



**PUBLIC HEALTH  
AND  
ENVIRONMENTAL  
ASSESSMENTS**



**BUILT  
ENVIRONMENT  
WORKGROUP**



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## Project Background

In the winter of 2017, OPHA's Built Environment Work Group successfully conducted a survey amongst public health units (PHUs) in Ontario to understand the current level of engagement of the public health sector in the Environmental Assessment (EA) process. The purpose of the survey was to determine the present level of public health activity in this area, in order to identify opportunities for engagement and to strengthen public health competency and skills.<sup>6</sup>

This report highlights key findings on the partnerships, the successes and importance of engagement and the opportunities for public health to be further involved in the environmental assessment process. Public health has potential to act as a key informant in this process to influence ultimate design, associated treatments, roadway operations and transportation system use. Using their expert knowledge in population health, public health professionals can provide insight in areas of influence to protect and promote health pertaining to infrastructure projects.<sup>1</sup>

Through the inclusion of public health in the EA process the ultimate outcome is to increase positive health outcomes in Ontarians. This proposed collaboration between public health and other professionals, especially in the EA process related to built environment projects, can aid in the reduction of obesity rates, traffic-related injuries and chronic diseases. For example, multi-modal/active transportation provides opportunities to integrate physical activity into daily living. However, in order to have uptake of active transportation, the transportation network needs to provide safe, connected and accessible options for walking and cycling. Additionally, providing more opportunities for people to use active transportation can shift mode of transport from driving, and potentially reduce greenhouse gas emissions. In the long run, this has positive impacts towards protection of communities from climate change-related impacts and extreme weather events such as flooding or ice storms. Reducing motor vehicle travel also contributes to improved air quality. Due to a high number of traffic-related injuries and fatalities in Ontario, public health is taking more notice of road safety measures. Increased involvement of public health in this area during the EA process can enhance measures to protect vulnerable users such as pedestrians and cyclists. Partnership in the EA process can provide insight into many other avenues in which public health is knowledgeable.<sup>6</sup>

This report will provide further analysis on the capacity and knowledge available in public health units in relation to contributing to EAs. It can provide public health with insight into mitigating adverse effects of proposed initiatives affecting various populations. Areas of influence include using a health lens on major infrastructure projects related to transportation, wastewater treatment facilities, and the clean energy sector. This process can inform public health decision-making as well as decision making on initiatives on the built environment being assessed by municipalities.

## What is an Environmental Assessment?

Environmental assessments (EA) are a process to predict environmental effects of proposed initiatives before being carried out. The purpose of EAs is to minimize adverse environmental effects before they occur and incorporate environmental factors into decision-making. Environment is a broadly used term to identify factors concerning the natural environment, economic, social, cultural and technical environment.<sup>1</sup> An EA aims to identify adverse environmental effects which could be detrimental to society, propose mitigation strategies, predict whether there will be significant adverse environmental effects once mitigation strategies are established and additionally includes follow up measures to validate the accuracy of the assessment and effectiveness of mitigation measures. EAs act as a tool to support project planning and decision making when considering mitigation strategies and adverse environmental effects. EAs work to minimize environmental concerns, provide opportunities for public participation and aboriginal consultation, protect human health, reduce risk of environmental harm and inform decision-making contributing to responsible development of natural resources.<sup>1</sup>

In looking at the purpose of environmental assessments the public health sector has much to contribute in areas concerning impact on human health. Consultations with the public are mandatory components of the EA process as outlined by the Ontario Environmental Assessment Act. A two-way communication process is in place to involve interested persons in the planning, implementation and monitoring of a proposed undertaking. The purpose of consultations is to identify various risks, relevant information, guidelines and policies to enable the ministry in making a fair and balanced decision.<sup>5</sup>

1. A municipal environmental assessment document sets out a streamlined self-assessment process. A class EA applies to routine projects that have predictable and manageable environmental effects.<sup>5</sup> Streamlined EAs can also be used for routine projects that have predictable and manageable environmental effects Approval is not directly granted for each project. Examples include: class environmental assessments, electricity projects regulations and more.<sup>5</sup>
2. Individual EAs are prepared for large-scale, complex projects with the potential for significant environmental effects. They require Ministry of the Environment and Climate Change approval.<sup>5</sup>

More information on various EAs can be found at: <https://www.ontario.ca/page/preparing-environmental-assessments#section-5>

In addition, there is a Federal Environmental Assessment process intended to protect components of the environment that are within federal legislative authority or on federal lands. The Canadian Environmental Assessment Agency is the responsible authority. Information on the Federal EA process can be found at <https://www.canada.ca/en/environmental-assessment-agency.html>

### **Project Method: (Appendix A: Survey Question)**

To understand the current state of engagement within public health units and the environmental assessment process, OPHA undertook an online survey. The sample survey can be found in Appendix A.

