

Results-based Plan Briefing Book 2011-12

Ministry of Health Promotion and Sport

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Part I: Results-Based Plan 2011-12

Ministry of Health Promotion and Sport

PART I: PUBLISHED RESULTS-BASED PLAN 2011-12

Vision, Mission/Mandate

The ministry's vision is to enable Ontarians to lead healthy, active lives and make the province a healthy place to live, work, play, learn and visit. The fundamental goals are to promote and encourage Ontarians to make healthier choices at all ages and stages of life, create healthy and supportive environments, lead the development of healthy public policy and assist with promoting behaviours that improve health.

The ministry's mission is to:

- Provide programs, services, tools and incentives that will enhance health and well-being.
- Support individuals to make healthy choices easier.
- Work with other ministries, and levels of government, community partners, the private sector, the media and the public to promote health and well-being for all Ontarians.
- Make Ontario a leader in health promotion within Canada and internationally.
- Building the infrastructure and enhancing opportunities for Ontario athletes to achieve national and international success.

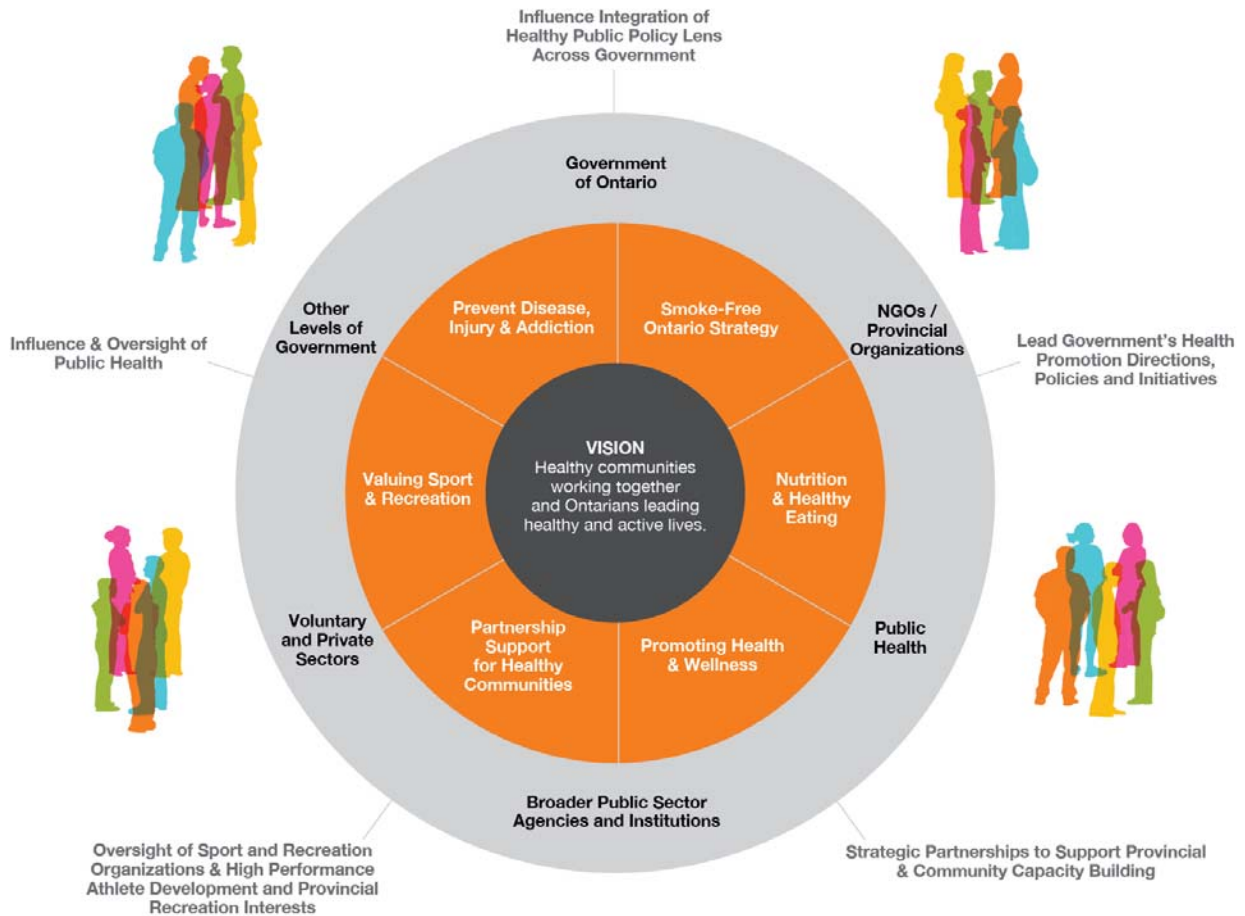
Ministry Overview

The Ministry of Health Promotion and Sport's (MHPS) goal is to improve the health and well-being of Ontarians and to help contribute to the sustainability of our publicly funded health care system.

By championing health promotion across Ontario and inspiring partners to create a culture of health and well-being for all, we are building healthy communities that will provide economic benefits well beyond health care savings.

MHPS is pursuing this vision by focusing on the following core goals and priorities: (1) Promoting Health and Wellness; (2) Nutrition and Healthy Eating; (3) Preventing Disease, Injury and Addiction; (4) Valuing Sport and Recreation; (5) Partnership Support for Healthy Communities; (6) Smoke-Free Ontario Strategy.

