,690											932,690
Total Funding Sources	932,690											932,690
Under / (Over) Allocated												

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Infectious and Communicable Diseases Prevention and Control

Expenditures	Vector Borne Diseases	Infectious Disease Program	Mental Health Promotion	Substance Use Prevention	Harm Reduction	Sexual Health	Infection Prevention and Control Nurses Initiative	Infectious Diseases Control Initiative	Infectious and Communicable Diseases Prevention and Control
Salaries and Wages	637,230	2,846,160	98,870	81,620	109,940	1,497,030	72,470	868,460	6,201,780
Benefits	159,480	763,390	27,930	22,150	29,530	401,870	17,630	231,600	1,653,580
Travel	27,300	32,790	110	20	220	9,700	-	100	70,240
Professional Services	82,530	76,320	800	70	1,450	173,030	-	-	334,200
Expenditure Recoveries & Offset Revenues	-	(144,970)	(10)	(10)	(10)	(152,480)	-	-	(297,480)
Other Program Expenditures	110,940	754,420	41,290	25,490	34,390	485,590	-	84,800	1,536,920
Total Expenditures:	1,017,480	4,328,110	168,990	129,340	175,520	2,414,740	90,100	1,174,960	9,499,240

Funding Sources

Mandatory Programs (Cost-Shared)		4,328,110	168,990	129,340	175,520	2,414,740				Total	7,216,700
Vector-Borne Diseases Program (Cost-Shared)	1,017,480										1,017,480
Infection Prevention and Control Nurses Initiative (100%)							90,100				90,100
Infectious Diseases Control Initiative (100%)								1,174,960			1,174,960
Total Funding Sources	1,017,480	4,328,110	168,990	129,340	175,520	2,414,740	90,100	1,174,960	-	-	9,499,240
Under / (Over) Allocated											

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Safe Water

Expenditures	Safe Water	Enhanced Safe Water Initiative	Small Drinking Water Systems	Safe Water	Safe Water	Safe Water	Safe Water	Safe Water	Safe Water
Salaries and Wages	777,720	6,100	42,780	-	-	-	-	-	826,600
Benefits	208,090	1,420	10,470	-	-	-	-	-	219,980
Travel	15,430	1,000	1,000	-	-	-	-	-	17,430
Professional Services	12,500	-	-	-	-	-	-	-	12,500
Expenditure Recoveries & Offset Revenues	(7,040)	-	-	-	-	-	-	-	(7,040)
Other Program Expenditures	184,080	34,330	5,870	-	-	-	-	-	224,280
Total Expenditures:	1,190,780	42,850	60,120	-	-	-	-	-	1,293,750

Funding Sources

Funding Sources	Safe Water	Enhanced Safe Water Initiative	Small Drinking Water Systems	Safe Water	Safe Water	Safe Water	Safe Water	Safe Water	Safe Water
Mandatory Programs (Cost-Shared)	1,190,780	-	-	-	-	-	-	-	1,190,780
Enhanced Safe Water Initiative (100%)	-	42,850	-	-	-	-	-	-	42,850
Small Drinking Water Systems Program (Cost-Shared)	-	-	60,120	-	-	-	-	-	60,120
Total Funding Sources	1,190,780	42,850	60,120	-	-	-	-	-	1,293,750
Under / (Over) Allocated	-	-	-	-	-	-	-	-	-

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Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

School Health - Oral Health

Expenditures	Oral Health Assessment	Healthy Smiles Ontario	School Health - Oral Health	School Health - Oral Health	School Health - Oral Health	School Health - Oral Health	School Health - Oral Health	School Health - Oral Health
Salaries and Wages	177,800	992,250	-	-	-	-	-	1,170,050
Benefits	54,000	263,750	-	-	-	-	-	317,750
Travel	4,500	8,920	-	-	-	-	-	13,420
Professional Services	180	-	-	-	-	-	-	180
Expenditure Recoveries & Offset Revenues	(30)	-	-	-	-	-	-	(30)
Other Program Expenditures	79,440	295,380	-	-	-	-	-	374,820
Total Expenditures:	315,890	1,560,300	-	-	-	-	-	1,876,190

Funding Sources

Mandatory Programs (Cost-Shared)	315,890	-	-	-	-	-	-	315,890
Healthy Smiles Ontario Program (100%)	-	1,560,300	-	-	-	-	-	1,560,300
Total Funding Sources	315,890	1,560,300	-	-	-	-	-	1,876,190
Under / (Over) Allocated								

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

School Health - Vision

Expenditures	Child Visual Health and Vision Screening									School Health - Vision
Salaries and Wages	20,860	-	-	-	-	-	-	-	-	20,860
Benefits	4,940	-	-	-	-	-	-	-	-	4,940
Travel	10	-	-	-	-	-	-	-	-	10
Professional Services	-	-	-	-	-	-	-	-	-	-
Expenditure Recoveries & Offset Revenues	-	-	-	-	-	-	-	-	-	-
Other Program Expenditures	3,890	-	-	-	-	-	-	-	-	3,890
Total Expenditures:	29,700	-	-	-	-	-	-	-	-	29,700

Funding Sources

Mandatory Programs (Cost-Shared)	29,700	-	-	-	-	-	-	-	-	-	29,700
Total Funding Sources	29,700	-	-	-	-	-	-	-	-	-	29,700
Under / (Over) Allocated											

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Expenditures	Substance Use							Substance Use
	Tobacco Control, Prevention and Cessation	Harm Reduction	Substance Use Prevention	Electronic Cigarettes Act - Protection and Enforcement	Harm Reduction Program Enhancement	Needle Exchange Program Initiative		
Salaries and Wages	-	236,020	157,840	6,360	195,860	-	-	595,880
Benefits	-	64,100	41,220	1,770	51,060	-	-	158,150
Travel	-	1,520	1,340	750	-	-	-	3,610
Professional Services	-	11,150	9,620	-	-	-	-	20,770
Expenditure Recoveries & Offset Revenues	-	(30)	(20)	-	-	-	-	(50)
Other Program Expenditures	-	82,440	43,060	43,360	3,280	217,500	-	389,640
Total Expenditures:	-	395,200	253,060	52,240	250,000	217,500	-	1,168,000

Funding Sources	Substance Use							Substance Use
	Tobacco Control, Prevention and Cessation	Harm Reduction	Substance Use Prevention	Electronic Cigarettes Act - Protection and Enforcement	Harm Reduction Program Enhancement	Needle Exchange Program Initiative		
Mandatory Programs (Cost-Shared)	-	395,200	253,060	-	-	-	-	648,260
Electronic Cigarettes Act: Protection and Enforcement (100%)	-	-	52,240	52,240	-	-	-	52,240
Harm Reduction Program Enhancement (100%)	-	-	-	-	250,000	-	-	250,000
Needle Exchange Program Initiative (100%)	-	-	-	-	-	217,500	-	217,500
Total Funding Sources	-	395,200	253,060	52,240	250,000	217,500	-	1,168,000
Under / (Over) Allocated	-	-	-	-	-	-	-	-

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Injury Prevention

Expenditures	Injury Prevention	Injury Prevention	Injury Prevention	Injury Prevention	Injury Prevention	Injury Prevention	Injury Prevention	Injury Prevention	Injury Prevention
Salaries and Wages	290,680								290,680
Benefits	77,410								77,410
Travel	4,020								4,020
Professional Services	4,890								4,890
Expenditure Recoveries & Offset Revenues	(30)								(30)
Other Program Expenditures	83,830								83,830
Total Expenditures:	460,800								460,800

Funding Sources

Mandatory Programs (Cost-Shared)	460,800								460,800
Total Funding Sources	460,800								460,800
Under / (Over) Allocated									

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.3 Allocation of Expenditures (per Program)

Indirect Costs

	Public Health Unit Administration	Office of the Medical Officer of Health	Indirect Costs						Indirect Costs
Salaries and Wages	1,005,810	254,790						1,260,600	
Benefits	268,150	57,900						326,050	
Travel	15,010	-						15,010	
Professional Services	3,260	-						3,260	
Expenditure Recoveries & Offset Revenues	(42,650)	-						(42,650)	
Other Program Expenditures	289,460	16,150						305,610	
Total Expenditures:	1,539,040	328,840						1,867,880	

Funding Sources

Mandatory Programs (Cost-Shared)	1,539,040	328,840						1,867,880
								-
								-
								-
								-
								-
Total Funding Sources	1,539,040	328,840						1,867,880
Under / (Over) Allocated								

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries
4.3 Allocation of Expenditures (per Program)

School Health - Other

Expenditures	School Health	Tobacco Control, Prevention and Cessation	Injury Prevention	Chronic Disease Prevention	Mental Health Promotion	Substance Use Prevention	Harm Reduction	Sexual Health	School Health - Other
Salaries and Wages	1,193,810	50,860	93,260	190,810	510,290	144,440	14,240	164,910	2,382,620
Benefits	313,120	14,400	25,710	50,440	133,360	37,560	3,920	43,380	621,890
Travel	11,950	-	580	1,920	3,390	820	190	1,920	20,770
Professional Services	460	80	90	90	190	1,410	1,370	60	3,750
Expenditure Recoveries & Offset Revenues	(29,470)	(10)	(1,430)	(4,750)	(8,100)	(1,440)	-	(4,750)	(49,950)
Other Program Expenditures	339,010	19,010	32,240	56,080	144,190	40,930	5,600	47,630	684,690
Total Expenditures:	1,828,880	84,340	150,450	294,590	783,320	223,720	25,320	253,150	3,643,770

Funding Sources

Mandatory Programs (Cost-Shared)	1,828,880	84,340	150,450	294,590	783,320	223,720	25,320	253,150	3,643,770
Total Funding Sources	1,828,880	84,340	150,450	294,590	783,320	223,720	25,320	253,150	3,643,770
Under / (Over) Allocated									

Board of Health for the City of Hamilton, Public Health Services

Part 4 - Budget Allocation and Summaries

4.4 Overall Budget Summary (by Funding Source)

Base Funding

Funding Source	Budget (at 100%)	Provincial Share	Approved Allocation	Variance
	A	B= A*Prov.Share	C	D = C - B
Mandatory Programs (Cost-Shared)	32,347,140	24,260,355	22,650,700	(1,609,655)
Chief Nursing Officer Initiative (100%)	121,500	121,500	121,500	-
<i>Electronic Cigarettes Act</i> : Protection and Enforcement (100%)	52,240	52,240	51,900	(340)
Enhanced Food Safety - Haines Initiative (100%)	78,550	78,550	78,300	(250)
Enhanced Safe Water Initiative (100%)	42,850	42,850	42,300	(550)
Harm Reduction Program Enhancement (100%)	250,000	250,000	250,000	-
Healthy Smiles Ontario Program (100%)	1,560,300	1,560,300	1,560,300	-
Infection Prevention and Control Nurses Initiative (100%)	90,100	90,100	90,100	-
Infectious Diseases Control Initiative (100%)	1,174,960	1,174,960	1,111,200	(63,760)
Needle Exchange Program Initiative (100%)	217,500	217,500	202,000	(15,500)
Small Drinking Water Systems Program (Cost-Shared)	60,120	45,090	41,100	(3,990)
Smoke-Free Ontario Strategy: Prosecution (100%)	10,000	10,000	10,000	-
Smoke-Free Ontario Strategy: Protection and Enforcement (100%)	403,070	403,070	374,200	(28,870)
Smoke-Free Ontario Strategy: Tobacco Control Area Network - Coordination (100%)	308,570	308,570	285,800	(22,770)
Smoke-Free Ontario Strategy: Tobacco Control Area Network - Prevention (100%)	278,910	278,910	276,800	(2,110)
Smoke-Free Ontario Strategy: Tobacco Control Coordination (100%)	100,000	100,000	100,000	-
Smoke-Free Ontario Strategy: Youth Tobacco Use Prevention (100%)	81,300	81,300	80,000	(1,300)
Social Determinants of Health Nurses Initiative (100%)	180,500	180,500	180,500	-
Vector-Borne Diseases Program (Cost-Shared)	1,017,480	763,110	754,900	(8,210)
Base Funding:	\$ 38,375,090	\$ 30,018,905	\$ 28,261,600	-\$ 1,757,305

Board of Health for the City of Hamilton, Public Health Services

Part 5 - Additional Base and One-Time Funding Requests

5.1 Base Funding Requests

1. Request Title: Raccoon Rabies Business Case

2. Does this request relate to an existing program(s) (Yes/No)? No

If Yes, please select a program name from the drop-down menu

If No, please provide the program name and the respective Standard/Section: Raccoon Rabies

Description	Project Cost Item / Description	Cost/Item	Risks / Impacts	Outcomes
-------------	---------------------------------	-----------	-----------------	----------

Description	Project Cost Item / Description	Cost/Item	Risks / Impacts	Outcomes																								
<p><i>Provide a detailed description and identify issue(s) and/or opportunity(ies) that have led to this request (e.g. increased demand for services, legislative changes). Your description should include details on the populations served and any other relevant data/demographics, and how the request relates to government and ministry priorities (maximum characters of 1,800).</i></p> <p>Length = 1086</p> <p>Continue funding two temporary full time Public Health Inspector positions in Public Health Services to meet the increased service levels due to the unexpected and extraordinary Raccoon Rabies outbreak in Hamilton and surrounding areas that began in December, 2015.</p> <p>Find at least two low cost rabies clinics and provide support to Public Health Services for the local collection and coordination of wild animal specimens, including but not limited to, skunks and raccoons for raccoon rabies surveillance and testing by Ministry of Natural Resources and Forestry</p> <p>Outbreak is expected to continue for another 3-5 years so providing two low cost rabies options will help the community protect their pets from rabies. A coordinated collection and submission of animals locally will also provide a more accurate indication of the control of the outbreak. As Hamilton is at the epicentre of Ontario's raccoon rabies outbreak it is crucial that Hamilton Public Health is aware of the level of control or spread occurring in order to tailor our communication strategies through each year.</p>	<p><i>Identify the cost items in the cells provided below and provide a description for each item, including how the cost was determined.</i></p> <table border="1"> <tr> <td>Employer Paid Parking</td> <td>\$</td> <td>2,400</td> </tr> <tr> <td>Mileage</td> <td></td> <td>3,000</td> </tr> <tr> <td>Operating Expenses</td> <td></td> <td>20,000</td> </tr> <tr> <td>IP Telephony</td> <td></td> <td>280</td> </tr> <tr> <td>Cell Phone</td> <td></td> <td>1,200</td> </tr> <tr> <td>Contractual Services</td> <td></td> <td>94,510</td> </tr> <tr> <td>Salary & Benefits</td> <td></td> <td>205,770</td> </tr> <tr> <td>Total Cost</td> <td>\$</td> <td>327,160</td> </tr> </table>	Employer Paid Parking	\$	2,400	Mileage		3,000	Operating Expenses		20,000	IP Telephony		280	Cell Phone		1,200	Contractual Services		94,510	Salary & Benefits		205,770	Total Cost	\$	327,160	<p><i>Describe the risks and/or direct impacts to programs and services with not reaching any or all of the funding requested (maximum characters of 1,800).</i></p> <p>Length = 629</p> <p>Rabies is fatal in humans so if the outbreak is not well controlled the risk of exposure to rabid animals locally could increase. Without the additional two public health inspectors there will be an increase in the number of vehicles and animals being inspected with the outbreak and are expected to remain higher than historical levels. Hamilton had a coordinated system to collect and submit animals to MNRF for surveillance and if this is not available there is a risk the number of animals collected and submitted will drop potentially masking the true picture of the outbreak.</p>	<p><i>What outcome(s) does the board of health intend to achieve with this request/project? (maximum characters of 1,800)</i></p> <p>Length = 300</p> <p>To reduce the risk of exposure to rabid terrestrial animals in Hamilton and to assist Ministry partners including the Ministry of Natural Resources and Forestry and the Ministry of Agriculture, Food, and Rural Affairs (OMAFRA) to control and eventually eliminate raccoon rabies from Ontario.</p>	
Employer Paid Parking	\$	2,400																										
Mileage		3,000																										
Operating Expenses		20,000																										
IP Telephony		280																										
Cell Phone		1,200																										
Contractual Services		94,510																										
Salary & Benefits		205,770																										
Total Cost	\$	327,160																										

1. Request Title:
Public Health Inspector Practicum Program

2. Does this request relate to an existing program(s) (Yes/No)?
No

If No, please select a program name from the drop-down menu

Existing Program Name:
Public Health Inspector Practicum Program

New Program Name:
Public Health Inspector Practicum Program

Standard/Section:
Healthy Environments

Description	Project Cost Item / Description	Cost/Item	Risks / Impacts	Outcomes
<p>Provide a detailed description and identify issue(s) and/or opportunity(ies) that have led to this request (e.g. increased demand for services, legislative changes). Your description should include details on the populations served and any other relevant data/demographics, and how the request relates to government and ministry priorities (maximum characters of 1,800).</p> <p><i>Length = 248</i></p> <p>Outcome is to Hire 0.16 FTE PHI Trainee to provide public health services to the City of Hamilton between Victoria Day and Labour Day for program support and to train future PHIs.</p> <p>This request is an opportunity to take advantage of annual grant.</p>	<p>Identify the cost items in the cells provided below and provide a description for each item, including how the cost was determined.</p> <p>Wages & Benefits</p>	<p>Identify the cost per each item.</p> <p>\$ 10,000</p>	<p>Describe the risks and/or direct impacts to programs and services with not receiving any or all of the funding requested (maximum characters of 1,800).</p> <p><i>Length = 365</i></p> <p>Beach Sampling Program will not get done. A portion of low risk and moderate risk food premises would not get inspected. # of weeks based on 10,000 funding = 8.9 weeks # of weeks to be certified = 13 weeks There is a shortfall in funding to provide the student with the required number qualified weeks for certification based on \$10,000 funding allocation.</p>	<p>What outcome(s) does the board of health intend to achieve with this request/project? (maximum characters of 1,800)</p> <p><i>Length = 344</i></p> <p>Outcome is to hire 0.16 FTE PHI Trainee to provide public health services to the City of Hamilton between Victoria Day and Labour Day, and to train future PHIs. To help complete the beach sampling program and support the Canadian Institute of Public Health Inspectors board of certification requirements - which includes practicum placement.</p>
Total Cost		\$ 10,000		

1. Request Title: Smoke Free Ontario Expanded Smoking Cessation Programming for Priority Populations

No

2. Does this request relate to an existing program(s) (Yes/No)?

If Yes, please select a program name from the drop-down menu

Existing Program Name:

If No, please provide the program name and the respective Standard/Section

New Program Name: SFO Expanded Smoking Cessation Programming for Priority Population

Standard/Section: Substance Use

Description	Project Cost Item / Description	Cost/Item	Risks / Impacts	Outcomes
<p><i>Provide a detailed description and identify issue(s) and/or opportunity(ies) that have led to this request (e.g. increased demand for services, legislative changes). Your description should include details on the populations served and any other relevant data/demographics, and how the request relates to government and ministry priorities (maximum characters of 1,800).</i></p> <p><i>Length = 1529</i></p> <p>City of Hamilton PHS (PHS) operates a quit smoking clinic that offers one-on-one counselling and access to free nicotine replacement therapy (NRT). Priority is given to pregnant and breastfeeding women, families with children under 1 year of age, persons living in poverty, persons with mental illness, persons new to Canada, and those without a family physician.</p> <p>Referrals for the quit smoking clinic are received from internal HPHS programs, local agencies including hospitals and health care providers, community partners, self-referrals, and through Smokers' Helpline. In 2017, there were 1281 callers and 463 unique referrals to quit smoking services and of those 799 unique clients were booked into clinic. 1497 appointments were scheduled with an attendance rate of 70% by clients (n=1048). Clients are given their follow-up appointment at their session each week and also receive a reminder call.</p> <p>Currently, including NRT and operating supplies, is financed through the MOHLTC Annual Program Based Grants. The quit smoking clinic is a cross-divisional service provided by staff from the Family Health and Preventive Services Division and is physically located within PHS Clinical and Mobile Outreach Clinics with marginalized populations. The expanded funding also address the gap from hospital to home in partnership with our local hospitals and through the Cessation Care Pathway and each client is documented and referred to clinical services.</p>	<p><i>Identify the cost items in the cells provided below and provide a description for each item, including how the cost was determined.</i></p> <p>Nicotine Replacement Therapy (NRT)</p>	<p><i>Identify the cost per each item.</i></p> <p>\$ 25,000</p>	<p><i>Describe the risks and/or direct impacts to programs and services with not receiving any or all of the funding requested (maximum characters of 1,800).</i></p> <p><i>Length = 1359</i></p> <p>This project is necessary to increase and further support cessation by motivating and assisting people to quit tobacco use. This project will fund NRT within Hamilton Public Health Services' Quit Smoking Clinic and via Hamilton's Cessation Care Pathway. This project will increase service delivery by expanding reach and access to clinic services and stop smoking medications.</p> <p>Smoking among pregnant women and new mothers is dramatically higher in certain neighbourhoods within the city of Hamilton. In some cases upwards of (40%) of prenatal and post-natal women are reported as smoking. These women are at increased risk of preterm birth, spontaneous abortion, sudden infant death syndrome, impaired physical and brain development and long-term chronic illness. Similarly, there is a higher rate of smoking reported in disadvantaged or marginalized populations including those with mental health diagnosis as well as among blue collar workers supported by participating in the Hamilton Workplace Cessation Initiative.</p> <p>In the absence of this one-time funding City of Hamilton Public Health Services will be faced with the</p>	<p><i>What outcome(s) does the board of health intend to achieve with this request/project? (maximum characters of 1,800)</i></p> <p><i>Length = 162</i></p> <ol style="list-style-type: none"> 1. Increase the # of people screened 2. Increase the # of people who enter or maintain quit attempt 3. 100% of people who wish to quit smoking are offered tobacco cessation services
Total Cost		\$ 25,000		

1. Request Title:

Mandatory Programs

2. Does this request relate to an existing program(s) (Yes/No)?

Yes

If Yes, please select a program name from the drop-down menu

Existing Program Name: All Programs

If No, please provide the program name and the respective Standard/Section

New Program Name: All

Description	Project Cost Item / Description	Cost/Item	Risks / Impacts	Outcomes
<p><i>Provide a detailed description and identify issue(s) and/or opportunity(ies) that have led to this request (e.g. increased demand for services, legislative changes). Your description should include details on the populations served and any other relevant data/demographics, and how the request relates to government and ministry priorities (maximum characters of 1,800).</i></p> <p><i>Length = 466</i></p> <p>The request of \$257,610 reflects the additional operating costs above the total gross operating cost of the current approved funding to deliver programs and services. Historically Hamilton Public Health Services continues to be funded below the share as determined by the equity based funding formula. Hamilton Public Health Services encourages the Ministry to continue to work to grow the overall funding pot for public health in order to maintain the quality and timeliness of mandated services.</p>	<p><i>Identify the cost items in the cells provided below and provide a description for each item, including how the cost was determined.</i></p> <p>Additional operating costs above the current approved funding</p> <p>Note: The costs listed above are the total gross operating costs above the current approved funding</p>	<p><i>Identify the cost per each item.</i></p> <p>\$ 257,610</p>	<p><i>Describe the risks and/or direct impacts to programs and services with not receiving any or all of the funding requested (maximum characters of 1,800).</i></p> <p><i>Length = 576</i></p> <p>Not receiving any or all of the funding requested has the potential to impact the ability of Hamilton Public Health Services to maintain mandatory service levels as per the requirements of the Ontario Public Health Standards. Budget pressures through 2016 and 2017 have lead to substantial reductions in staffing and program support costs in order to maintain service to meet mandated requirements. Changes that have been made to meet budget pressures in addition to the provincial transformation agenda has created difficulty in being able to maintain high quality services.</p>	<p><i>What outcome(s) does the board of health intend to achieve with this request/project? (maximum characters of 1,800)</i></p> <p><i>Length = 123</i></p> <p>Maintain quality and timeliness of mandatory service levels as per the requirements of the Ontario Public Health Standards.</p>
Total Cost		\$ 257,610		

Board of Health for the City of Hamilton, Public Health Services

Part 5 - Additional Base and One-Time Funding Requests

5.2 One-Time Funding Requests

1. Request Title:

2. Does this request relate to an existing program(s) (Yes/No)?

If Yes, please select a program name from the drop-down menu

Existing Program Name:

If No, please provide the program name and the respective Standard/Section

New Program Name: Standard/Section:

3. Can the project be completed by March 31, 2019? (Yes/No) (If no, please explain)?

If No, How much of the total project cost will be incurred by March 31, 2019?

Description	Project Cost Item / Description	Cost/Item	Risks / Impacts	Outcomes	
Provide a detailed description and identify issue(s) and/or opportunity(ies) that have led to this request (e.g. increased demand for services, legislative changes). Your description should include details on the populations served and any other relevant data/demographics, and how the request relates to government and ministry priorities.	Identify the cost items in the cells provided below and provide a description for each item, including how the cost was determined.	Identify the cost per each item.	Describe the risks and/or direct impacts to programs and services with not receiving any or all of the funding requested.	What outcome(s) does the board of health intend to achieve with this request/project?	
<p>Length = 0</p>	<p>Length = 0</p>	<p>Length = 0</p>	<p>Length = 0</p>	<p>Length = 0</p>	

Total Cost \$ -

Board of Health for the City of Hamilton, Public Health Services

Part 5 - Additional Base and One-Time Funding Requests

5.3 Base and One-Time Funding Requests Summary

Base Funding Requests

Requests		Amount
1	Raccoon Rabies Business Case	\$ 327,160
2	Public Health Inspector Practicum Program	10,000
3	Smoke Free Ontario Expanded Smoking Cessation Programming for Priority Populations	25,000
4	Mandatory Programs	257,610
5		-
6		-
7		-
8		-
9		-
10		-
Sub-Total Base Funding Request		\$ 619,770

One-Time Funding Requests

Requests		Amount
1		\$ -
2		-
3		-
4		-
5		-
6		-
7		-
8		-
9		-
10		-
Sub-Total One-Time Funding Request		\$ -

Total Base and One-Time Requested \$ 619,770

Board of Health for the City of Hamilton, Public Health Services

Part 6 - Board of Health Membership

#	Member First Name	Member Last Name	Type of Appointment (e.g. municipal, provincial)	Identify Municipality (if applicable)
1	Aidan	Johnson	municipal	Hamilton
2	Jason	Farr	municipal	Hamilton
3	Matthew	Green	municipal	Hamilton
4	Sam	Merulla	municipal	Hamilton
5	Chad	Collins	municipal	Hamilton
6	Tom	Jackson	municipal	Hamilton
7	Donna	Skelly	municipal	Hamilton
8	Terry	Whitehead	municipal	Hamilton
9	Doug	Conley	municipal	Hamilton
10	Maria	Pearson	municipal	Hamilton
11	Brenda	Johnson	municipal	Hamilton
12	Lloyd	Ferguson	municipal	Hamilton
13	Arlene	VanderBeek	municipal	Hamilton
14	Robert	Pasuta	municipal	Hamilton
15	Judi	Partridge	municipal	Hamilton
16				

Board of Health for the City of Hamilton, Public Health Services

Part 7 - Key Contacts and Certification by Board of Health

Key Contacts

Position	First Name	Last Name	Phone	Street Number and Name	City/Town	Postal Code
Chair, Board of Health	Fred	Eisenberger	905-546-4200	71 Main Street West	Hamilton	L8P 4Y5
Medical Officer of Health	Elizabeth	Richardson	905-546-2424 X3502	100 Main Street West	Hamilton	L8P 1H6
Chief Executive Officer (if applicable)						
Business Administrator	Helen	Klumpp	905-546-2424 X3508	28 James Street North	Hamilton	L8R 2K1

Certification by Board of Health

Board of Health Chair

Name

Mayor Fred Eisenberger

(Signature) (Date)

Medical Officer of Health / Chief Executive Officer

Name

Dr. Elizabeth Richardson

(Signature) (Date)

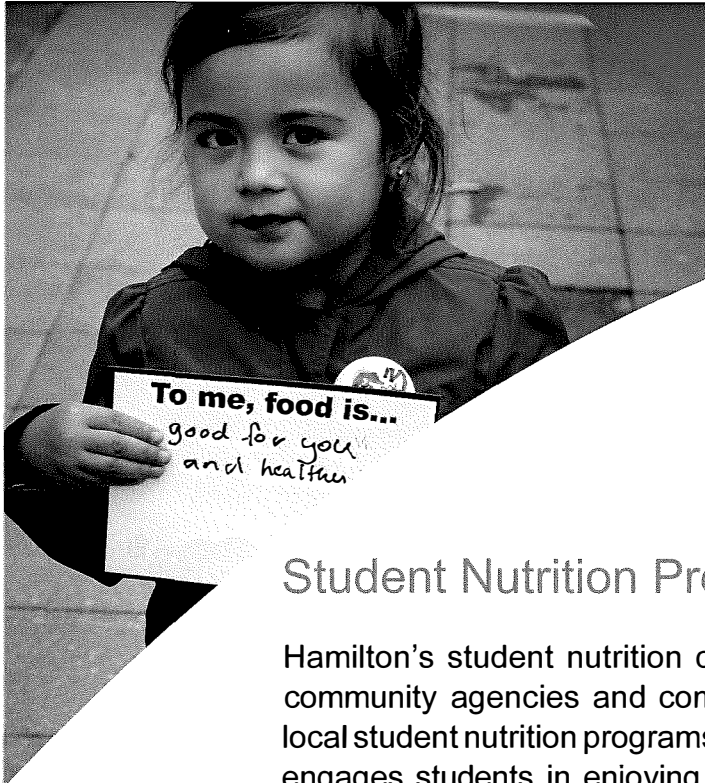
Chief Financial Officer / Business Administrator

(Verifies that the budget data provided in the Annual Service Plan and Budget Submission is accurate)

Name

Helen Klumpp

(Signature) (Date)



Student Nutrition Programs

Hamilton's student nutrition collaborative (TasteBuds) is a partnership of community agencies and community members that support and facilitate local student nutrition programs for children and youth. The inclusive program engages students in enjoying meals and snacks in a welcoming setting to improve student success, support healthy growth, development, and lifelong eating habits. Priority is given to ensuring that programs are in place in vulnerable neighbourhoods, although the services are universal and open to all students. In 2016 in Hamilton, there were 172 Student Nutrition Programs at 120 sites. On average in 2014 - 2015, Tastebuds volunteers served healthy snacks to 30,082 students per day.