- On-line survey was launched to all public health units (36 in total) in Ontario, circulated via the Council of Medical Officers of Health list serve. OPHA's Built Environment Work Group members participated in the collection of data, survey administration and development of questions
- Survey was conducted over a 4-6 week period
- Survey consisted of 18 multiple choice and free text questions
- One consolidated survey response per health unit was requested

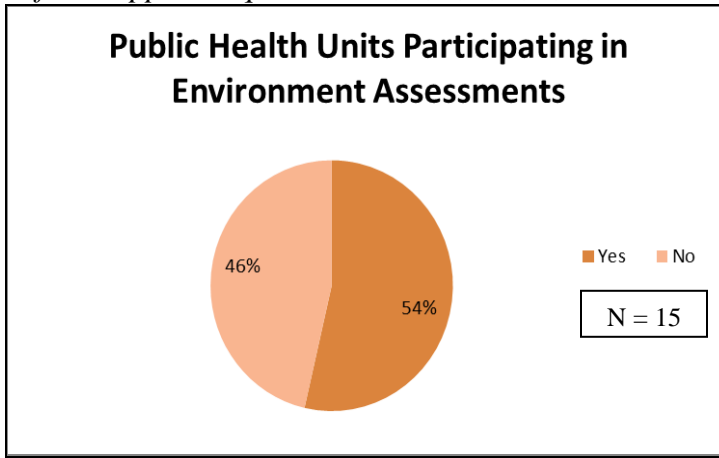
### **Project Results: (Appendix B: Survey Results)**

A total of 28 responses were received out of 36 total health units. 100 percent of respondents completed the survey Respondents were given the option to identify their health unit; 25 chose to do so. From this list it was determined that two sets of responses were received from one health unit. The remainder are assumed to be from unique health units, although some individuals who identified themselves did not provide their health unit, so it may be possible that there were one or two more duplications. It is assumed that responses were received from 27 unique health units (response rate of 75%). However the data reporting uses all 28 survey responses.

Results collected from the survey have been grouped into two themes: the current level of knowledge surrounding EAs within public health unit staff and current level of engagement if any in the environmental assessment process with the barriers to future engagement in this process. Full survey results can be found in appendix B.

**1. Current Engagement in Environmental Assessment:**

*Refer to appendix questions: 3, 4, 5, 6, 7, 8, 9, 10,11 and 12*



Currently 54% of Ontario PHUs who responded to the survey participate in the environmental assessment process, mostly in streamlined EAs which includes class EAs. When participating in municipal class EAs, public health unit staff engaged with both upper and lower tier municipality showcasing varied streams of communication. Engagement took place when notification letters were received from the municipalities or construction consultants. Responses show that notification of EAs can be better conducted to result in further engagement within the public health sector. Specifically, a strong relationship with municipal/regional government and transportation services can act as a catalyst to this change. Public health units who have participated in the EA process had a wide range of staff that contributed. Presently most prevalent staff to be involved includes Environmental Health Managers followed by Environmental Health Specialists or Public Health Inspectors. However, Medical Officers of Health also contributed frequently, as well as staff from Chronic Disease and Injury Prevention and Health Promotion (refer to table below for detail). In addition, contribution to the EA process was conducted via written comments, open houses and reviewing plans. When providing comments PHUs contributed to a broad range of topic areas related to health:

- Impacts to air quality (87%)
- Impacts to community safety/injury prevention (87%)
- Impacts to travel (active transportation) (80%)
- Impacts to water & soil quality (73%)
- Climate change impacts (73%)

This further demonstrates the breadth of knowledge within public health units which can add value to the EA process. Currently, public health units do not participate in EAs frequently; of the 15 who currently participate, 9 identified that they do so infrequently. There is much opportunity for increasing the involvement of this sector in applicable EAs.

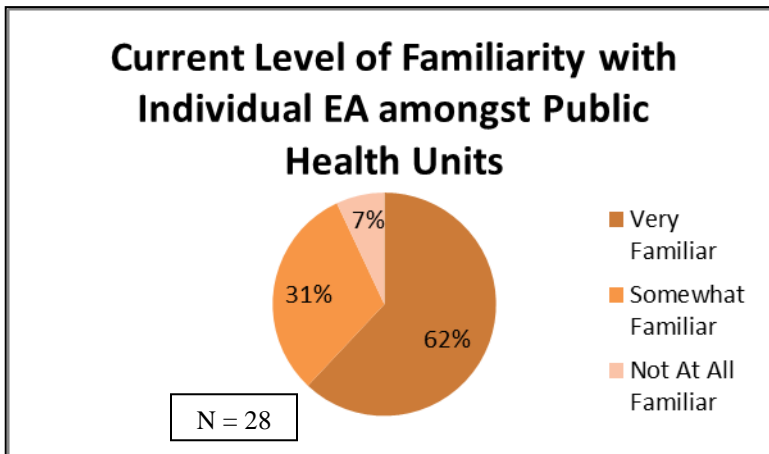
## Public Health Unit Staff Involved in EA