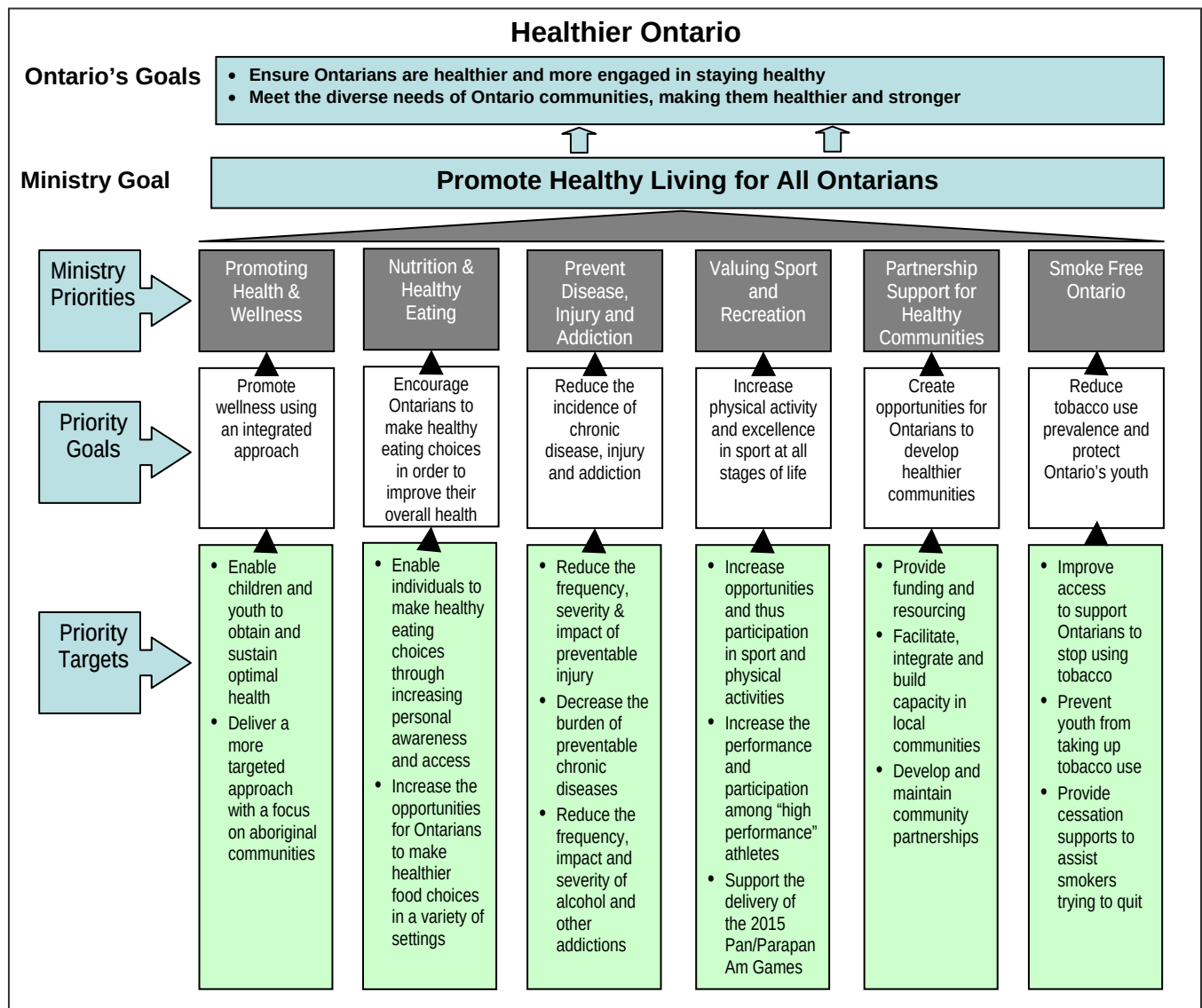
(See the diagram below.)



Good health is more than the absence of illness. It is leading a balanced life that includes a healthy lifestyle, healthy eating, managing stress, getting adequate rest and being physically active.

However, not all Ontarians have the resources or opportunities to make healthy choices. Where you live or work; your access to healthy foods and recreation centres; and transportation issues can all impact your health.

The MHPS' vision and priorities are illustrated in the following chart.



Health Promotion and Sport Key Initiatives

In 2011-12 the ministry will continue to deliver on the following key initiatives:

Pan/Parapan American Games: Building on the momentum of the successful bid to host the 2015 Pan/Parapan American Games, the Pan Am Games Secretariat (PAGS) has been established within MHPS as the one-window to provide strategic direction, coordination and oversight of the Provincial government's participation in the Games. In 2011-12, MHPS will continue to work with the Toronto 2015 Organizing Committee and other Games partners to support the successful delivery of the Games. The Games will bring over 10,000 athletes and team officials to Ontario and attract up to 250,000 tourists. The Games will mean thousands of jobs, create a legacy of new and updated sport venues and stimulate a number of key infrastructure projects in Toronto and the Greater Golden Horseshoe, including public transportation and affordable housing.

Valuing Sport: The ministry funded a total of 62 PSOs/MSOs through the Provincial Sport/ Multi Sport (PSO/MSO) Program. The ministry's assistance contributed to building organizational capacity, enhancing participation rates in high performance competitions and helped the organizations in the development of their athletes and improvement of their athlete's performance.

Through the Quest for Gold Program, the ministry invested in coaching programs, enhanced training and competitive opportunities for athletes. Over 1,100 athletes also received direct funding through the Athlete Assistance Program. This funding assisted athletes to pursue athletic excellence at the highest levels of national and international training and competition.

Diabetes: MHPS is leading the prevention component of the government's Diabetes Strategy. The prevention component aims to reduce the impact of diabetes in high-risk populations through targeted interventions in neighbourhoods and workplaces. In 2011-12, MHPS will continue to work closely with Ministry of Health and Long-Term Care to build on existing initiatives and align prevention activities with disease management activities.