Charitable Food Programs

Not all Hamiltonians have enough income to purchase sufficient amounts of food for themselves or their families. Hamilton Food Share collaborates with local emergency food providers to make food accessible to residents who lack the income to access food in the mainstream food retail system. Hamilton's emergency food system operate food banks, free meal services, soup kitchens and pantries, with Hamilton Food Share co-ordinating the delivery of bulk quantities of food to 10 local organizations.

The majority of food that Hamilton Food Share distributes to emergency food providers is donated by the food industry, with a smaller percentage either purchased or obtained by community food drives. While food banks try to encourage donations of healthier options the food, unfortunately, donated food can include unhealthy options.

Improved incomes, through adequate social assistance rates, living wages, and other policies and programs that enhance household financial resources, along with increased access to affordable housing are the most important responses to household food insecurity. Addressing these issues must be foremost in advocacy efforts toward ensuring nutritious food is economically accessible to Hamilton's most vulnerable residents.

Poverty and Household Food Insecurity

Because food insecurity results from a household's inability to access adequate food due to limited incomes, poverty is closely linked to food insecurity. In 2013, 79,450 Hamiltonians, or 15.7% of Hamilton's population, were living in poverty. A 2011 - 2012 survey showed that 11.6% of households in Hamilton, or more than 1 in 9, experienced some degree of food insecurity. Food insecurity is categorized on three levels: worrying about running out of food (marginal food insecurity); compromising quantity or quality of food consumed (moderate food insecurity); or reducing food intake and disrupting eating patterns due to lack of food (severe food insecurity). For 8.2% of households in Hamilton, the degree of food insecurity was moderate or severe.

The annual Nutritious Food Basket (NFB) survey provides Hamilton data on the cost of nutritious food. In 2015, the estimated average cost for a family of four to buy basic nutritious food in Hamilton was \$191 per week or \$827 per month.

The cost of living can have a major impact on the amount of money available for purchasing food among lower-income households. NFB 2015 data combined with average market rate rental housing costs in Hamilton shows that households with minimum wage employment or receiving social assistance (Ontario Works or Ontario Disability Support Program) are likely to have incomes that are insufficient for basic living. For many living in poverty, certain fixed costs, such as paying for rent and utilities come before paying for food, which can lead to some degree of household food insecurity.

Charitable food programs and community food programs with a more dignified approach (for example, community gardens, collective kitchens, and Good Food Box programs) may offer some short-term relief. However, these programs do not reduce the prevalence of household food insecurity over the long-term because they do not address poverty.

The most effective way to ensure all Hamiltonians are food secure is through everyone having an adequate income. This approach is the most likely to reduce and eventually eliminate the charity food model because everyone would have the income to access food through other means.



HEALTHY & SAFE COMMUNITIES COMMITTEE

REPORT 18-001

1:30 pm

Monday, February 26, 2018

Council Chambers

Hamilton City Hall

71 Main Street West, Hamilton

Present: Councillors S. Merulla (Chair), A. Johnson, T. Jackson,
D. Skelly, J. Partridge

Absent with Regrets: Councillors J. Farr and T. Whitehead – Personal
Council M. Green – City Business

THE HEALTHY & SAFE COMMUNITIES COMMITTEE PRESENTS REPORT 18-001 AND RESPECTFULLY RECOMMENDS:

1. **Appointment of Administrator of Ontario Works (HSC18001) (City Wide) (Item 5.2)**
 - (a) That the appointment of Bonnie Elder as the Administrator of Ontario Works be approved; and,
 - (b) That the appointment of Bonnie Elder as the Administrator of Ontario Works be submitted to the Ministry of Community and Social Services for approval.

2. **Good Shepherd Non Profit Homes Inc. – Request for Service Manager Consent to Sell Units (HSC18002) (City Wide) (Item 8.1)**
 - (a) That Council, in its capacity as Service Manager under the *Housing Services Act, 2011*, approve the request of Good Shepherd Non-Profit Homes Inc. to sell two properties comprised of nine housing units, subject to the following condition:
 - (i) that the sale proceeds be reinvested towards an infill development at 19 Patterson Street to create 26 one bedroom units of affordable rental housing with 13 units being constructed to the accessibility standards set out in the City's Barrier Free Guidelines;

- (b) That the General Manager of Healthy and Safe Communities Department or his designate be authorized and directed to use the existing rent subsidy portion of the nine units proposed for sale to create nine new portable rent supplements to be administered by Good Shepherd Non-Profit Homes Inc.; and,
- (c) That the General Manager of Healthy and Safe Communities Department or his designate be authorized and directed to execute a new rent supplement agreement with Good Shepherd Non-Profit Homes Inc., satisfactory to the City Solicitor, that reflects the change to its housing portfolio and subsidy allocation, as set out in Report HSC18002.

FOR INFORMATION:

(a) CHANGES TO THE AGENDA (Item 1)

The Committee Clerk advised there was one change to the agenda:

1. DELEGATION REQUEST (Item 4)

- 4.2 Tucker Finn, Buzz Street Properties, respecting Item 8.1, Good Shepherd Non Profit Homes Inc. – Request for Service Manager Consent to Sell Units (HSC18002), as the buyer for 320 John Street North, and to describe the development plans (for the February 26, 2018 meeting).

The Agenda for the February 26, 2018 meeting of the Healthy & Safe Communities Committee was approved, as amended.

(b) DECLARATIONS OF INTEREST (Item 2)

None declared.

(c) APPROVAL OF MINUTES (Item 3)

(i) February 12, 2018 (Item 3.1)

The Minutes of the February 12, 2018 Emergency & Community Services Committee meeting were approved, as presented.

(d) DELEGATION REQUESTS (Item 4)

(i) Elaine Cameron respecting Mountain Kidz Klub (Item 4.1)

The Delegation Request from Elaine Cameron respecting Mountain Kidz Klub, was approved for the April 9, 2018 meeting of the Healthy & Safe Communities Committee.

- (ii) **Tucker Finn, Buzz Street Properties, respecting Item 8.1, Good Shepherd Non Profit Homes Inc. – Request for Service Manager Consent to Sell Units (HSC18002), as the buyer for 320 John Street North, and to describe the development plans (for the February 26, 2018 meeting) (Added Item 4.2)**

The Delegation Request from Tucker Finn, Buzz Street Properties, respecting Item 8.1, Good Shepherd Non Profit Homes Inc. – Request for Service Manager Consent to Sell Units (HSC18002), as the buyer for 320 John Street North, and to describe the development plans, was approved for the February 26, 2018 meeting of the Healthy & Safe Communities Committee.

(e) CONSENT ITEMS (Item 5)

- (i) **Seniors Advisory Committee Minutes – January 5, 2018 (Item 5.1)**

The Minutes of the Seniors Advisory Committee dated January 5, 2018, were received.

(f) PUBLIC HEARINGS/DELEGATIONS (Item 6)

- (i) **Tucker Finn, Buzz Street Properties, respecting Item 8.1, Good Shepherd Non Profit Homes Inc. – Request for Service Manager Consent to Sell Units (HSC18002), as the buyer for 320 John Street North, and to describe the development plans (for the February 26, 2018 meeting) (Item 6.1)**

Tucker Finn, Buzz Street Properties, addressed the Committee respecting Item 8.1, Good Shepherd Non Profit Homes Inc. – Request for Service Manager Consent to Sell Units (HSC18002), as the buyer for 320 John Street North, and to describe the development plans.

The Delegation from Tucker Finn, Buzz Street Properties, respecting Item 8.1, Good Shepherd Non Profit Homes Inc. – Request for Service Manager Consent to Sell Units (HSC18002), as the buyer for 320 John Street North, and to describe the development plans, was received.

For disposition of this matter, please refer to Item 2.

(g) ADJOURNMENT (Item 13)

There being no further business, the Healthy & Safe Communities Committee was adjourned at 1:38 p.m.

Respectfully submitted,

Councillor S. Merulla
Chair, Healthy & Safe
Communities Committee

Lisa Chamberlain
Legislative Coordinator
Office of the City Clerk



SPECIAL GENERAL ISSUES COMMITTEE REPORT 18-006

10:00 a.m.

Tuesday, February 27, 2018

Council Chambers

Hamilton City Hall

71 Main Street West

Present: Mayor F. Eisenberger, Deputy Mayor T. Jackson (Chair),
Councillors D. Skelly, C. Collins, S. Merulla, A. Johnson,
D. Conley, M. Pearson, L. Ferguson, R. Pasuta, J. Partridge

Absent with

Regrets: Councillors T. Whitehead, A. VanderBeek, Farr – Personal
Councillor M. Green, B. Johnson – Other City Business

THE GENERAL ISSUES COMMITTEE PRESENTS REPORT 18-006 AND RESPECTFULLY RECOMMENDS:

1. Our People Survey Update (CM18006) (City Wide) (Item 5.1)

That Report CM18006, respecting the Our People Survey Update, be received.

FOR INFORMATION:

(a) CHANGES TO THE AGENDA (Item 1)

The Committee Clerk advised that there were no changes to the agenda.

The agenda for the February 27, 2018 Special General Issues Committee meeting was approved, as presented.

(b) DECLARATIONS OF INTEREST (Item 2)

There were no declarations of interest.

Council – February 28, 2018

(c) STAFF PRESENTATIONS (Item 7)

(i) Our People Survey Update (CM18006) (City Wide) (Item 5.1)

The presentation, respecting Report CM18006 – Our People Survey Update, was received.

A copy of the presentation is available on the City's website at www.hamilton.ca or through the Office of the City Clerk.

For disposition of this matter, please refer to Item 1.

(d) ADJOURNMENT (Item 9)

There being no further business, the General Issues Committee adjourned at 11:50 a.m.

Respectfully submitted,

T Jackson, Deputy Mayor
Chair, General Issues Committee

Stephanie Paparella
Legislative Coordinator
Office of the City Clerk

CITY OF HAMILTON MOTION

Council: February 28, 2018

MOVED BY COUNCILLOR J. FARR.....

SECONDED BY COUNCILLOR

Lifting the Motion respecting Hamilton Waterfront Trust Board Reorganization Proposal LS18005 (Governance Review Sub-Committee Report 18-001, January 31, 2018), Tabled at the February 14, 2018 Council meeting

That the motion respecting Hamilton Waterfront Trust Board Reorganization Proposal LS18005 (Governance Review Sub-Committee Report 18-001, January 31, 2018), Tabled at the February 14, 2018 Council meeting, which reads as follows be LIFTED from the table:

Hamilton Waterfront Trust Board Reorganization Proposal LS18005 (City Wide)(Item 12.1)

- (i) That the City Manager or his delegate be authorized and directed to advise the Hamilton Waterfront Trust (HWT) and the Hamilton Port Authority (HPA) that the City of Hamilton consents to the removal of the HPA board member as outlined in the HWT’s January 10, 2017 resolution, with the exception of the HPA Board member remaining as a member of the HWT Board until the review of the HWT’s governance model is completed by Council.
- (ii) That Report LS18005 remain confidential.

CITY OF HAMILTON MOTION

Council: February 28, 2018

MOVED BY COUNCILLOR J. FARR.....

SECONDED BY COUNCILLOR

Hamilton Waterfront Trust Board Reorganization Proposal LS18005 (City Wide)(Item 12.1)

- (i) That the City Manager or his delegate be authorized and directed to advise the Hamilton Waterfront Trust (HWT) and the Hamilton Port Authority (HPA) that the City of Hamilton consents to the removal of the HPA board member as outlined in the HWT's January 10, 2017 resolution, with the exception of the HPA Board member remaining as a member of the HWT Board until the review of the HWT's governance model is completed by Council.
- (ii) That Report LS18005 remain confidential.

CITY OF HAMILTON

MOTION

Council Date: February 28, 2018

MOVED BY COUNCILLOR D. SKELLY.....

SECONDED BY COUNCILLOR.....

Inch Park Improvements (Ward 7)

WHEREAS, Inch Park is home to Hamilton Challenger Baseball, an organization that provides sports for players with special needs, and;

WHEREAS, Hamilton Challenger Baseball consists of more than 190 players and 60 dedicated volunteers, and offers the opportunity for those with developmental and physical disabilities to be empowered and assert their independence through sport, and;

WHEREAS, Challenger Baseball has applied for a \$150,000 Field of Dreams Capital Space Grant, through the Jays Care Foundation, to fund improvements to Inch Park. The proposed improvements include a large Picnic shelter, a storage shed, dugout renovations, and upgrades to the baseball diamonds, and;

WHEREAS, allocating additional funding would help ensure proposed improvements are implemented at Inch Park,

THEREFORE BE IT RESOLVED:

That staff be directed to proceed with proposed improvements to Inch Park, and that the funding of \$150,000 be approved from the Ward 7 Area Rating Reserve account number 108057 in support of this project.

CITY OF HAMILTON

MOTION

Council Date: February 28, 2018

MOVED BY COUNCILLOR S. MERULLA.....

SECONDED BY COUNCILLOR.....

Urging the Provincial Government to invest in Cycling Infrastructure

WHEREAS, the Provincial government has implemented *CycleON: Ontario’s Cycling Strategy* with the vision of seeing cycling recognized, respected and valued as a core mode of transportation that provides individuals and communities with health, economic, environmental, social and other benefits, and;

WHEREAS, the City of Hamilton has set a target of 15% of all daily trips being made by walking or biking within the 2021-2031 timeframe¹, and;

WHEREAS, the City of Hamilton has committed to continue funding new cycling infrastructure to increase the safety of our residents and encourage more cycling as a means of transportation,

THEREFORE BE IT RESOLVED:

- (a) That the Mayor correspond with the Minister of Transportation to urge the Provincial Government to include an annual investment of \$75 million in cycling infrastructure in its capital budget
- (b) That other municipalities across Ontario, through the Association of Municipalities of Ontario, be encouraged to join with the City of Hamilton in calling on the Province to act.

¹ Transportation Master Plan (2007). City of Hamilton. Retrieved from: <https://d3fplf1m7bbt3.cloudfront.net/sites/default/files/media/browser/2014-12-17/transportation-master-plan-chapters2.pdf>

CITY OF HAMILTON

MOTION

Council: February 28, 2018

MOVED BY COUNCILLOR A. JOHNSON.....

SECONDED BY COUNCILLOR

Amendment to Item 21 of Planning Committee Report 18-002 respecting Application for Official Plan Amendment and Zoning By-law Amendments for Lands Located at 860 Queenston Road (OMB Case No. PL170282)(LS18010)

WHEREAS, the recommendations contained in Report LS18010 which were approved by Council on February 14, 2018 can be made public;

Therefore, be it resolved that Item 21 of Planning Committee Report 18-002 respecting Application for Official Plan Amendment and Zoning By-law Amendments for Lands Located at 860 Queenston Road (OMB Case No. PL170282) be deleted in its entirety and the following be inserted therein:

~~That the direction to staff outlined in the recommendations of Report LS18010 be approved and the report and appendices remain private and confidential and restricted from public disclosure.~~

With regard to the appeal to the Ontario Municipal Board (the "Board" or "OMB") by Queenston Road Holdings Inc. ("QRH"), Owner/Appellant, from the refusal by City Council of QRH's applications for amendments to the Urban Hamilton Official Plan, City of Hamilton Zoning By-law 05-200, and Former City of Stoney Creek Zoning By-law 3692-92 to permit a 19 storey apartment building consisting of 219 units for lands located at 860 Queenston Road (Stoney Creek) as shown on Appendix 'A' to Report LS18010:

- (a) That staff be directed to settle the OMB appeal respecting the Subject Lands, substantially in accordance with the draft official plan and zoning by-law amendments and drawings attached hereto as Appendices 'B', 'C', and 'D' respectively;
- (b) That staff be directed to present and/or provide evidence in support of the settlement to the Board, as may be necessary;
- (c) That the City Solicitor, or his/her designate, be authorized to execute Minutes of Settlement and/or a Draft Order substantially in accordance with the recommendations of this Report LS18010, and substantially in accordance with the form attached as Appendix 'E' to this Report LS18010; and
- (d) That Report LS18010 and its appendices remain confidential.

CITY OF HAMILTON

MOTION

Council Date: February 28, 2018

MOVED BY COUNCILLOR L. FERGUSON.....

SECONDED BY COUNCILLOR.....

Gypsy Moth Infestation Control (City Wide) - (PW17088a)

- (a) That Council approve the Single Source Procurement of Zimmer Air Services (ZAS) (Zimmer Air Services Incorporated), pursuant to Procurement Policy #11, Non-competitive Procurements, for the aerial application of the biological pesticide *Bacillus thuringiensis 'kurstaki'* ("Btk") in the areas identified in Appendix A to Report PW17088a;
- (b) That the General Manager, Public Works Department be authorized to negotiate, enter into, and execute a Contract and any ancillary documents required to give effect thereto with Zimmer Air Services, in a form satisfactory to the City Solicitor;
- (c) That staff coordinate the contract Terms of Reference with those of area municipalities who are also undertaking aerial Gypsy Moth control programs in order to engage Policy #12, Cooperative Procurement and benefit from the favourable pricing that economies of scale offers in the coordination of the aerial application of Btk.

Attachments:

Appendix A – Report 17088(a)

Appendix B – Appendix A to Report 17088(a)



CITY OF HAMILTON
PUBLIC WORKS DEPARTMENT
Environmental Services Division

TO:	Chair and Members Public Works Committee
COMMITTEE DATE:	February 22, 2018
SUBJECT/REPORT NO:	Gypsy Moth Infestation Control (City Wide) - (PW17088a)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Le' Ann W. Seely (905) 546-2424, Extension 3919 Steve Robinson (905) 546-2424, Extension 5495
SUBMITTED BY:	Craig Murdoch, B. Sc. Director, Environmental Services Division Public Works Department
SIGNATURE:	

RECOMMENDATION

- (a) That Council approve the Single Source Procurement of Zimmer Air Services (ZAS) (Zimmer Air Services Incorporated), pursuant to Procurement Policy #11, Non-competitive Procurements, for the aerial application of the biological pesticide *Bacillus thuringiensis 'kurstaki'* ("Btk") in the areas identified in Appendix A to Report PW17088a;
- (b) That the General Manager, Public Works Department be authorized to negotiate, enter into, and execute a Contract and any ancillary documents required to give effect thereto with Zimmer Air Services, in a form satisfactory to the City Solicitor;
- (c) That staff coordinate the contract Terms of Reference with those of area municipalities who are also undertaking aerial Gypsy Moth control programs in order to engage Policy #12, Cooperative Procurement and benefit from the favourable pricing that economies of scale offers in the coordination of the aerial application of Btk.

EXECUTIVE SUMMARY

OUR Vision: To be the best place to raise a child and age successfully.

OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

Through Report PW17088 funding in the amount of \$2.5 million over a 2-year period was approved for a Gypsy Moth Infestation Control Program using aerial application of *Bacillus thuringiensis 'kurstaki'* (Btk) over an estimated 1,950 hectares. Report PW17088 directed staff to report to Council, after completion of 2017 monitoring operations and before initiating the Program, on the final determination of areas that require treatment. The completed 2017 monitoring operations have confirmed the areas shown on the map attached as Appendix A to Report PW17088a as requiring treatment. This total area is approximately 1,999 hectares across wards 1, 8, 12, 13, and 14, plus 803 hectares of Hamilton Conservation Area land.

For reasons detailed in this report, and in consultation with the City's Procurement Section, it has been determined that the most effective and economical method to secure an experienced and competent vendor for Btk application is through Procurement Policy #11 Non-competitive Procurement, and Policy #12 Cooperative Procurement.

The Single Source recommendation was reached in consideration of Transport Canada Aviation Regulations that require a twin-engine helicopter be used for the low-altitude flight work needed to spray pesticide over urban/suburban areas, such as those in the City of Hamilton treatment area. In addition to the unique qualifications required for the operation of the low-flying twin engine helicopter is the complexity of aerial application. Therefore, Canadian Aviation Regulations requires the air operator to submit an application for Aerial Work with a detailed work plan. This application must be submitted to Transport Canada officials at least 21 days prior to initiating the operation. Upon approval, the air operator is granted Ministerial Authorization through a Special Flight Operations Certificate for Aerial Work. The pesticide must be applied at a period of time that will be between mid-May to early-June, which means the operators flight plan must be submitted to Transport Canada by early April. This speciality in terms of equipment and expertise limits the applicators that are able to complete this work. At the moment, staff is aware of only one other vendor located in British Columbia.

The Cooperative Procurement recommendation is made based on neighbouring municipalities that have also been impacted by the effects of Gypsy Moth. The City of Mississauga and the Town of Oakville have received approval from their Councils for aerial application of Btk in 2018. The City of Mississauga has also received approval from their Council for the Single Source procurement of Zimmer Air Services in 2018. The City of Hamilton Forestry Section has been collaborating with Mississauga and Oakville to coordinate Terms of Reference for a Btk treatment contract to achieve economies of scale and subsequent cost savings for each partnering municipality.

In order to meet the timelines and critical dates for the treatment, the Procurement Section has recommended that permission of Committee and Council be sought in order to secure a competent vendor through Procurement Policy 11, Non-competitive Procurement, and to employ Policy #12, Cooperative Procurement to benefit from

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economies of scale through cooperation with the City of Mississauga and the Town of Oakville.

Alternatives for Consideration – See Page 6

FINANCIAL – STAFFING – LEGAL IMPLICATIONS

Financial: Funds in the amount of \$1,950,000 in 2018 and \$550,000 in 2019 were approved through Report PW17088, funded through the Tax Stabilization Reserve.

Staffing: There are no staffing implications from the recommendations of this report.

Legal: There are no legal implications from the recommendations of this report. Assistance will be required for the finalization and execution of any contract with ZAS.

HISTORICAL BACKGROUND

Gypsy Moth (*Lymantria dispar dispar*) is a non-native invasive species that is known to be a significant defoliator of hardwood tree species. The pest was introduced accidentally to North America in 1869, and it was first discovered in Canada in 1969 on Wolfe Island, Ontario.

Since that time, this pest has continued to move westward, and has impacted urban forests throughout Southern Ontario, with notable impact to the City of Hamilton in 2007, and 2017. As a result of the 2007 studies an aerial spray program was undertaken through the Forestry Section in 2008 to treat this pest with *Bacillus thuringiensis 'kurstaki'* (Btk).

Btk is a soil-borne bacteria that is applied to the leaves of affected trees while caterpillars are in their early instar stage (immature). Once ingested, the bacteria disrupt the caterpillars' digestive system within 24-48 hours. Within days, caterpillars that have ingested Btk will succumb to its effects. Btk has very low residual properties in the natural environment. Sunlight and fungi deteriorate this bio-pesticide within 1-4 days after application. Since Btk requires an alkaline environment in a caterpillar's gut in order to be effective, it does not have any detrimental effects to humans, birds, or bees. Btk will affect other caterpillar species, such as a Fall Cankerworm (known as non-target species). Due to Btk's low residual properties and the narrow spray window (to be applied during the pest's larval development stage), the impact to non-target species is expected to be low. Conservative and measured application will be undertaken with the goal of strictly reducing the population below the 2,500 egg masses per hectare. This program is not intended to eradicate the pest entirely.

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In 2008, approximately 1,950 hectares were treated with Btk in the City of Hamilton. The 2009 follow-up monitoring indicated that the spray program was a success. This work was completed by Zimmer Air Services (ZAS) through Procurement Policy #11.

Through 2016 and 2017, Gypsy Moth egg mass monitoring was undertaken through the City's Forestry Section. In December 2017, the Forestry Section completed their egg mass monitoring operations. The result of the monitoring was a final determination of the areas that require aerial application of Btk to a total area of approximately 1,999 hectares, plus 803 hectares of HCA land. Treatment areas are shown on the map attached to Report PW17088a as Appendix A.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

By-law 08-070 is in place to address Gypsy Moth infestations as a nuisance with City staff being given authority to treat with Btk when egg mass quantities exceed 2,500 per hectare.

By-law 17-064 Procurement Policy, Policy #11 Non-competitive Procurements and Policy #12 Cooperative Procurements would be utilized if the recommendations of this report are approved.

RELEVANT CONSULTATION

Transport Canada requires twin engine helicopters be used in the application of Btk over built-up (urban/suburban) areas as per Canadian Aviation Regulations, Part VII Commercial Air Services, Subpart 2, Aerial Work. The nature of this low-altitude twin engine helicopter flight work is unique. In addition to the unique qualifications needed for the operation of the low-flying twin engine helicopter is the complexity of aerial treatment of pesticide over an urban/suburban area. Therefore, part of the Canadian Aviation Regulation requires the air operator to submit an application for Aerial Work with a detailed work plan. This application must be submitted to Transport Canada officials at least 21 days prior to initiating the operation. Upon approval, the air operator is granted Ministerial Authorization through a Special Flight Operations Certificate for Aerial Work. This speciality in terms of equipment and expertise limits the applicators that are able to complete this work. At the moment, staff is aware of only one other vendor located in British Columbia.

