

CITY OF HAMILTON

PUBLIC HEALTH SERVICES Healthy Living Division

TO:	Mayor and Members Board of Health
COMMITTEE DATE:	January 12, 2015
SUBJECT/REPORT NO:	Healthy Kids Community Challenge, Hamilton's Healthy Kids (Childhood Obesity) Strategy - BOH14007(a) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Rosanna Morales (905) 546-2424, Ext. 7153
SUBMITTED BY:	Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services Department
SIGNATURE:	

RECOMMENDATION

- (a) That the Board of Health authorize and direct the Medical Officer of Health to receive, utilize and report on new funding for the Healthy Kids Community Challenge from the Ministry of Health and Long Term Care, and execute an agreement between the City and the Ministry of Health and Long Term Care, satisfactory in form to the City Solicitor;
- (b) That the Board of Health authorize and direct the Medical Officer of Health to extend the temporary Hamilton Healthy Kids Strategy Project Manager position through December 2015.

EXECUTIVE SUMMARY

In 2012, the Government of Ontario set a provincial target of reducing rates of childhood obesity by 20% over five years. The government created the Healthy Kids Panel (HKP), a multi-sectoral group of 18 leading experts who have a broad understanding of childhood obesity. In 2013, the HKP released their report "No Time to Wait: The Healthy Kids Strategy", which outlines 23 specific recommendations to achieve this target.

In March 2014, the City of Hamilton submitted an application to the Healthy Kids Community Challenge (HKCC), a funding opportunity to address recommendations of

the report. Our application included the support of three Councillors, 22 community partners and six City of Hamilton divisions with a focus on the Hamilton Mountain (Wards 6, 7, 8).

On September 11, 2014, we were notified that our application to the HKCC was successful. The HKCC will support 45 communities across Ontario over the next four years. The Ministry of Health and Long Term Care (MOHLTC) will announce a theme every nine months that relates to physical activity, healthy eating, or adequate sleep in children (eg. healthy breakfast). Partners will come together to identify needs and develop a comprehensive theme-based action plan to address each theme in their community. A Transfer Payment Agreement (TPA) and the first theme are expected to be received in early 2015.

Alternatives for Consideration – See Page 4

FINANCIAL – STAFFING – LEGAL IMPLICATIONS (for recommendation(s) only)

Financial: The total amount of the funding being offered to Hamilton is not yet known and will be provided when the TPA is received. The announcement outlined funding of up to \$1.5 million over the four years of the initiative, including funding for 0.5 FTE of a Project Manager. Community funding of the other 0.5 FTE of the Project Manager is a requirement of the funding.

Staffing: A requirement of accepting this funding is that the community must fund 0.5 FTE for the Project Manager overseeing this strategy for four years. A dedicated Project Manager to oversee Hamilton's Healthy Kids Strategy (HHKS) was hired on a temporary basis in September 2013 (current contract until March 2015). The HKCC will provide funding for 0.5 FTE of this position until approximately April 2018. Options being explored for funding of the other 0.5 FTE include private sector partnerships and reallocation of existing resources.

Legal: The City of Hamilton must sign a TPA with the MOHLTC. Legal Services will be engaged in the review of the TPA, which is expected to be received in early 2015.

HISTORICAL BACKGROUND (Chronology of events)

- In 2012, the Government of Ontario set a provincial target of reducing rates of childhood obesity by 20% over five years.
- In 2013, the HKP released their report "No Time to Wait: The Healthy Kids Strategy", outlining 23 recommendations to reduce childhood obesity.
- In January 2014, the MOHLTC announced the HKCC, a funding opportunity for communities to help them implement programs and policies to support children and youth to be more active, eat healthy and ensure they are getting adequate sleep.
- On March 11, 2014, a proposal was submitted to the provincial HKCC, focusing on the Hamilton Mountain (Wards 6, 7, 8).

- On March 14, 2014, an Information Update was submitted to the Board of Health outlining details of the City of Hamilton's application to the provincial HKCC.
- June 2014, due to the provincial election, funding announcements for HKCC applicants were delayed. Consultation with local partners indicated that they wished to wait for the decision about HKCC funding before moving forward with any actions.
- On August 14, 2014, an Information Report was submitted and a presentation was made to the Board of Health outlining HHKS, including an update that a decision about our application to the HKCC was still pending.
- On September 12, 2014, an Information Update was submitted to the Board of Health to share the news that our application to the HKCC was successful (Appendix A).