Renewal of Ontario's Tobacco Control Strategy: MHPS is supporting the government's renewed commitment to a Smoke Free Ontario through a number of actions. These include helping smokers trying to quit by providing more cessation supports in a variety of new settings across the province, and providing new resources to increase efforts focused on the prevention of tobacco use by Ontario's youth.

Through the Tobacco Strategy Advisory Group (TSAG) and the Scientific Advisory Committee under the Ontario Agency of Health Protection and Promotion, MHPS has engaged a wide range of scientific and technical experts in the areas of tobacco control and chronic disease prevention to provide strategic advice, propose new performance measures and targets, and recommend future directions.

Ontario Public Health: New Guidance Documents were implemented in 2010-11 which will help local boards of health plan and execute their responsibilities under the *Ontario Health Protection and Promotion Act* and the Ontario Public Health Standards. The ministry also released the new Ontario Public Health Organizational Standards in February 2011, in partnership with the Ministry of Health and Long-Term Care. The Organizational Standards are a key part of the Government's Public Health Performance Management Framework and will set expectations for boards of health related to governance and administration. In 2011-12, the ministry will develop accountability agreements to further public health system performance.

Ontario's After-School Initiative: Identified as a key initiative under the governments Poverty Reduction Strategy, the program, launched in October of 2009 provides after-school services to children and youth from grades 1 to 12 in high priority communities/populations, with safe, accessible, active and healthy activities (e.g. physical activity, healthy eating and nutrition, and personal health and wellness).

Healthy Communities Fund: The Healthy Communities Fund (HCF) is dedicated to building stronger and healthier communities. It is a one-window approach to funding community partnership programs. Encouraging partnerships, the Fund provides support to provincial and community organizations who deliver initiatives that address multiple risk factors for chronic diseases and that promote health and wellness. In the last two years, HCF has already benefited over 500,000 Ontarians through more than 360 different projects in communities across the province.

Ministry Priorities

To support MHPS's enhanced focus on results and new strategic directions, the ministry has identified the following six priorities in its 2011-12 Results-based Planning process:

- (I) Promoting Health and Wellness
- (II) Nutrition and Healthy Eating
- (III) Prevent Disease, Injury and Addiction
- (IV) Valuing Sport and Recreation
- (V) Partnership Support for Healthy Communities
- (VI) Smoke-Free Ontario

I. Promoting Health and Wellness

The ministry has adopted a comprehensive and integrated approach to promoting health and wellness designed to improve population health outcomes for all Ontarians. It focuses on children and youth, aboriginals, and persons of low socio-economic status.

The ministry's After-School Initiative is one example of an integrated approach. Developed in partnership with a number of key Ministries, the program brings together sport and recreation, nutrition, mental and physical health, and literacy so that children and youth engaged in the program receive the benefit of a holistic community plan and service.

II. Nutrition and Healthy Eating

The ministry is working to assist consumers to make better food choices across all venues, including workplace cafeterias, grocery stores, restaurants and schools by working in partnership with other ministries, the federal government, public health units, family health teams, NGOs, school boards, the food and restaurant industries and registered dietitians.

III. Prevent Disease, Injury and Addiction

Preventing chronic diseases, injury and addiction lies at the core of both the ministry's and public health's agenda. The ministry works closely with and supports Local Public Health Agencies and Public Health Units in addressing this priority. MHPS will develop performance measures and accountability agreements for Public Health Units to implement the chronic disease prevention and injury prevention and substance misuse Public Health Standards. Public Health Units will work in partnership with other sectors and community members to identify and address local needs and implement health promotion strategies with schools, workplaces, municipalities and the private sector. Key areas may include: improving the built environment to support physical activity and food accessibility. The work involves coordination, integration and building upon health promotion and chronic disease prevention activities of other ministries and partners across sectors to achieve a seamless approach to prevention and management of chronic diseases. The objective is to invest in prevention strategies and initiatives that help manage health care costs and contribute to the long-term sustainability of the provincial health care system.

IV. Valuing Sport and Recreation

The ministry continues to support building a culture and continuum of engagement in sport in Ontario. Valuing sport requires a cultural shift within communities, assisted by consistent branding and enhanced attention to the role of sports in healthy development of all children, leading to life-long enjoyment and, if desired, to sporting success.

The successful bid to host the 2015 Pan/Parapan American Games is an important initiative that will complement this strategic direction. The Games will facilitate a heightened community awareness of the value of sport and create a legacy of sport and recreation infrastructure in the GTA and Greater Golden Horseshoe.

V. Partnership Support for Healthy Communities

Under this priority, MHPS supports communities to work together to develop policies, plans and programs that make it easier for Ontarians, especially those at risk of poorest health, to be healthier where they live, work, study or play. MHPS has drawn on research that shows that coordinated action among different sectors and effective population-based change strategies can contribute to reducing preventable chronic diseases.

MHPS is using its Healthy Communities Fund (HCF) to implement this priority and provide this combination of supports. The HCF includes three inter-related components: (1) the Grants Project Stream funds health promotion projects, led by local and provincial community groups, that address physical activity, sport and recreation; healthy eating; injury prevention; substance and alcohol misuse, tobacco use/exposure and/or mental health promotion; (2) the Partnership Stream promotes coordinated community planning and mobilization to create policy change and an environment that promotes health; and (3) the Resource Stream provides training and capacity building on partnership and community development and the sharing of effective strategies to build healthy communities.

VI. Smoke-Free Ontario

Tobacco is the leading cause of preventable disease and death in Ontario accounting for approximately 13,000 deaths each year. The Smoke-Free Ontario (SFO) Strategy is undergoing review and renewal. Launched in 2005, the SFO Strategy has achieved its key objectives; however, significant challenges remain to be addressed. MHPS initiated a process for renewing the future of the Government's tobacco control initiatives. With key partners and stakeholders, the ministry is pursuing a five-year plan for tobacco control in Ontario with new performance targets for the 2010-15 period.