City staff have consulted with the City of Burlington, the Town of Oakville, the City of Mississauga, the City of Toronto, Hamilton Conservation Authority, and Royal Botanical Gardens. It was determined that a collaborative procurement where possible is the preferred method as it would provide opportunities for the realization of economies of scale through the use of same contract terms and conditions.

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The Hamilton Conservation Authority (HCA) and the City of Hamilton's Forestry Section have been working together on their monitoring programs and intend to continue to share information. HCA is considering a spray program for 2018 subject to available funds. If funds are approved, HCA staff has expressed interest in contributing funds to the City's contract with the chosen vendor, in order to have HCA land included in the treatment area. Given the contiguous nature of their lands with those of the City of Hamilton, this would be a favourable solution for both parties. Treatment areas are on the map attached to Report PW17088a as Appendix A.

The City of Hamilton Procurement Section was consulted extensively with regards to the process to secure a competent vendor and support the recommendations to Committee and Council. The Manager of Procurement has provided comments to this report.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

Proposed Treatment Area:

The Forestry Section has confirmed that approximately 1,999 hectares require treatment of Gypsy Moth with Btk, with the potential addition of 803 hectares if HCA achieves funding and wishes to partner with the City of Hamilton. Table 1 below, identifies the treatment locations in relation to wards and size of area to be treated.

Table 1: Planned Treatment Locations

Location	Ward	Area (Hectares)
West Hamilton Escarpment	Ward 1	29
West Hamilton	Ward 1	43
West Hamilton Escarpment	Ward 8	9
Ancaster	Ward 12	1092
Dundas	Ward 13	701
Flamborough	Ward 14	125
Total		1,999

Staff recommend that Procurement Policies 11, Non-competitive Procurements, and Policy 12, Cooperative Procurements be employed to permit the Gypsy Moth Control Program to be undertaken based on the information listed below.

1) In order to meet Transport Canada regulations for approval to operate a low flying twin engine helicopter over urban/suburban areas in Hamilton, the vendor must submit a detailed work plan no later than early April, which is approximately 6-weeks from the date of this report. Issuing an RFP requires at the very least a 6-week timeline to prepare, issue, and award a contract. This process would likely prevent any ability for a spray program to be completed in 2018.

- 2) Zimmer Air Services (ZAS) has a demonstrated ability and experience completing programs of this scale and complexity. In 2007, ZAS successfully completed an aerial spray program for the City of Mississauga and the City of Toronto. In 2008, ZAS successfully completed an aerial application of Btk in the City of Hamilton having been retained through Policy 11 Procurement process.
- 3) In 2017 ZAS was retained by the City of Toronto for the purpose of aerial application of Btk retained ZAS, as well as the City of Mississauga for aerial application of Btk to be undertaken in 2018.
- 4) The Town of Oakville is in the process of coordinating their terms of reference with the City of Mississauga and securing the approvals necessary to retain ZAS for their aerial application of Btk.
- 5) Research and consultation informs staff that the likelihood of getting more than one competent bidder with experience in low-altitude twin engine helicopter flight work in combination with the aerial application of pesticide over an urban/suburban area is very low. Therefore, the benefits of issuing a Request for Proposals would be diminished if staff were to expend the time necessary to prepare and issue the RFP issue a Request for Proposal (RFP) only to receive one compliant bid. The Manager of Procurement therefore supports the recommendations for approval in order to prevent undue prolonging of the approval process, which would have significantly negative impacts of the Gypsy Moth Control Program.
- 6) Staff from both Forestry and Procurement have had extensive discussions regarding the engagement of a vendor to perform the application requirements. Given the time constraints to secure a competent vendor and to seek the necessary approvals from Transport Canada all within the small window of time in which to apply the BtK, the Manager of Procurement has recommended that Committee and Council approval be sought to engage ZAS through a Procurement Policy #11, Non-competitive Procurement. Furthermore, the engagement of ZAS is also viewed by the Manager of Procurement as a Policy #12 Cooperative Procurement, which allows the City to gain both efficiencies in the procurement process and in the cost for services.
- 7) By exercising Procurement Policy #12 Cooperative Procurements, the City of Hamilton will realize economies of scale by pooling our requirements with that of both Mississauga and Oakville and can gain leverage in negotiating a cost-effective price that would otherwise be secured through a competitive process.
- 8) City of Hamilton staff have been working with the City of Mississauga, the Town of Oakville, and Hamilton Conservation Authority to coordinate the Terms of Reference so that we may benefit from the favourable pricing that economies of scale can offer.

ALTERNATIVES FOR CONSIDERATION

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Council has the option to direct staff to issue a Request for Proposal (RFP) for the aerial application of Btk over urban/suburban land in the City of Hamilton. There is a high likelihood that Zimmer Air Services will be the only compliant bidder to an RFP that meets Transport Canada regulations. Furthermore, issuing a RFP requires at the very least a 6 week timeline in order to prepare, issue, and award a contract. This process would significantly delay and quite possibly prevent any ability for a spray program to be completed in 2018. Staff therefore does not recommend this alternative.

ALIGNMENT TO THE 2016 – 2025 STRATEGIC PLAN

Economic Prosperity and Growth

Hamilton has a prosperous and diverse local economy where people have opportunities to grow and develop.

Healthy and Safe Communities

Hamilton is a safe and supportive city where people are active, healthy, and have a high quality of life.

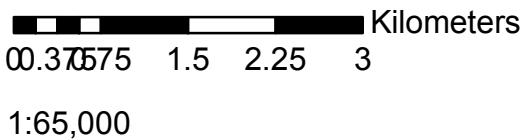
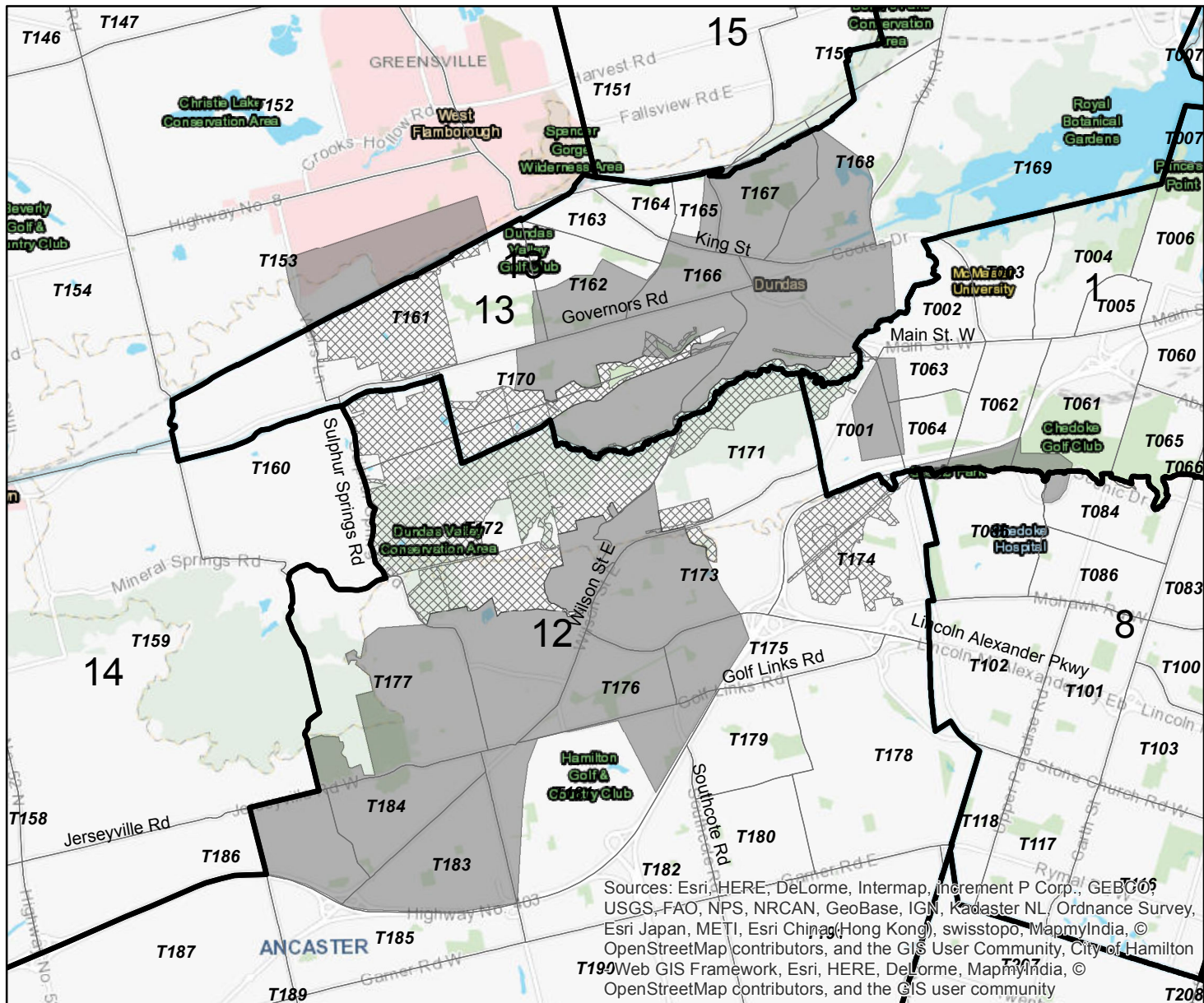
Clean and Green

Hamilton is environmentally sustainable with a healthy balance of natural and urban spaces.

APPENDICES AND SCHEDULES ATTACHED

Appendix A: Proposed Treatment Locations, 2018

2018 Proposed Aerial Spray Locations



Legend

- Ward Boundary
- Treatment Areas (1,999 Ha)
- Grid Boundary
- HCA Treatment Areas (803 Ha)

CITY OF HAMILTON

MOTION

Council: February 28, 2018

MOVED BY COUNCILLOR A. JOHNSON.....

SECONDED BY COUNCILLOR

Amendment to Item 20 of Planning Committee Report 18-002 respecting Bill 139, *Building Better Communities and Conserving Watersheds Act, 2017* - Ontario Proposed Changes to the Land Use Planning and Appeals System (LS16027(c)/PED16237(b)) (City Wide)

WHEREAS, the recommendations contained in Report LS16027(c)/PED16237(b) which were approved by Council on February 14, 2018 can be made public;

THEREFORE BE IT RESOLVED, that Item 20 of Planning Committee Report 18-002 respecting Bill 139, *Building Better Communities and Conserving Watersheds Act, 2017* - Ontario Proposed Changes to the Land Use Planning and Appeals System be deleted in its entirety and the following be inserted therein:

~~That the direction to staff outlined in the recommendations of Report LS16027(c)/PED16237(b) be approved and the report and appendices remain private and confidential and restricted from public disclosure.~~

WHEREAS, on May 18, 2010, staff were directed to report to Planning Committee on matters relating to non-decision appeals filed under the Ontario Municipal Board process and specific instructions have not yet been given;

NOW THEREFORE BE IT RESOLVED:

- (a) That staff be instructed and directed as follows:
 - (i) Where an appellant has agreed to postpone the scheduling of any hearing event until such time as Planning Committee has had an opportunity to consider the matter and that agreement has been communicated to the Ontario Municipal Board or its successor, that Planning staff be directed to process those matters accordingly and bring those matters to Planning Committee at a non-statutory public meeting for consideration and for direction to be given to the City Solicitor;

- (ii) Where an appellant does not agree as described in (i), that Planning and Legal Services be directed to report back on the specific matter for further instructions or direction;
 - (iii) That the City Solicitor be instructed to oppose these appeals until such time as further instruction is given on any specific appeal.
- (b) That, the City Solicitor and General Manager of Planning and Economic Development be authorized and directed to obtain any necessary legal, planning and engineering resources to manage any increased workloads due to Bill 139 transition appeals, including any required temporary contract staff and/or external legal counsel, planning and engineering resources;
- (c) That staff be directed to fund any additional planning and engineering resources referred to in subsection (b) from the Development Fee Stabilization Reserve (110086) for up to a maximum amount of \$800,000;
- (d) That staff be directed to fund any additional legal resources referred to in subsection (b) from the Tax Stabilization Reserve (110046) for up to a maximum amount of \$430,000;
- (e) That staff be directed to monitor the number of appeals and impacts on overall workload, and report back to Planning Committee if additional funding or resources are needed;
- (f) That Report LS16027(c)/PED16237(b) remain confidential.

CITY OF HAMILTON

MOTION

Council: February 28, 2018

MOVED BY COUNCILLOR L. FERGUSON.....

SECONDED BY COUNCILLOR

Amendment to Item 9 of Public Works Committee Report 17-010 respecting the Ontario Municipal Commuter Cycling (OMCC) 2018 Funding Agreement

WHEREAS, on August 18, 2017, Council of the City of Hamilton approved Item 9 of Public Works Committee Report 17-010, and authorized the City of Hamilton to apply to receive funding for 17 City of Hamilton projects listed in Schedule 1 to this Motion under the Ontario Municipal Commuter Cycling (“OMCC”) Program;

WHEREAS, the Ontario Ministry of Transportation has approved funding for the 17 City of Hamilton projects under the OMCC Program;

WHEREAS, at its meeting on August 18, 2017, Council of the City of Hamilton also authorized the signing of a Transfer Payment Agreement with Her Majesty the Queen in right of Ontario as represented by the Minister of Transportation to receive funding for the approved projects under the OMCC Program;

WHEREAS, the OMCC Transfer Payment Agreement requires the City to confirm, by way of a by-law, the approval by the City of the 17 projects submitted under the OMCC Program as well as the approval by the City of its 20% funding Contribution to the projects.

THEREFORE BE IT RESOLVED:

That sub-section (d) of Item 9 of Public Works Committee Report 17-010 respecting the Ontario Municipal Commuter Cycling (OMCC) 2018 Funding Agreement be deleted and replaced and that a new sub-section (f) be added to read as follows:

- (a) That the list of proposed cycling projects described in Appendix A to Report PW17069 be approved for submission to the Ontario Ministry of Transportation (MTO) for the Ontario Municipal Commuter Cycling (OMCC) 2018 Funding Application;
- (b) That the Mayor and City Clerk be directed to sign the Ontario Municipal Commuter Cycling (OMCC) Program Application Declaration, Appendix B to Report PW17069, to be submitted to the Ontario Ministry of Transportation;

- (c) That the General Manager of Public Works, or their designate, be authorized and directed to enter into and sign, on behalf of the City of Hamilton, all negotiated agreements and associated documents with the Province of Ontario, Ministry of Transportation, for funding from the Ontario Municipal Commuter Cycling Program (OMCC) in a form satisfactory to the City Solicitor;
- ~~(d) ***That a By-law authorizing and directing the Mayor, the City Clerk, and the General Manager, Finance and Corporate Services to sign a Letter of Agreement between the City of Hamilton and the Province of Ontario with respect to funding under the Ontario Municipal Commuter Cycling (OMCC) Program;***~~
- (d) ***That a By-law authorizing and directing the Mayor, the City Clerk and the General Manager of Finance and Corporate Services to sign the Agreement between the City of Hamilton and the Province of Ontario with respect to funding for projects approved by Council for submission to the Ontario Ministry of Transportation through PW17069 under the Ontario Municipal Commuter Cycling (OMCC) Program, confirming the approval by the City of the projects submitted under the OMCC Program, and confirming the City 20% funding contribution to the projects under the OMCC Program, be prepared.***
- (e) That the funding requirement over the three year Ontario Ministry of Transportation (MTO) completion deadline be forwarded to Council for consideration in the 2018 to 2020 Capital Budget Process;
- (f) ***That the City's 20% own share contribution of \$927,000 be funded as follows:***
- (i) ***\$300,000 in 2018 as approved by Council in the 2018 Tax Supported Capital Budget (FCS17099) through Project ID 4661817124;***
 - (ii) ***\$600,000 pre-committed in principle by Council (\$300,000 in 2019, \$300,000 in 2020) in the 2018 Tax Supported Capital Budget (FCS17099) through Project ID 4661817124;***
 - (iii) ***\$27,000 surplus funds from 2017 Project ID 4661717124 On Street Bike Facilities.***

Authority: Item 9, Public Works Committee
Report 07-016 (PW07153)
CM: December 12, 2007
Ward: 2, 3, 6, 9, 10

Bill No. 034

CITY OF HAMILTON

BY-LAW NO. 18-

To Amend By-law No. 01-215 Being a By-law To Regulate Traffic

WHEREAS sections 8, 9 and 10 of the Municipal Act, 2001, S.O. 2001, c. 25, authorize the City of Hamilton to pass by-laws as necessary or desirable for the public and municipal purposes, and in particular paragraphs 4 through 8 of subsection 10(2) authorize by-laws respecting: assets of the municipality, the economic, social and environmental well-being of the municipality; health, safety and well-being of persons; the provision of any service or thing that it considers necessary or desirable for the public; and the protection of persons and property;

AND WHEREAS on the 18th day of September, 2001, the Council of the City of Hamilton enacted By-law No. 01-215 to regulate traffic;

AND WHEREAS it is necessary to amend By-law No. 01-215.

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. Schedule 2 (Speed Limits) of By-law No. 01-215, as amended, is hereby further amended by removing from Section "C" (Flamborough) thereof the following item, namely:

Parkside Drive	50m east of Evans Road	Millborough Line	60km/h
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And by adding to section "A" (Hamilton) thereof the following items, namely;

San Remo Drive	San Pedro Drive	Lavina Crescent	40 km/h
San Antonio Drive	San Remo Drive	San Pedro Drive	40 km/h
Karen Crescent	San Antonio Drive	San Pedro Drive	40 km/h
Violet Drive	Grandville Avenue	Barlake Avenue	40 km/h
Barlake Avenue	Easterly limit	Hollydene Place	40 km/h
Hollydene Place	Southerly limit	Northerly limit	40 km/h

To Amend By-law No. 01-215
Being a By-law to Regulate Traffic

Page 2 of 2

Upper Kenilworth Avenue	Mohawk Road	Limeridge Road	40 km/h
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And by adding to section "F" (Stoney Creek) thereof the following items, namely;

Bonita Drive	King Street	Brentwood Drive	40 km/h
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2. Subject to the amendments made in this By-law, in all other respects, By-law No. 01-215, including all Schedules thereto, as amended, is hereby confirmed unchanged.
3. This By-law shall come into force and take effect on the date of its passing and enactment.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Authority: Item 14, Committee of the Whole
 Report 01-003 (FCS01007)
 CM: February 6, 2001
 Ward: 2, 3, 6, 9, 10

Bill No. 035

CITY OF HAMILTON

BY-LAW NO. 18-

**To Amend By-law No. 01-218, as amended,
 Being a By-law To Regulate On-Street Parking**

WHEREAS Section 11(1)1 of the *Municipal Act, S.O. 2001, Chapter 25*, as amended, confers upon the councils of all municipalities the power to enact by-laws for regulating parking and traffic on highways subject to the *Highway Traffic Act*;

AND WHEREAS on the 18th day of September, 2001, the Council of the City of Hamilton enacted By-law No. 01-218 to regulate on-street parking;

AND WHEREAS it is necessary to amend By-law No. 01-218, as amended.

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. By-law No. 01-218, as amended, is hereby further amended by adding/deleting from the identified Schedules and Sections noted in the table below as follows:

Schedule	Section	Highway	Side	Location	Times	Adding/ Deleting
8 - No Parking	F	Echovalley	East & North	from 57.8m south of Winslow to 25.1m southerly and easterly along the curbline	Anytime	Deleting
8 - No Parking	F	Echovalley Dr.	East & North	58m south of Winslow Way to south curb line of Stockbridge Gardens	Anytime	Adding
8 - No Parking	F	Echovalley Dr.	West	Winslow Way to 50m southerly	Anytime	Adding
8 - No Parking	F	Winslow Way	South	Echovalley Dr. to 80m easterly	anytime	Adding
8 - No Parking	F	Winslow	North & West	from 68.5m east of the extended east curb line of Echovalley to 25m easterly and northerly along the curbline	Anytime	Deleting

To Amend By-law No. 01-218, as amended,
Being a By-law to Regulate On-Street Parking

Schedule	Section	Highway	Side	Location	Times	Adding/ Deleting
8 - No Parking	F	Winslow	Southwest & West	from 55.4m southeast of the eastern intersection with Westbank to 24.4m southeasterly and southerly along the curbline	Anytime	Deleting
8 - No Parking	F	Winslow Way	North, West & South	68m east of Echovalley Dr to 65m northerly	Anytime	Adding
8 - No Parking	F	Winslow Way	East	Thornbury Crt. to 61m southerly	Anytime	Adding
8 - No Parking	F	Winslow Way	North	Westbank Tr. (W. Leg) to 58m easterly	Anytime	Adding
8 - No Parking	F	Thornbury	West & Southwest	from 42m north of Westbank to 25.9m northerly and northwesterly along the curbline	Anytime	Deleting
8 - No Parking	F	Thornbury Crt.	West	Westbank Tr. To 66m northerly	Anytime	Adding
8 - No Parking	F	Thornbury Crt.	North	70m north of Westbank Tr. To 50m westerly	Anytime	Adding
8 - No Parking	F	Thornbury Crt.	South	100m north of Westbank Tr. To 65m westerly	Anytime	Adding
8 - No Parking	F	Westbank	Southeast & South	from 50.7m northeast of the western intersection with Winslow to 20.8m northeasterly and easterly along the curbline	Anytime	Deleting
8 - No Parking	F	Westbank Tr.	South & East	Winslow Way/ Thornbury Crt. to 150m westerly	Anytime	Adding
8 - No Parking	F	Westbank Tr.	West	110m west of Thornbury Crt/ Winslow Way to 120m southerly	Anytime	Adding
8 - No Parking	F	Westbank Tr.	East	70m south of Winslow Way (S. leg) to 125m northerly	Anytime	Adding
8 - No Parking	F	Westbank Tr.	East	Mud St. to 100m north of Stockbridge Gardens	Anytime	Adding
8 - No Parking	F	Stockbridge Gardens	South	Westbank Tr. To Echovalley Dr.	Anytime	Adding
8 - No Parking	E	Shirley St.	East	23m north of Hardale Cres. to 7m northerly	Anytime	Adding
8 - No Parking	E	Park St.	East	35m north of Herkimer St. to 15m northerly	Anytime	Adding

To Amend By-law No. 01-218, as amended,
Being a By-law to Regulate On-Street Parking

Schedule	Section	Highway	Side	Location	Times	Adding/ Deleting
12 – Permit	E	Shaw St.	North	105m east of Victoria Ave. to 6m easterly	Anytime	Adding

Schedule	Section	Highway	Side	Location	Times	Adding/ Deleting
<i>13 - No Stopping</i>	<i>F</i>	Lyton Cres.	North	Kennard St. to 23m easterly	Anytime	Adding
<i>13 - No Stopping</i>	<i>F</i>	Glen Cannon Dr.	North & West	145m east of Braw Crest Dr. to 33m easterly	Anytime	Adding

Schedule	Section	Highway	Side	Location	Times	Adding/ Deleting
<i>20 – School Bus LZ</i>	E	Hughson	East	Simcoe to 80.4m northerly	7:00 a.m. to 6:00 p.m. Monday to Saturday	Deleting
<i>20 – School Bus LZ</i>	E	Simcoe St.	North	20m east of Hughson St. to 55m easterly	7:00 a.m. to 6:00 p.m. Monday to Saturday	Adding

2. Subject to the amendments made in this By-law, in all other respects, By-law No. 01-218, including all Schedules thereto, as amended, is hereby confirmed unchanged.

To Amend By-law No. 01-218, as amended,
Being a By-law to Regulate On-Street Parking

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2. This By-law shall come into force and take effect on the date of its passing and enactment.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Authority: Item 7, Economic Development &
Planning Committee Report 10-005
(PED10051)
CM: March 10, 2010
Ward: 11

Bill No. 036

CITY OF HAMILTON

BY-LAW NO. 18-

**To Establish City of Hamilton Land
Described as Block 108 on Plan 62M-1144
as Part of Greti Drive**

WHEREAS sections 8, 9 and 10 of the *Municipal Act, 2001* authorize the City of Hamilton to pass by-laws necessary or desirable for municipal purposes, and in particular by-laws with respect to highways; and

WHEREAS section 31(2) of the *Municipal Act, 2001* provides that land may only become a highway by virtue of a by-law establishing the highway.

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. The land, owned by and located in the City of Hamilton, described as Block 108 on Plan 62M-1144, is established as a public highway, forming part of Greti Drive.
2. The General Manager of Public Works or their authorized agent is authorized to establish the said land as a public highway.
3. This By-law comes into force on the date of its registration in the Land Registry Office (No. 62).

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Authority: Item 6, Public Works Committee
Report 16-020 (PW16111)
CM: December 14, 2016
Ward: 8

Bill No. 037

CITY OF HAMILTON

BY-LAW NO. 18-

To Permanently Close and Sell a Portion of a Road Allowance between Stonechurch Road West and Upper Horning Road, Hamilton, namely Part of Road Allowance between Lots 54 and 55, Concession 3, in the Geographic Township of Ancaster, designated as Part 8, Plan 62R-14003, save and except Part 4, Plan 62R-16769, City of Hamilton

WHEREAS sections 8, 9 and 10 of the *Municipal Act, 2001* authorize the City of Hamilton to pass by-laws necessary or desirable for municipal purposes, and in particular by-laws with respect to highways; and

WHEREAS section 34(1) of the *Municipal Act, 2001* provides that a by-law permanently closing a highway does not take effect until a certified copy of the by-law is registered in the proper land registry office; and

WHEREAS highways to be closed by by-law are declared to be surplus to the needs of the City of Hamilton under the Sale of Land Policy By-law; and

WHEREAS at its meeting of December 14, 2016, Council approved of Item 6.2 of Public Works Committee Report 16-020, and authorized the City of Hamilton to permanently close and sell a Portion of Road allowance between Stonechurch Road West and Upper Horning Road, Hamilton, being Part of Road Allowance between Lots 54 and 55, Concession 3, in the Geographic Township of Ancaster, designated as Part 8, Plan 62R-14003, save and except Part 4, Plan 62R-16769, City of Hamilton; and

WHEREAS notice to the public of the proposed sale of the part of the road allowance has been given in accordance with the requirements of the Sale of Land Policy By-law.

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. The part of the road allowance between Stonechurch Road West and Upper Horning Road, Hamilton, being Part of Road Allowance between Lots 54 and 55, Concession 3, in the Geographic Township of Ancaster,

To Permanently Close and Sell a Portion of a Road Allowance between Stonechurch Road West and Upper Horning Road, Hamilton, namely Part of Road Allowance between Lots 54 and 55, Concession 3, in the Geographic Township of Ancaster, designated as Part 8, Plan 62R-14003, save and except Part 4, Plan 62R-16769, City of Hamilton

Page 2 of 2

designated as Part 8, Plan 62R-14003, save and except Part 4, Plan 62R-16769, City of Hamilton, which is owned by the City of Hamilton, is permanently closed.

2. The soil and freehold of the part of the road allowance permanently closed under section 1 is to be sold to Frank Mulas Construction Limited for the sum of Two Thousand Dollars (\$2,000.00).
3. This by-law comes into force on the date of its registration in the Land Registry Office (No. 62).