N = 15

<u>Various Public Health Unit Staff</u>	<u>Percentage</u>
Medical Officer of Health/AMOH	53.3%
Environmental Health Managers	80.0%
Chronic Disease and Injury Prevention Managers	40.0%
Public Health Inspector	60.0%
Public Health Nurse	26.7%
Health Promoters	46.7%
Environmental Health Specialist	60.0%
Other	40.0%

### 2. Knowledge of EAs and Barriers to Engagement:

*Refer to appendix questions: 13, 14, 15, 16, 17, and 18*



Assessing the knowledge base with the EA process is an important factor when considering bridging the existing gap. There is some familiarity with the need for an assessment and the process in which it takes place. However, education is needed on streamlined EA processes and municipal class EAs. This lack of understanding is further reflected in the barriers to being involved in EAs. Barriers identified by respondents included the need for knowledge on the EA process, capacity within specific health units and lack of notification, as outlined above, from municipalities. Furthermore, it is evident that there is recognition of the opportunity that exists, as 96% of public health units in Ontario that have responded to the survey would like to

be more engaged in the EA process. In support of this, respondents suggested sharing information between organizations on how capacity building has been successful, creating webinars and workshops to understand the EA process and the role of public health, and developing online resources with detailed information on best practices. Development of assessment tools, communication with municipalities and provincial collaboration for knowledge exchange specifically with Public Health Ontario and other EA agencies can further bridge the gap for PHUs to become more involved in EAs.

## **Limitations**

Limitations in conducting this report may have some effects on featured results. When conducting the survey each public health unit was asked to make one consolidated submission, however at least one health unit submitted more than once which may slightly skew some results. Providing the organization's name was an optional portion of the survey (25 out of 28 provided names), therefore it is unknown whether there were additional duplicate submissions. At most there may be one or two. The survey was sent to all health units in Ontario but responses were not received from all 36. While the results reflect the responses given, the possibility exists that information from health units who did not participate could alter the results. However, because the duplicate responses were minimal and the overall response rate was 75%, it is assumed that results provide a reasonable picture of the current state of public health involvement in environmental assessments.

## **Analysis/Recommendations**

Survey responses provide insight on ways in which public health can influence and work together with the municipal, provincial and federal governments on the EA process. Below are recommendations to strengthen public health involvement in environmental assessments:

- Internal Capacity and Knowledge Building:
  - Many public health units are currently engaged with other municipal planning processes, and staff frequently work together to review municipal land-use plans, bylaws and policies. For example, one health unit has built an internal cross-sectoral group to coordinate responses to regional and municipal requests relating land use, transportation and community planning. Taking this approach PHUs can work internally to establish a group for participating in EAs and organize processes to effectively and efficiently contribute. Ideally this would include a cross-section of staff from different departments, given that EAs cross a variety of public health outcomes.
  - Few health units have tools or guidelines for assessing health promoting impacts of EAs, but almost all identified that they would like to be more engaged in the EA process, illustrating that there is recognition of this being an opportunity to impact the health of the community. Partnering with organizations such as OPHA and PHO to share online resources and hold webinars on the EA process and exchange relevant knowledge amongst public health units could assist in tackling



the gap in knowledge about EAs and help share learnings about the established processes within other public health units.

- Upstream integration of Public Health:
  - Improve communication between municipalities and public health units to create an established process on informing health units about upcoming EAs.
  - In parallel with initiatives and activities to enhance capacity and knowledge of the EA process, OPHA in collaboration with PHU's, the Municipal Engineers Association (MEA) and the Provincial Government could begin exploring potential enhancements to the Environmental Assessment Act of Ontario that would elevate the role of PHUs as commenting and/or contributing agencies and to broaden the scope of EAs to consider health impacts of municipal undertakings.<sup>3</sup>

## Conclusion

Municipal undertakings related to waste, water and transportation infrastructure that are subject to Environmental Assessments present important opportunities for Public Health Units in Ontario to influence the healthy planning, design and operations of these facilities. Currently 54% of Ontario public health units that responded to the survey participate in the environmental assessment process, however 94% of respondents stated they would like to get more engaged in EA process. This presents an important opportunity for professional agencies like OPHA and MEA, supported by Public Health Ontario, to advance and enhance the effective participation of PHU's in the planning, design and operations of municipal infrastructure towards creating healthier communities.<sup>3,4</sup>

The findings indicate that immediate capacity and knowledge building opportunities to support the desire of Ontario's PHUs to become more effectively involved in EAs should be pursued and could not only showcase the experience of PHUs already actively participating in EAs, but also engage the PHUs already involved in the EA process to compile a registry of their frameworks, internal processes and associated policies. Such a registry could potentially guide other PHUs in Ontario who express a desire to participate in the EA process.

Further, the recent Government of Canada - Environmental and Regulatory Reviews Discussion Paper released June 2017, states, "*Canada's new environmental assessment system must consider impacts on more than just the environment. The economic, social and health effects associated with a project must be considered.*"<sup>2</sup> This increasing emphasis on consideration of human health in the EA process further highlights the importance of public health involvement in the process, and the opportunity to bring human health considerations to the forefront by using a so-called 'health lens' to view proposed projects.