The Ministry is committed to building a smoking cessation system that will result in the following: more health practitioners having access to training and resources needed to provide counselling support to those who need help quitting, new work with pharmacists regarding their role in cessation support services, targeted support to hospital patients with related chronic diseases, new partnerships with employers and trade organizations, counselling services combined with easy to access prescription cessation medication and nicotine replacement therapy in many settings.

Continuing with efforts to prevent youth from starting to use tobacco and getting them to quit include: providing resources to increase prevention efforts focused on protecting youth, engaging youth to develop youth-led tobacco prevention initiatives and working with partners to investigate innovative ways to prevent youth from smoking.

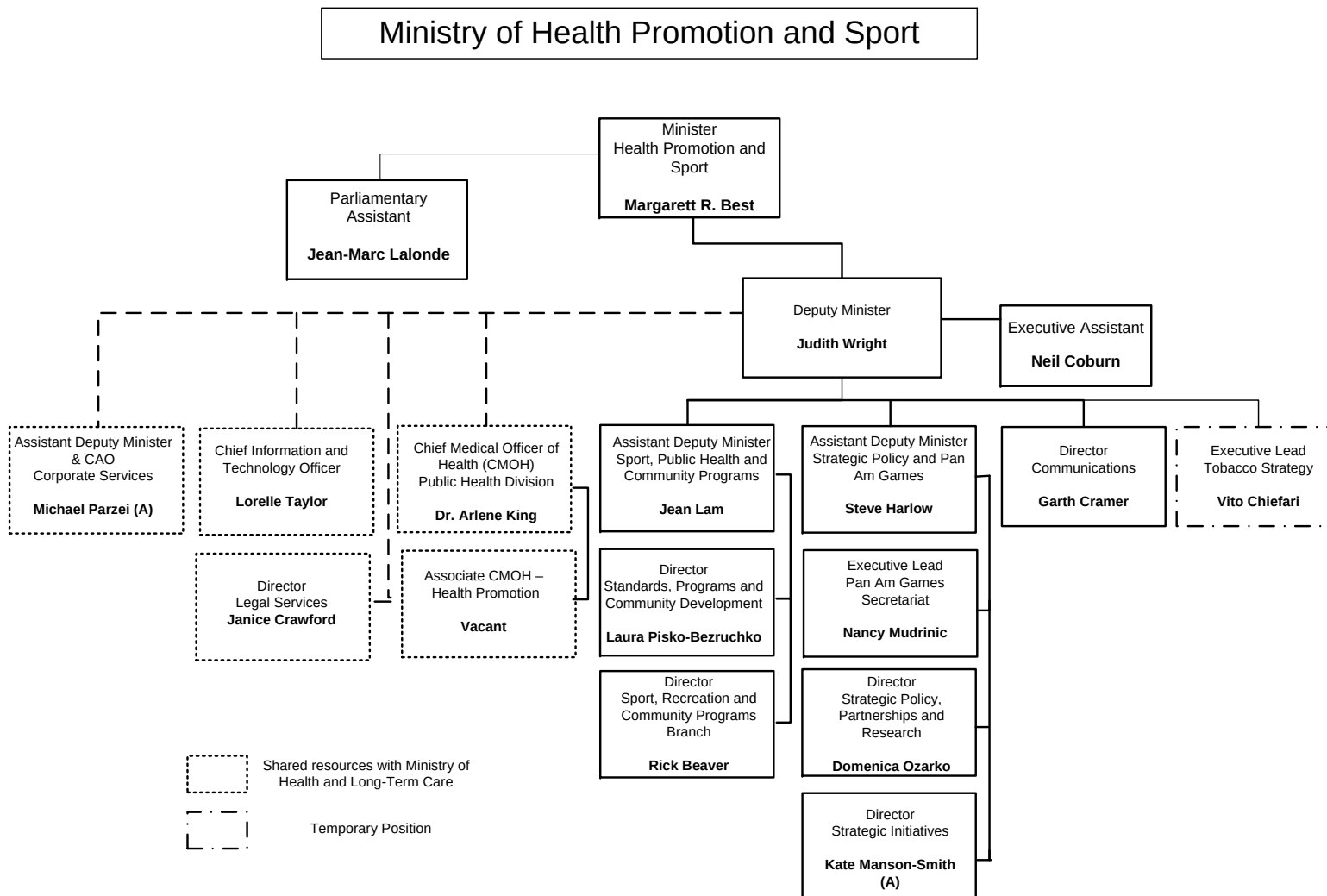
2010-11 Highlights of Achievements

In 2010-11, the ministry continued to add to its growing list of achievements. MHPS continues to promote excellence in sport through the Quest for Gold program; winning the bid to host the 2015 Pan/Parapan American Games in the Greater Golden Horseshoe Area (GGHA); cooperating with the Ministry of Tourism and Culture to deliver the Recreational Infrastructure Canada Program/Ontario Recreation Program in Ontario; creating a Youth Engagement Advisory Group to advise the ministry in establishing and helping to assess new models for engaging Ontario's youth and supporting new youth engagement initiatives involving broader community partnerships.