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Authority: Item 1, Planning Committee Report
15-016 (PED15160)
CM: October 28, 2015
Ward: 11

Bill No. 038

CITY OF HAMILTON

BY-LAW NO. 18-

To Repeal and Replace By-law No. 18-001, Being a By-law to Permanently Close and Sell a Portion of Kinsman Drive being Parts 1 to 6, inclusive, on Plan 62R-19974, City of Hamilton

WHEREAS sections 8, 9 and 10 of the *Municipal Act, 2001* authorize the City of Hamilton to pass by-laws necessary or desirable for municipal purposes, and in particular by-laws with respect to highways; and

WHEREAS section 34(1) of the *Municipal Act, 2001* provides that a by-law permanently closing a highway does not take effect until a certified copy of the by-law is registered in the proper land registry office; and

WHEREAS highways to be closed by by-law are declared to be surplus to the needs of the City of Hamilton under the Sale of Land Policy By-law; and

WHEREAS by execution of a Subdivision Agreement dated October 25, 2016 between the City of Hamilton and Empire Communities (Caterini) Ltd., the City has authorized and agreed to the closure and conveyance of a certain portion of Kinsman Drive being Parts 1 to 6 inclusive, on Plan 62R-19974, when deemed by the City to no longer be required for road purposes; and

WHEREAS notice to the public of the proposed sale of the part of the road allowance has been given in accordance with the requirements of the Sale of Land Policy By-law.

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. The part of the road allowance, being Kinsman Drive being Parts 1 to 6 inclusive, on Plan 62R-19974, City of Hamilton, is permanently closed.
2. The soil and freehold of the part of the road allowance permanently closed under section 1 is to be sold to Empire Communities (Caterini) Ltd. for the sum of two dollars (\$2.00) pursuant to the terms of the Subdivision Agreement dated October 25, 2016 between City of Hamilton and Empire Communities (Caterini) Ltd. registered as Instrument No. WE1182574 on January 30, 2017.

3. By-law No. 18-001 is repealed.
4. This by-law comes into force on the date of its registration in the Land Registry Office (No. 62).

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Authority: Item 17, Public Works Committee
Report 07-11
(TOE02005(b)/PED07248)
CM: September 26, 2007
Ward: 12

Bill No. 039

CITY OF HAMILTON

BY-LAW NO. 18-

To Impose a Sanitary Sewer Charge Upon Owners of Land Abutting Garner Road West from Shaver Road to Approximately 190m Easterly, in the City of Hamilton

WHEREAS the Council of the City of Hamilton authorized recovering a portion of costs associated with the construction of a Sanitary Sewer Works including by approving, on September 26, 2007, Item 17 of Public Works Committee Report 07-011 (Report TOE02005b/FCS02026b/PED07248); and

WHEREAS a developer, Monterey Heights Development Corporation, in satisfaction of terms and conditions of subdivision agreement "Monterey Heights", did construct certain Sanitary Sewer Works, in the City of Hamilton, as more particularly described in Schedule "A" attached to this By-law; and

WHEREAS the cost of the Sewer Works to be recovered from all benefitting property owners is \$23,235.00.

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. Sewer Charges are imposed upon the owners or occupants of land who benefit from the construction of the Sewer Works (the "Assessed Owners").
2. The Assessed Owners' lands and the respective Sewer Charges are more particularly described in Schedule "A", which Schedule is attached to and forms part of this By-law.
3. The Sewer Charges have been established using the approved method for cost apportionment per City of Hamilton Report TOE02005b/FCS02026b/PED07248 (Funding Methodologies for Municipal Infrastructure Extensions Review and Update), establishing flat fee Sewer Charge of \$7,745.00. The Sewer Charges shall be annually adjusted to the current rate in the City's User Fees and Charges By-law.
4. The amount resulting from the application of the Sewer Charges (the "Indebtedness"), shall be collected at the time of permit issuance for any connection to the said Sewer Works, in addition to any applicable permit fee.
5. The Assessed Owners have the option of paying the Indebtedness by way of annual payments over a period of 15 years from the date of permit issuance for connection by entry on the tax roll, to be collected in like manner as municipal taxes. The interest rate utilized for the 15 year payment shall be the City of Hamilton's then-current 15 year borrowing rate (2018 rate -3.25%).

6. Notwithstanding Section 5, an Assessed Owner of a parcel described in Schedule "A" may pay the commuted value of the Indebtedness without penalty, but including interest, at any time.
7. Should an Assessed Owner sever or subdivide their parcel of land, the Sewer Charges owed to the City of Hamilton, whether the parcel of land is connected or not, and whether or not the Assessed Owner has previously exercised the repayment option set out in Section 5 above, shall be paid forthwith to the City of Hamilton in a lump sum as a condition of the severance or subdivision approval.
8. The developer, Monterey Heights Development Corporation, upon satisfying the City that it has completed its obligations with respect to the construction of the said Sewer Works, shall receive repayment of that portion of the associated cost of the construction collected hereunder, pursuant to the terms and conditions of its subdivision agreement.
9. Unpaid Sewer Charges constitute a debt to the City and may be added to the tax roll and collected in the same manner as municipal taxes.
10. If any provision or requirement of this By-law, or the application of it to any person, shall to any extent be held to be invalid or unenforceable by any court of competent jurisdiction, the remainder of the By-law, or the application of it to all persons other than those in respect of whom it is held to be invalid or unenforceable, shall not be affected, and each provision and requirement of this By-law shall be separately valid and enforceable.
11. This By-law comes into force on the day following the date of its passing.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

To Impose a Sanitary Sewer Charge Upon Owners of Land Abutting Garner Road West from Shaver Road to Approximately 190m Easterly, in the City of Hamilton

Schedule "A" to By-law No. 18-039

Garner Road West
Sanitary Sewer on Garner Road West from Shaver Road to approximately 190m
Easterly

Property Address	Sanitary Sewer Charge
629 Garner Road West	\$7,745.00
527 Shaver Road	\$7,745.00
563 Shaver Road	\$7,745.00
TOTAL	\$23,235.00

Authority: Item 7, Planning Committee
Report 18-003 (PED16232(b))
CM: February 28, 2018
Ward: City Wide
Bill No. 040

CITY OF HAMILTON

BY-LAW NO. 18-

To Amend By-law No. 07-170, being a By-law to License and Regulate Various Businesses

WHEREAS Council enacted a by-law to licence and regulate various businesses being City of Hamilton By-law No. 07-170; and

WHEREAS this By-law amends Schedule 25 (Taxicabs);

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. Section 1(1) is amended by adding the following definitions in alphabetical order:

- a) **“accessible priority list”** means the list of applications for an accessible taxicab owner licence maintained by the Director of Licensing and made available to the public with names set out thereon in chronological order as to the date and time of receipt;
- b) **“new accessible taxicab owner’s licence”** means an accessible taxicab owner’s licence issued, transferred or purchased after September 2017, except renewals existing at the date of the enactment of this schedule;

2. Section 13 is amended by adding a new subsection (m) as follows:

- (m) to impose conditions on any accessible taxicab owner’s licence issued by the City, transferred or purchased after September 2017 requiring the accessible taxicab to be in service and available for dispatched calls on:
 - a) specified days of the week; and,
 - b) specified times of the 24-hour period of any day.

3. Section 16 is amended by deleting subsection (v).

4. Section 17 is amended by deleting and replacing subsection (2) with a new subsection (2):

- (2) New accessible taxicab owner licence plates shall be issued:
 - a) first to individuals on the priority list; and,
 - b) second to individuals on the accessible priority list.
5. Section 18 is amended by adding a new subsection (m) as follows:
 - (m) where the licensed broker fails to dispatch an accessible taxicab on a priority basis to a person with a disability who requests such service.
6. Section 20 is amended by adding a new subsection (5) as follows:
 - (5) Notwithstanding any other provision of this schedule, the Director of Licensing may authorize the issuance of additional accessible taxicab plates at his/her discretion.
7. Section 21 is amended by adding subsection (1) behind section 21 so that it reads 21(1) and adding a new subsection (2) as follows:
 - (2) Names of licensed taxicab drivers shall be placed on the accessible priority list in chronological order from date of application.
8. Section 22 is amended by adding a new subsection (3) as follows:
 - (3) Notwithstanding the closure of the priority list, the accessible priority list shall remain open allowing licensed drivers to be added to the list in order of application date.
9. Section 23 is amended by adding a new subsection (9) as follows:
 - (9) Persons whose names are on the accessible priority list must comply with all sub-sections of this Section 23.
10. Section 24 is amended by adding a new subsection (9) as follows:
 - (9) Persons whose names are on the accessible priority list must comply with all subsections of this Section 24.
11. Section 25 is amended by adding a new subsection (3) as follows:

- (3) Persons whose names are on the accessible priority list must comply with all subsections of this Section 25.

12. Section 26 is amended by adding a new subsection (3) as follows:

- (3) Subsections (1) and (2) of this Section 26 also applies to individuals on the accessible priority list.

13. Section 38(1) is amended by deleting and replacing subsection (a) with:

- (a) submitted by such person to the Director of Licensing for testing and inspection at any time as directed;

14. Section 38(1) is amended by deleting subsection (e).

15. Section 41(4) is amended by adding a new subsection (c) as follows:

- (c) proof of insurance in the amount of \$2,000,000.

16. Section 42(2) is amended by deleting and replacing subsection (b) with the following:

- (b) a taxicab that is accessible, as determined by the Director of Licensing from time to time, and is no more than five (5) years old when first approved as a taxicab under section 56(5), shall be no more than ten (10) years old.

17. Section 47 is amended by deleting and replacing subsection (1)(Z) to (1)(z), lower case (z)

18. Section 50(1) is amended by adding a closed bracket after (o so that it reads (o).

19. Section 54(1) is deleted and replaced it with the following:

- (1) This schedule shall be administered by the Director of Licensing with delegation of the enforcement to any Municipal Officer.

20. Section 54(2) is amended by adding a new subsection (e) as follows:

- (e) issue an administrative penalty notice for any contraventions of this Schedule.

To Amend By-law No. 07-170, a By-law to License and Regulate Various Businesses

(Page 4 of 4)

21. The amendments in this By-law include any necessary grammatical, numbering and lettering changes as necessary.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Authority: Item 8, Planning Committee
Report 18-003 (PED18045)
CM: February 28, 2018
Ward: City Wide
Bill No. 041

CITY OF HAMILTON

BY-LAW NO. 18-

To Amend By-law No. 07-170, Being a By-law to License and Regulate Various Businesses

WHEREAS Council enacted a By-law to License and Regulate Various Businesses being City of Hamilton By-law No. 07-170; and

WHEREAS this By-law deletes and replaces Appendix 1 of Schedule 25 – Taxicabs;

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. Appendix 1 of Schedule 25 of By-law 07-170 is deleted and replaced with Appendix “A” attached hereto.
2. This By-law comes into force on the day it is passed.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

**SCHEDULE 25
TAXICABS**

**Appendix 1 (Taxicab Tariff/Fares)
Meter and By Agreement Rates**

The Meter and By Agreement Rates as approved by Council are set as follows:

For the first 71.4 meters or part thereof	\$3.90
For each additional 55.6 meters or part thereof	\$0.10 (\$1.80)
For waiting time while under engagement for each eleven (11) seconds	\$0.10
Livery or meter cabs by agreement (per hour)	\$37.00

Senior Citizens receive a 10% reduction on the above Meter Rates calculated on the highest Full Dollar registered on the taxi meter.

The above rate includes the Harmonized Sales Tax.

In accordance with section 68 of this By-law, promotional discount fares are prohibited subject to the written consent of the Director of Licensing.

Authority: Item 9, Planning Committee
Report 18-003 (PED16039(a))
CM: February 28, 2018
Ward: City Wide
Bill No. 042

CITY OF HAMILTON

BY-LAW NO. 18-

To Amend By-law No. 07-170, a By-law to License and Regulate Various Businesses

WHEREAS Council enacted a by-law to license and regulate various businesses being City of Hamilton By-law No. 07-170;

AND WHEREAS section 154.1 of the Municipal Act, 2001 authorizes the City of Hamilton to define the location and limit the number of payday loan establishments;

AND WHEREAS this By-law deletes and replaces Schedule 11 – Payday Loan Businesses;

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. Schedule 11 of By-law No. 07-170 is repealed and replaced with Appendix “A” attached hereto.
2. Despite the repeal of Schedule 2 under section 1:
 - a. the Schedule shall continue to apply to proceedings in respect of offences that occurred before its repeal; and,
 - b. all licences issued under the Schedule that are in effect at the time of the repeal shall be deemed to be licences as issued under this Schedule, with all necessary modifications, and all the rules, requirements and regulations of this Schedule shall apply.
3. This By-law comes into force on the day it is passed.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

APPENDIX “A” TO CITY OF HAMILTON BY-LAW NO. 18-042

SCHEDULE 11

PAYDAY LOAN BUSINESSES

DEFINITIONS

1. In this Schedule:

“chartered bank annual consumer loan rate” means the most recent chartered bank – consumer loan rate set out in Table 176-0043 of the Bank of Canada Financial Market Statistics; and

“payday loan business” means a person or entity licensed as a lender or a loan broker under the *Payday Loans Act, 2008*.

LICENSING

General

2. Every payday loan business shall hold the applicable current and valid licence under this Schedule.
3. Before a licence may be issued, every applicant for a licence, in addition to complying with the General Provisions of this By-law, shall submit, for approval of the Issuer of Licences:
 - (a) Proof of a current and valid licence as a lender or a loan broker under the *Payday Loans Act, 2008*;
 - (b) accurate, scale representations of the posters that will be displayed in accordance with sections 8 and 9; and
 - (c) the credit counselling information that will be given in accordance with section 10.
4. No new payday loan business shall be issued a licence for a location listed in section 7.

5. No payday loan business shall be located and no payday loan business licence shall be issued except for in areas as permitted by sections 6 and 7.

(a) No more than 15 payday loan business licenses shall be issued; and

(b) No more than 1 payday loan business licence shall be issued per ward.

6. Council may consider a request to substitute a new location for an existing payday loan business location provided that any requested new location shall be restricted by ward and no more than one location per ward shall be permitted.

7. Despite section 6, the premises at the following municipal addresses licensed and in actual use as payday loans businesses in the City on January 1, 2018, are deemed to be a location where a payday loans business is permitted to operate and eligible to be licensed only for so long as the premises continues to be used for such purposes, the business owner maintains their licence, and the business carried on therein is in compliance with this By-law:

- (a) 736 Queenston Road;
- (b) 970 Upper James Street;
- (c) 152 Hwy 8, Unit 158 (Stoney Creek);
- (d) 61 King Street East;
- (e) 1392 Main Street East;
- (f) 460 Main Street West;
- (g) 483 Hwy 8 (Stoney Creek);
- (h) 1 Wilson Street;
- (i) 836 Upper James Street;
- (j) 1655 Main Street West;
- (k) 1056 Barton Street East;
- (l) 314 Queenston Road, Unit F;
- (m) 58 Centennial Parkway North;

- (n) 309 Grays Road (Stoney Creek);
- (o) 1120 Fennell Avenue East;
- (p) 529 Concession Street;
- (q) 732 Queenston Road;
- (r) 219 King Street East;
- (s) 1299 Barton Street East, Building K;
- (t) 147 Locke Street South;
- (u) 534 Concession Street;
- (v) 127 King Street East;
- (w) 13 King Street East, Suite 1;
- (x) 858 Upper James Street;
- (y) 478 King Street East, Unit 2;
- (z) 1116 Barton Street East, Unit 1;
- (aa) 77 James Street North, Unit 223;
- (bb) 695 Queenston Road;
- (cc) 833 Upper James Street;
- (dd) 1062 Barton Street East'

Poster for Rates

8. Every payday loan business shall display a poster at each of the offices authorized by its *Payday Loans Act, 2008* licence that:
 - (a) has been approved in advance by the Issuer of Licences;
 - (b) is in English;
 - (c) is visible to any person immediately upon entering the office;
 - (d) is of a minimum size of 61 centimetres in width by 91 centimeters in length; and

- (e) consists of:
 - (i) in 144 point font, a heading setting out the words “Our Annual Interest Rate” and the amount of the payday loan business’s annual interest rate, which may be shown on a replaceable card attached to the face of the poster or by any other similar means, immediately below the heading;
 - (ii) in 144 point font, a heading setting out the words “Chartered Bank – Annual Consumer Loan Rate” and the chartered bank annual consumer loan rate, which may be shown on a replaceable card attached to the face of the poster, immediately below the heading; and
 - (iii) in 34 point font and below 4(e)(i) and 4(e)(ii) the words “This poster is required under Schedule 11 of the City of Hamilton’s Business Licensing By-law No. 07-170.”

Poster for Credit Counselling

9. Every payday loan business shall display a poster at each of the offices authorized by its *Payday Loans Act, 2008* licence that:
- (a) has been approved in advance by the Issuer of Licences;
 - (b) is in English;
 - (c) is visible to any person immediately upon entering the office;
 - (d) is of a minimum size of 61 centimetres in width by 91 centimeters in length; and
 - (e) consists of:
 - (i) in 144 point font, a heading setting out the words “Credit Counselling”;
 - (ii) in 144 point font, a heading setting out the word “Contact” followed by one or more of the following credit counselling agencies:

- (1) Credit Counselling Canada,
- (2) Canadian Association of Credit Counselling Services,
- (3) Ontario Association of Credit Counselling Services,
- (4) Canadian Association of Independent Credit Counselling Agencies,

together with their respective telephone number and email address; and

- (iii) in 34 point font and below 5(e)(i) and 5(e)(ii) the words “This poster is required under Schedule 11 of the City of Hamilton’s Business Licensing By-law No. 07-170.”

Credit Counselling Information

10. Every payday loan business shall ensure that each person who attends at its offices is given, immediately upon him or her expressing an interest in a loan, credit counselling information that has been approved in advance by the Issuer of Licences.

CITY OF HAMILTON
BY-LAW NO. 18-

To Amend By-law No. 17-225, a By-law to Establish a System of Administrative Penalties

WHEREAS Council enacted a By-law to Establish a System of Administrative Penalties, being By-law No. 17-225; and

WHEREAS this By-law amends By-law No. 17-225;

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. The amendments in this By-law include any necessary grammatical, numbering and lettering changes.
2. Schedule A of By-law No. 17-225 is amended by adding a new Table 11 entitled BY-LAW NO. 11-285 NOISE CONTROL BY-LAW.

TABLE 11: BY-LAW NO. 11-285 NOISE CONTROL BY-LAW				
ITEM	COLUMN 1 DESIGNATED BY-LAW & SECTION		COLUMN 2 SHORT FORM WORDING	COLUMN 3 SET PENALTY
1	11-285	Sec. 3(1)(a)	make unreasonable noise	\$100.00
2	11-285	Sec. 3(1)(a)	permit unreasonable noise to be made	\$100.00
3	11-285	Sec. 3(1)(b)	make noise likely to disturb inhabitants	\$100.00
4	11-285	Sec. 3(1)(b)	permit noise likely to disturb inhabitants	\$100.00
5	11-285	Sec. 3(2)(a)	noise from bell	\$100.00
6	11-285	Sec. 3(2)(a)	noise from horn	\$100.00
7	11-285	Sec. 3(2)(a)	noise from siren	\$100.00
8	11-285	Sec. 3(2)(a)	noise from warning device	\$100.00
9	11-285	Sec. 3(2)(b)	noise from condition of disrepair	\$100.00
10	11-285	Sec. 3(2)(b)	noise from condition of maladjustment	\$100.00
11	11-285	Sec. 3(2)(c)	noise from radio clearly audible 8 meters from vehicle	\$100.00
12	11-285	Sec. 3(2)(c)	noise from amplifier clearly audible 8 meters from vehicle	\$100.00
13	11-285	Sec. 3(2)(c)	noise from speaker clearly audible 8 meters from vehicle	\$100.00
14	11-285	Sec. 3(2)(c)	noise from similar device clearly audible 8 meters from vehicle	\$100.00
15	11-285	Sec. 3(2)(d)(i)	noise from radio projected into public place for advertising purpose	\$100.00
16	11-285	Sec. 3(2)(d)(i)	noise from amplifier projected into public place	\$100.00

TABLE 11: BY-LAW NO. 11-285 NOISE CONTROL BY-LAW				
ITEM	COLUMN 1 DESIGNATED BY-LAW & SECTION		COLUMN 2 SHORT FORM WORDING	COLUMN 3 SET PENALTY
			for advertising purpose	
17	11-285	Sec. 3(2)(d)(i)	noise from speaker projected into public place for advertising purpose	\$100.00
18	11-285	Sec. 3(2)(d)(i)	noise from similar device projected into public place for advertising purpose	\$100.00
19	11-285	Sec. 3(2)(d)(ii)	noise from radio clearly audible at point of reception	\$100.00
20	11-285	Sec. 3(2)(d)(ii)	noise from amplifier clearly audible at point of reception	\$100.00
21	11-285	Sec. 3(2)(d)(ii)	noise from speaker clearly audible at point of reception	\$100.00
22	11-285	Sec. 3(2)(d)(ii)	noise from similar device clearly audible at point of reception	\$100.00
23	11-285	Sec. 3(2)(e)	noise from the exhaust of steam engine	\$100.00
24	11-285	Sec. 3(2)(e)	noise from the exhaust of internal combustion engine	\$100.00
25	11-285	Sec. 3(2)(e)	noise from a pneumatic device	\$100.00
26	11-285	Sec. 3(2)(f)	noise from a combustion engine used for recreational purposes for more than 1 hour between 10pm and 7am clearly audible	\$100.00
27	11-285	Sec. 3(2)(f)	noise from an electric engine used for recreational purposes for more than 1 hour between 10pm and 7am clearly audible	\$100.00
28	11-285	Sec. 3(2)(g)(i)	noise from animal that is persistent and clearly audible at point of reception	\$100.00
29	11-285	Sec. 3(2)(h)	noise from construction clearly audible at point of reception between 10pm and 7am	\$100.00
30	11-285	Sec. 3(2)(h)	noise from loading clearly audible at point of reception between 10pm and 7am	\$100.00
31	11-285	Sec. 4(a)	Make/permit noise that contravenes Noise Pollution Control Publication	\$350.00
32	11-285	Sec. 4(b)	make/permit noise that contravenes a permission under federal/provincial legislation	\$350.00

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Authority: Item 4(a), Planning
 Committee Report 18-003
 (PED18047)
 CM: February 28, 2018
 Ward: City Wide
Bill No. 044

CITY OF HAMILTON
BY-LAW NO. 18-

To Amend By-law No. 17-225, a By-law to Establish a System of Administrative Penalties

WHEREAS Council enacted a By-law to Establish a System of Administrative Penalties, being By-law No. 17-225; and

WHEREAS this By-law amends By-law No. 17-225;

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. The amendments in this By-law include any necessary grammatical, numbering and lettering changes.
2. Schedule A of By-law No. 17-225 is amended by adding a new Table 10 entitled BY-LAW NO. 07-170 TO LICENSE AND REGULATE VARIOUS BUSINESSES.

TABLE 10: BY-LAW NO. 07-170 TO LICENSE AND REGULATE VARIOUS BUSINESSES				
ITEM	COLUMN 1 DESIGNATED BY-LAW & SECTION		COLUMN 2 SHORT FORM WORDING GENERAL PROVISIONS	COLUMN 3 SET PENALTY
1	07-170	Sec.1(2)	Engage/carry on any business regulated by this By-law	\$300.00
2	07-170	Sec. 6(6)(a)	Licence holder fail to renew licence before expiry	\$100.00
3	07-170	Sec. 20	fail to deliver licence certificate upon request	\$75.00
4	07-170	Sec. 20	fail to deliver licence plate upon request	\$75.00
5	07-170	Sec. 20	fail to deliver identification card upon request	\$75.00
6	07-170	Sec. 20	fail to deliver form upon request	\$75.00
7	07-170	Sec. 20	fail to deliver document upon request	\$75.00
8	07-170	Sec. 21(1)	transfer licence without written consent of Director or Council	\$100.00
9	07-170	Sec. 21(3)	use premises/part thereof except as identified on licence certificate or record of application	\$200.00
10	07-170	Sec. 21(3)	use vehicle/cycle/cart except as identified on licence certificate or record of application	\$200.00
11	07-170	Sec. 21(3)	use cycle/cart for business not authorized by licence	\$200.00

TABLE 10: BY-LAW NO. 07-170 TO LICENSE AND REGULATE VARIOUS BUSINESSES				
ITEM	COLUMN 1 DESIGNATED BY-LAW & SECTION		COLUMN 2 SHORT FORM WORDING GENERAL PROVISIONS	COLUMN 3 SET PENALTY
12	07-170	Sec. 22(1)(a)	Licensee fail to post licence certificate on premises	\$75.00
13	07-170	Sec. 22(1)(b)	Licensee fail to keep licence certificate posted in position readily seen and read by persons entering	\$75.00
14	07-170	Sec. 22(1)(c)	Licensee fail to remove licence certificate not current	\$75.00
15	07-170	Sec. 23	Licensee fail to keep business premises clean and orderly	\$75.00
16	07-170	Sec. 23	Licensee fail to keep vehicle/cycle/cart authorized for use in business clean	\$75.00
17	07-170	Sec. 23	Licensee fail to keep vehicle/cycle/cart authorized for use in business in safe condition	\$300.00
18	07-170	Sec. 23	fail to keep licensed cycle clean	\$75.00
19	07-170	Sec. 23	fail to keep licensed cycle safe	\$100.00
20	07-170	Sec. 23	fail to keep licensed cart clean	\$75.00
21	07-170	Sec. 23	fail to keep licensed cart safe	\$100.00
22	07-170	Sec. 24	fail to permit inspection of places or premises used for business	\$300.00
23	07-170	Sec. 24	fail to permit inspection of equipment/vehicle/other personal property used for business	\$300.00
24	07-170	Sec. 25	Licensee fail to provide criminal record when required	\$75.00
25	07-170	Sec. 25	Licensee fail to provide further criminal/driving record when required	\$75.00
26	07-170	Sec. 25a	Licence holder fail to immediately advise the Director in writing of change of information	\$75.00
27	07-170	Sec. 26(1)	fail to comply with the Licensing By-law, Schedules and provisions regulating such business	\$300.00
28	07-170	Sec. 26(2)	Licensee fail to comply with conditions of licence	\$200.00
29	07-170	Sec. 26(2)	Licensee cause/permit employee/agent/other persons to fail to comply with conditions of licence	\$100.00

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Authority: Item 31, Planning and Economic
Development Committee
Report: 06-005
CM: April 12, 2006
Ward: 12

Bill No. 045

CITY OF HAMILTON

BY-LAW NO. 18-

To Amend Ancaster Zoning By-law No. 87-57 Respecting Lands located at 555 Highvalley Road (Ancaster)

WHEREAS, the *City of Hamilton Act, 1999*, Statutes of Ontario, 1999 Chap. 14, Sch. C. did incorporate, as of January 1, 2001, the municipality "City of Hamilton";

AND WHEREAS, the City of Hamilton is the successor to certain area municipalities, including the former municipality known as the "The Corporation of the Township of Glanbrook" and is the successor to the former regional municipality, namely, "The Regional Municipality of Hamilton-Wentworth";

AND WHEREAS, the *City of Hamilton Act, 1999* provides that the Zoning By-laws of the former area municipalities continue in force in the City of Hamilton until subsequently amended or repealed by the Council of the City of Hamilton;

AND WHEREAS Zoning By-law No. 87-57 (Ancaster) was enacted on the 22nd day of June, 1987, and approved by the Ontario Municipal Board on the 23rd day of January, 1989;

AND WHEREAS the Council of the City of Hamilton, in adopting Item 31 of Report 06-005 of the Planning and Economic Development Committee at its meeting held on the 12th day of April, 2006, which recommended that the Director of Development and Real Estate be authorized to give notice and prepare by-laws for presentation to Council, to remove the "H" Holding Provision from By-laws where the conditions have been met; and,

AND WHEREAS this By-law is in conformity with the Urban Hamilton Official Plan.

