

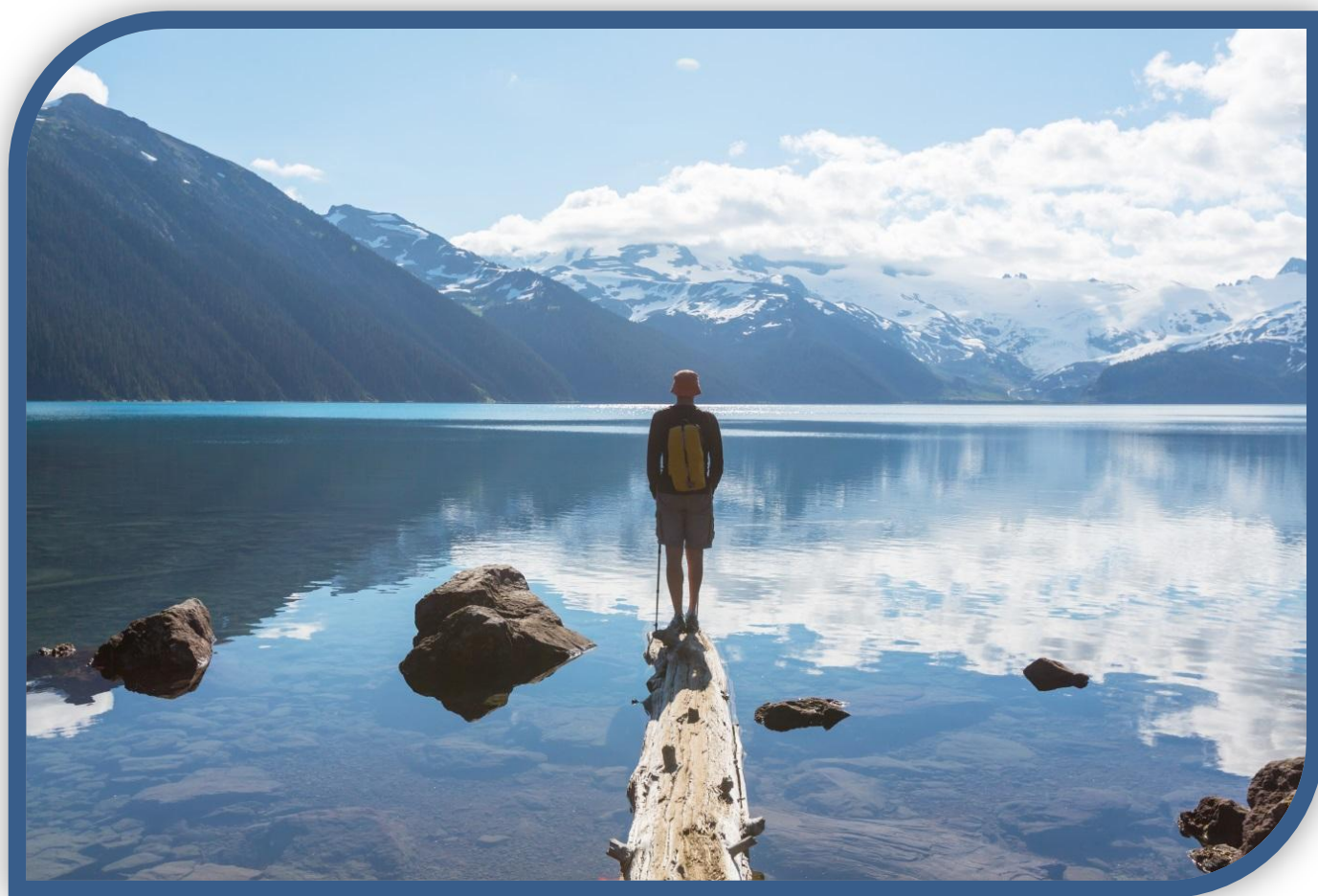


Health
Canada

Santé
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Health Canada

2017-18 Departmental Sustainable Development Strategy



October 2017

Canada 

Health Canada is the federal department responsible for helping the people of Canada maintain and improve their health.

We assess the safety of drugs and many consumer products, help improve the safety of food, and provide information to Canadians to help them make healthy decisions. We provide health services to First Nations people and to Inuit communities. We work with the provinces to ensure our health care system serves the needs of Canadians.

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We are working – today and every day – to protect the health of our environment, and with it, the health of Canadians.

The Right Honourable Justin Trudeau 2016



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Section 1

Context for the Departmental Sustainable Development Strategy





The 2016–19 Federal Sustainable Development Strategy (FSDS) presents the Government of Canada’s sustainable development goals and targets, as required by the [Federal Sustainable Development Act](#). In keeping with the objectives of the Act to integrate environmental, social and economic considerations into decision-making, and make such decisions more transparent and accountable to Parliament, Health Canada supports reaching goals laid out in the FSDS through the activities described in this Departmental Sustainable Development Strategy (DSDS).

Section 2

Sustainable Development in Health Canada



Canadians are living longer and are some of the healthiest people in the world; enjoying more quality years in good health than ever before. Health Canada has a responsibility to continue to help Canadians maintain and improve their health by recognizing that human well-being cannot be sustained without a healthy environment. The Department has identified 46 performance indicators that either contribute to a goal or target identified in the 2016-19 FSDS or are specific program activities that are supportive of broader sustainability objectives. Health Canada's DSDS is aligned with five of the thirteen long-term goals identified in the FSDS:

- *Effective action on climate change*
- *Low-carbon government*
- *Clean drinking water*
- *Sustainable food*
- *Safe and healthy communities*

FSDS Goal: Effective action on climate change

Climate change is a critical global problem that could affect future generations' ability to

meet their basic needs. Adaptation, a key factor in addressing climate change, is about making smart, informed, forward-looking decisions. Health Canada's contributions to this goal focus on adaptation measures, such as heat alert and response systems that can help Canadians improve their resiliency to extreme heat. The Department's Climate Change and Health Adaptation Program has recently been expanded to include First Nations communities south of the 60th parallel and will continue to provide funding for community-driven research projects in First Nations communities. This work will help to inform the development of adaptation plans that focus on the issues that are of greatest importance to specific communities.