The ministry continued to deliver on the following key initiatives:

- Through the Provincial Sport/Multi Sport (PSO/MSO) Program, the ministry funded 62 PSO/MSOs to promote participation and excellence in sport throughout Ontario.
- Through the Quest for Gold Program, the ministry invested in coaching programs and enhanced training and competitive opportunities for athletes. The program contributed to an increase in participation of Ontario athletes on Canadian teams. 33 of 48 Ontario athletes funded through Quest for Goal participated in the 2010 Winter Olympics and 13 athletes won 7 medals (representing 27 per cent of Canada's medal count). A total of 21 of the 25 paralympian for the 2010 Winter Olympics in Vancouver received funds from the Quest for Gold Program.
- Through a partnership with the federal government, the ministry delivered the Recreational Infrastructure Canada/Ontario Recreation Program resulting in \$190M in support to over 760 sport and recreation projects.
- The ministry invested in Aboriginal health promotion programming to expand recreation and physical activity opportunities and a Healthy Living Program.
- Through a targeted Diabetes Prevention Strategy in cooperation with the Ministry of Health and Long-Term Care, this strategy aims to reduce the impact of diabetes for Ontarians most at risk (e.g. Aboriginal, Asian, South Asians, African-Caribbean descent, Hispanic and lower income) through targeted interventions in neighbourhoods and workplaces.
- MHPS provided more than 18,000 children in over 310 sites across the province with access to safe, active and healthy after school activities through its After School Initiative.
- Children In Need Of Treatment (CINOT) Program was expanded in 2009 to provide coverage to children in low-income families to children and youth 17 years and under. In 2010, CINOT provided emergency care for 43,484 children and youth with serious oral health problems who may have otherwise gone untreated. The program also offers out-of-hospital general anaesthetic for children age five and older.

- Further Amendments to the *Smoke-Free Ontario Act* were made in 2010 that restricted the sale of cigarillos to packages of at least 20 and prohibited the sale of flavoured cigarillos.
- Through the Healthy Communities Fund the ministry has, over the last two years, made significant investments in over 360 projects to help local partners promote physical activity, healthy eating, injury prevention, tobacco control, substance misuse and mental health promotion.

Ministry Organization Chart


April 1, 2011

Legislation

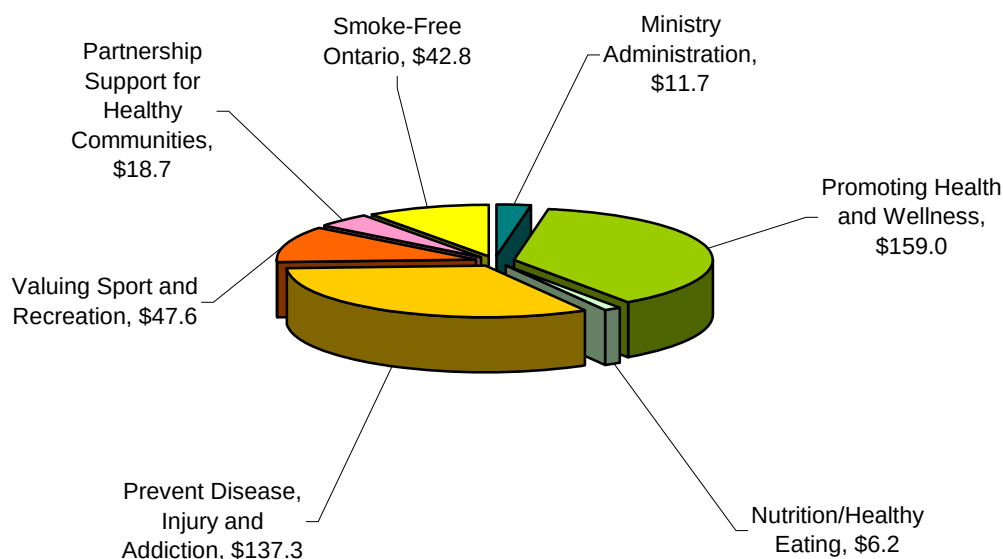
The ministry is responsible for the following statutes:

- *Community Recreation Centres Act*, R.S.O. 1990, c. C.22
- *Health Protection and Promotion Act*, R.S.O. 1990, c. H.7, section 7, in so far as it relates to the following mandatory health programs and services: Chronic Disease Prevention, Injury Prevention including Substance Abuse Prevention, Child Health and Reproductive Health, as described in guidelines published under section 7, and any other provision of the Act in so far as it relates to the administration or enforcement of section 7 respecting those programs and services
- *Ministry of Health and Long-Term Care Act*, R.S.O. 1990, c. M.26, in so far as it relates to health promotion
- *Ministry of Tourism and Recreation Act*, R.S.O. 1990, c. M.35, in respect of recreation
- *Smoke-Free Ontario Act*, S.O. 1994, c. 10, as amended.

MINISTRY FINANCIAL INFORMATION

The following chart depicts the ministry's operating investment in 2011-12 in the priorities.

Ministry Allocation of 2011-12 Base Spending (\$ Millions)



MINISTRY OF HEALTH PROMOTION AND SPORT

By championing health promotion across Ontario and inspiring partners to create a culture of health and wellbeing for all, the Ministry of Health Promotion and Sport is building healthy communities that will provide economic benefits well beyond health care savings. The Ministry of Health Promotion and Sport works with other ministries, other levels of government and community partners to develop and implement strategies and policies aimed at preventing chronic disease and that support healthy eating, physical activity, and smoking prevention/cessation. The ministry is also responsible for supporting amateur sport participation and performance excellence. These ministry initiatives support the sustainability of the healthcare system, and are critically linked to the government's overall agenda of a healthy Ontario, strong economy, reduction in poverty and student success.