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. That Map No. 1 to Schedule "B", appended to and forming part of By-law No. 87-57 (Ancaster), is amended by changing the zoning from the Holding – Residential "H-R3-679" Zone, Modified, to Residential "R3-679" Zone, Modified, on the lands the extent and boundaries of which are shown on a plan hereto annexed as Schedule "A".

To Amend Ancaster Zoning By-law No. 87-57
Respecting Lands located at 555 Highvalley Road (Ancaster)

(Page 2 of 3)

2. No building or structure shall be erected, altered, extended or enlarged, nor shall any building or structure or part thereof be used, nor shall any land be used, except in accordance with the Residential "R3-679" Zone, Modified, Zone provisions.
3. The Clerk is hereby authorized and directed to proceed with the giving of notice of the passing of this By-law, in accordance with the *Planning Act*.

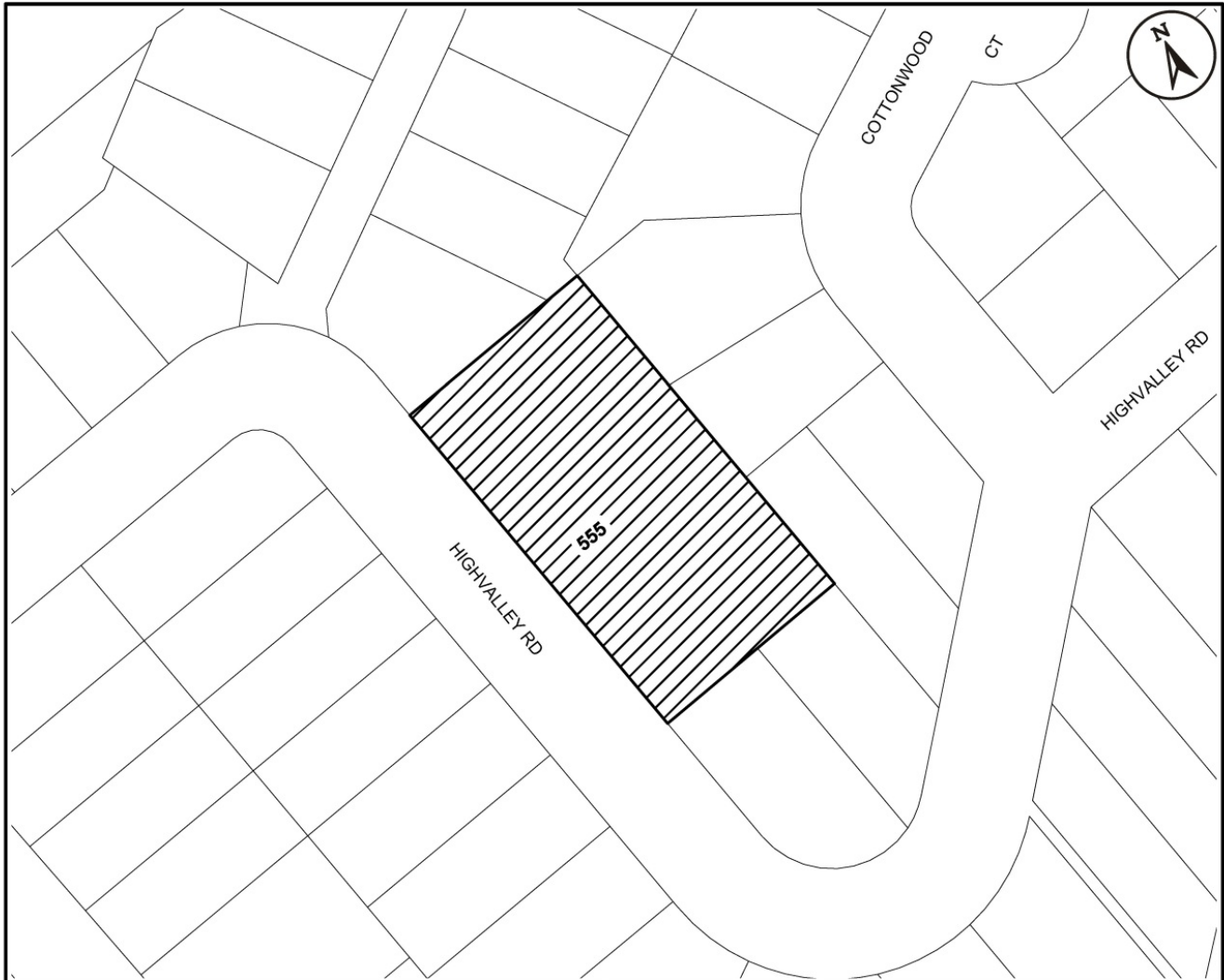
PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

ZAH-17-035

To Amend Ancaster Zoning By-law No. 87-57
 Respecting Lands located at 555 Highvalley Road (Ancaster)



This is Schedule "A" to By-law No. 18-
 Passed the day of, 2018

 Mayor

 Clerk

Schedule "A"

Map Forming Part of
 By-law No. 18-_____

to Amend By-law No. 87-57

Subject Property

555 Highvalley Road



Change in Zoning from the
 Holding - Residential "H-R3-679" Zone, Modified,
 to the Residential "R3-679" Zone, Modified

Scale:
 N.T.S.

File Name/Number:
 ZAH-17-035

Date:
 Feb. 1, 2018

Planner/Technician:
 DB/AL



Hamilton

PLANNING AND ECONOMIC DEVELOPMENT DEPARTMENT

Authority: Item 11, Planning Committee
Report 18-002 (PED18034)
CM: February 14, 2018
Ward: 11

Bill No. 046

CITY OF HAMILTON

BY-LAW NO. 18-

To Adopt:

**Official Plan Amendment No. 93 to the
Urban Hamilton Official Plan**

Respecting:

235 Tanglewood Drive (Glanbrook)

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. Amendment No. 93 to the Urban Hamilton Official Plan consisting of Schedule "1", hereto annexed and forming part of this by-law, is hereby adopted.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Urban Hamilton Official Plan Amendment No. 93

The following text, together with Appendix "A" – Binbrook Village Secondary Plan Land Use Plan – Volume 2: Map B.5.1-1, attached hereto, constitutes Official Plan Amendment No. 93 to the Urban Hamilton Official Plan.

1.0 Purpose and Effect:

The purpose and effect of this Amendment is to amend the Binbrook Village Secondary Plan Land Use Plan by establishing a Site Specific Policy Area to permit the proposed development of 14 Street Townhouse Dwellings with a maximum density of 45 units per hectare.

2.0 Location:

The lands affected by this Amendment are known municipally as 235 Tanglewood Drive within the City of Hamilton (former Township of Glanbrook).

3.0 Basis:

The basis for permitting this Amendment is as follows:

- The proposal satisfies all characteristics and requirements of the low density residential policies, save and except the prescribed residential density range.
- The proposed Amendment is compatible with the existing and planned development in the immediate area.
- The proposed amendment is consistent with the Provincial Policy Statement, 2014 and conforms to the Growth Plan for the Greater Golden Horseshoe, 2017.

4.0 Actual Changes:

4.1. Text Changes

Urban Hamilton Official Plan Volume 2 – Secondary Plans

- 4.1.1 Volume 2: Chapter B, Glanbrook Secondary Plans, Section B.5.1.13 Binbrook Village Secondary Plan is amended by adding a new Site Specific Policy – Area "O" as follows:

"Site Specific Policy – Area O

B.5.1.13.15 Notwithstanding Volume 2, Policy B.5.1.4.5 c) ii), for the lands located at 235 Tanglewood Drive, designated Low Density Residential 2h and identified as Site Specific Policy – Area "O" on Map B.5.1-1 – Binbrook Village Secondary Plan – Land Use Plan, the maximum net residential density shall be 45 units per hectare."

4.2 Mapping Changes:

Urban Hamilton Official Plan Volume 2 – Secondary Plans

4.2.1 Urban Hamilton Official Plan Volume 2, Map B.5.1-1 – Binbrook Village Secondary Plan Land Use Plan, be amended by identifying the subject lands as Site Specific Policy - Area "O", as shown on Appendix "A" attached to this Amendment.

5.0 Implementation:

An implementing Zoning By-law Amendment will give effect to the intended uses on the subject lands.


This is Schedule "1" to By-law No. 18-046, passed on the 28th day of February, 2018.

**The
City of Hamilton**

F. Eisenberger
MAYOR

R. Caterini
CITY CLERK

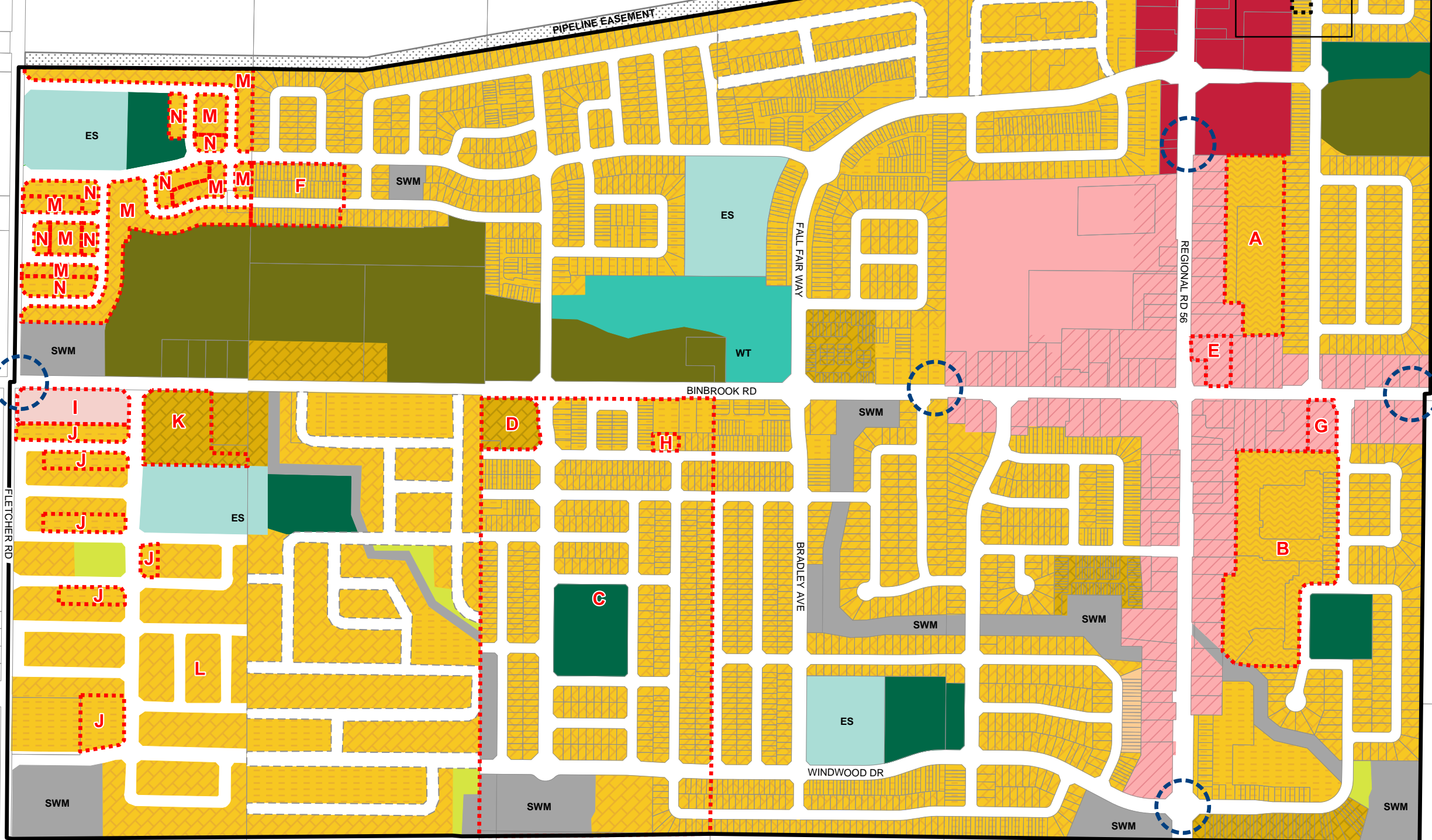
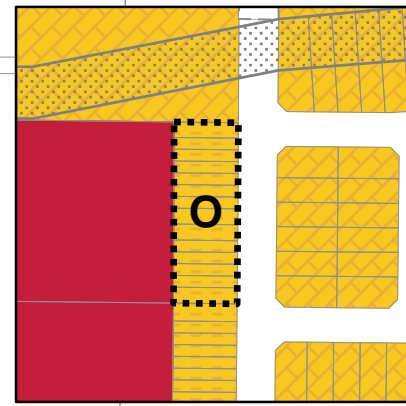
Appendix A
 APPROVED Amendment No. 93
 to the Urban Hamilton Official Plan

 Lands to be identified as
 Site Specific Policy Area "O"
 (235 Tanglewood Drive, Ancaster)

Date:
 February 13, 2018





Revised By:
 AB/NB

Reference File No.:
 OPA-U-93(G)




Legend






Residential Designations

-  Low Density Residential 2d
-  Low Density Residential 2e
-  Low Density Residential 2h
-  Low Density Residential 3e



Commercial and Mixed Use Designations

-  Local Commercial
-  District Commercial
-  Mixed Use - Medium Density
-  Mixed Use - Medium Density - Pedestrian Predominant






Parks and Open Space Designations

-  Parkette
-  Neighbourhood Park
-  Community Park
-  General Open Space
-  Natural Open Space

Other Designations

-  Institutional
- ES** Elementary School
-  Utility
- SWM** Storm Water Management

Other Features

-  Area or Site Specific Policy
-  Gateway
- WT** Water Tower
-  Pipeline
-  Proposed Roads
-  Secondary Plan

Council Adopted: July 9, 2009
 Ministerial Approval: March 16, 2011
 Effective Date: August 16, 2013

Urban Hamilton Official Plan
Binbrook Village
Secondary Plan
 Land Use Plan
 Map B.5.1-1



Date: October 2016

PLANNING & ECONOMIC DEVELOPMENT DEPARTMENT
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 OF SURVEY.

Authority: Item 11, Planning Committee
Report 18-002 (PED18034)
CM: February 14, 2018
Ward: 11
Bill No. 047

CITY OF HAMILTON
BY-LAW NO. 18-

To Amend Zoning By-law No. 464, Respecting Lands located at 235 Tanglewood Drive in the Former Township of Glanbrook, now in the City of Hamilton

WHEREAS the *City of Hamilton Act, 1999*, Statutes of Ontario, 1999 Chap. 14. Schedule C. did incorporate, as of January 1st 2001, the municipality "City of Hamilton";

AND WHEREAS the City of Hamilton is the successor to certain area municipalities, including the former area municipality known as "The Corporation of the Township of Glanbrook," and is the successor to the former Regional municipality, namely "The Regional Municipality of the Hamilton-Wentworth";

AND WHEREAS the *City of Hamilton Act, 1999* provides that the Zoning By-laws of the former municipalities continue in force in the City of Hamilton until subsequently amended or repealed by the Council of the City of Hamilton;

AND WHEREAS Zoning By-law No. 464 (Glanbrook) was enacted on the 16th day of March, 1992, and approved by the Ontario Municipal Board on the 31st day of May, 1993;

AND WHEREAS the Council of the City of Hamilton, in adopting Item 11 of Report 18-002 of the Planning Committee, at its meeting held on 14th day of February, which recommended that the Zoning By-law No. 464 (Glanbrook), be amended as hereinafter provided;

AND WHEREAS this By-law is in conformity with the Urban Hamilton Official Plan, upon finalization of Official Plan Amendment No. 93.

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. That Schedule "H" appended to and forming part of By-law No. 464 (Glanbrook), is amended by changing the zoning from the Deferred Development "DD" Zone to the Residential Multiple "RM2-310" Zone, Modified.

The extent and boundaries of which are shown on a plan hereto annexed as Schedule "A".

2. That Section 44 "Exceptions to the Provisions on this By-law", of Zoning By-law No. 464 (Glanbrook) be amended by adding Special Exception "RM2-310" as follows:

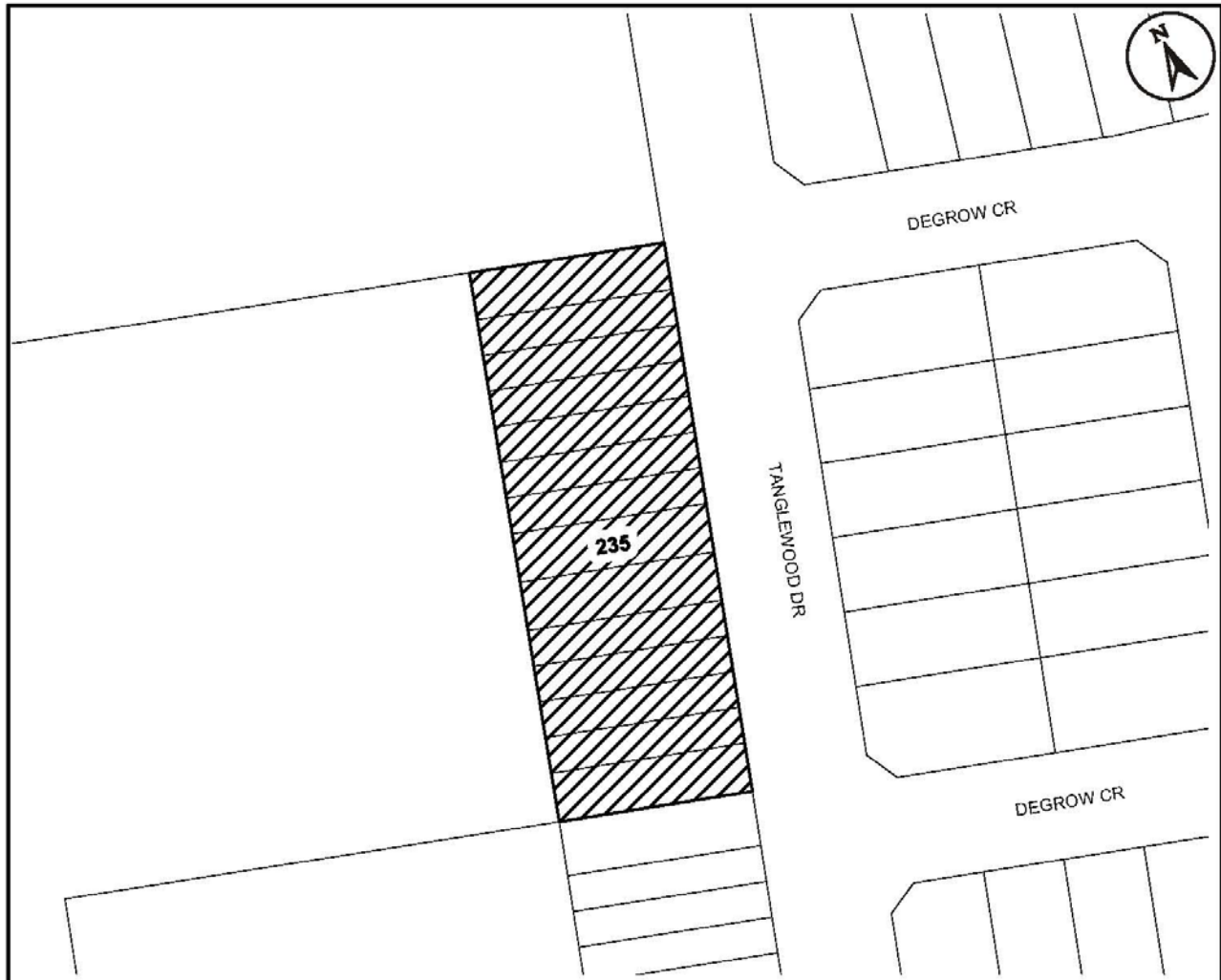
3. That the City Clerk is hereby authorized and directed to proceed with the giving of Notice of Passing of this by-law, in accordance with the *Planning Act*.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

ZAC-17-025/UHOPA-17-019



This is Schedule "A" to By-law No. 18- Passed the day of, 2018	----- Mayor ----- Clerk
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<h2 style="margin: 0;">Schedule "A"</h2> <p style="margin: 10px 0 0 0;">Map Forming Part of By-law No. 18-_____</p> <p style="margin: 10px 0 0 0;">to Amend By-law No. 464</p>	<p>Subject Property 235 Tanglewood Drive</p> <p> Change in Zoning from Deferred Development "DD" Zone to Residential Multiple "RM2-310" Zone, Modified</p>
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Scale: N.T.S.	File Name/Number: ZAC-17-025/UHOPA-17-019	<p>Hamilton</p>
Date: Dec. 13, 2017	Planner/Technician: AB/AL	
PLANNING AND ECONOMIC DEVELOPMENT DEPARTMENT		

Authority: Item 12, Planning Committee
Report: 18-002 (PED18022)
CM: February 14, 2018
Ward: 5

Bill No. 048

CITY OF HAMILTON

BY-LAW NO. 18-

To Adopt:

**Official Plan Amendment No. 95 to the
Urban Hamilton Official Plan**

Respecting:

**2782 Barton Street East
Hamilton**

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. Amendment No. 95 to the Urban Hamilton Official Plan consisting of Schedule "1", hereto annexed and forming part of this by-law, is hereby adopted.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Urban Hamilton Official Plan Amendment No. 95

The following text, together with Appendix “A” – Urban Site Specific Key Map – Volume 3: Map 2 attached hereto, constitutes Official Plan Amendment No. 95 to the Urban Hamilton Official Plan.

1.0 Purpose and Effect:

The purpose and effect of this Amendment is to establish a Site Specific Policy for the lands located at 2782 Barton Street East, to permit a 13 storey multiple dwelling with a maximum net residential density of 379 units per hectare.

2.0 Location:

The lands affected by this Amendment are known municipally as 2782 Barton Street East, in the former City of Hamilton.

3.0 Basis:

The basis for permitting this Amendment is as follows:

- The proposed development complies with the function, scale and design of the High Density Residential use category of the Neighbourhoods designation;
- The proposed development implements the Residential Intensification policies of the Urban Hamilton Official Plan; and,
- The proposed amendment is consistent with the Provincial Policy Statement, 2014 and conforms to the Growth Plan for the Greater Golden Horseshoe, 2017.

4.0 Actual Changes:

4.1 Volume 3 – Special Policy Areas

Text

4.1.1 Chapter C – Hamilton Urban Site Specific Policies

- a. That Volume 3: Chapter C – Hamilton Urban Site Specific Policies be amended as follows:

“UHN-23 – 2782 Barton Street East, City of Hamilton

- 1.0 Notwithstanding Policy E.3.6.6 b) of Volume 1, for the lands designated “Neighbourhoods” located at 2782 Barton Street East, the maximum net residential density shall be 379 units per hectare.”

Schedules and Appendices

4.1.2 Appendices

- a. That Volume 3: Map 2 – Urban Site Specific Key Map be amended by identifying the subject lands as “UHN-23,” as shown on Appendix “A” attached to this amendment.

5.0 Implementation:

An implementing Zoning By-Law Amendment and Site Plan will give effect to the intended uses on the subject lands.


This Official Plan Amendment is Schedule “1” to By-law No. 18-048 passed on the 28th of February, 2018.

**The
City of Hamilton**

F. Eisenberger
MAYOR

R. Caterini
CITY CLERK

Appendix A
 APPROVED Amendment No. 95
 to the Urban Hamilton Official Plan

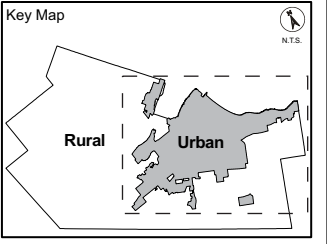
 Lands to be identified as
 Site Specific Policy UHN-23

(2782 Barton Street East, Hamilton)

Date:
 February 13, 2018

Revised By:
 MK/NB

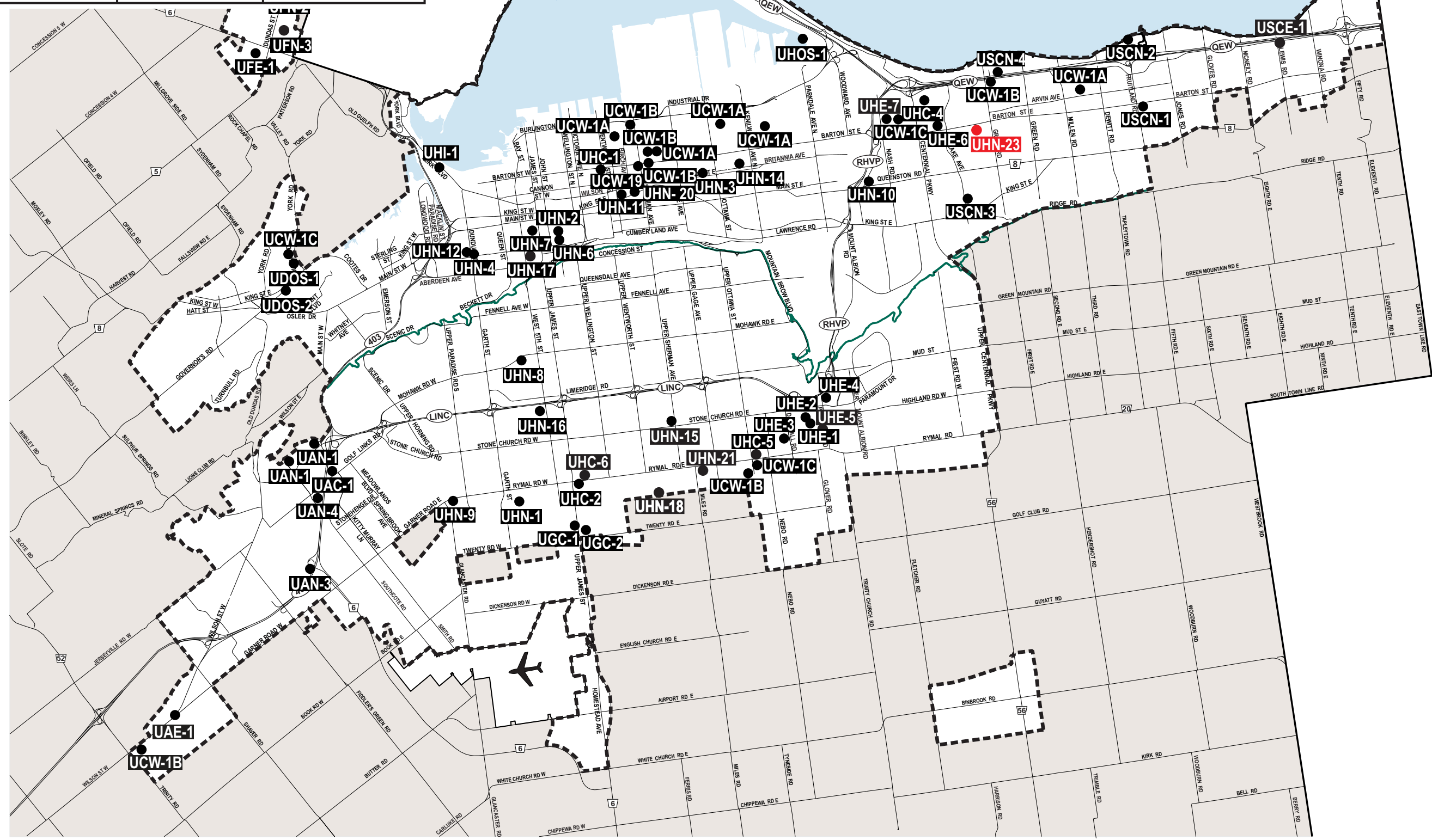
Reference File No.:
 OPA-U-95(H)





Note: For Rural Site Specific Areas, refer to Volume 3: Appendix A of the Rural Hamilton Official Plan.