## References

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6. Ontario Public Health Association. (n.d.). Retrieved July 19, 2017, from <http://www.opha.on.ca/Home.aspx>

## **Appendix A: Survey Questions**

### **Public Health Roles in Environmental Assessments**

**Investigator(s):** Ontario Public Health Association

#### **Purpose:**

The OPHA Built Environment Workgroup is seeking to find out how health units across Ontario are currently participating in Environmental Assessments (EAs) in their communities. This includes both Individual EAs, as well as streamlined EAs, which include Municipal Class EAs. This survey is part of our work to seek ways for public health to engage with transportation professionals. One key area for engagement is in the environmental assessment process, as a way to insert a health lens on infrastructure projects such as roads, water and wastewater. The purpose of this survey is to determine the present level of public health activity in this area, in order to identify opportunities to build public health skills. For more information on the project, please visit our website: <http://opha.on.ca/What-We-Do/Projects/public-health-and-transportation.aspx>.

#### **Description:**

Please submit one survey response per health unit. There may be more than one person or department who participates in EA reviews and comments at your health unit. Please combine all activities into one survey.

#### **Participation:**

Thank you for taking part in this survey. Your input is greatly appreciated. Your participation is voluntary, and there is no cost to be part of this survey. You are free to stop participating at any time. If you choose to stop participating, you can ask that your information be removed from the collected data, when possible.

Whether you choose to participate or not, the services from OPHA that you receive now or may request in the future will not be affected. When reporting the results, participants' responses will be added together to reduce the possibility of identifying information being used.

The results may be used in reports, journal articles, or presentations.

#### **Potential Benefits:**

You may or may not directly benefit from your participation in this survey. The potential benefits are contributing to building knowledge in an emerging field of practice. We hope that any further strategies that are initiated as a result of our findings from this survey will benefit your staff in the future.

1. Name of Health Unit (Optional Question) – Open field question
2. Type of Health Unit Board (check one box)

- a. Autonomous Board of Health
  - b. Part of Regional Government
  - c. Part of Municipal/City Government
3. Has your health unit participated in an Environmental Assessment Process? (choose 1):
- a. Yes (continue to question 4)
  - b. No (skip to question 13)
4. Which types of environmental assessment has your health unit participated in? Please check all that apply
- a. Individual EAs
  - b. Streamlined EAs (includes Class EAs)
5. When participating in a municipal class EA, what level of municipality have you engaged with? Please check all that apply:
- a. Upper Tier
  - b. Lower Tier
  - c. Single Tier
  - d. Have not participated in a municipal class EA
6. How was your health unit notified of the environmental assessments you have participated in? Please check all that apply:
- a. Letter from municipality
  - b. Letter from construction consultant
  - c. Notice in the local paper
  - d. Other (please specify)
7. When participating in an environmental assessment, which staff members are involved? Please choose all that apply:
- a. Medical Officer of Health/AMOH
  - b. Environmental Health Managers
  - c. Chronic Disease and Injury Prevention Managers
  - d. Public Health Inspector
  - e. Public Health Nurse
  - f. Health Promoters
  - g. Environmental Health Specialist
  - h. Others (Please Specify) – allow for open field question
8. How does your health unit currently participate in the EA process? Please choose all that apply:
- a. submits written comments
  - b. attends open houses
  - c. reviews plans

- d. meets with staff and consultants
  - e. other
9. How regularly does your health unit participate in the Environmental Assessment process? Please check one:
- a. Very Regularly (participate in most EAs in our area)
  - b. Regularly (participate in multiple EAs per year)
  - c. Not Regularly (participate infrequently in EAs)
  - d. Never
10. When providing comments to an environmental assessment, what areas of health have you commented on? Please choose all that apply:
- a. Impacts to water
  - b. Impacts to soil
  - c. Impacts to air quality
  - d. Climate change impacts
  - e. Impacts to travel (active transportation)
  - f. Impacts to community safety/injury prevention
  - g. Impacts to food production
  - h. Others (please specify):
11. Please provide a couple of examples of EA's your health unit has commented on.
12. Has your health department developed any tools or guidelines to assess the health promoting impact of EAs?
- a. No
  - b. Yes (please describe)
13. What is your current level of familiarity with the Individual EA process?
- a. Very familiar
  - b. Somewhat familiar
  - c. Not at all familiar
14. What is your current level of familiarity with the Streamlined EA process, including Municipal Class EAs?
- a. Very familiar
  - b. Somewhat familiar
  - c. Not at all familiar
15. What are barriers to getting involved in the EA process? Please choose all that apply:
- a. There is no one at our health unit with knowledge about how the process works
  - b. My health unit doesn't see it as our role
  - c. My health unit doesn't have the staff capacity to do this