Table 1: Ministry Planned Expenditures 2011-12 (\$M)

Operating	419.3
Capital	51.7
TOTAL	471.0

Ministry Planned Expenditures by Program Name 2011-12 (\$M)

Program Name	Ministry Planned Expenditures
Ministry Administration	11.7
Health Promotion and Sport Programs	407.6
Health Promotion and Sport Capital	51.7

Table 2: Operating and Capital Summary by Vote

Votes/Programs	Estimates 2011-12 \$	Change from Estimates 2010-11 \$	Change %	Estimates* 2010-11 \$	Interim Actuals* 2010-11 \$	Actuals* 2009-10 \$
OPERATING AND CAPITAL EXPENSE						
Ministry of Health Promotion and Sport	475,458,300	(297,530,300)	(38.5)	772,988,600	713,827,200	449,219,260
TOTAL OPERATING and CAPITAL EXPENSE TO BE VOTED	475,458,300	(297,530,300)	(38.5)	772,988,600	713,827,200	449,219,260
Statutory Appropriations	64,014	-	-	64,014	64,014	65,968
Ministry Total Operating and Capital Expense	475,522,314	(297,530,300)	(38.5)	773,052,614	713,891,214	449,285,228
Net Consolidation Adjustments	(4,560,800)	9,733,000	(68.1)	(14,293,800)	(15,749,400)	(16,290,918)
Total Including Consolidations and Other Adjustments	470,961,514	(287,797,300)	(37.9)	758,758,814	698,141,814	432,994,310
OPERATING ASSETS						
Ministry of Health Promotion and Sport	500,000	-	-	500,000	500,000	500,000
TOTAL OPERATING and CAPITAL ASSETS TO BE VOTED	500,000	-	-	500,000	500,000	500,000

* Estimates for the previous fiscal year are re-stated to reflect any changes in ministry organization and/or program structure.

Interim actuals reflect the numbers presented in the 2011 Ontario Budget.

Note: Commencing in 2009-10, the Province's minor Tangible Capital Assets (mTCA) are capitalized on a prospective basis. Direct comparison between 2011-12, 2010-11, and 2009-10 may not be meaningful.

For additional financial information, see:

<http://www.fin.gov.on.ca/english/budget/estimates/>
<http://www.fin.gov.on.ca/english/budget/paccts/>
<http://www.fin.gov.on.ca/english/budget/ontariobudgets/2011/>

or

<http://www.mhp.gov.on.ca/en/about/rbp/default.asp>

APPENDIX: ANNUAL REPORT 2010-11

2010-11 Annual Report

The Ministry of Health Promotion and Sport was established in June 2005 to help Ontarians lead healthier lives by delivering programs that promote healthier choices. The ministry is a leader and champion of health promotion and chronic diseases and injury prevention for all Ontarians. It is committed to developing and implementing policies and programs that enable individuals, families and communities to live healthy, active and safe lives. The ministry is working closely with its partners in government and across sectors to develop and influence policies, programs and practices that impact the health of all Ontarians.

In 2010-11, the Ministry of Health Promotion and Sport moved forward on key commitments and initiatives, with several significant accomplishments. By working with its partners to heighten public awareness of health and chronic disease prevention, the ministry is contributing to the following objectives linked to the Social Determinants of Health, as identified by the World Health Organization (WHO):

- Increased access to and levels of physical activity and sport participation;
- Increased awareness and adoption of healthy eating practices;
- Increased access to quality after-school programs;
- Increased awareness of Type II diabetes within high-risk populations;
- Increased awareness of the harm associated with tobacco use/substance misuse;
- Increased awareness of how to reduce or prevent injuries;
- Increased youth resiliency; and
- Improved collaboration among community partners.

The following highlights of achievements in 2010-11 demonstrate how working in partnership helps to shape the broader health promotion agenda and give Ontarians the opportunity to make informed and positive choices about their health.

Creating a Smoke-Free Ontario

Tobacco use remains the number one cause of preventable disease and death in Ontario, killing over 13,000 Ontarians every year. Tobacco-related diseases directly cost the Ontario economy \$1.6 billion for health care annually and accounts for at least 500,000 hospital days each year.

The government's Smoke-Free Ontario Strategy was launched in 2005 and received widespread support. It is a comprehensive strategy, incorporating policy change, legislation and direct programming to prevent and reduce tobacco use, and protect Ontarians from involuntary exposure to second-hand smoke. The *Smoke-Free Ontario Act* became effective on May 31, 2006*.

In February, 2010, Health Canada released initial data on smoking behaviours for the first six months of 2008 captured by the 2009 Canadian Tobacco Use Monitoring Study (CTUMS). The results indicate that there is a decline in the number of cigarettes smoked by daily smokers, although, compared to 2008, there has not been significant change in overall smoking behaviour for Ontario's population (aged 15+ years).

Approximately 62 per cent of current Ontario smokers aged 18+ years report that they intend to quit smoking in the next six months, and 32 per cent of current Ontario smokers aged 18+ years of age intend to quit in the next 30 days.

To further protect Ontarians from the dangers of tobacco use, the following three amendments were introduced to the *Smoke-Free Ontario Act*:

1. Tobacco Display Ban: On May 31, 2008, a full ban on the display of tobacco products at point-of-sale came into effect.
2. Smoking in Motor Vehicles: This new law, which prohibits persons from smoking in motor vehicles with children under 16, came into effect on January 21, 2009. Under the law, a driver or passenger smoking in a motor vehicle, while someone else under the age of 16 is present, is committing an offence, and can be fined up to \$250.
3. Cigarillos: On July 1, 2010, amendments to the *Smoke-Free Ontario Act* with respect to Cigarillos came into effect which prohibits the sale of cigarillos in packages of less than 20, and prohibits the sale of flavoured cigarillos.

Policy and Legislative Initiatives:

While continuing the implementation of the SFO Strategy, the ministry:

- Initiated a process to develop a new five-year plan for tobacco control in collaboration with stakeholders and the Ontario Agency for Health Protection and Promotion (OAHPP). The process engaged stakeholders through a Tobacco Strategy Advisory Group to examine evidence through the work of a Scientific Advisory Committee convened by the OAHPP on behalf of MHPS.

* Costs of public health programs receive 100% funding from the Ministry of Health Promotion and Sport, to local municipal governments.

- Amendments were made to the *Smoke-Free Ontario Act* to protect Ontario's youth by prohibiting the sale and distribution of flavoured cigarillos in 2010.