APPEAL






The southern urban boundary that generally extends from Upper Centennial Parkway and Mud Street East in the east, following the hydro corridor and encompassing the Red Hill Business Park to Upper James Street remains under appeal – see illustration on Schedules E and E-1, Volume 1



Legend

-  Site Specific Areas (SSA)
-  Refers to Urban Site Specific Area #, Volume 3, Chapter B

Other Features

-  Rural Area
-  John C. Munro Hamilton International Airport
-  Niagara Escarpment
-  Urban Boundary
-  Municipal Boundary

Council Adoption: July 9, 2009
 Ministerial Approval: March 16, 2011
 Effective Date: August 16, 2013

**Urban Hamilton Official Plan
 Volume 3: Map 2
 Urban Site Specific Key Map**



Authority: Item 12, Planning Committee
Report: 18-002 (PED18022)
CM: February 14, 2018
Ward: 5

Bill No. 049

CITY OF HAMILTON

BY-LAW NO. 18-

To Repeal By-law No. 87-77 and To Amend Zoning By-law No. 6593, as amended by By-law No. 74-007 Respecting Lands Located at 2782 Barton Street East, Hamilton

WHEREAS the *City of Hamilton Act, 1999*, Statutes of Ontario, 1999 Chap. 14, Schedule C. did incorporate, as of January 1, 2001, the municipality “City of Hamilton”;

AND WHEREAS the City of Hamilton is the successor to certain area municipalities, including the former municipality known as the “The Corporation of the City of Hamilton” and is the successor to the former regional municipality, namely, “The Regional Municipality of Hamilton-Wentworth”;

AND WHEREAS the *City of Hamilton Act, 1999* provides that the Zoning By-laws and Official Plans of the former area municipalities and the Official Plan of the former regional municipality continue in full force in the City of Hamilton until subsequently amended or repealed by the Council of the City of Hamilton;

AND WHEREAS the Council of The Corporation of the City of Hamilton passed Zoning By-law No. 6593 (Hamilton) on the 25th day of July 1950, which by-law was approved by the Ontario Municipal Board by Order dated the 7th day of December 1951 (File No. P.F.C. 3821);

AND WHEREAS the Council of the City of Hamilton, in adopting Item 12 of Report 18-002 of the Planning Committee, at its meeting held on the 14th day of February, 2018, which recommended that Zoning By-law No. 6593 (Hamilton), be amended as hereinafter provided; and,

AND WHEREAS this By-law is in conformity with the Urban Hamilton Official Plan, upon finalization of Official Plan Amendment No. 95;

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. That By-law No. 87-77 is hereby repealed in its entirety.
2. That for the purposes of this By-law, Section 2(a), 2(b)2 and 3 of By-law No. 74-7 shall not apply.
3. That Sheet No. E123 of the District Maps appended is amended to and forming part of Zoning By-law No. 6593 (Hamilton), is amended by changing the zoning from the “E-2/S-306” and “E-2/S-306a” (Multiple Dwellings) District, Modified to the “E-3/S-306b” (High Density Multiple Dwellings) District, Modified; the extent and boundaries of which are shown on a plan here to annexed as Schedule “A”.

4. That the “E-3” (High Density Multiple Dwellings) District provisions, as contained in Section 11C of Zoning By-law No. 6593, applicable to the subject lands, be further modified to include the following special requirements:
 - a) That notwithstanding Section 11C (b), where a building or structure is distant not greater than 30.0 metres from a “DE”, “DE-2”, “DE-3”, “RT-10”, “RT-20” or “RT-30” District, the height of a building or structure shall not exceed thirteen storeys or 41.0 metres in height.
 - b) That notwithstanding Section 11C(2)(a), a front yard having a depth not less than 4.7 metres. For the purposes of Zoning conformity, the front lot-line shall be defined as the lot line abutting Barton Street East (northerly lot line).
 - c) That notwithstanding Section 11C(2)(b), an easterly side yard having a depth not less than 1.95 metres, except 3.7 metres to the hypotenuse of the daylight triangle, and a westerly side yard having a depth not less than 4.4 metres.
 - d) That notwithstanding Section 11C(2)(c), a rear yard having a depth not less than 41 metres.
 - e) That notwithstanding Section 11C(4), no building or structure shall have a gross floor area greater than the area within the district of the lot on which it is situate, multiplied by the floor area factor of 3.15.
 - f) That notwithstanding Section 11C(5), for every building or structure, there shall be provided and maintained on the lot and within the district at least 23% of the area of the lot on which it is situate, as landscaped area.
 - g) That notwithstanding Section 18(3)(vi)(cc)(iii), a balcony may encroach into the required side yard not more than 1.0 metres.
 - h) That notwithstanding Section 18A(7), every required parking space, other than a parallel parking space, shall have dimensions not less than 2.6 metres wide by 5.5 metres long.
 - i) That notwithstanding Section 18A (Table 1) & (Table 2), a multiple dwelling shall provide 1.25 parking spaces per Class A dwelling unit of which 0.23 spaces per unit shall be allocated for visitor parking.
 - j) That notwithstanding Section 18A (Table 3) one (1) loading space shall be provided for a multiple dwelling with greater than 100 dwelling units, with a minimum size of 18.0 metres in length and 6.0 metres in width.
5. That no building or structure shall be erected, altered, extended or enlarged, nor shall any building or structure or part thereof be used, nor shall any land be used, except in accordance with the “E-3” (High Density Multiple Dwellings) District

provisions, subject to the special requirements referred to in Sections 3 and 4.

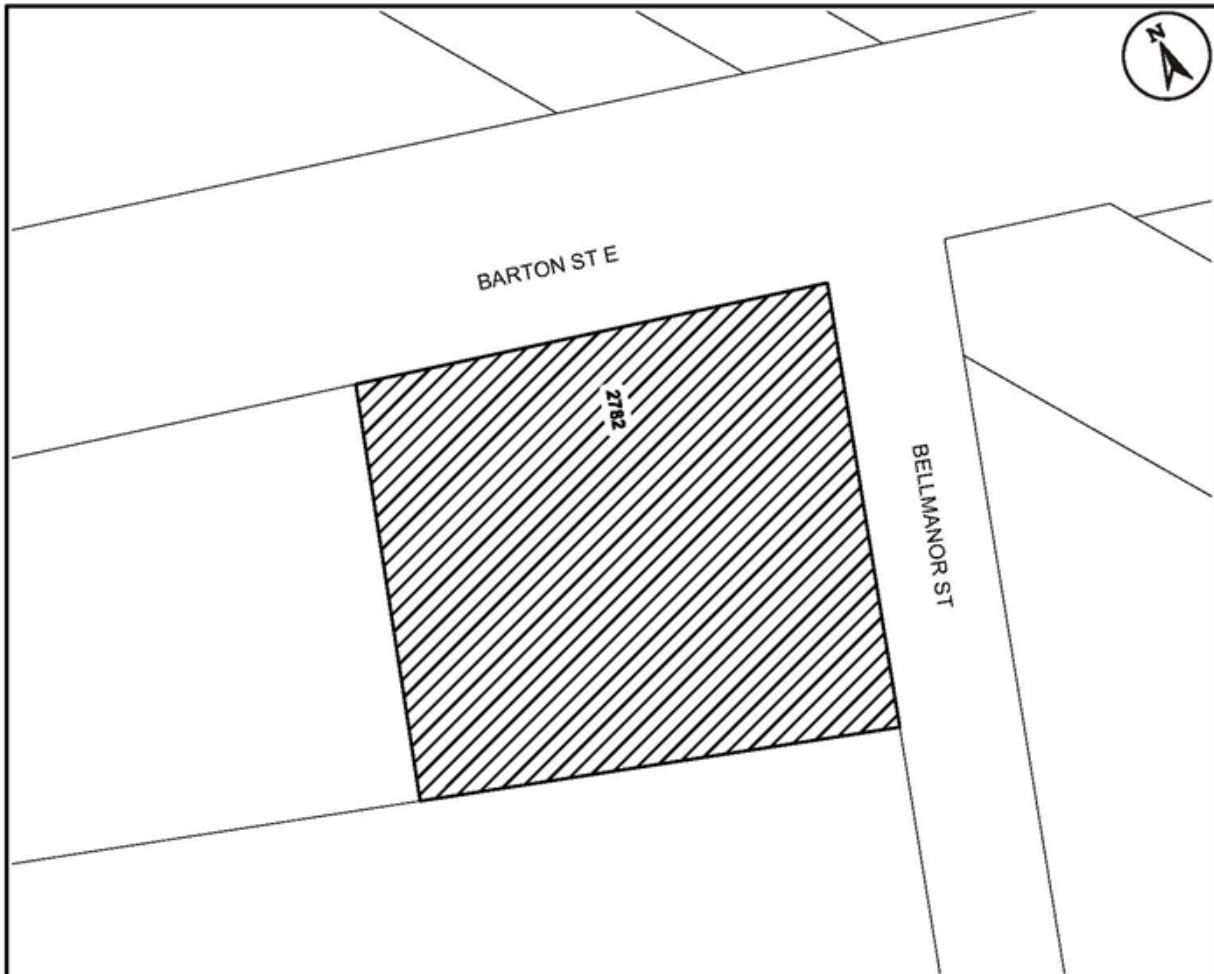
6. That Sheet No. E123 of the District Maps is amended by marking the lands referred to in Section 1 of the By-law as "E-3/S-306b".
7. That By-law No. 6593 is amended by adding this By-law to Section 19B as Schedule S-306b.
8. That the Clerk is hereby authorized and directed to proceed with the giving of notice of the passing of this By-law in accordance with the *Planning Act*.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

ZAC-17-050



This is Schedule "A" to By-law No. 18- Passed the day of, 2018	----- Mayor ----- Clerk
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<h2>Schedule "A"</h2> Map Forming Part of By-law No. 18-_____ to Amend By-law No. 6593	Subject Property 2782 Barton Street East "E-2/S-306" and "E-2/S-306a" (Multiple Dwellings) District, Modified to "E-3/S-306b" (High Density Multiple Dwellings) District, Modified
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Scale: N.T.S.	File Name/Number: ZAC-17-050	
Date: January 12, 2018	Planner/Technician: MK/AL	
PLANNING AND ECONOMIC DEVELOPMENT DEPARTMENT		

Authority: Item 13, Planning Committee
Report: 18-002 (PED18032)
CM: February 14, 2018
Ward: 12

Bill No. 050

CITY OF HAMILTON

BY-LAW NO. 18-

To Adopt:

**Official Plan Amendment No. 96 to the
Urban Hamilton Official Plan**

Respecting:

**503 & 515 Garner Road West
(former Ancaster)**

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. Amendment No. 96 to the Urban Hamilton Official Plan consisting of Schedule "1", hereto annexed and forming part of this by-law, is hereby adopted.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Urban Hamilton Official Plan

Amendment No. 96

The following text, together with:

Appendix “A” – Volume 1, Schedule B – Natural Heritage System

Appendix “B” – Volume 1, Schedule B-2 – Detailed Natural Heritage Features – Significant Woodlands

Appendix “C” – Volume 2, Map B.2.2-1 - Shaver Neighbourhood Secondary Plan – Land Use Plan

attached hereto, constitutes Official Plan Amendment 96 to the Urban Hamilton Official Plan.

1.0 Purpose and Effect:

The purpose and effect of this Amendment is to amend the land use designations of the Shaver Neighbourhood Secondary Plan to permit the development of a maximum of forty-seven (47) Block Townhouse Dwellings and to protect the natural heritage features on the subject lands.

2.0 Location:

The lands affected by this Amendment are known municipally as 503 & 515 Garner Road West, in the former Town of Ancaster.

3.0 Basis:

The basis for permitting this Amendment is as follows:

- The proposed Amendment is in keeping with the policies of the Urban Hamilton Official Plan and Shaver Neighbourhood Secondary Plan to provide a diversity of housing opportunities that are suitable for different segments of the population in order to make the best use of urban lands, especially along a major arterial road.
- The proposed Amendment further refines the boundaries of the Core Area.

- The proposed development is considered to be consistent with, and complimentary to, the planned and existing development in the immediate area.
- The proposed Amendment is consistent with the Provincial Policy Statement, 2014 and conforms to the Growth Plan for the Greater Golden Horseshoe, 2017.

4.0 **Actual Changes:**

4.1 **Volume 1 – (Urban Hamilton Official Plan – Schedule B – Natural Heritage System**

4.1.1 Schedule B – Natural Heritage System be amended by removing and adding Core Areas, as shown on Appendix “A” attached to this Amendment.

4.1.2 Schedule B-2 – Detailed Natural Heritage Features – Key Natural Heritage Feature – Significant Woodlands be amended by removing and adding Key Natural Heritage Feature Significant Woodlands, as shown on Appendix “B” attached to this Amendment.

4.2 **Volume 2 – (Urban Hamilton Official Plan – Map B.2.2-1, Shaver Neighbourhood Secondary Plan)**

4.2.1 That Volume 2, Map B.2.2-1 – Shaver Neighbourhood Secondary Plan – Land Use Plan be amended by:

- a) re-designating a portion of the subject lands from “Low Density Residential 1” to “Low Density Residential 3a”; and,
- b) re-designating a portion of the subject lands from “Low Density Residential 1” to “Natural Open Space”;

as shown on Appendix “C” attached to this Amendment.

5.0 **Implementation:**

An implementing Zoning By-Law Amendment and Site Plan will give effect to the intended uses on the subject lands.

This Official Plan Amendment is Schedule "1" to By-law No. 18-050 passed on the 28th of February, 2018.

**The
City of Hamilton**

F. Eisenberger
MAYOR

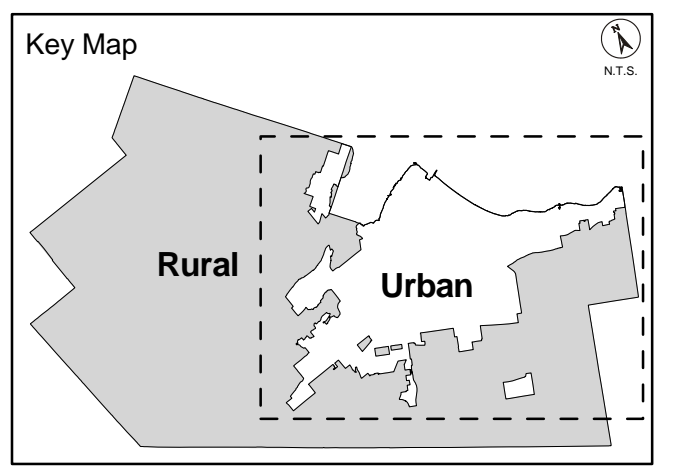
R. Caterini
CITY CLERK

Appendix A
 APPROVED Amendment No. 96
 to the Urban Hamilton Official Plan

- Core Area to be removed from Natural Heritage System
- Core Area to be added to Natural Heritage System

(503 & 515 Garner Road West, Ancaster)

Date: February 13, 2018	Revised By: GZ/NB	Reference File No.: OPA-U-96(A)
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Note: For Rural Natural Heritage Features refer to Schedule B of the Rural Hamilton Official Plan.

APPEAL

The southern urban boundary that generally extends from Upper Centennial Parkway and Mud Street East in the east, following the hydro corridor and encompassing the Red Hill Business Park to Upper James Street remains under appeal - see illustration on Schedules E and E-1, Volume 1.

★ Lands Under Appeal

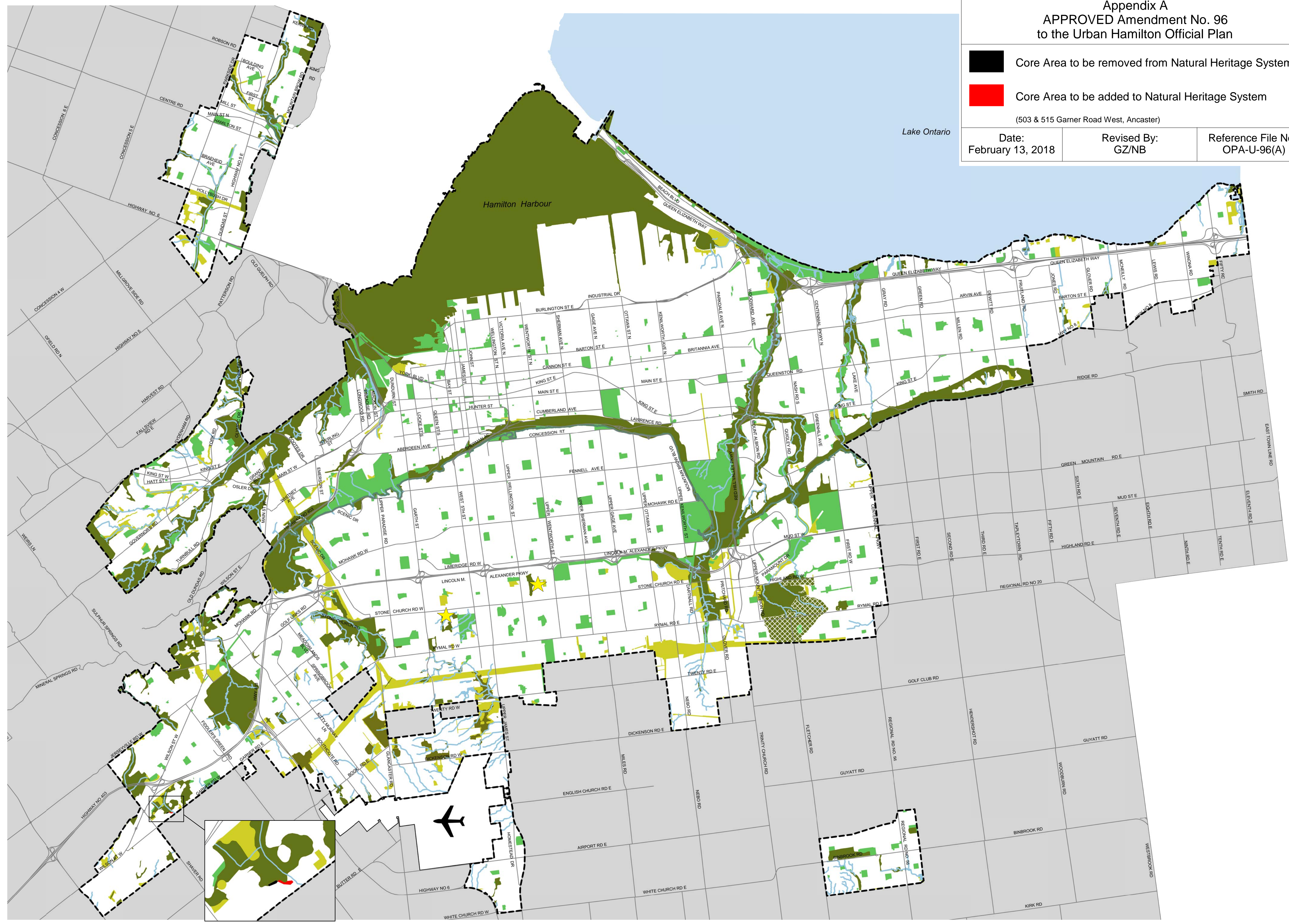
- 305 Stone Church Road West
- 313 Stone Church Road East & lands bounded by Stone Church Road East, Upper Wellington Street, Lincoln M Alexander Parkway and Upper Wentworth Street

Legend

- Core Areas
- Area Specific Policy - USC-1 and USC-2 in Volume 3
- Linkages
- Parks & General Open Space (Excluding Parkettes)
- Streams
- Other Features**
- Rural Area
- John C. Munro Hamilton International Airport
- Niagara Escarpment
- Urban Boundary
- Municipal Boundary

Council Adoption: July 9, 2009
 Ministerial Approval: March 16, 2011
 Effective Date: August 16, 2013

**Urban Hamilton Official Plan
 Schedule B
 Natural Heritage System**

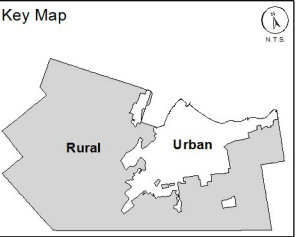


Appendix B
 APPROVED Amendment No. 96
 to the Urban Hamilton Official Plan

- Key Natural Heritage Feature Significant Woodlands to be removed from Key Natural Heritage Feature Significant Woodlands
- Key Natural Heritage Feature Significant Woodlands to be added to Key Natural Heritage Feature Significant Woodlands

(503 & 515 Garner Road West, Ancaster)

Date: February 13, 2018	Revised By: GZ/NB	Reference File No.: OPA-U-96(A)
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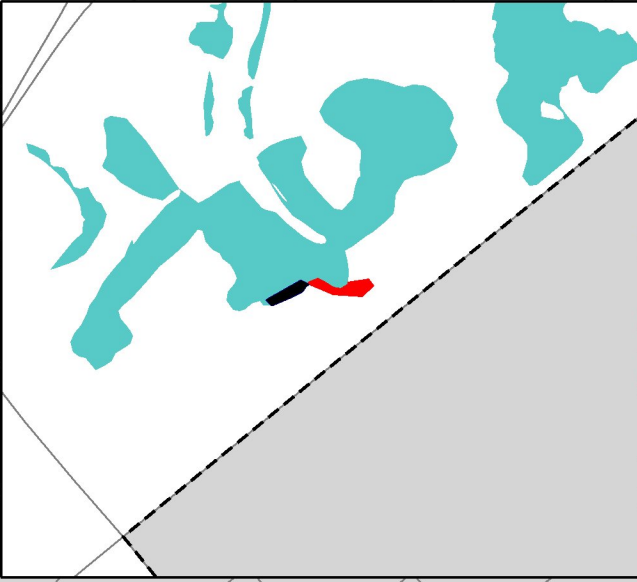
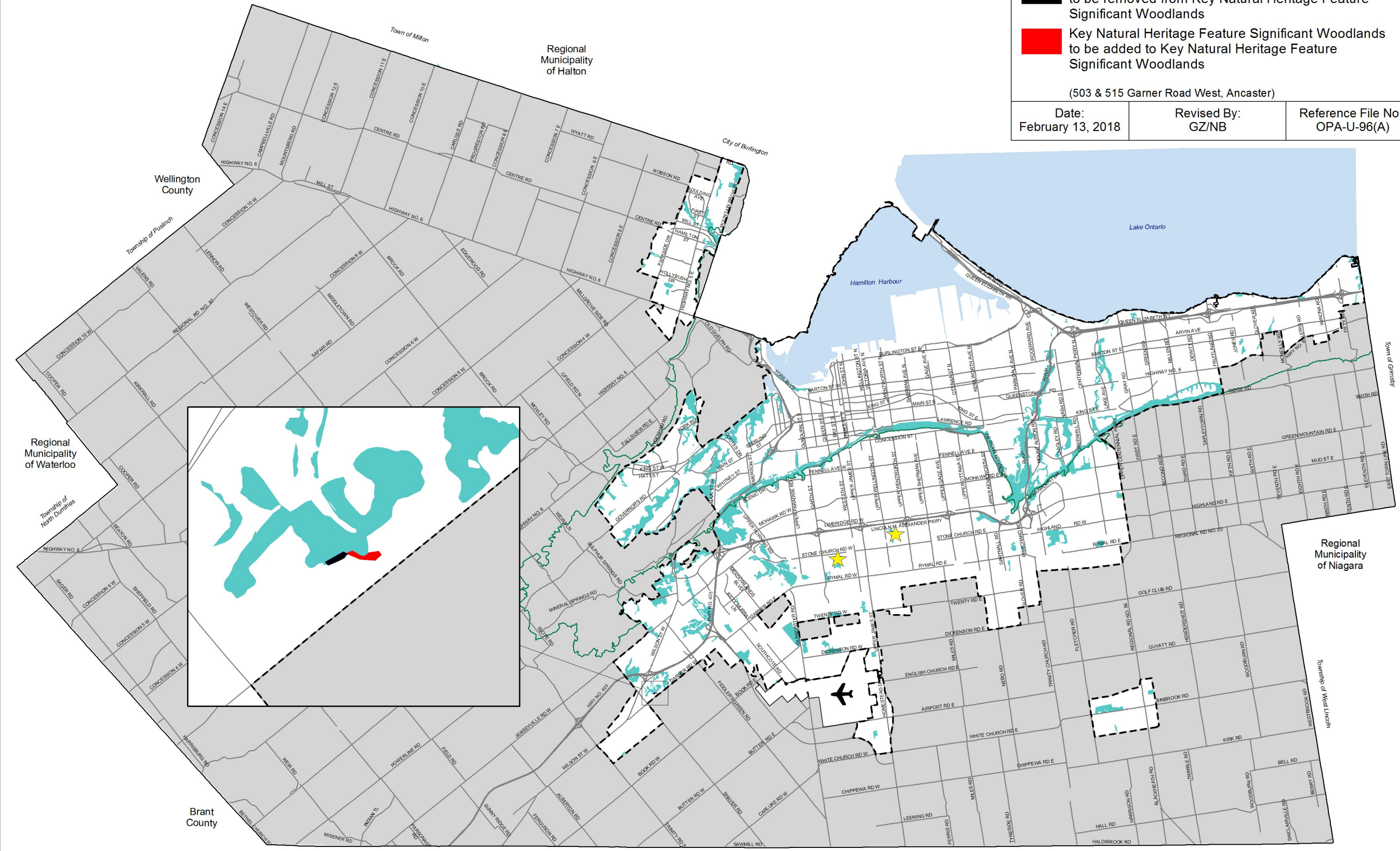
Note: For Rural Detailed Natural Heritage Features refer to Schedule B-2 of the Rural Hamilton Official Plan.

APPEAL

The southern urban boundary that generally extends from Upper Centennial Parkway and Mud Street East in the east, following the hydro corridor and encompassing the Red Hill Business Park to Upper James Street remains under appeal - see illustration on Schedules E and E-1, Volume 1.