- d. We do not get notification from our local municipalities
  - e. Other (please specify):
16. Would you/your health unit like to get more engaged in EA process?
- a. Yes
  - b. No (if no, skip to question 18)
17. What kind of support would be helpful to help you/your health unit to become more engaged in the EA process?
- a. Find out what other health units are doing
  - b. Attend a webinar to get introduced to the process
  - c. Attend an in-person workshop to get introduced to the process
  - d. Be directed to online resources (case studies, best practices, etc)
  - e. Other (please specify):
18. Are you/your health unit engaged with other municipal planning processes (e.g. official plans, secondary plans, bylaw etc)
- a. Yes (please specify):
  - b. No
19. Can we contact you for more information on your responses?
- a. Yes (If yes please provide name and contact info email/phone)
  - b. No

## Appendix B: Survey Results




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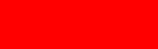
#### 1. Name of Health Unit (optional)

The 25 response(s) to this question can be found in the appendix.


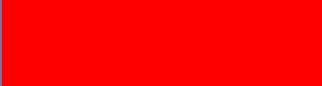
#### 2. Type of Health Unit Board? Please choose one:

Response	Chart	Percentage	Count
Autonomous Board of Health		53.6%	15
Part of Regional Government		28.6%	8
Part of Municipal/Government		17.9%	5
		<b>Total Responses</b>	<b>28</b>

#### 3. Has your health unit participated in an Environmental Assessment Process? Please choose one:

Response	Chart	Percentage	Count
Yes (Continue to question 4)		53.6%	15
No (Skip to question 13)		46.4%	13
		<b>Total Responses</b>	<b>28</b>

#### 4. Which types of environmental assessment has your health unit participated in? Please choose all that apply:

Response	Chart	Percentage	Count
Individual EAs		73.3%	11
Streamlined EAs (includes Class EAs)		93.3%	14
		<b>Total Responses</b>	<b>15</b>

**5. When participating in a municipal class EA, what level of municipality have you engaged with? Please choose all that apply:**

Response	Chart	Percentage	Count
Upper Tier		60.0%	9
Lower Tier		53.3%	8
Single Tier		40.0%	6
Have not participated in a municipal class EA		6.7%	1
		<b>Total Responses</b>	<b>15</b>

**6. How was your health unit notified of the environmental assessments you have participated in? Please choose all that apply:**

Response	Chart	Percentage	Count
Letter from municipality		73.3%	11
Letter from construction consultant		46.7%	7
Notice in the local paper		26.7%	4
Other, please specify...		66.7%	10
		<b>Total Responses</b>	<b>15</b>

**6. How was your health unit notified of the environmental assessments you have participated in? Please choose all that apply: (Other, please specify...)**

#	Response
1.	conversation at the start of the process
2.	community, Board of Health
3.	We have a strong relationship with our Planning and Public Works departments
4.	regional planning, regional transportation department, provincial government
5.	Internal notification due to the desire for a corporate-wide response
6.	Regional planners/engineers, lower tier municipal pedestrian and cycling committee
7.	Under direction of Regional Government (i.e. Regional Council direction to participate)
8.	Environmental Health is directly notified and notification from our Public Works Department. Environmental Health and Chronic Disease and Injury Prevention coordinate



reviews and comments.
9. Email, invitation to open house; Consultants acting on behalf of industry, municipality, or provincial Ministeries; Direct notification from Ministry (MOECC, MNM)
10. Advisory Committee, newsletters, email notices






**7. When participating in an environmental assessment, which staff members are involved? Please choose all that apply:**

Response	Chart	Percentage	Count
Medical Officer of Health/AMOH		53.3%	8
Environmental Health Managers		80.0%	12
Chronic Disease and Injury Prevention Managers		40.0%	6
Public Health Inspector		60.0%	9
Public Health Nurse		26.7%	4
Health Promoters		46.7%	7
Environmental Health Specialist		60.0%	9
Other, please specify...		40.0%	6
		<b>Total Responses</b>	<b>15</b>




**7. When participating in an environmental assessment, which staff members are involved? Please choose all that apply: (Other, please specify...)**

#	Response
1.	Strategic Support Branch planner
2.	Senior Advisor
3.	Director of Environmental Health. Also have engaged community members to send letters
4.	Environmental Policy & Research Analyst
5.	Public Health Advisors
6.	Director Environmental Health






**8. How does your health unit currently participate in the EA process? Please choose all that apply:**

Response	Chart	Percentage	Count
Submits written comments		100.0%	15
Attends open houses		100.0%	15
Reviews plans		93.3%	14
Meets with staff and consultants		93.3%	14
Other		40.0%	6
		<b>Total Responses</b>	<b>15</b>

**9. How regularly does your health unit participate in the Environmental Assessment process? Please choose one:**

Response	Chart	Percentage	Count
Very Regularly (participate in most EAs in our area)		20.0%	3
Regularly (participate in multiple EAs per year)		20.0%	3
Not Regularly (participate infrequently in EAs)		60.0%	9
Never		0.0%	0
		<b>Total Responses</b>	<b>15</b>