Programming:

- Continued to support smokers to make quit attempts and build smoking cessation system supports.
- Continued to build system capacity through training cessation interveners.
- Expanded opportunities for smoking cessation interveners by developing and sponsoring specialty courses for Aboriginal cessation and working with under-served populations with co-addictions.
- Expanded the Ottawa Model on Smoking Cessation to 29 hospitals province-wide and built on the model to address correlated risk factors for undiagnosed diabetes.
- Expanded access to Nicotine Replacement Therapy (NRT) through an initiative in partnership with Ministry of Health and Long-Term Care and Family Health Teams (FHTs).

Obesity/Healthy Eating and Active Living/Diabetes Strategy

Following a reduction in the use of tobacco, healthy weights are seen as the next most significant and complex problem to address in order to prevent and manage chronic disease and help contain health care costs. The ministry is making significant investments to support an integrated approach to good nutrition and physical activity, as well as prevent and reduce the incidences of childhood obesity.

The ministry continues to deliver the following programs: EatRight Ontario (ERO) Dietitian Advisory Service, Northern Ontario Fruit and Vegetable Program; NutriSTEP (Nutrition Screening Tool for Every Pre-schooler); EatSmart! in recreation centres and workplaces; School Health Environment Survey (SHES); and Healthy Schools Recognition Program.

As a critical component of the Poverty Reduction Strategy, the ministry invested \$10 million in Ontario's After-School Initiative to provide 18,000 children and youth in grades one to 12 with access to safe, active and healthy after-school activities at more than 300 sites across the province. As a result of this initiative children and youth have access to services such as sports and recreation activities, nutrition and wellness education, healthy snacks as well as homework assistance and arts and culture activities.

By supporting structured after-school activities in high-needs communities, the ministry is taking an important step toward giving Ontario's children and youth opportunities for a better future.

Through its Healthy Communities Fund, the ministry provided over the last two years support to over 360 provincial and community-based organizations to help plan and deliver integrated programs that improve the health of Ontarians. This approach to funding

provincial and community-based organizations builds on the success of current ministry funding programs and provides more opportunities for local organizations to apply for funding for eligible health promotion initiatives that include: physical activity, sport and recreation; healthy eating; tobacco use and exposure; injury prevention; substance & alcohol misuse; and mental health. The fund requires increased partnerships among local organizations, resulting in more comprehensive health promotion programs.

The 2008 Ontario Budget set out a plan to address diabetes in Ontario:

“While it’s important to treat illness when it occurs, it’s even better to prevent it... And we need to do more to help the one in three Ontarians living with a chronic illness. Over the next four years, we plan to launch a battle against such illnesses, starting with diabetes.”

Consistent with government direction, the ministry continued in 2010-11 to develop the Diabetes Prevention Strategy launched in 2008-09 comprised of five complementary initiatives:

- High Risk Populations: Community-Based Intervention: Provided funding to community organizations to strengthen diabetes prevention in the following priority populations: Aboriginal, South Asian, African descent, Hispanic, and Asian, as well as targeted low-income communities. Work has been concentrated in Peel, Toronto, and Northwestern and Northeastern Ontario.
- Diabetes Prevention in Health Care (Ottawa Model): Replicating the Model's success in smoking cessation to diabetes prevention by institutionalizing key screening and intervention protocols in the daily practice of health care programming.
- Workplace Diabetes Prevention: In partnership with Toronto and Northwestern Public Health and in alignment with other ministry initiatives, developed and delivered a comprehensive workplace health promotion programs in select local workplaces.
- EatRight Ontario (ERO): Diabetes Programming and Awareness of Services: Implemented enhancements to ERO to better support diabetes prevention in Ontario by adding meal planning tools and culturally appropriate resources, as well employing staff with expertise in diabetes.
- Risk Factor Campaign Targeting Priority Populations: Developed and carried out a public education/social marketing campaign targeting at-risk populations.

Support for Ontario's Public Health System

Ontario Official Local Health Agencies (36 public health units across the province) are responsible for local planning and delivery of public health programs and services by administering mandatory health programs under the provisions of the *Health Protection and Promotion Act*. The ministry funded the following four mandatory programs[†]:

1. Chronic Disease Prevention Standard: Public health units worked with schools, workplaces, recreational facilities, food service establishments and other community partners to provide programming in support of tobacco-free living, healthy eating, healthy weights, regular physical activity and reduced exposure to ultraviolet radiation.
2. Child Health Standard: Public health units provided leadership in health promotion initiatives to enhance positive parenting, breastfeeding, healthy family dynamics, healthy eating, healthy weights and physical activity growth and development and oral health. Under this standard is the Children in Need of Treatment (CINOT) program. Public health units provided oral health screening and administered the CINOT program and its expanded coverage for eligible to children and youth aged 17 and under who require urgent dental care.
3. Reproductive Health Standard: Public health units coordinated services that provide preconception care, prenatal care and screening to support healthy pregnancies, and preparation for parenting.
4. Prevention of Injury and Substance Misuse Standard: Public health units provided programs and services to reduce motorized vehicle collisions, bicycle crashes, misuse of alcohol and other substances and falls across the lifespan.

In 2010-11, the ministry continued its effort to implement the Ontario Public Health Standards in partnership with the Ministry of Health and Long-Term Care with an objective of moving towards standards that are measurable, linked with specific performance measures for increased accountability, and integrated into the Public Health Performance Management Framework.

Northern Ontario Fruit and Vegetable Program

The Northern Fruit and Vegetable program, launched in selected areas of Northern Ontario, in 2006 is designed to increase awareness and educate elementary school-aged children and their families about the benefits of healthy eating. The program was expanded in 2010-

[†] Costs of public health programs are split as follows: 75% is funded by the Province, with the remaining 25% funded by local municipal governments.