★ Lands Under Appeal

- 305 Stone Church Road W
- 313 Stone Church Road E & lands bounded by Stone Church Road East, Upper Wellington Street, Lincoln M Alexander Parkway and Upper Wentworth Street



Legend

- Key Natural Heritage Feature Significant Woodlands
- Rural Area
- John C. Munro Hamilton International Airport
- Niagara Escarpment
- Urban Boundary
- Municipal Boundary

Council Adopted: July 9, 2009
 Ministerial Approval: March 16, 2011
 Effective Date: August 16, 2013

**Urban Hamilton Official Plan
 Schedule B-2
 Detailed Natural Heritage Features
 Key Natural Heritage Feature
 Significant Woodlands**



Appendix C
APPROVED Amendment No. 96
 to the Urban Hamilton Official Plan

- Lands to be redesignated from "Low Density Residential 1" to "Low Density Residential 3a"
 - Lands to be redesignated from "Low Density Residential 1" to "Natural Open Space"
- (503 and 515 Garner Road West, Ancaster)

Date:
February 13, 2018

Revised By:
GZ/NB

Reference File No.:
OPA-U-96(A)

Legend

Residential Designations

- Low Density Residential 1
- Low Density Residential 2a
- Low Density Residential 2c
- Low Density Residential 3a
- Low Density Residential 3f
- Medium Density Residential 2a
- Medium Density Residential 2b
- Medium Density Residential 2c
- High Density Residential 1

Parks and Open Space Designations

- Neighbourhood Park
- General Open Space
- Natural Open Space

Other Designations

- Local Commercial
- Institutional
- SSS** Separate Secondary School

Other Features

- Area or Site Specific Policy
- Secondary Plan Boundary

Council Adopted: July 9, 2009
 Ministerial Approval: March 16, 2011
 Effective Date: August 16, 2013

Urban Hamilton Official Plan
Shaver Neighbourhood
Secondary Plan
 Land Use Plan
 Map B.2.2-1

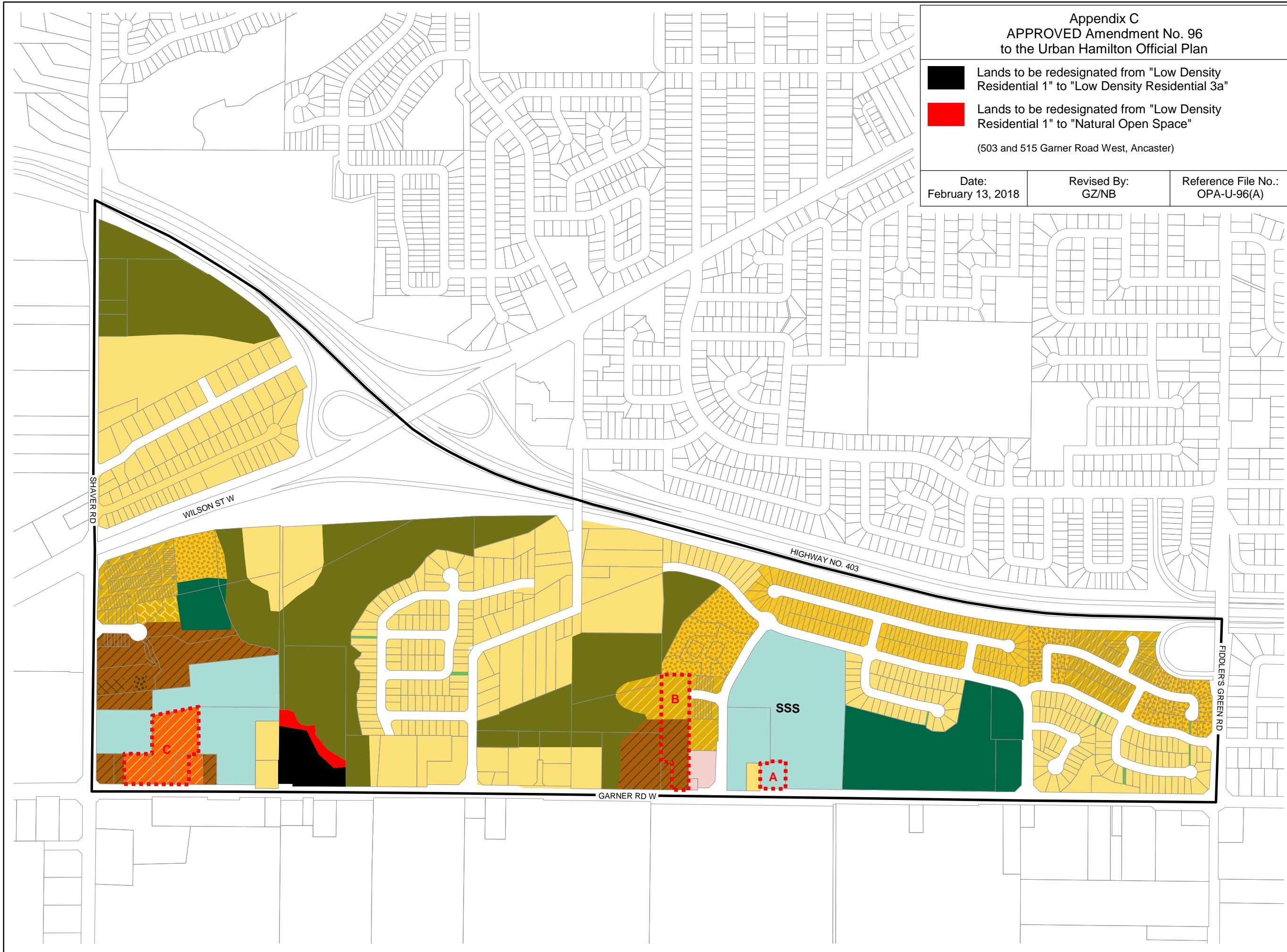


Not To Scale



Date: Dec. 1, 2015

PLANNING & ECONOMIC DEVELOPMENT DEPARTMENT
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 OF SURVEY



Authority: Item 13, Planning Committee
Report 18-002 (PED18032)
CM: February 14, 2018
Ward: 12

Bill No. 051

CITY OF HAMILTON

BY-LAW NO. 18-

To Amend Zoning By-law No. 87-57 Respecting Lands Located at 503 and 515 Garner Road West (Ancaster)

WHEREAS the *City of Hamilton Act, 1999*, Statutes of Ontario, 1999 Chap. 14, Sch. C. did incorporate, as of January 1, 2001, the municipality “City of Hamilton”;

AND WHEREAS the City of Hamilton is the successor to certain area municipalities, including the former municipality known as the “The Corporation of the City of Hamilton” and is the successor to the former regional municipality, namely, “The Regional Municipality of Hamilton-Wentworth”;

AND WHEREAS the *City of Hamilton Act, 1999* provides that the Zoning By-laws of the former area municipalities continue in force in the City of Hamilton until subsequently amended or repealed by the Council of the City of Hamilton;

AND WHEREAS Zoning By-law No. 87-57 (Ancaster) was enacted on the 22nd day of June, 1987, and approved by the Ontario Municipal Board on the 23rd day of January, 1989;

AND WHEREAS the Council of the City of Hamilton, in adopting Item 13 of Report 18-002 of the Planning Committee at its meeting held on the 14th day of February 2018, which recommended that Zoning By-law No. 87-57 (Ancaster), be amended as hereinafter provided; and,

AND WHEREAS this By-law will be in conformity with the Urban Hamilton Official Plan upon adoption of UHOPA No. 96;

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. That Map No. 1-B to Schedule “B”, appended to and forming part of By-law No. 87-57 (Ancaster) is amended by changing the zoning from the Agricultural “A-216” Zone to the Residential Multiple “RM2-690” Zone, Modified on the lands the extent and boundaries of which are shown on a plan hereto annexed as Schedule “A”.
2. The Section 34: Exceptions, to Zoning By-law No. 87-57 (Ancaster), as amended, is hereby further amended by adding the following Sub-sections:

RM2 - 690

That notwithstanding the provisions of Sections 3.43 and 3.132, Section 7.14 (a)(i) and (x), (b)(i)(B), Section 7.12(c) and (d), Section 9.5, Section 9.3(b), Section 15.1, and Section 15.2 (a), (b), (c), (d), (f), (g) and (h), the following special provisions shall apply to the lands zoned "RM2-690":

PERMITTED USES

- (a) Block Townhouse dwellings and uses, buildings and structures accessory thereto shall also be permitted.

REGULATIONS

- (a) Minimum Lot Area: 150 square metres per dwelling unit
- (b) Minimum Lot Frontage: 6.0 metres per dwelling unit
- (c) Minimum Lot Depth: 25 metres per dwelling unit
- (d) Maximum Lot Coverage: 55 percent per dwelling unit
- (e) Minimum Side Yard - External: 1.2 metres
Internal: 0.0 metres
- (f) Minimum Side Yard Abutting Garner Road West: 2.5 metres
- (g) Minimum Rear Yard: 6.0 metres per dwelling unit
- (h) Maximum Building Height: 13 metres

Frontage on a Condominium Road

- (i) For the purpose of this By-law, a Common Element Condominium road shall be deemed to be a street, and that visitor parking and landscaping for the dwelling units fronting the common element condominium road are permitted within the common element condominium road.

Definition of Front Lot Line

- (j) The lot line fronting onto a common element condominium road shall be considered the front lot line. In the case where two lot lines abut a common element condominium road, the shorter of the two shall be considered the front lot line.

Minimum Required Visitor Parking

- (k) A minimum of 0.5 visitor parking spaces per unit within a condominium driveway shall be provided and maintained.

Encroachment of Air Conditioning Units and Heat Pumps

- (l) The provisions of Paragraph (b), Sub-section 9.3, "Air Conditioning Units and Heat Pumps", shall not apply.

Privacy Screens

- (m) The provisions of Sub-section 9.5, "Privacy Screens", shall not apply.

Dwelling Unit Placement

- (n) Sub-section 15.2, Paragraph (k), "Dwelling Unit Placement", shall not apply.

Definition of Height and Grade

- (o) Notwithstanding the definition of "height" and "grade" in Section 3 of the Town of Ancaster Zoning By-law 87-57, for the purposes of this by-law, height shall be measured on the basis of each individual unit.

Encroachment of Porches and Steps

- (p) Notwithstanding the provisions of Section 7.12(d), a maximum encroachment for porches, including steps, of 2.0 m shall be permitted.

Parking and Loading – General Provisions

- (q) The provisions of Section 7.14(a)(x) "Parking and Loading – General Provisions" shall not apply.

Encroachment of Eaves and Gutters

- (r) Notwithstanding Section 7.12(d) "Yard Encroachments", eaves or gutters may project into any yard a distance of not more than 1.5 metres.

All of the other provisions of Section 15.2 of the by-law apply.

3. That no building or structure shall be erected, altered, extended, or enlarged, nor shall any building or structure or part thereof be used, nor shall any land be used, except in accordance with the Residential Multiple "RM2" Zone provisions, subject to the special requirements referred to in Section 2 of this By-law.

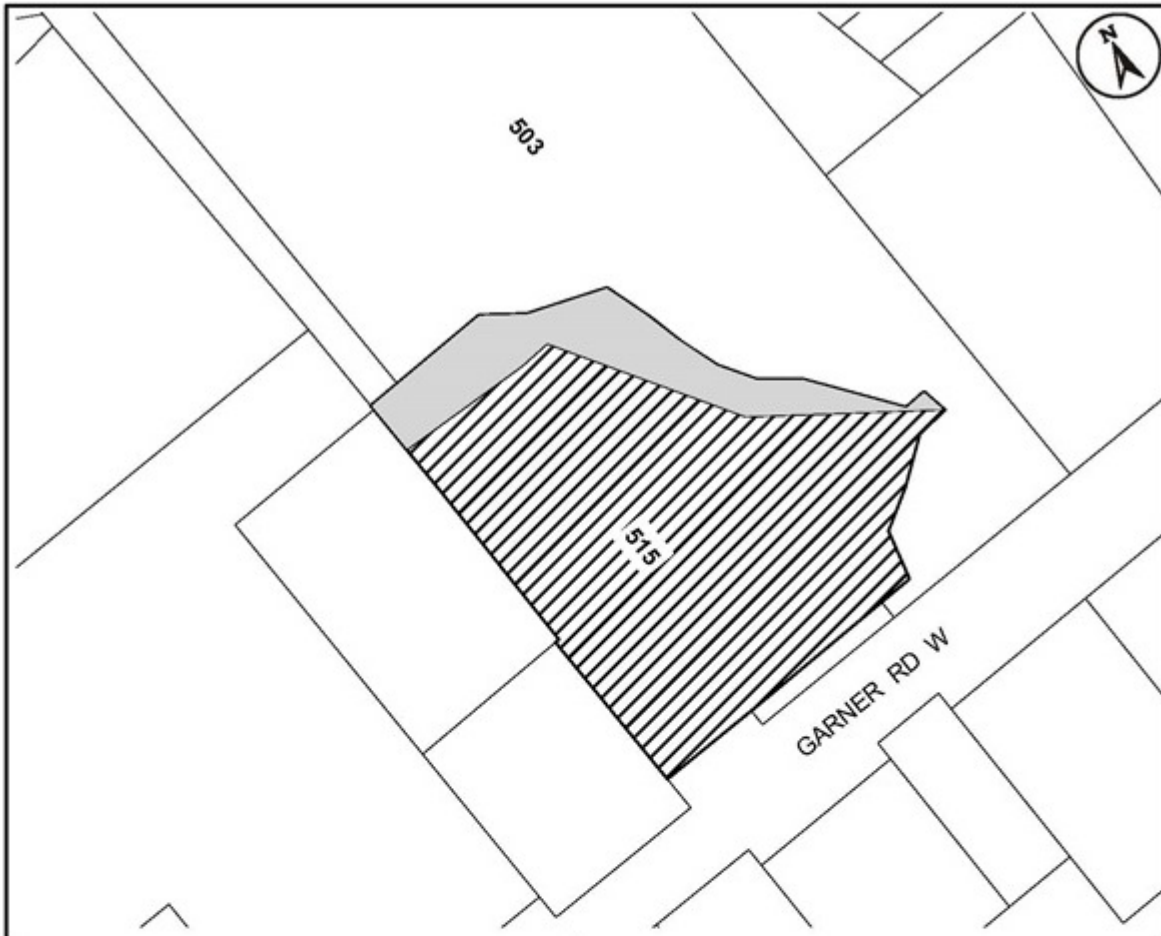
4. That the Clerk is hereby authorized and directed to proceed with the giving of notice of the passing of this By-law in accordance with the *Planning Act*.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

ZAC-16-017/UHOPA-16-007



This is Schedule "A" to By-law No. 18- Passed the day of, 2018	----- Mayor ----- Clerk
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<h2 style="margin: 0;">Schedule "A"</h2> <h3 style="margin: 0;">Map Forming Part of By-law No. 18-_____</h3> <h3 style="margin: 0;">to Amend By-law No. 87-57</h3>	Subject Property 503 and 515 Garner Road West <div style="display: flex; align-items: flex-start;"> <div style="margin-right: 10px;"> </div> <div> Block 1 - Change in zoning from Agricultural "A-216" Zone to Residential Multiple "RM2-690" Zone, Modified with Exceptions </div> </div> <div style="display: flex; align-items: flex-start;"> <div style="margin-right: 10px;"> </div> <div> Block 2 - Refer to By-law 05-200 </div> </div>
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Scale: N.T.S.	File Name/Number: ZAC-16-017/UHOPA-16-007
Date: Jan. 8, 2018	Planner/Technician: GZ/VS
PLANNING AND ECONOMIC DEVELOPMENT DEPARTMENT	



Authority: Item 13, Planning Committee
Report 18-002 (PED18032)
CM: February 14, 2018
Ward: 12

Bill No. 052

CITY OF HAMILTON

BY-LAW NO. 18-

A By-law to Amend Zoning By-law No. 05-200 Respecting Lands Located at 503 and 515 Garner Road West (Ancaster)

WHEREAS Council approved Item 13 of Report 18-002 of the Planning Committee, at its meeting held on the 14th day of February, 2018;

AND WHEREAS this By-law conforms to the Urban Hamilton Official Plan;

NOW THEREFORE Council enacts as follows:

1. That Map No. 1435 of Schedule "A" – Zoning Maps, of Zoning By-law No. 05-200, be amended as follows:
 - a. by adding to the City of Hamilton Zoning By-law No. 05-200, the lands the extent and boundaries of which are shown as Schedule "A" to this By-law; and,
 - b. by establishing a Conservation / Hazard Land (P5, 670) Zone, to the lands the extent and boundaries of which are shown as Schedule "A" to this By-law.
2. That Schedule "C" – Special Exceptions, of By-law No. 05-200 is hereby amended by adding an additional exception as follows:

"670 Within the lands zoned Conservation / Hazard Land (P5) Zone, identified on Map No. 1435 of Schedule "A" – Zoning Maps and described as 503 and 515 Garner Road West, the following special provisions shall apply:

 - a) Notwithstanding Subsection 4.23 d), all buildings or structures located on the subject property shall be setback a minimum of 6.0 metres from the Conservation / Hazard Land (P5) Zone.

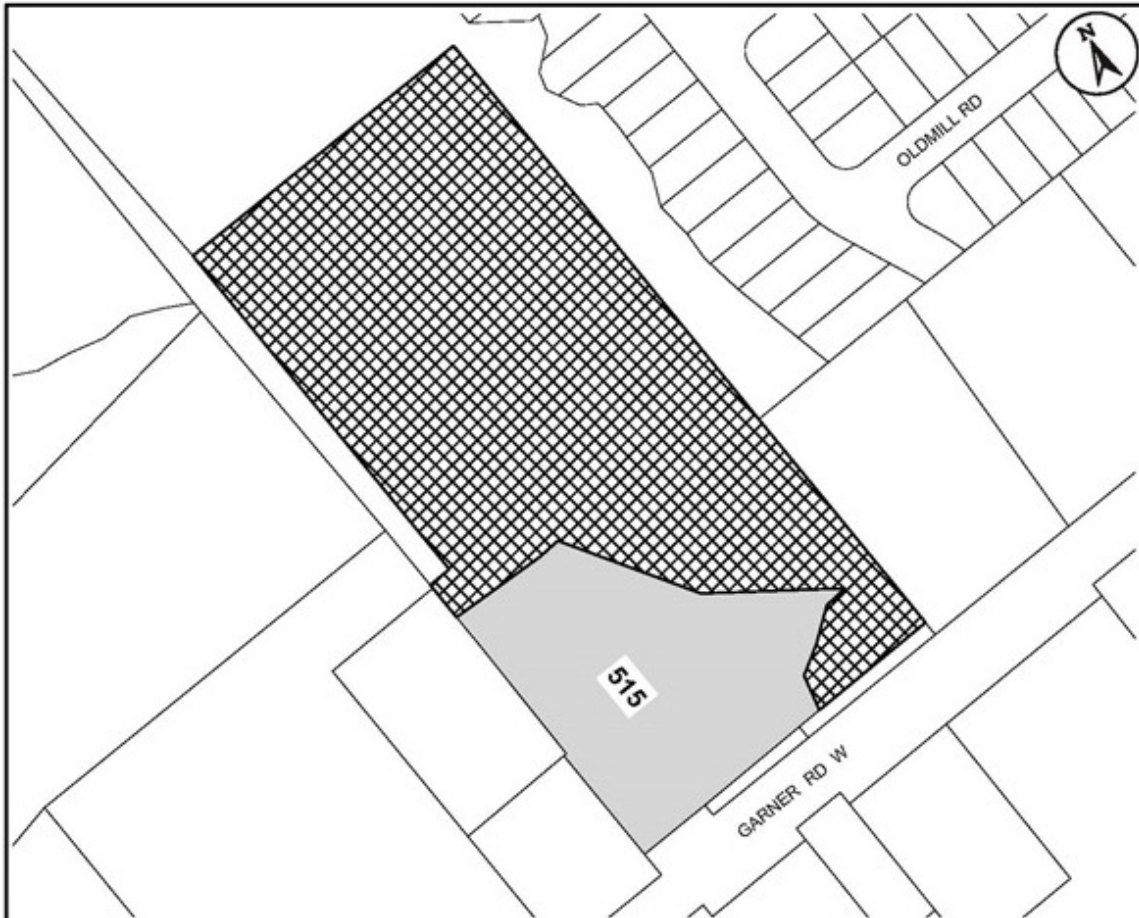
3. That the Clerk is hereby authorized and directed to proceed with the giving of notice of the passing of this By-law in accordance with the *Planning Act*.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

ZAC-16-017/UHOPA-16-007



<p>This is Schedule "A" to By-law No. 18-</p> <p>Passed the day of, 2018</p>	<p>-----</p> <p style="text-align: center;">Mayor</p> <p>-----</p> <p style="text-align: center;">Clerk</p>
--	---

<h2 style="margin: 0;">Schedule "A"</h2> <p style="margin: 10px 0 0 0;">Map Forming Part of By-law No. 18-_____</p> <p style="margin: 10px 0 0 0;">to Amend By-law No. 05-200 Map 1435</p>		<p>Subject Property</p> <p>503 and 515 Garner Road West</p> <div style="margin-top: 10px;"> <div style="display: flex; align-items: center; margin-bottom: 5px;"> <div style="width: 20px; height: 10px; background-color: #cccccc; margin-right: 5px;"></div> <p>Block 1 - Refer to By-law 87-57</p> </div> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 10px; background: repeating-linear-gradient(45deg, transparent, transparent 2px, black 2px, black 4px); margin-right: 5px;"></div> <p>Block 2 - Change in zoning from Agricultural "A-216" Zone to Conservation / Hazard Land (P5, 670) Zone</p> </div> </div>
<p>Scale: N.T.S.</p>	<p>File Name/Number: ZAC-16-017/UHOPA-16-007</p>	<p>Hamilton</p>
<p>Date: Jan. 8, 2018</p>	<p>Planner/Technician: GZ/VS</p>	
<p>PLANNING AND ECONOMIC DEVELOPMENT DEPARTMENT</p>		

Authority: Item 14, Planning Committee
Report: (PED18029)
CM: February 14, 2018
Ward: 11

Bill No. 053

CITY OF HAMILTON

BY-LAW NO. 18-

To Adopt:

**Official Plan Amendment No. 16 to the
Rural Hamilton Official Plan**

Respecting:

**1051 Green Mountain Road East
(Stoney Creek)**

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. Amendment No. 16 to the Rural Hamilton Official Plan consisting of Schedule "1", hereto annexed and forming part of this by-law, is hereby adopted.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

Urban Hamilton Official Plan Amendment No. 16

The following text, together with Appendix “A” – Volume 3: Appendix A – Site Specific Key Map attached hereto, constitutes Official Plan Amendment No. 16 to the Rural Hamilton Official Plan.

1.0 Purpose and Effect:

The purpose and effect of this Amendment is to create a new site specific policy to permit the extension of the Vinemount Quarry.

2.0 Location:

The lands affected by this Amendment are lands located northwest of the intersection of Green Mountain Road East and Tenth Road East, known municipally as 1051 Green Mountain Road East, in the former City of Stoney Creek.

3.0 Basis:

The amendment allows for the subject lands to be utilized for mineral aggregate extraction as an extension to the existing Vinemount Quarry. The basis for permitting this Amendment is as follows:

- The proposal had undergone a thorough technical review by the Combined Aggregate Review Team, comprising City staff, outside agencies, and peer reviewers.
- The proposal includes appropriate provisions to ensure protection of the natural environment and to minimize impacts to surrounding agricultural uses and residents.
- The Provincial Policy Statement and Greenbelt Plan do not allow lands to be removed from a Prime Agricultural designation. Therefore, the subject lands will remain in the Agriculture designation with a site specific policy added to permit mineral aggregate extraction.
- The proposed amendment is consistent with the Provincial Policy Statement,

2014 and conforms to the Greenbelt Plan, 2017.

4.0 Actual Changes:

4.1 Volume 3 – Special Policy and Site Specific Areas

Text Changes

4.1.1 Chapter B – Rural Site Specific Areas

- a. That Volume 3: Chapter B – Rural Site Specific Areas be amended by adding a new site specific policy to a portion of the lands, as follows:

“R-38 Part of lands known municipally as 1051 Green Mountain Road East, former City of Stoney Creek

- 1.0 In addition to the uses permitted in Volume 1, Sections D.2.0 – Agriculture Designation and D.3.0 – Specialty Crop Designation, the lands known municipally 1051 Green Mountain Road East, designated Specialty Crop on Schedule “D” and identified as Site Specific Policy R-38, may also be used for the extraction of mineral aggregate resources and related accessory uses, in accordance with Policy D.6.4 of Volume 1 and a license issued under the *Aggregate Resources Act*.”



Schedules and Appendices

4.1.2 Appendices

- a. That Volume 3: Appendix A – Site Specific Key Map be amended by identifying the lands known municipally as 1051 Green Mountain Road East as Site Specific Area R-38, as shown on Schedule “A,” attached to this Amendment.

5.0 Implementation:

An implementing Zoning By-Law Amendment will give effect to the intended uses on the subject lands.


This Official Plan Amendment is Schedule "1" to By-law No. 18-052 passed on the 28 of February, 2018.

**The
City of Hamilton**

F. Eisenberger
MAYOR

R. Caterini
CITY CLERK

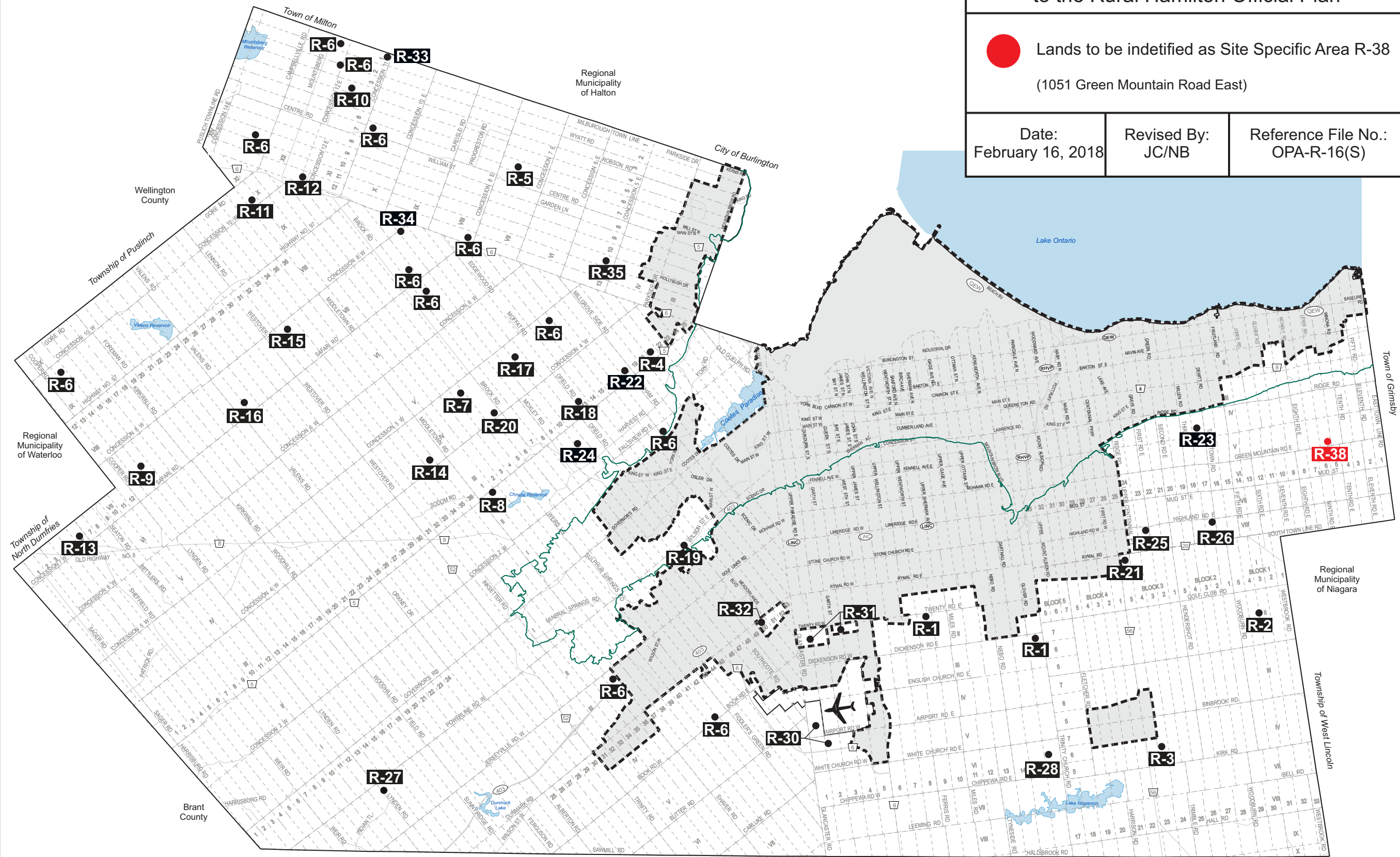
Appendix A APPROVED Amendment No. 16 to the Rural Hamilton Official Plan







 Lands to be indetified as Site Specific Area R-38
(1051 Green Mountain Road East)

Date:
February 16, 2018

Revised By:
JC/NB

Reference File No.:
OPA-R-16(S)



- Legend**
-  Site Specific Areas (SSA)
 - R-** Refers to Rural Site Specific Area #, Volume 3, Chapter B
- Other Features**
-  Urban Area
 -  John C. Munro Hamilton International Airport
 -  Niagara Escarpment
 -  Urban Boundary
 -  Municipal Boundary

Council Adoption: September 27, 2006
Ministerial Approval: December 24, 2008
Effective Date: March 7, 2012

Rural Hamilton Official Plan Volume 3: Appendix A Site Specific Key Map

Not To Scale
Date: Feb. 28, 2017



PLANNING & ECONOMIC DEVELOPMENT DEPARTMENT
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Haldimand County

Authority: Item 14, Planning Committee
Report: (PED18029)
CM: February 14, 2018
Ward: 11

Bill No. 054

CITY OF HAMILTON

BY-LAW NO. 18-

To amend Zoning By-law 05-200 Respecting Lands Located at lands located at 1051 Green Mountain Road (Stoney Creek)

WHEREAS the City of Hamilton has in force several Zoning By-laws which apply to the different areas incorporated into the City by Virtue of the *City of Hamilton Act*, 1999 S.O. 1999, Chap. 14;

WHEREAS the City of Hamilton is the lawful successor of the former Municipalities identified in Section 1.7 of By-law No. 05-200;

WHEREAS the first stage of Zoning By-law, being By-law No. 05-200 came into force and effect on the 25th day of May, 2005;

WHEREAS the Council of the City of Hamilton, in adopting Item 14 of Report 18-002 of the Planning Committee, at its meeting held on the 14th day of February, 2018 which recommended that Zoning By-law No. 05-200 be amended as hereinafter provided; and,

WHEREAS this By-law amendment is in conformity with the Rural Hamilton Official Plan.