FSDS Goal: Low-carbon government

Health Canada is the custodian of 15 buildings (seven laboratories, two support facilities and six health facilities) and it leases space in approximately 59 additional facilities across the country. These facilities include laboratories, health centres, nursing stations and hospitals, as well as offices, warehouses and other storage facilities. The Department also manages a fleet of 509 vehicles, and procures goods and services in order to serve Canadians. The commitments under the low-carbon government goal outline the areas Health Canada plans to focus on to continue to reduce the environmental effects associated with the Department's physical operations and procurement decisions. Specifically, Health Canada will take steps to 'green' its buildings, support the reduction of energy use in the Department's fleet, integrate environmental performance considerations into all aspects of the departmental procurement process, and promote employee engagement and awareness across a range of issues from sustainable travel practices to efficient water use.



FSDS Goal: Clean drinking water

Clean drinking water is essential for health, while polluted water can cause serious illness due to bacteria, viruses and other contaminants. Most drinking water advisories are issued as a precaution; however, they can indicate that water could be contaminated and needs to be boiled before use, is unsafe for drinking, or is unsafe to use at all. While drinking water in Canada is among the safest in the world, access to safe drinking water remains a challenge in on-reserve First Nation communities. To minimize possible negative health impacts associated with drinking water, Health Canada will continue to support First Nations communities in the monitoring of the quality of their drinking water. The Department will also continue to work with federal, provincial and territorial partners to develop/update health-based drinking water quality guidelines and guidance documents for use by all jurisdictions in Canada to use as the basis for their own drinking water requirements.

FSDS Goal: Sustainable food

All Canadians, including those in isolated northern communities need to have access to nutritious food. For Indigenous peoples, this includes traditional or country food, as well as store-bought food. To help northern Canadians afford healthy food, the [Nutrition](#)

[North Canada](#) (NNC) initiative provides funds to retail and community-based nutrition education programs in eligible isolated northern communities to help



promote a safe and accessible food supply. As part of this program, Health Canada will provide nutrition education activities such as learning about healthy eating and how to choose and prepare healthy foods.

FSDS Goal: Safe and healthy communities

We are committed to ensuring Canadians live in clean, safe environments that contribute to their health and well-being. Among other measures, this means improving air quality, protecting Canadians from harmful substances, and preventing environmental emergencies or mitigating their impacts if they do occur.

Exposure to high concentrations of air pollution, especially on a daily basis, is dangerous, and the health problems it causes impose economic costs from lost productivity, increased need for medical care, decreased quality of life, and premature death. Health Canada, along with

Environment and Climate Change Canada (ECCC), will work with the provinces and territories and other key stakeholders, to implement the [Air Quality Management System](#) (AQMS), a collaborative effort among governments in Canada to manage air quality. Health Canada will provide the health basis and guidance for developing actions to reduce the health risks from outdoor air pollutants. The Department will also focus on increasing awareness and use of the [Air Quality Health Index](#) (AQHI) among individuals who are vulnerable to the health impacts of air pollution. Health Canada's work to address health risks related to indoor air quality, ranging from mould to [radon](#) gas, includes the development of health assessments, conducting research, providing expertise, and preparing outreach campaigns to raise awareness about health risks. The Department will also work with federal partners and provincial authorities to strengthen emergency preparedness in order to minimize impacts on public health, safety, property and the environment and will provide human health advice to other



federal departments that are cleaning up contaminated sites.

While chemicals are part of our everyday lives and provide many benefits, they can also be harmful if not properly managed. Managing these substances, as well as assessing and cleaning up contaminated sites, protects our health and the environment and benefits Canada's economy. Health Canada's work in this area spans across multiple programs. Health Canada will continue to work with ECCC to implement the [Chemicals Management Plan](#) (CMP), whose most recent phase was



launched in May 2016. This will include addressing 1,550 remaining priority chemicals (of the original 4,300) and assessing new substances as they are introduced into Canada. Health Canada also will continue to play a significant role in developing collaborative approaches to conducting joint pesticide reviews, promoting international regulatory alignment, and in accessing the best science available to support pre and post market regulatory decisions related to pesticides.

In addition, work related to the [Canadian Health Measures Survey](#) and the [Northern Contaminants Program](#) provide invaluable data and research for scientists, health and environment officials, and communities to help inform decisions and develop policies aimed at reducing exposure to chemicals and contaminants.

Health Canada is committed to providing regular updates to its DSDS in order to incorporate new decisions and actions as we monitor our progress and develop new approaches. The Department will provide periodic updates through the interactive FSDS e-strategy in addition to a more detailed account of progress through established departmental reporting processes. Information about the initial commitments that Health Canada has made to contribute to the 2016-19 FSDS are outlined in Section 3 of this DSDS.

Section 3

Commitments for Health Canada





Effective Action on Climate Change: A low-carbon economy contributes to limiting global average temperature rise to well below two degrees Celsius and supports efforts to limit the increase to 1.5 degrees Celsius

Health Canada's contributions in this area align with the following United Nations Sustainable Development Goals:



By 2030, reduce Canada's total GHG emissions by 30% relative to 2005 emission levels

Departmental Action 1



Increase knowledge, capacity and tools to address climate change and health risks, including ways for Canadians to improve their resiliency to extreme heat, commonly called 'heat waves'.

How Health Canada Contributes

By supporting programs focused on heat alert response systems, real-time heat morbidity and mortality surveillance systems, disseminating heat health information, and developing training, Health Canada helps decision makers identify ways to address health risks and opportunities arising from climate change.

For example, identifying populations that are particularly vulnerable to extreme heat is an important consideration in developing heat-alert messaging and programs. Additionally, research about areas that are most susceptible to the 'urban heat-island effect', which is when built up areas are hotter than nearby rural areas, can inform the development of response plans, the location of 'cooling centres', and cooling options for high risk populations.

Starting Point

In 2016-17, 30% of health regions were implementing evidence-based adaption measures to protect health from extreme heat.