**10. When providing comments to an environmental assessment, what areas of health have you commented on? Please choose all that apply:**

Response	Chart	Percentage	Count
Impacts to water		73.3%	11
Impacts to soil		73.3%	11
Impacts to air quality		86.7%	13
Climate change impacts		73.3%	11
Impacts to travel (active transportation)		80.0%	12

Impacts to community safety/injury prevention		86.7%	13
Impacts to food production		26.7%	4
Other, please specify...		46.7%	7
		<b>Total Responses</b>	<b>15</b>



**10. When providing comments to an environmental assessment, what areas of health have you commented on? Please choose all that apply: (Other, please specify...)**

#	Response
1.	cancer prevention (shade); parks & open space,
2.	noise and vibration
3.	accessibility, equity
4.	exposure to other health hazards e.g. wind turbines, radiation
5.	Impacts to Noise, Vector Borne Disease, Impact from traffic-related air pollution
6.	Correlated impacts on community health
7.	Impacts to water include surface water, ground water, private drinking water, municipal drinking water, recreational water use; Impacts to private sewage systems; Remediation plans, impacts to quality of natural environment/ecosystem impacts; At a high level, clarify risks to vulnerable or sensitive populations and make recommendations to prevent or mitigate risks as appropriate

**11. Please provide a couple of examples of EA's your health unit has commented on.**

The 15 response(s) to this question can be found in the appendix C.




**12. Has your health department developed any tools or guidelines to assess the health promoting impact of EAs?**

Response	Chart	Percentage	Count
Yes, please specify...		26.7%	4
No		80.0%	12
		<b>Total Responses</b>	<b>15</b>




### 12. Has your health department developed any tools or guidelines to assess the health promoting impact of EAs? (Yes, please specify...)

#	Response
1.	We tried to apply a desktop version of a Health Impact Assessment to frame the review
2.	an internal Key statements document for health
3.	Attempts made however challenges and barriers prevented success/completion
4.	Environmental Assessment (EA) Health Criteria; EA Training for Health staff

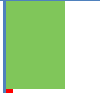


### 13. What is your current level of familiarity with the Individual EA process?



Response	Chart	Percentage	Count
Very familiar		7.1%	2
Somewhat familiar		64.3%	18
Not at all familiar		32.1%	9
		<b>Total Responses</b>	<b>28</b>

### 14. What is your current level of familiarity with the Streamlined EA process, including Municipal Class EAs?

Response	Chart	Percentage	Count
Very familiar		7.1%	2
Somewhat familiar		42.9%	12
Not at all familiar		50.0%	14
		<b>Total Responses</b>	<b>28</b>

### 15. What are barriers to getting involved in the EA process? Please choose all that apply:

Response	Chart	Percentage	Count
There is no one at our health unit with knowledge about how the process works		25.0%	7
My health unit doesn't see it as our role		3.6%	1
My health unit doesn't have the staff capacity to		39.3%	11



do this			
We do not get notification from our local municipalities		57.1%	16
Other, please specify...		50.0%	14
		<b>Total Responses</b>	<b>28</b>

**15. What are barriers to getting involved in the EA process? Please choose all that apply: (Other, please specify...)**






#	Response
1.	I would say that our Board of Health is semi-autonomous in that it is autonomous on paper but a majority of members are municipal councillors who serve at the pleasure of Council. In other words, if they vote against Council's wishes they can be rejected and replaced.
2.	we occasionally become aware of them in advance but is not formalized that we automatically participate or even automatically are involved/consulted
3.	We are working towards having capacity
4.	No barriers
5.	need to increase capacity of knowledge re: EA process
6.	Or if we do get notification, it seems to stay at a high level (MOH, Director) and not get routed to frontline staff
7.	It can be difficult to provide more useful and tangible comments to inform the EA process, not having regulatory authority under the OPHS or the Environmental Assessment Act
8.	Our Health Unit is not mandated to be involved in EAs; Regional processes are already in place which outline the requirements for EAs; Our Health Unit rarely asked to comment/consult on EAs
9.	in 1999 Ont health units were removed from their roles under the Env. Prot. Act. for private sewage systems development and now the program is with the local building department and health units do not get opportunities as much in the past to provide commnets.
10.	Areas of expertise in HU (esp related to toxicology info), staff time; we rely on looking at information provided by 3rd party and summarize finding related to PH issues.
11.	Appropriateness based on levels of governance
12.	We are involved and we're refining our apporach and associated tools to better assess the health impacts of various transportation undertakings.
13.	Limited knowledge of public health staff pertaining to certain topics given specialized topic matter and variable nature of requests; Documents to be reviewed are often technical in nature and complex; EA process is very lengthy; Some very long-term projects (i.e., mining) include high level remediation comments while detailed remediation plans will be released decades following initial EA and comments. Challenging for public health staff to provide meaningful comments regarding remediation when many of the details are not yet known.