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

None

RELEVANT CONSULTATION

HKCC partners have been notified that our application was successful and have expressed their excitement about moving forward with this initiative.

Legal Services and Finance will be engaged in the review of the TPA with the MOHLTC.

Initial consultation with Brian MacDonald, Manager of Revenue Generation, regarding possible private sector support for 0.5 FTE for the Project Manager or other HKCC costs, has occurred and this option will continue to be explored.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

(Include Performance Measurement/Benchmarking Data if applicable)

Overweight and obesity rates in Canadian children and youth have risen tremendously in the past 30 years. In 1978-79, 15% of 2-17 year olds were overweight or obese. In 2009-11, 32.8% of 5-11 year olds and 30.1% of 12-17 year olds were overweight or obese¹. In the City of Hamilton, 31.8% of 12-17 year olds and 35.6% of 5 year olds are overweight or obese^{2,3}. It is estimated that if all Ontario residents had healthy weights, the province would save up to \$2.5 billion a year in healthcare expenditures⁴. Significant benefits can be achieved by working to reduce these rates in Hamilton.

Although Hamilton PHS staff does comprehensive work in the community on physical activity and healthy eating, the funds provided by the MOHLTC will support the development and expansion of programs and services across the Hamilton Mountain that would not otherwise be possible. Specifically, this funding opportunity will provide:

• Up to \$1.5 million over four years (pro-rated for the first year because of delays).

- Up to 50% of the annual salary of a Project Manager over four years.
- Training and support to develop, implement and evaluate local action plans.

ALTERNATIVES FOR CONSIDERATION

(Include Financial, Staffing, Legal and Policy Implications and Pros and Cons for each alternative)

The Board of Health could choose not to accept the funding offered through the HKCC, which would mean these resources would not be available to support HHKS. This would be a lost opportunity to address major risk factors impacting the health of children in Hamilton, particularly for the designated area which is underserved and has high needs. This would not align with Council's vision of making Hamilton the best place to raise a child.

Financial: This alternative would forego up to \$1.5 million in funding over the next four years from the MOHLTC, including up to \$50,000 annually to support a 0.5 FTE Project Manager.

Staffing: Current HHKS Project Manager's contract will end in March 2015. Resources to continue to fund this full time position would be required. Alternatively, the Project Manager resource would be discontinued.

Legal: A TPA with the MOHLTC would not be required.

Policy Implications: None

Pros: Avoid the need to secure funding (0.5FTE) for Project Manager over 4 years.

Cons: Lost opportunity to increase service to high need families, bring resources to an underserved area and build relationships with private and public sector partners.

ALIGNMENT TO THE 2012 - 2015 STRATEGIC PLAN

Strategic Priority #1

A Prosperous & Healthy Community

WE enhance our image, economy and well-being by demonstrating that Hamilton is a great place to live, work, play and learn.

Strategic Objective

1.5 Support the development and implementation of neighbourhood and City wide strategies that will improve the health and well-being of residents.

APPENDICES AND SCHEDULES ATTACHED

Appendix A – September 12, 2014 Information Update

References

¹ Roberts KC, Shields M, de Groh M, Aziz A, Gilbert JA. Overweight and obesity in children and adolescents: Results from the 2009 to 2011 Canadian Health Measures Survey. *Health Reports* 2012; 23(3)39-43.

² Statistics Canada. Table 105-0501–Health indicator profile, annual estimates, by age group and sex, Canada, provinces, territories, health regions (2012 boundaries) and peer groups, occasional, CANSIM (database). Accessed September 13, 2013.

³ Hamilton Kindergarten Parent Survey, 2005.

⁴ Ontario Chronic Disease Prevention Alliance [OCDPA]. (2012). Make Ontario the Healthiest Province in Canada. Retrieved from http://www.healthiestprovince.ca/make-ontario-the-healthiest-province-in-canada.