Performance Indicator

By March 31, 2019, 50% of health regions will be implementing evidence-based adaptation measures to protect health from extreme heat.

Departmental Action 2

Host regional workshops with First Nations communities across Canada to promote the new southern component of the Climate Change and Health Adaptation Program

How Health Canada Contributes

Health Canada's Climate Change and Health Adaptation Program was established in 2008.

The Program is unique among adaptation programs in that it focuses on supporting community-driven health research and adaptation strategies. This allows communities to identify the areas of research and vulnerability-assessments that are of greatest importance to them.

Initially the Program targeted northern communities in the territories and has recently been expanded to include First Nations communities in the south (i.e., south of the 60th parallel) in order to address gaps in public health surveillance, community driven research and adaptation plans to minimize risks to health.

By hosting regional workshops to promote the new southern component of the Program, additional communities will learn about the funding that is available for community-based research and action oriented projects to help minimize risks and adapt to the impacts of climate change on human health.

Starting Point

In 2016-17, the Climate Change and Health Adaptation Program held workshops in three regions to promote the new southern component.

Performance Indicator

By March 31, 2018, five regional workshops will have identified priorities related to the Climate Change and Health Adaptation Program, including the expansion of the Program south of the 60th parallel.



Departmental Action 3



Provide funding for community-driven projects in First Nations communities south of the 60th parallel, and northern First Nations and Inuit communities. Funding will support the development of adaptation plans and actions that identify and prioritize the health impacts of climate change.

How Health Canada Contributes

First Nations and Inuit communities play a leading role in helping to understand and address vulnerabilities and risks from climate change impacts, identify economic opportunities arising from clean growth, and reduce emissions.

By providing financial support, the Climate Change and Health Adaptation Program creates an opportunity for communities to identify the areas of adaptation research and vulnerability-assessments (e.g., food security and access to traditional food, physical and mental health impacts, extreme weather events, water monitoring) that are of greatest importance to them so they can be prioritized at a regional level.

Starting Point

Since the Climate Change and Health Adaptation Program began in 2008, 95 projects in northern First Nations and Inuit communities have been supported.

Performance Indicator

By March 31, 2018, 100% of stakeholders receiving funding from the Climate Change and Health Adaptation Program will have identified adaptation measures in their plans, strategies, reports and projects (n=7 southern communities, n=4 northern communities)



Low-Carbon Government: *The Government of Canada leads by example by making its operations low-carbon*

Health Canada's contributions in this area align with the following United Nations Sustainable Development Goals:



Reduce GHG emissions from federal government buildings and fleets by 40% below 2005 levels by 2030, with an aspiration to achieve this reduction by 2025

Departmental Action 1



Adopt and maintain approaches and activities that reduce Health Canada's energy use, where operationally feasible, and improve overall environmental performance of departmental-owned buildings.

How Health Canada Contributes

The objective of this departmental action is to have 'greener' buildings that require less energy to operate, reduce emissions and pollutants, conserve water, generate less solid waste and have decreased operation and maintenance costs. Actions that reduce the demand for energy or switch to cleaner sources of energy will lead to reductions in Greenhouse Gases (GHG).

Performance Indicator

By March 31, 2018, requirements of the National Energy Code for Buildings, which sets out technical requirements for the energy efficient design and construction of new buildings, will be integrated into Health Canada's Real Property Sustainability Framework.

Performance Indicator

By March 31, 2018, 100% of applicable existing custodial building fit-ups, refits, major investments and new construction projects will have achieved an industry-recognized level of high-environmental performance.

Performance Indicator

By March 31, 2019, real property managers and functional heads responsible for new construction, leases or existing building operations will have clauses related to environmental considerations incorporated into their performance agreements.

Performance Indicator

By March 31, 2019, Health Canada will have reduced GHG emissions from facilities by 5% from the 2013-14 baseline and report on the following:

- energy use intensity (GJ/m²)
- GHG emission intensity by floor space (g CO₂eq/m²)
- density of use (e.g., FTE/m²)

Departmental Action 2



Support the reduction of energy use in Health Canada's fleet by selecting the smallest and most fuel-efficient vehicle to meet operational requirements, keeping vehicles properly maintained, and developing fleet infrastructure (e.g., charging stations).

How Health Canada Contributes

Actions that reduce the amount of fuel consumed for fleet operation or switch to less GHG intensive vehicles will contribute to GHG reductions.

Starting Point

In 2005-06, GHG emissions from Health Canada's fleet were 3.06ktCO₂e.

Performance Indicator

By March 31, 2018, Health Canada will reduce GHG emissions from fleet by 40% from the 2005-06 baseline and report on the following:

- Overall fuel consumption (LGE)
- GHG emissions (KtCO₂e)

Starting Point

In 2013-14, 97% of vehicles purchased were right-sized for operational needs and the most fuel efficient vehicle in their class at the time of purchase.

Performance Indicator

By March 31, 2018, 90% of vehicles purchased will be right-sized for operational needs and the most fuel efficient vehicle in their class available at the time of purchase and/or are an alternative-fuel vehicle. The 90% is a maintenance target, since results are subject to fluctuation.

Performance Indicator

By March 31, 2019, a feasibility study regarding the deployment of electric vehicle charging stations at Health Canada-owned buildings will be completed.

Health Canada has established a Fleet Management Standard that includes green procurement and environmentally responsible operational requirements.

Departmental Action 3



Promote environmental sustainability by integrating environmental performance considerations into departmental procurement process, including planning, acquisition, use and disposal, and ensuring there is the necessary training and awareness to support green procurement.

How Health Canada Contributes

Green procurement incorporates environmental considerations into purchasing decisions and is expected to motivate suppliers to green their goods, services and supply chain. GHG reductions are one area of consideration in green procurement.

Starting Point

In 2013-14, 91% of Health Canada's specialists in procurement and materiel management have completed training to support green procurement.

Performance Indicator

By March 31, 2018, 100% of specialists in procurement and materiel management will have completed the Canada School of Public Service green procurement course or equivalent, or have included it in their learning plan for completion within a year.