14. Limited time/resources, short turn around from time of notification to respond, training

### 16. Would you/your health unit like to get more engaged in EA process?

Response	Chart	Percentage	Count
Yes		96.3%	26
No (if no, skip to question 18)		3.7%	1
		<b>Total Responses</b>	<b>27</b>

### 17. What kind of support would be helpful to help you/your health unit to become more engaged in the EA process?



Response	Chart	Percentage	Count
Find out what other health units are doing		88.9%	24
Attend a webinar to get introduced to the process		85.2%	23
Attend an in-person workshop to get introduced to the process		70.4%	19
Be directed to online resources (case studies, best practices, etc)		88.9%	24
Other, please specify...		37.0%	10
		<b>Total Responses</b>	<b>27</b>

### 17. What kind of support would be helpful to help you/your health unit to become more engaged in the EA process? (Other, please specify...)

#	Response
1.	
2.	real world examples and case studies to give us examples of precedent
3.	Development of assessment tools
4.	Local workshop that includes transportation, health, planning, etc. to share needs/perspectives.
5.	Connect with local municipalities to make them aware of our interest so that they will forward notices about EAs to us
6.	Further to option D to have specific health recommendations for various EA themes (transportation EAs, point source emissions, soil contamination, impacts on water quality,

	impacts on housing, using a health equity lens, Active Transportation, Injury Prevention, etc.)
7.	At this time due to internal structure, we would not be ready to proceed with these learning opportunities
8.	Work with other Health Units and the OPHA to develop a standard method for assessing the health impacts of transportation EA's, i.e. Ministry of Transportation - Environmental Guide for Assessing and Mitigating Air Quality Impacts and GHG emissions of Provincial Transportation Projects
9.	Provincial SharePoint site for knowledge and resource exchange/community of practice; Specialized knowledge (PHO); Collaborate with other health units and health/environmental agencies on comments; In-depth in-person training over multiple days.
10.	Have an internal expert, clarity on PH role e.g. guideline /more specifically mentioned in OPHS

### 18. Are you/your health unit engaged with other municipal planning processes? (e.g. official plans, secondary plans, bylaw etc)

Response	Chart	Percentage	Count
Yes, please specify...		96.4%	27
No		3.6%	1
		<b>Total Responses</b>	<b>28</b>

### 18. Are you/your health unit engaged with other municipal planning processes? (e.g. official plans, secondary plans, bylaw etc) (Yes, please specify...)

#	Response
1.	Review official plans, secondary plans and bylaw amendments
2.	Many bylaws originate with Health Unit, go to the Board of Health for approval and then go to municipal Council for consideration. The Chair of the Board of Health is a municipal councillor so is often asked to weigh in on bylaws.
3.	OPs, secondary plans, municipal strategic plans, subdivision comments, etc
4.	receive and comment on OP, have been a member of the technical committee at the OP review table, and review plans of subdivision etc. Not usually involved in bylaw review
5.	all of the above, ad hoc basis
6.	Official plans, bylaws etc. and through Part VIII of the OBCA/R
7.	zoning, community design plans, functional road designs, transportation master plans, site plan reviews, subdivision review

8.	Yes, we provide comments to the Official Plan
9.	official and secondary plans
10.	Provide input to regional and local official plans, transportation master plans, secondary plans, plans of subdivision, and review development applications.
11.	official plans
12.	Recently requested to be added to municipal planning circulation lists, and have an internal process for providing comment. Over the next year we will be flushing out criteria to help identify which document we will /will not review, but for now we are taking a look at all documents shared (secondary plans, subdivision plans, etc.) as part of a learning process.
13.	official plans, master plans, bylaws, MOUs
14.	We are involved in many municipal processes. provide comment on official plan policies when they are up for review. Provide input on secondary plans (e.g. local communit plans, Transportation plans) Contribute to development of Integrated Community Sustainability plans, Trails Master Plan, Parks and Rec Strategic Plan, Active Transportation Plans. Have provided input on EAs via Trails Committee (re: Waterfront Trail development)
15.	York Region Public Health has an internal cross-divisional Building Healthy Communities (BHC) Workgroup to coordinate responses to regional and municipal requests relating to land use, transportation and community planning. As a result we have been able to connect more effectively internally with our regional departments (e.g. Planners) and with many of our local municipal stakeholders. It has taken several years of consultation and collaboration but we now have a better process for commenting on plans. All high level plans such as Official Plans, Secondary Plans, Master plans are now sent to our 2 Public Health Managers (from Health Protection and Healthy Living) for comment. They are then sent to our BHC Co-chairs in order to co-ordinate comments along with the BHC Workgroup members. Many of our comments are of a high level but some of our inputs are policy development related such as the policies we created for our Regional Official Plan (e.g. Healthy Communities). We continue to develop expertise within the BHC WG and work with our partners on this process. It is a work in progress moving forward. Most recently we have provided comments on a range of built environment related plans such as York Region Transportation Master Plan, York Region Community & Health Services Dept. Multi Year Plan, Provincial Policy Statement, Designing Great Streets – Regional Municipality of York, Town of Newmarket Urban Centres Secondary Plan, Strengthening Ontario Trails Strategy Discussion Paper, Coordinated Land Use Plans (Growth, Oak Ridges Moraine Conservation Plan, Greenbelt Plan) and the Town of Richmond Hill's Greening the Hill Draft Environment Strategy. We have two Regional Planners on our Public Health Branch's BHC WG – one from Long Range Planning and another from our Community & Health Services Department Strategies and Partnerships Branch who links to all of the C&HS corporate initiatives.
16.	we support the work of the Regional Planning Department through research
17.	official plans, bylaws, etc..
18.	minimal review of official plans and some bylaws
19.	OP's Healthy communities and developments
20.	