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. That Map Nos. 1514, 1515, 1561, 1562, 1606 and 1607 on Schedule "A" – Zoning Maps, to Zoning By-law No. 05-200, is amended by incorporating additional Extractive Industrial (M12) Zone, on the lands the extent and boundaries are shown as Schedule "A" to this By-law;
2. That the Clerk is hereby authorized and directed to proceed with the giving of notice of the passing of this By-law, in accordance with the *Planning Act*.

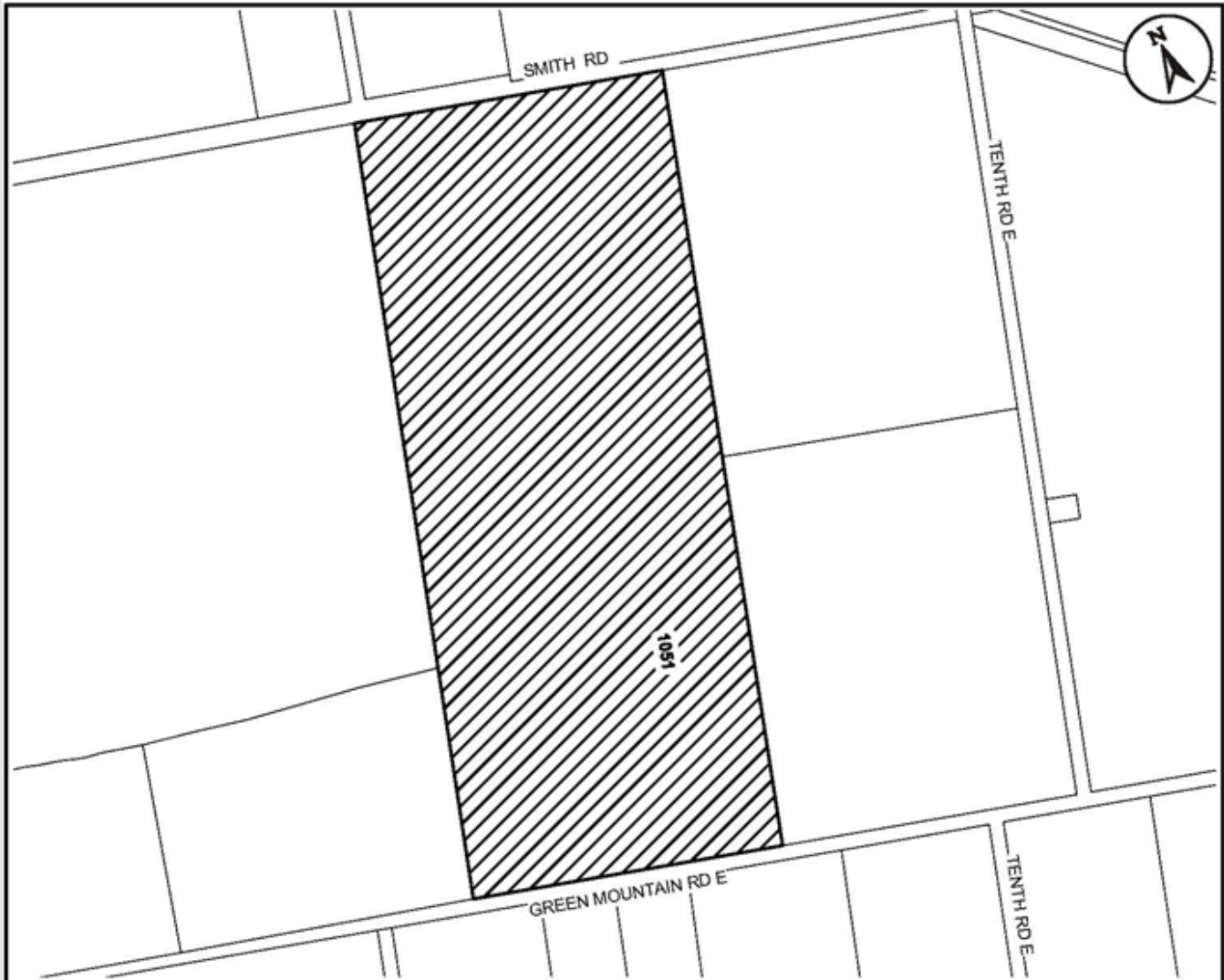
3. That this by-law No. 18-054 shall come into force and deemed to come into force in accordance with Subsection 34(21) of the *Planning Act* , either upon the date of passage of the By-law or as otherwise provided by the said subsection.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

ZAC-15-052/RHOP-15-022



This is Schedule "A" to By-law No. 18-
 Passed the day of, 2018

 Mayor


 Clerk

Schedule "A"

Map Forming Part of
 By-law No. 18-_____
 to Amend By-law No. 05-200
 Maps 1514, 1515, 1561,
 1562, 1606 & 1607

Subject Property

1051 Green Mountain Road

 Land to be Zoned Extractive Industrial (M12) Zone

Scale:
 N.T.S.

File Name/Number:
 ZAC-15-052 / RHOP-15-022

Date:
 Dec. 15, 2017

Planner/Technician:
 JC/AL



Hamilton

Authority: Item 6, Planning Committee
Report 18-003 (PED18018)
CM: February 28, 2018
Ward: 11

Bill No. 055

CITY OF HAMILTON

BY-LAW NO. 18-

To Amend Zoning By-law 3692-92 (Stoney Creek) Respecting lands located at 2 Glover Mountain Road (Stoney Creek)

WHEREAS the *City of Hamilton Act 1999*, Statutes of Ontario, 1999 Chap.14, Sch. C. did incorporate, as of January 1st, 2001, the municipality "City of Hamilton";

WHEREAS the City of Hamilton is the successor to certain area municipalities, including the former area municipality known as "The Corporation of the City of Stoney Creek" and is the successor to the former Regional Municipality, namely, The Regional Municipality of Hamilton-Wentworth;

WHEREAS the *City of Hamilton Act, 1999* provides that the Zoning By-laws of the former area municipalities continue in force in the City of Hamilton until subsequently amended or repealed by the Council of the City of Hamilton;

WHEREAS Zoning By-law No. 3692-92 (Stoney Creek) was enacted on the 8th day of December, 1992, and approved by the Ontario Municipal Board on the 31st day of May, 1994;

WHEREAS the Council of the City of Hamilton, in adopting Item 6 of Report 18-003 of the Planning Committee, at its meeting held on the 28th day of February, 2018, which recommended that Zoning By-law No. 3692-92 (Stoney Creek) be amended as hereinafter provided; and

WHEREAS this By-law is in conformity with the Urban Hamilton Official Plan.

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. That Map No. 11 of Schedule "A", appended to and forming part of By-law No. 3692-92 (Stoney Creek), is amended as follows:
 - (a) by changing the zoning from the from Neighbourhood Development "ND" Zone to Single Residential "R4-34(H1, H2)" Zone, Modified (Blocks 1 – 4);
2. That Subsection 6.5.7, "Special Exemptions" of Section 6.5 Single Residential "R4" Zone, of Zoning By-law No. 3692-92, be amended by adding a new Special Exemption, "R4-34(H1, H2)", as follows:

"R4-34(H1, H2)" 2 Glover Mountain Road, Schedule "A", Map No. 1352

Notwithstanding the provisions of Paragraphs (a), (b), (c), (d), (e), (f), and (g) of Section 6.5.3 “Zone Regulations” of the Single Residential “R4” Zone and Section 4.19 “Yard Encroachments”, the regulations of the Single Residential “R4-31” Zone, Modified, as established under By-law No. 14-180, shall apply on those lands zoned “R4-34” by this By-law, and the following shall also apply:

- | | |
|-----------------------------|---|
| (a) Maximum Building Height | 10.3 metres (2 storeys) and the elevation of the peak of the roof shall be a maximum of 196.5 masl. |
|-----------------------------|---|

Notwithstanding the provision of Section 3.8 “Holding Zones”, on those lands zoned “R4-34 (H1, H2)” by this By-law, the Holding symbol (H1) may be removed and thereby give effect to the “R4-34” Zone provisions in Section 2 above, upon completion of the following:

- (a) That a visual analysis is finalized including determination of the maximum building height as a Metre Above Sea Level (MASL) to the satisfaction of the Director of Planning and Chief Planner and the Niagara Escarpment Commission.

Notwithstanding the provision of Section 3.8 “Holding Zones”, on those lands zoned “R4-34 (H1, H2)” by this By-law, the Holding symbol (H2) may be removed and thereby give effect to the “R4-34” Zone provisions in Section 2 above, upon completion of the following:

- (a) That the Niagara Escarpment Commission (NEC) issue development permits for the creation of the lots, the road and the outlet / spillway and all conditions of the development permits are cleared to the satisfaction of Manager of Engineering Approvals, Growth Management Division.

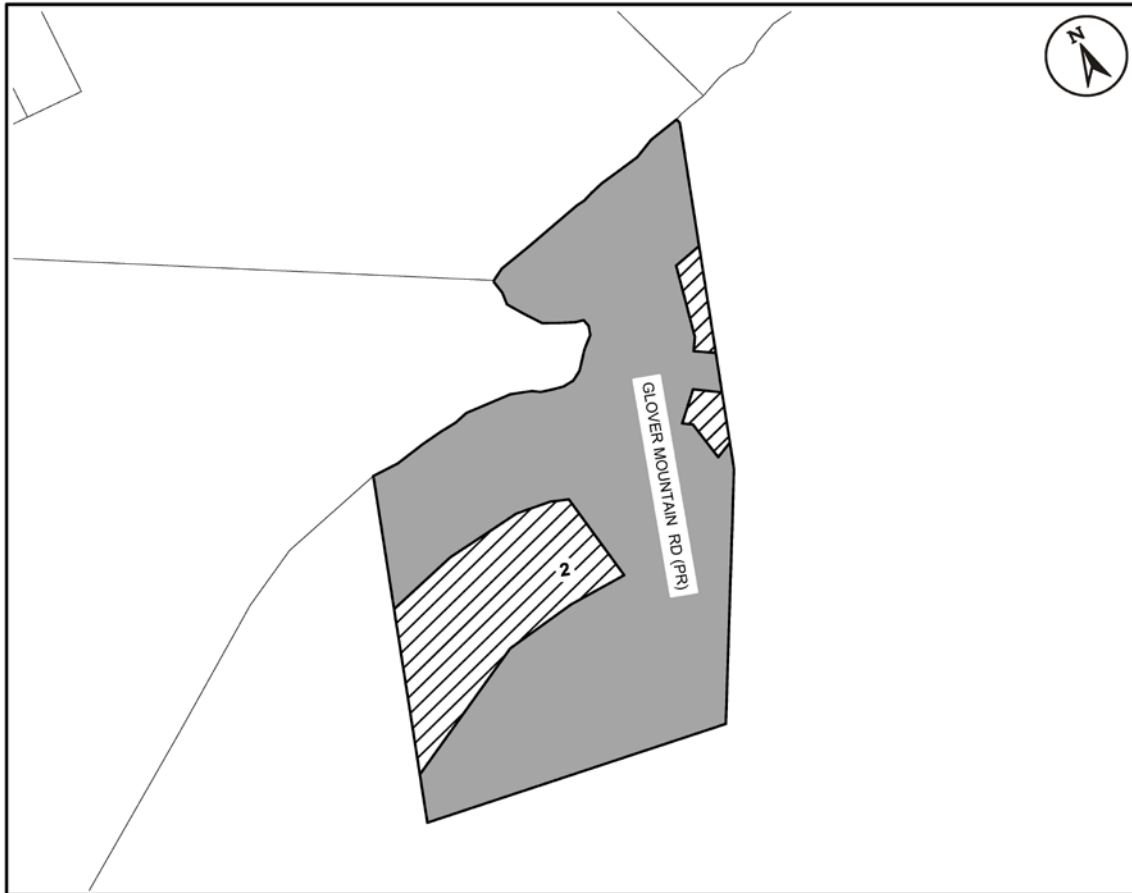
That the Clerk is hereby authorized and directed to proceed with the giving of notice of the passing of this By-law, in accordance with the *Planning Act*.

PASSED this 28th day of February, 2018

F. Eisenberger
Mayor

R. Caterini
City Clerk

ZAC-16-001
25T-201601



This is Schedule "A" to By-law No. 18- Passed the day of, 2018	----- Mayor ----- Clerk
---	--------------------------------------

<h2 style="margin: 0;">Schedule "A"</h2> <p style="margin: 10px 0 0 0;">Map Forming Part of By-law No. 18-_____</p> <p style="margin: 10px 0 0 0;">to Amend By-law No. 3692-92</p>	<p>Subject Property 2 Glover Mountain Road</p> <p> Change in Zoning from Neighbourhood Development "ND" Zone to the Single Residential "R4-34 (H1, H2, H3)" Zone, Modified</p> <p> Refer to By-law No. 05-200</p>
--	--

Scale: N.T.S.	File Name/Number: ZAC-16-001/25T-201601		Date: Jan. 18, 2018
PLANNING AND ECONOMIC DEVELOPMENT DEPARTMENT			Planner/Technician: JR/AL

Authority: Item 6, Planning Committee
Report 18-003 (PED18018)
CM: February 28, 2018
Ward: 11

Bill No. 056

CITY OF HAMILTON

BY-LAW NO. 18-

To Amend Zoning By-law No. 05-200 Respecting lands located at 2 Glover Mountain Road (Stoney Creek)

WHEREAS the City of Hamilton has in force several Zoning By-laws which apply to different areas incorporated into the City by virtue of the *City of Hamilton Act 1999*, Statutes of Ontario, 1999 Chap.14;

WHEREAS the City of Hamilton is the lawful successor to the former Municipalities identified in Section 1.7 of By-law No. 05-200;

WHEREAS the Council of the City of Hamilton, in adopting Item 6 of Report 18-003 of the Planning Committee, at its meeting held on the 28th day of February 2018, which recommended that Zoning By-law No. 05-200 be amended as hereinafter provided; and,

WHEREAS this By-law is in conformity with the Urban Hamilton Official Plan.

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. That Map No. 1352 of Schedule "A" – Zoning Maps of By-law No.05-200, be amended as follows:
 - a) by adding to the City of Hamilton Zoning By-law No. 05-200, the lands the extent and boundaries of which are shown as schedule "A" to this By-law;
 - b) by establishing a Conservation / Hazard Land (P5-679) Zone, Modified, to the lands, the extent and boundaries of which are shown as "Blocks 5-8" hereto annexed as Schedule "A";
2. That Schedule "C" – Special Exceptions of By-law No. 05-200, is amended, by adding the following special provision:
 - a) Notwithstanding Section 4.23 d), the minimum setback from any building or structure to Conservation / Hazard Land (P5) Zone will be 1.2 metres for any residential side yards and will be 7.0 metres for any rear yards.
3. That the Clerk is hereby authorized and directed to proceed with the giving of notice of the passing of this By-law, in accordance with the *Planning Act*.

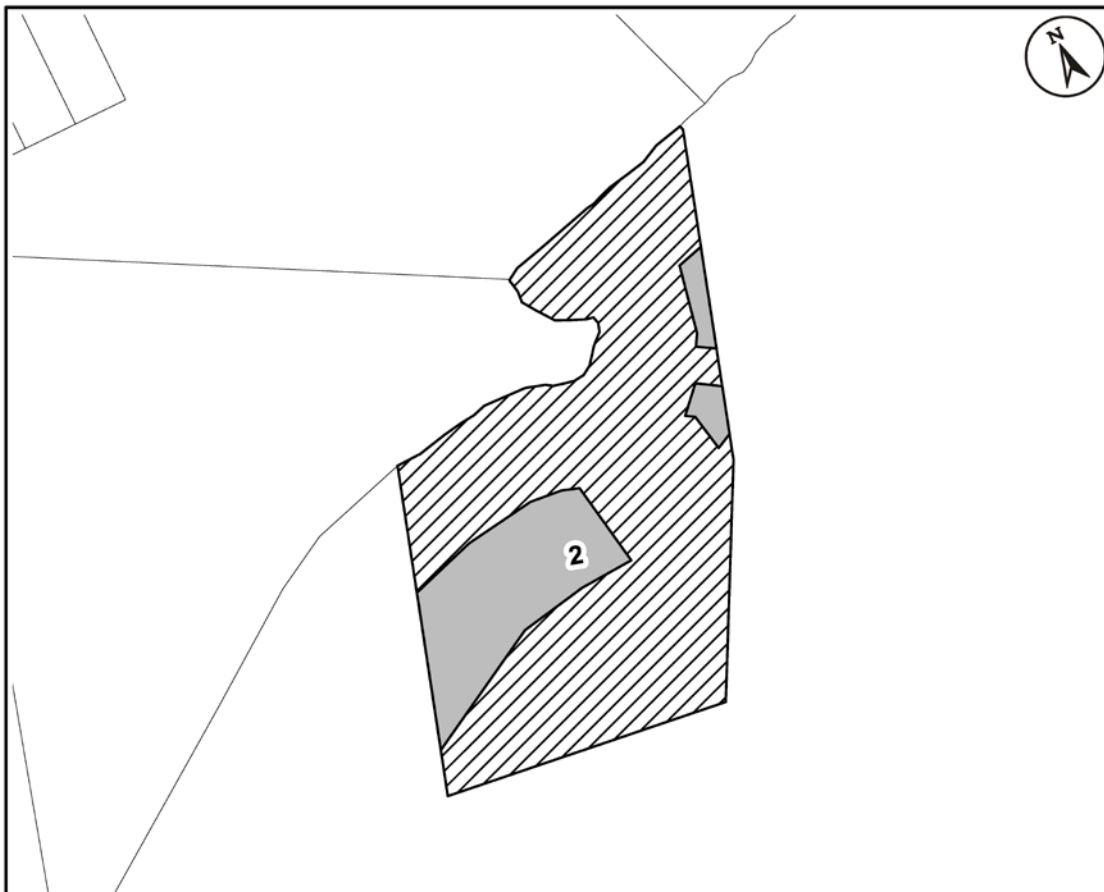
4. That this By-law No. 18-056 shall come into force and be deemed to have come into force in accordance with Subsection 34(21) of the *Planning Act*, either upon the date of passage of this By-law or as provided by the said Subsection

PASSED this 28th day of February, 2018

F. Eisenberger
Mayor

R. Caterini
City Clerk

ZAC-16-001
25T-201601



This is Schedule "A" to By-law No. 18- Passed the day of, 2018	----- Mayor ----- Clerk
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<h2 style="margin: 0;">Schedule "A"</h2> <h3 style="margin: 0;">Map Forming Part of By-law No. 18-_____</h3> <h3 style="margin: 0;">to Amend By-law No. 05-200 Map 1352</h3>	Subject Property 2 Glover Mountain Road Lands to be zoned Conservation / Hazard (P5, 679) Zone, Modified Refer to By-law No. 3692-92
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Scale: N.T.S.	File Name/Number: ZAC-16-001/25T-201601	
Date: Jan. 24, 2018	Planner/Technician: JR/AL	
PLANNING AND ECONOMIC DEVELOPMENT DEPARTMENT		Hamilton

Authority: Item 9, Public Works Committee
Report 17-010 (PW17069)
CM: August 18, 2017
Ward: City Wide

Bill No. 057

CITY OF HAMILTON

BY-LAW NO. 18-

To Authorize the Execution of the Ontario Municipal Commuter Cycling (OMCC) Program Transfer Payment Agreement between the City of Hamilton and Her Majesty the Queen in right of Ontario as represented by the Minister of Transportation for the Province of Ontario (Funding Year 2017-2018)

WHEREAS on August 18, 2017, Council of the City of Hamilton approved Item 9 of Public Works Committee Report 17-010, and authorized the City of Hamilton to apply to receive funding for projects under the OMCC Program;

AND WHEREAS the Ontario Ministry of Transportation has approved funding for 17 City of Hamilton projects under the OMCC Program listed in Schedule 1 to this By-law;

AND WHEREAS at its meeting on August 18, 2017, Council of the City of Hamilton authorized the signing of a Transfer Payment Agreement with Her Majesty the Queen in right of Ontario as represented by the Minister of Transportation to receive funding for the approved projects under the OMCC Program;

NOW THEREFORE the Council of the City of Hamilton enacts as follows:

1. The following Schedule forms part of this By-law:

Schedule 1– Approved City of Hamilton Cycling Projects for Ontario Municipal Commuter Cycling (Funding Year 2017-2018)

2. The projects listed in Column 1 of Schedule 1 have been approved by the City of Hamilton.
3. The Mayor, the City Clerk and the General Manager, Finance and Corporate Services are authorized and directed, on behalf of the City of Hamilton, to enter into and sign the OMCC Program Transfer Payment Agreement between the City of Hamilton and Her Majesty the Queen in right of Ontario as represented by the Minister of Transportation to receive funding for the projects listed in Column 1 of Schedule 1 to this By-law for funding.

To Authorize the Execution of the Ontario Municipal Commuter Cycling (OMCC) Program Transfer Payment Agreement between the City of Hamilton and Her Majesty the Queen in right of Ontario as represented by the Minister of Transportation for the Province of Ontario (Funding Year 2017-2018)

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4. The City of Hamilton commits to provide the equivalent to twenty percent of the 2017-2018 funding provided to the City of Hamilton under the OMCC.
5. This By-law shall come into effect upon its passing.

PASSED this 28th day of February 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk

SCHEDULE 1

Approved City of Hamilton Cycling Projects for Ontario Municipal Commuter Cycling (Funding Year 2017-2018)

	COLUMN 1	
	Project Name	Capital Project Description
1	Claremont Access	Multi-use trail (West 5th St to Hunter St), cycle track on Hunter St (Liberty St to Claremont Access), bike path on West 5th (Claremont Access to Brantdale Ave), plus 500m of multiuse trail connectors. Total Length 3.2 km
2	Bike Share Enhancement	Increasing the existing system area station density to minimum station and bike density targets to better serve high density commuter nodes and places of work. 525 Bicycles and 40 Stations
3	Governor's Road	Cycle track (Creighton to Moss) beside sidewalk and bike lanes (Moss to Davidson) inconjunction with street reconstruction. Total Length 1.5 km
4	Sydenham Road	Paved shoulders (Hwy 5 to escarpment brow) in conjunction with roadway resurfacing, including construction of a wider platform along 40% of the project. Total Length 2.8 km
5	Bike Share Expansion Wards 3 & 4	Expansion of the existing Bike Share network easterly to Kenilworth Ave including: 100 Bicycles and 25 Stations
6	Barton Street	Bike path (Red Hill Valley Pkwy to Centennial Pkwy) beside the sidewalk. Total Length 0.9 km
7	Highway 8	Bike path (King St to Dewitt Rd) beside the sidewalk; portions of the asphalt path have recently been constructed. Total Length 1.4 km
8	West 5th Street	Bike path (Mohawk College to the planned Claremont Access multi-use trail) beside the existing sidewalk. Total Length 0.6 km
9	Hunter Street	Cycle track (MacNab St to Catharine St) with a road diet, completing the seamless connection to the Hamilton GO Centre both easterly and westerly. Total Length 0.5 km
10	Hatt Street	Bike lanes (Creighton Rd to Market St to Main St, Dundas) in conjunction with on-street parking consolidation. Total Length 1.8 km
11	Kitty Murray Lane	Bike lanes (Golf Links Rd to Garner Rd) on existing asphalt, in conjunction with parking consolidation. Total Length 2.3 km
12	Stonehenge Drive	Bike lanes (Southcote Rd to Stone Church Rd) on existing asphalt, in conjunction with parking consolidation. Total Length 2.5 km

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13	Limeridge Road	Bike lanes (Bonaventure Dr/Garth St to West 5th St/Hawkridge Ave) on existing asphalt. Total Length 1.8 km
14	King St @ Red Hill Valley Parkway	Resolve cycling gap through an expressway interchange between two well-established segments of bike lanes, the final facility design and routing is to be determined, but is expected to include some curb modifications. Total Length 0.7 km
15	Charlton Avenue	Bike lanes (Ferguson Ave to James St) on existing asphalt with possible impact to on-street parking. Total length 0.6 km
16	Bike Racks Parking	Bike racks fabrication/installation to continue to expand the bike parking facilities, across the city, focusing on destinations (employment & commercial).
17	Bike Racks HSR	Purchase bike racks for the front of transit busses (HSR) to ensure the entire fleet continues to have this amenity as the fleet expands.

CITY OF HAMILTON

BY-LAW NO. 18-

To Confirm the Proceedings of City Council at its meeting held on February 28, 2018.

**THE COUNCIL OF THE
CITY OF HAMILTON
ENACTS AS FOLLOWS:**

1. The Action of City Council at its meeting held on the 28th day of February, 2018, in respect of each recommendation contained in,

Planning Committee Report 18-003 – February 20, 2018,
General Issues Committee Report 18-005 – February 21, 2018,
Public Works Committee Report 18-003 – February 22, 2018,
Board of Health Report 18-002 – February 22, 2018,
Healthy and Safe Communities Committee Report 18-001 – February 26, 2018,
and
Special General Issues Committee Report 18-006 – February 27, 2018

considered by City of Hamilton Council at the said meeting, and in respect of each motion, resolution and other action passed and taken by the City Council at its said meeting, is, except where prior approval of the Ontario Municipal Board is required, hereby adopted, ratified and confirmed.

2. The Mayor of the City of Hamilton and the proper officials of the City of Hamilton are hereby authorized and directed to do all things necessary to give effect to the said action or to obtain approvals where required, and except where otherwise provided, the Mayor and the City Clerk are hereby directed to execute all documents necessary in that behalf, and the City Clerk is hereby authorized and directed to affix the Corporate Seal of the Corporation to all such documents.

PASSED this 28th day of February, 2018.

F. Eisenberger
Mayor

R. Caterini
City Clerk