Starting Point

Since 2013-14, all of Health Canada's common use documents residing in the Procurement and Contracting Intranet site for Health Canada and the Public Health Agency of Canada have been vetted annually to ensure they include a 'greening' statement or directive, where applicable.

Performance Indicator

By March 31, 2018, 100% of procurement related documents, guides and tools posted on Health Canada's intranet will have been reviewed for compliance, where applicable.

Starting Point

In 2013-14, 65% of Health Canada's office supply purchases* included consideration of environmental impacts.

*This excludes purchases made using acquisition cards.

Performance Indicator

By March 31, 2018, 80% of office supply purchases will continue to include criteria to reduce the environmental impact associated with the production, acquisition, use, and/or disposal of the supplies.



Starting Point

In 2013-14, 64% of Health Canada's information technology purchases* included criteria to reduce their environmental impact.

*This excludes laboratory and field equipment as well as purchases made using acquisition cards.

Performance Indicator

By March 31, 2018, 92% of information technology hardware purchases will continue to include criteria to reduce the environmental impact associated with the production, acquisition, use, and/or disposal of the equipment.

Note: this is done in conjunction with Shared Services Canada as the IT procurement authority.

Starting Point

Since 2013-14, Health Canada has required that employee performance discussions for all managers of procurement and materiel management include consideration of how they contributed to green procurement practices.

Performance Indicator

By March, 31, 2018, 100% of performance evaluations for procurement and materiel management managers will continue to include a discussion about how they supported and contributed to the Department's green procurement practices.

Although there are permissible discharge limits of some hazardous liquid wastes (e.g., chemicals, radioactive substances) in municipal sewers, Health Canada does not allow any generated hazardous waste, either liquid or solid, to enter the sewers or go directly to landfills. All hazardous biological, chemical and radioactive waste is disposed of through specialized disposal companies.

Departmental Action 4



Promote programs such as the Build in Canada Innovation Program, which could enable departmental employees to procure and test late-stage innovative goods and services.

How Health Canada Contributes

Actions by individual departments that incent, support, or procure state-of-the-art innovative clean technologies that lower the environmental footprint of government operations while contributing to the success of clean-tech businesses in Canada.

Performance Indicator

By March 31, 2018, develop and release at least one outreach/communication message to departmental employees to raise awareness of the Build in Canada Innovation Program.

Departmental Action 5



Encourage and facilitate the use of sustainable travel practices.

How Health Canada Contributes

Increased awareness about sustainable travel practices could help to reduce the amount of business travel or encourage employees to consider less GHG intensive modes of transportation.

Performance Indicator

By March 31, 2018, the Sustainable Workplace Operations Framework and the Employee Engagement Strategy will be updated to include promotion of sustainable travel practices.

Performance Indicator

By March 31, 2018, develop and release two outreach / communications messages to departmental employees about sustainable workplace operations, including travel practices.

The collection, diversion and disposal of workplace waste in Health Canada-owned buildings will continue to be managed in an environmental responsible manner.

Departmental Action 6



Review programs and assets (buildings, fleet) to ensure that sources of GHG emissions are inventoried and that any impacts to climate change are quantified.

How Health Canada Contributes

Factoring climate variability and change into policy, programs, and operations is one of the most important ways the government can adapt to a changing climate and is consistent with the government's risk management approach of enhancing the protection of public assets and resources and strengthening planning and decision-making.

Performance Indicator

By June 30, 2018, review assets (buildings, fleet) to ensure that sources of GHG emissions are inventoried and that any impacts to climate change are quantified.

In order to reduce costs and decrease GHG emissions, Health Canada employees in the National Capital Region who work in buildings on a transit route, will continue to be encouraged to use public transportation to attend meetings.

Departmental Action 7



Continue to incorporate climate change considerations into corporate risk planning by including this element as part of the standard guidance/checklist to branches during the development of their risk snapshots, and business continuity planning in order to identify risks that could affect Health Canada's ability to deliver on its mandate and achieve its strategic outcomes.

How Health Canada Contributes

Factoring climate variability and change into policy, programs, and operations is one of the most important ways the government can adapt to a changing climate and is consistent with the government's risk management approach of enhancing the protection of public assets and resources and strengthening planning and decision-making.

Starting Point

In 2017 Health Canada's Corporate Risk Profile identified climate change as a driver of risk pertaining to the lifespan of physical infrastructure in the North. In the context of business continuity management, planning to ensure the continued delivery of critical services and the availability of assets that support them, is based on an all-hazard approach. This includes developing continuity and/or recovery strategies to mitigate events linked to the effects of climate change.

Performance Indicator

Plans related to the identification of corporate risk and business continuity integrate considerations of climate change impact mitigation and adaption, where appropriate.

Health Canada has a Sustainable Workplaces Forum that is open to all Health Canada employees which serves as a place for colleagues to share ideas, discuss and collaborate on activities, best practices and initiatives that promote a greener environment and support sustainable workplace operations.



Clean Drinking Water: All Canadians have access to safe drinking water and, in particular, the significant challenges Indigenous communities face are addressed

Health Canada's contributions in this area align with the following United Nations Sustainable Development Goals:



By March 31, 2019, 60% and by March 31, 2021 100% of the long-term drinking water advisories affecting First Nation drinking water systems financially supported by Indigenous and Northern Affairs Canada are to be resolved

Departmental Action 1



Support all First Nations communities in ensuring they have ongoing access to a trained Community Based Drinking Water Quality Monitor or an Environmental Health Officer to sample and test the drinking water for potential bacteriological contamination.

How Health Canada Contributes

Health Canada works together with First Nations communities and provides funding to Chiefs and Councils for drinking water monitoring through its Community-Based Water Monitor program.

By working with First Nations communities to ensure they have the technical support and expertise required to monitor drinking water quality, potential concerns can be identified and the appropriate recommendation can be provided to the Chief and Council of the First Nation community for action. These recommendations can include issuing a drinking water advisory.

Starting Point

Since 2012-13, all First Nations communities have had access to a trained Community Based Drinking Water Quality Monitor or an Environmental Health Officer.