21. Official plan reviews, Master plan reviews, Other strategic documents. We may become involved in an EA process, if requested specifically by municipality or through complaints/investigations
22. Official plans, bylaws, secondary plans
23. Peel Regon - Official Plan Ammendment (ROPA) 27 - Healthy Development Assessment
24. Official plans; secondary plans; bylaws; subdivision plans; participation on advisory committees in specialist/advisory role; contacted directly by municipalities on topic specific matters
25. site plans, bylaws
26. Official plans, change in use, subdivision plans, ect.
27. sometimes comment on official plans when being revised; sometimes get circulated zoning changes; not consistant between all 22 municipalities

## Appendix C

### 1. Name of Health Unit (optional)

#	Response
1.	Chatham-Kent PHU
2.	Peterborough Public Health
3.	Elgin St. Thomas
4.	Toronto Public Health
5.	LGLDHU
6.	Ottawa Public Health
7.	Oxford County Public Health
8.	Durham Region Health Department
9.	Halton Region Health Department
10.	Brant
11.	WDGPH
12.	North Bay Parry Sound District Health Unit
13.	Haliburton, Kawartha, Pine Ridge District HU
14.	York Region Public Health Unit
15.	Region of Waterloo Public Health and Emergency Services
16.	Peterborough Public Health
17.	Perth District Health Unit
18.	Peel Health
19.	Lambton Public Health
20.	Simcoe Muskoka District Health Unit
21.	Niagara Region Public Health
22.	Peel Public Health
23.	Sudbury & District Health Unit
24.	Middlesex-London Health Unit
25.	Leeds, Grenville & Lanark District Health Unit

### 11. Please provide a couple of examples of EA's your health unit has commented on. |

#	Response
1.	Major reconstruction project of a street and open space in downtown Peterborough,
2.	EA for a significant road widening project
3.	Gardiner Expressway, McNicoll Bus Garage, Billy Bishop Airport Expansion,
4.	Western Light Rail Transit expansion, stage 2
5.	Princeton/Drumbo Wastewater EA, Proposed Landfill (we requested a HIA as part of the TOR review)
6.	municipal official plans (ex. Oshawa official plan, Whitby official plan) Region of Durham Master Transportation plan, Coordinated provincial land use plan,
7.	Gas-fired electricity generation; road widening; GTA West Highway
8.	County Road rehabilitation Project. Commented about need to include paved shoulders on this project. We are not sure about others, as there have been staff changes in our EH department, but it is likely that our health unit has been asked to comment on projects such as incinerators, wind turbines. Nothing in the recent past though (i.e. 2-3 years or so)
9.	Southeast Collector Trunk Sewer EA, Western Vaughan IEA, Hwy 427 EA, Class Environmental Assessment Study (Road Widening) EA, Class Environmental Assessment Study for a Stormwater Management Facility, Class EA Study for Water Servicing, York Sewage Solutions Environmental Assessment, Energy from Waste IEA, 16th Ave Road Widening EA
10.	New land developments, commercial developments and impact to public health and site clean up and

	decommissioning
11.	Landfill expansion, hazardous waste facility expansion, Centennial Park contaminated soil, widening of the 402 highway
12.	Wainfleet water contamination, Port Colborne soil contamination, Niagara Stone Road road upgrades, St. David's Road bridge impacts, Merrittville Highway Bridge crossing
13.	<a href="https://www.peelregion.ca/pw/transportation/enviro-assess/ea-the-gore-road.htm">https://www.peelregion.ca/pw/transportation/enviro-assess/ea-the-gore-road.htm</a> <a href="https://www.peelregion.ca/pw/transportation/enviro-assess/ea-mississauga-rd-2proj.htm">https://www.peelregion.ca/pw/transportation/enviro-assess/ea-mississauga-rd-2proj.htm</a>
14.	Ferrocrome smelter, Cote Gold mine development, Long Lake Gold Mine remediation, cogeneration plant, sewer and municipal waste-water system upgrades, Ramsey Lake and Junction Creek Watershed Studies, highway expansion/realignment/improvement plans
15.	1) Intersections, 2) multiuse pathway connections, 3) downtown flex street, 4) redesign of County road, 5) rapid transit, 6) Cycling Master Plan 7) road widening 8) chemical leaching into ground water from industry 9) building demolition projects