11 to provide more than 18,000 students in 110 schools in the Porcupine and Algoma regions with fruits and vegetables, twice a week for the duration of the school year.

EatRight Ontario Dietitian Advisory Service

In partnership with the Dietitians of Canada, the ministry continued to provide Ontarians with access to registered dietitians' services and advice. EatRight Ontario is a free service offering evidence-based nutrition, healthy eating advice and menu planning directly from registered dietitians by phone or online. The call service is available in more than 100 languages.

The ministry is enhancing the service to strengthen its outreach to key population groups. EatRight Ontario will contribute to important government initiatives, such as:

- Supporting Ontarians with the prevention and management of diabetes through specific nutrition advice and resources;
- Acting as a resource for the implementation of the Ministry of Education's School Food and Beverage Policy as well as the Ministry of Children and Youth Services' Student Nutrition Program; and
- Acting as a resource for the Ministry of Agriculture, Food and Rural Affairs' Local Food Initiative.

Valuing Sport and Recreation

The ministry is committed to increasing Ontarians' sport and physical activity participation levels and developing high performance athletes whose achievements inspire people across Ontario and Canada. The ministry is working to promote a culture in Ontario which values sport and recreation.

The Ministry of Health Promotion and Sport operates a number of programs that promote participation in sport and recreation and provides financial support to those organizations that serve athletes. This includes funding to Provincial Sport Organizations and Multi Sport Organizations, the Sport Alliance of Ontario, the Canadian Sport Centre Ontario, and the Coaches Association of Ontario.

The Quest for Gold Program is a \$10 million program developed and administered by the Ministry of Health Promotion and Sport. It provides support to increase the performance and number of Ontario athletes competing at the highest national and international levels. Under the 2010-11 program, over 1,100 Ontario athletes received \$6.4 million in direct financial assistance from the program. In addition, \$3.6 million was allocated to enhanced coaching, training and competitive opportunities for Ontario athletes.

We are seeing the benefits of our increased investment in high-performance sport. Ontario

athletes made up 23 percent of the Canadian Team at the Vancouver 2010 Winter Olympics, up from 19 per cent in 2006.

Investment in Aboriginal Programming

In 2010-11, the ministry built on its existing investment in health promotion programming with Aboriginal communities by expanding the Urban Aboriginal Healthy Living Program delivered to 23 Friendship Centres. This investment provided recreation and physical activity opportunities for First Nations communities; problem gambling awareness programs and prevention of drug and alcohol related injuries. Diabetes prevention programming undertaken through Aboriginal Health Access Centres province-wide was also aligned with the diabetes management initiatives sponsored by the Ministry of Health and Long-Term Care.

The ministry also fostered development of a First Nations Health Promotion Strategy, in partnership with the Chiefs of Ontario and Health Canada, supported expansion of after school programming on First Nations reserves.

In addition, the Community Aboriginal Recreation Activator (CARA) Program provided 15 isolated First Nations communities with funding for 'Activators' to develop, mobilize and facilitate local sport and physical activity programs. This capacity building initiative supports Aboriginal communities to meet their sport and recreation needs.

Sport Hosting

In June 2006, MHPS released an International Amateur Sport Hosting Policy and Implementation Guidelines. The policy helps guide the Province's decisions to participate in events and also assists in determining the value of its investment in bids to host sporting events in Ontario. The policy covers international amateur sport associated with the international sport federation and games organizations recognized by the International Olympic Committee/International Paralympic Committee.

Since the policy was approved, the Province has invested \$4.5 million in a number of successful events.

2015 Pan/Parapan American Games

In November 2009, Ontario won the Bid to host the 2015 Pan/Parapan American Games in the Greater Golden Horseshoe Area (GGHA) with Toronto as the title city. The Games are a multi-sport event held every four years for athletes from 42 nations in the Americas. The Games are expected to attract more than 10,000 athletes and team officials taking part in 48 sports.

Hosting the 2015 Pan/Parapan American Games will have significant positive impacts on the Province. The Games is expected to attract up to 250,000 tourists from around the world, and will generate 15,000 jobs across multiple sectors. The Games will also create a legacy of new and updated sport venues and stimulate a number of key infrastructure projects in Toronto and the Greater Golden Horseshoe, including public transportation and affordable housing.

MHPS, in partnership with the Ministry of Infrastructure and Infrastructure Ontario, is responsible for overseeing the development of the Pan/Parapan American Athletes' Village in the West Don Lands. The Village will serve as a home-away-from-home to the 10,000 athletes and officials expected for the Games. After the Games, the Village will become the cornerstone of a vibrant community in the heart of Toronto, including a mix of affordable and market housing. A Request for Proposals (RFP) to select the development consortium for the Village was released in January 2011. The successful proponent is expected to be selected and announced in summer 2011, at which point construction will commence.

The Toronto 2015 Organizing Committee, a not-for-profit corporation, has been established under Provincial legislation to plan, organize, promote, finance and stage the Games.

MHPS has also established the Pan Am Games Secretariat, which serves as a "one window" entity that provides strategic direction, coordination and oversight of the Provincial government's participation in the Games.

Sport and Recreation Infrastructure

Over the last two years, the provincial/federal investments of \$390 million have supported over 760 sport and recreation infrastructure projects through the Recreational Infrastructure Canada in Ontario and Ontario Recreation Program (RInC/OREC). These investments have helped local municipalities, non-profit organizations and First Nations revitalize their arenas, swimming pools, sports fields and trails.

Table 1: Ministry Interim Actual Expenditures 2010-11

	Ministry Interim Actual Expenditures (\$M) 2010-11
Operating	398.0
Capital	300.1
Staff Strength (as of March 31, 2011)	161.0

* interim actuals reflect the numbers presented in the 2011 Ontario Budget.