Performance Indicator

By March 31, 2018, 100% of First Nations communities have access to a trained Community Based Drinking Water Quality Monitor or an Environmental Health Officer.

Departmental Action 2



Support First Nations communities in on-going monitoring of drinking water quality in order to minimize potential negative health impacts.

How Health Canada Contributes

Health Canada works directly with First Nations to assist communities in monitoring drinking water quality, which includes providing advice and guidance about drinking water safety and wastewater disposal, and reviewing infrastructure project proposals from a public health perspective.

These measures contribute to an understanding of drinking water quality issues facing First Nation communities and their resolution.

Starting Point

The average percentage rate of public water systems monitoring in First Nations communities was 80% in 2016-17.

Performance Indicator

By March 31, 2018, public water systems on reserve will be sampled on average at a minimum of 80% of the recommended frequency for bacteriological parameters in the Guidelines for Canadian Drinking Water Quality.



Upon request, Health Canada provides advice and develops drinking water screening values, to help partner agencies address spill or leak events.

Departmental Action 3

Develop/update health-based drinking water quality guidelines and guidance documents in collaboration with FPT partners, intended for use by all jurisdictions in Canada as the basis for their drinking water requirements to help ensure the safety of drinking water in Canada.

How Health Canada Contributes

This target reflects part of the overall goal of clean drinking water for all Canadians. The drinking water quality guidelines are a key component of drinking water programs that exist in First Nation communities, and provide critical information to help reduce long-term drinking water advisories in First Nation communities.

Starting Point

Since 2011, 26 water drinking water guidelines/guidance documents have been approved through the federal, provincial and territorial collaborative process.

Performance Indicator

By March 31, 2018, up to five drinking water guidelines/guidance documents will be approved through the federal, provincial and territorial collaborative process.



Health Canada assists federal, provincial and territorial (FPT) partners to adopt and use the Drinking Water Application (DWA) within the Canadian Network for Public Health Intelligence (CNPHI). The CNPHI DWA is a real time alert and response system that enables Canadian agencies/jurisdictions to enter and share information about drinking water advisories, including reasons for their issuance. This secure application allows analysis of key trends and root causes of advisories, providing FPT partners with a tool to better characterize priorities and target actions.



Sustainable Food: Innovation and ingenuity contribute to a world-leading agricultural sector and food economy for the benefit of all Canadians

Health Canada's contributions in this area align with the following United Nations Sustainable Development Goal:



Ensure safe and accessible food supply by mitigating risks to animal and plant resources from pests, diseases and other health hazards and prevent risks to health of Canadians

Departmental Action 1



Expand the nutrition education component of the Nutrition North Canada Program to include the new communities that were added in 2016-17.

How Health Canada Contributes

By providing funding to support the delivery of retail and community-based nutrition education initiatives, such as knowledge of healthy eating; developing skills in selecting and preparing healthy food; and strengthening retail-community partnerships, the [Nutrition North Canada](#) program helps to promote a safe and accessible food supply in isolated communities.

Starting Point

The Nutrition North Canada program was expanded in October 2016. As of March 31, 2017, 94% of the newly added First Nations communities received the funding to support delivery of the nutrition education component of the program.

Performance Indicator

By March 31, 2018, 100% of the new communities will be receiving funding to support the delivery of the nutrition education component of the Nutrition North Canada program.





Safe and Healthy Communities: All Canadians live in clean, sustainable communities that contribute to their health and well-being

Health Canada's contributions in this area align with the following United Nations Sustainable Development Goal:



Implement the Air Quality Management System to: Decrease the three-year average of particulate matter, nitrogen oxides and volatile organic compound emissions from regulated and/or targeted sources to below the previous three-year average

Departmental Action 1



Raise awareness of the health impacts of air pollution and support actions to improve air quality through research, assessment of health risks, and analysis of health benefits to improve the health of Canadians.

How Health Canada Contributes

Health Canada science plays an important role in guiding actions to improve outdoor air quality under the Air Quality Management System, for which health is the key driver.

Health Canada conducts research to evaluate Canadians' exposure to air pollution, to determine the relationship between exposure and human health and to find ways to reduce exposure to protect health. It also assesses the risks to health from specific pollutants and air pollutant sources, including industrial activities, modes of transportation and fuel types and quantifies the health and economic benefits to be gained from improved air quality.

The science is made available to a wide range of stakeholders to inform which measures should be put in place to continue to decrease air pollutants, including those key pollutants which contribute to smog (particulate matter, nitrogen oxides, and volatile organic compound).

Starting point

Health Canada science has contributed to the global understanding of how air pollution impacts human health. For example, the [Canadian Census Health and Environment Cohort](#) study has provided the largest study of the health effects of air pollution in the world. It has been used in the development of

[Canadian Ambient Air Quality Standards](#) and has been adopted into the [Global Burden of Disease project](#), a global effort to measure and track the cause of poor health worldwide.

In recent years, Health Canada has completed comprehensive health risk assessments on fine particulate matter and ozone (key components of smog), nitrogen dioxide and sulphur dioxide, and on pollutants found in diesel and gasoline exhaust, and has used this information to guide the development of new Canadian Ambient Air Quality Standards.

Performance Indicator

By March 31, 2018, five federal outdoor air quality health assessments, guidance documents, guidelines, research studies and standards will be distributed (either by publishing or distributing externally).

By March 31, 2018, five targeted knowledge transfer activities will be completed.



Departmental Action 2



Raise awareness of the health impacts of indoor air pollution and support improvements to indoor air quality through research, assessment of health risks, and the development of indoor air quality guidelines.

How Health Canada Contributes

Canadians spend 90% of their time indoors, where they are exposed to many different pollutants, often at levels higher than outside.

Health Canada guides actions by governments, public health professionals, building professionals and individual Canadians to reduce exposure to indoor air pollutants, in order to protect health.

Starting Point

Health Canada has published a series of Residential Indoor Air Quality Guidelines, along with other guidance for Canadians on improving indoor air, including preventing dampness and mould, cleaning up after floods, protecting your family from carbon monoxide and ensuring good ventilation, available through [Canada.ca](https://www.canada.ca).

Performance Indicator

By March 31, 2018, four federal indoor air quality health assessments, guidance documents, guidelines, research studies or standards will be distributed (either by publishing or distributing externally).

Health Canada works with the National Research Council to develop guidance and standards for healthier buildings and products.

Departmental Action 3



Respond to requests to conduct environmental public health inspections of homes in First Nations communities to help identify environmental public health issues including but not limited to the protection against infection and physiological requirements of the home. As appropriate, inspections will result in recommendations on remedial actions to Chiefs and Councils, community workers, and occupants.

How Health Canada Contributes

Poor housing conditions and lack of adequate housing are linked to a range of negative health outcomes, making housing a central public health priority in First Nations communities.

Housing conditions can be improved by providing, advice, recommendations and guidance to First Nations communities on how to reduce or mitigate potential public health risks, such as mould, that are identified during public health inspections. These inspections are conducted by Environmental Health Officers on request



from First Nations householders and communities.

Performance Indicator

The proportion of homes inspected where deficiencies were noted in the category; “protection against infection” which includes personal and domestic hygiene, food safety, sanitation, drainage and water supply

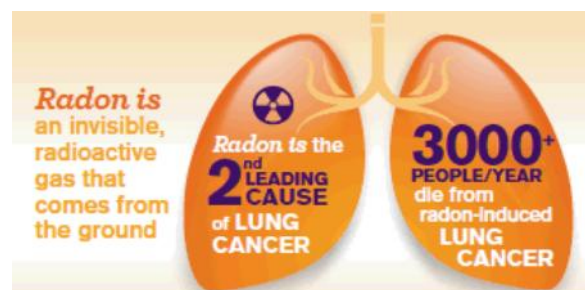
The proportion of homes inspected where deficiencies were noted in the category: “physiological requirements”, which includes dampness and mould, excess cold and heat, and non-microbial pollutants.

Departmental Action 4

Provide information to inform action and decision making related to indoor radon exposure.

How Health Canada Contributes

Health Canada develops standards and regularly updates guidance documents, codes of practice and protocols to measure and mitigate radon in homes and workplaces. By working with private industry and key partners the Department validates methods for radon measurement and improved technologies to reduce the intrusion of radon soil gas into buildings.



Priority outreach activities, such as [Radon Action Month](#) in November, with an emphasis on Canadians taking action to reduce radon exposure by testing and mitigating.

Updates and analysis of radon information from the [Households and the Environment Survey](#), conducted by Statistics Canada, as well as data in the National Radon Database, enables Health Canada to identify and prioritize at-risk populations and to continue to tailor outreach and communication messages.

Starting Point

In 2016-17, over 40 stakeholders from across Canada participated in education and awareness activities.

Performance Indicator

By March 31, 2018, 100% of stakeholders will have participated in radon education and awareness and communication activities.

Starting Point

In 2013, 53% of Canadians surveyed through the Households and the Environment Survey were knowledgeable of radon.

Performance Indicator

By March 31, 2019, 60%-65% of Canadians surveyed through the Households and the Environment Survey will be knowledgeable of radon.

Starting Point

In 2013, 5% of Canadians surveyed through the Household Environment Survey had tested for radon.

Performance Indicator

By March 31, 2019, 8% of Canadians surveyed through the Household Environment Survey will have tested for radon.

Departmental Action 5

Make environmental radiation data available to Canadians.

How Health Canada Contributes

The availability of [environmental radioactivity surveillance data](#) allows Canadians to view monthly summaries of various environmental radioactivity level data from across Canada, improving access to and understanding of radioactivity exposure from natural and man-made sources.

For example, following the 2011 Fukushima Daiichi nuclear accident in Japan, Health Canada used the monitoring networks and relationships with the international community to provide timely information to Canadians.

Starting Point

In 2016-17, environmental radioactivity surveillance data was posted to the Health Canada website (3,600 new data points) and the [Open Data Canada](#) website (6,129 new data points).

Performance Indicator

By March 31, 2018, 100% of environmental radiation data will be available to Canadians and stakeholders.

Departmental Action 6



Collaborate with other federal partners and provincial authorities to strengthen nuclear emergency preparedness and response.

How Health Canada Contributes

By administering the [Federal Nuclear Emergency Plan](#) and collaborating with other federal partners and provincial authorities, Health Canada helps to ensure that Canada is prepared to manage the federal response to a nuclear emergency in order to minimize the impact on public health, safety, property and the environment. This preparation is done through a series of drills and exercises to test the response to various nuclear emergency scenarios in order to identify gaps so issues can be resolved prior to a real emergency situation.

Starting Point

In 2016-17 Health Canada conducted 13 exercises and drills and met all 20 defined objectives.

Performance Indicator

By March 31, 2018, four nuclear emergency preparedness drills and exercises will have been completed and the defined objectives of the exercises will have been met.

Departmental Action 7



Provide Canadians with access to information that will enable them to take protective action to reduce impacts from air pollution.

How Health Canada Contributes

The [Air Quality Health Index](#) helps Canadians make decisions about how to protect their health by limiting short-term exposure to air pollution and adjusting their activity levels when there are increased levels of air pollution.

The Index pays particular attention to people who are more vulnerable to the health impacts of air pollution and provides them with advice on how to protect their health during air quality levels associated with low, moderate, high and very high health risks.

Starting Point

80% of Canadians have access to the Air Quality Health Index, which is now available in all provinces and two territories.

The focus now is on increasing awareness and use of the Air Quality Health Index among individuals who are more vulnerable to the health impacts of air pollution, building on the estimated 400,000 currently receiving Air Quality Health Index communications.

Performance Indicator

By March 31, 2018, 600,000 Canadians in vulnerable populations will be receiving Air Quality Health Index communications.

What is the scale for the Air Quality Health Index?

The Air Quality Health Index (AQHI) is measured on a scale ranging from 1-10+. The AQHI index values are grouped into health risk categories as shown below. These categories help you to easily and quickly identify your level of risk.



Departmental Action 8



Work collaboratively with provinces, territories and stakeholders to develop and regularly update Canadian ambient air quality standards to drive air quality improvements across the country.

How Health Canada Contributes

Air quality management is an area of shared jurisdiction among federal and provincial/territorial governments.

Health Canada, along with Environment and Climate Change Canada, will work with the provinces and territories and other key stakeholders, to implement the Air Quality Management System (AQMS).

The [Canadian Ambient Air Quality Standards](#) are health and environment based objectives, which are meant to drive actions to improve air quality across Canada under the AQMS. They also provide a framework for public reporting on changes in air quality over time to measure performance.

Health Canada co-leads and provides health guidance to the multi-stakeholder group which develops recommended standards to be considered by the [Canadian Council of Ministers of the Environment](#). In 2017-18, the multi-stakeholder group will review and revise the existing standard for ozone, in order to drive continuous improvement in air quality and in health. Ground-level ozone, a key component of smog, is linked to serious health impacts including chronic bronchitis, asthma, and premature deaths at all levels of pollution.

Starting Point

New Canadian Ambient Air Quality Standards for fine particulate matter, ground-level ozone and sulphur dioxide have been endorsed by the Canadian Council of Ministers of the Environment and standards for nitrogen dioxide are anticipated in 2017.

The federal, provincial and territorial governments also agreed to review and revise the standards every five years, as necessary, in order to support the goal of continuous improvement in air quality.

Performance Indicator

By March 31, 2018, a recommendation on a revised Canadian Ambient Air Quality Standard for ozone will be sent to the Canadian Council of Ministers of the Environment for consideration.

Departmental Action 9



Assess proposed actions to reduce air pollution for health benefits using the Air Quality Benefits Assessment Tool.

How Health Canada Contributes

The Air Quality Benefits Assessment Tool is a computer model that estimates the human health impacts from changes in air quality. Health Canada uses it to calculate the potential health benefits to be gained from proposed regulations, or other actions, that are meant to improve air quality. This allows for a comparison of the cost and benefits of proposed actions under the Air Quality Management System, to help find the most efficient ways to improve air quality.

Starting Point

The Air Quality Benefits Assessment Tool has been used support the development of regulations to reduce air pollutants from, for example, vehicles, coal-fired electricity generation and industry, by quantifying the health benefits to be gained so they can be compared to the costs of implementation.

Performance Indicator

By March 31, 2018, five proposed emission reduction scenarios assessed for health benefits using the Air Quality Benefits Assessment Tool.

Departmental Action 10



Assesses and manage, where appropriate, the potential health risks associated with chemical substances.

How Health Canada Contributes

The Chemicals Management Plan is a Government of Canada initiative aimed at reducing the risks posed by chemicals to Canadians and their environment. The third phase of the Chemicals Management Plan, launched in May 2016, will address the remaining 1,550 priority chemicals out of the original 4,363 chemicals identified as priorities during the categorization.

Starting Point

Annual: 88%, Program: 70% (2016-17)

Performance Indicator

By March 31, 2018, 100% of substances are assessed within prescribed timelines (Risk Assessment, Existing Substances).

Starting Point

99% (2016-17)

Performance Indicator

By March 31, 2018, 100% of substances are assessed within prescribed timelines (Risk Assessment, New Substances)

Starting Point

74% (2016-17)

Performance Indicator

By March 31, 2018, 100% of actions are taken in a timely manner to protect the health of Canadians from substances found to be a risk to human health (Risk Management Existing Substances).

Starting Point

100% (2016-17)

Performance Indicator

By March 31, 2018, 100% of actions are taken in a timely manner to protect the health of Canadians from substances found to be a risk to human health (Risk Management, New Substances)

Starting Point

100% (2016-17)

Performance Indicator

By March 31, 2018, 100% of substances are assessed within prescribed timelines (Revised In Commerce List).

Departmental Action 11



Release the Fourth Report on Human Biomonitoring of Environmental Chemicals in Canada, which presents national biomonitoring data on the Canadian population's exposure to chemicals collected as part of the [Canadian Health Measures Survey](#).

How Health Canada Contributes

The *Fourth Report on Human Biomonitoring of Environmental Chemicals in Canada* provides data for scientists and health and environment officials to use in assessing exposure to environmental

chemicals and in developing and accessing policies aimed at reducing exposure to toxic chemicals for the protection of the health of Canadians.

The national data have and will continue to be used to support research, to track trends in levels of chemicals in Canadians over time, and to assess the risk of environmental chemical exposures to the Canadian population.

Starting Point

The first report on human biomonitoring was released in 2010-11 with data from cycle 1 (2007-2009) of the CHMS. Since then a report has been released with each cycle of data; the second report was released in 2013-14 and the third report in 2015-16. Data from the first three cycles were made available on the Open Government portal in 2016-17.

Performance Indicator

By March 31, 2018 the Fourth Report on Human Biomonitoring of Environmental Chemicals in Canada will be released.

Departmental Action 12

Provide funding for research studies to monitor contaminant levels in wildlife and people in the Canadian North.

How Health Canada Contributes

The overall objective of the [Northern Contaminants Program](#) (NCP) is to reduce and, where possible, eliminate contaminants from the Arctic environment while providing information to Northerners about contaminants in traditional/country foods to make informed decisions about their food use.

Findings from research studies are used to influence the development and implementation of international/global agreements to reduce and/or eliminate the production, use and release of contaminating substances into the environment. Research and monitoring also form the basis for assessing risks to human health associated with contaminants in traditional/country foods. This information is used by national and regional health authorities to develop dietary advice to



Northerners, particularly those who are dependent on marine mammals and fish as an important part of their diets. NCP-funded research provides data to address risk assessment and risk management of CMP substances.

Starting Point

The first research study to monitor contaminant levels in wildlife and people in the Canadian north was funded in 2006. Since that time, 74 research studies have been co-funded to conduct this type of human health research.

Performance Indicator

By March 31, 2018, funding will have been provided for five research studies that monitor contaminant levels in wildlife and people in the Canadian North.

Departmental Action 13



Determine that regulated pesticides meet current scientific standards with respect to health and the environment by completing re-evaluations of registered pesticides that are listed in the Re-evaluation Work Plan. The Work Plan ensures that registered pesticides are reviewed every 15 years using modern scientific techniques and current scientific information.

How Health Canada Contributes

By re-evaluating older pesticides against current health and environmental standards, Health Canada verifies the continued acceptability of registered pesticides. In addition, when alerted to potential issues, a special review may be conducted to determine continued acceptability. When a pesticide is found to have unacceptable risks, Health Canada is responsible for taking action to protect human health and the environment (e.g., cancellation of products, label changes, and voluntary withdrawals).

Performance Indicator

By March 31, 2018, 80% of the actions taken in a timely manner to protect the health of Canadians from pesticides found to be a risk to human health and the environment. [Policy on Cancellations and Amendments Following Re-evaluation and Special Review.](#)



Departmental Action 14



Determine that regulated pesticides meet current scientific standards with respect to health and the environment.

How Health Canada Contributes

Regulated pesticides are determined to meet current scientific standards with respect to health and the environment. Through the post-market review of registered pesticides, Health Canada manages risk by staying up-to-date with current science and ensuring that only pesticides that meet modern standards are available in the marketplace.

Performance Indicator

By March 31, 2018, 80% of registered pesticides will meet current scientific standards.

Departmental Action 15



Influence international regulatory approaches by developing and adapting policies and regulatory approaches related to pesticides from work plans in collaboration with international partners.

How Health Canada Contributes

By working closely with international partners, Health Canada is able to influence the policies and approaches of regulatory partners as a means to further protect Canadians from potential risks associated with pesticides in an increasingly globalized trading environment.

Performance Indicator

By March 31, 2022, 80% of policies and regulatory approaches from workplans will be adapted by or developed with international partners



Departmental Action 16



Provide human health advice to other federal departments that are responsible for assessing and remediating contaminated sites.

How Health Canada Contributes

Under the [Federal Contaminated Sites Action Plan](#) Health Canada is an *Expert Support Department*. It provides guidance, training and advice to other federal departments on human health risks posed by sites that are contaminated and for which the federal government has full or partial responsibility. This work helps to minimize Canadians' health risks from environmental factors as contaminated sites are remediated, and provides consistency in the assessment and management of contaminated sites.

For example, guidance documents have been developed on a range of subjects, including human health risk assessment, as well as the process of planning public involvement activities and strategies for dealing with the psychological, social and cultural factors influencing people affected by contaminated sites.

Starting Point

100% (2016-17)

Performance Indicator

By March 31, 2018, 90% of health expertise will have been delivered to Custodians within prescribed timelines.

Section 4

Integrating Sustainable Development



At Health Canada the successful integration of sustainable development into policies, plans and programs is supported by the use of analytical techniques and management practices that consider and incorporate environmental, social and economic objectives with the aim of preserving similar benefits for future generations.

The analytical techniques most commonly identified and used to inform decision-making and to manage risk include: cost-benefit analysis; workshops; risk assessment; advisory committees; and literature and case analysis. Risk management is embedded into Health Canada's evidence-based decision-making processes and provides reasonable assurance that policy objectives and desired outcomes will be achieved.

Health Canada's Assistant Deputy Minister (ADM) Champion of Sustainable Development plays an important oversight and communication role regarding the Department's sustainable development commitments, as well as the application of Health Canada's Strategic Environmental Assessment (SEA) policy. Outreach to ADM colleagues and employees helps to facilitate dialogue within the Department and identify potential improvements to sustainable development and SEA process and practices. Information about Health Canada's role in sustainable development,

as well as tools and guidance related to SEA, are available to departmental employees.

Health Canada has a coordinator for SEA that provides guidance to proposal leads about the application of the SEA process and requirements of the Cabinet Directive on the Environmental Assessment of Policy, Plan and Program Proposals. Health Canada's SEA Policy defines a proposal as a memorandum to Cabinet, a Treasury Board Submission, a regulatory proposal, memoranda to the Minister that are seeking concurrence, and any other strategic document seeking Ministerial or Cabinet approval.

A series of questions prompt the proposal lead to consider if their proposal has potential positive, negative or uncertain impacts on FSDS goals and targets; this part of the process results in the completion of a Preliminary Scan. The departmental SEA coordinator helps to play a challenge function to ensure that the assessment of potential environmental impacts is comprehensive and robust and that full consideration is given to potential direct and indirect environmental impacts. If the Preliminary Scan indicates that the proposal is likely to have a positive or negative impact on the environment, or if the impact is uncertain, a Detailed Analysis is required.

Public statements on the [results of Health Canada's assessments](#) are prepared when an initiative that has undergone a Detailed Analysis is announced. The purpose of the public statement is to demonstrate that the environmental effects, including the impacts on achieving the FSDS goals and targets, of the approved policy, plan or program have been considered during proposal development and decision making.

On a quarterly basis, compliance with Health Canada's SEA Policy is reported to the Executive Committee, which is Chaired by the Deputy Minister and attended by Assistant Deputy Ministers. This forum helps to identify potential challenges, implement corrective measures and ensure on-going engagement with senior managers across the Department. Annual compliance reporting is also included in the Departmental Results Report, outlining the number of proposals that were reviewed within the fiscal year.

The Department offers various forums for SEA training. An on-line course is available to all departmental employees to provide information on Health Canada's SEA policy, the Cabinet Directive, and roles and responsibilities of the parties involved. In addition, an in-class course is offered annually, and includes case studies and scenarios relevant to the Health Canada context that aim to generate discussion and to enable participants to apply what they have learned through the on-line course. Health Canada's Office of Sustainable Development provides targeted training sessions to key groups across the Department to respond to specific questions. Employees are encouraged to incorporate SEA training opportunities into their Learning Plans as part of their Performance Management Agreements.

Health Canada will continue to ensure that the SEA process includes an analysis of the impacts of proposals on the environment, including on FSDS goals and targets.