



April 21, 2017

Ms. Paulina Salamo,
A/Director, Public Health Standards, Practice and Accountability Branch
Ministry of Health and Long-Term Care (MOHLTC)

By email: Paulina.Salamo@ontario.ca, PHTransformation@ontario.ca

**Re: New Standards for Public Health Programs and Services – Operational Considerations,
Implementation Requirements and Supports, and Training Supports**

Dear Ms. Salamo,

The Ontario Society of Nutrition Professionals in Public Health (OSNPPH) applauds the Ministry of Health and Long Term Care (MOHLTC) for the renewal of the mandate for Public Health through issuing the revised Standards for Public Health Programs and Services. We appreciate the opportunity to provide input on anticipated operational considerations, as well as implementation requirements and supports (e.g., needs for new protocols, guidance documents, and training supports). We are pleased to offer our recommendations relating to healthy eating to enhance the potential of the new Standards and look forward to the opportunity to work with MOHLTC staff to implement these suggestions.

OSNPPH is the independent and official voice of Registered Dietitians (RDs) working in Ontario's public health system. OSNPPH provides leadership in public health nutrition by promoting and supporting member collaboration to improve the health of Ontario residents.

Key Operational Considerations

Comprehensive Promotion of Healthy Eating is Integral to Operationalizing the Standards

Healthy eating is a crucial determinant of and protective factor for population health, which can contribute substantially to achieving the goal, outcomes, and objectives set out in the Policy Framework. An example that illustrates the spanning of a range of health promotion strategies and weaving into multiple of the Standards, using Canada's Food Guide as the example subject, is provided as **Appendix A**.

Of particular concern are several healthy eating topics that have been omitted with the Standards:

- **Food literacy/skills:** Removal of food skills and healthy eating is concerning as food literacy and skills are essential overarching competencies for healthy eating.
- **Food costing:** While explicitly removed from the body of modernized Standards document, Nutritious Food Basket (NFB) costing remains in the population health assessment protocol. Operationally, what does this mean for the frequency of NFB data collection? Are we still



expected to collect annually? OSNPPH recommends that that NFB costing remains within a protocol and continues to be collected annually with Registered Dietitian involvement.

- **Food environments/systems:** Understanding the food environment and incorporating a food systems approach is relatively new and evidence is evolving. The increased emphasis on natural and built environments could provide an opportunity to develop a Food Environment Guidance document as part of the Healthy Environment standard; however, there are concerns that food environments and food systems have not been included in language of the new Standards, which instead seem to be using a more individual-level interpretation of healthy eating. There needs to be clear definitions and inclusion of food environments and food systems in the Standards and accompanying protocols and guidance documents.

While we commend the Ministry for recognizing the value in responding to local situations, priorities and contexts in the area of health promotion, we are concerned that a less prescriptive approach may lead to a cut in health promotion budgets in some jurisdictions. These cuts may result from growing pressures from other areas, for example escalating costs of health care due to greater integration with Local Health Integration Networks. A key operational consideration will be the need for adequate funding to ensure sufficient resources and capacity for the important work of public health.

Implementation Requirements and Supports

Several implementation requirements and supports were identified by OSNPPH members and working groups: suggestions for new and revised protocols, a need for indicators of nutritional health, additional research and evidence supports, and increased clarity of terms.

Requirements for New and Revised Protocols and Guidance Documents

A renewed protocol outlining **Healthy Eating**, along with supportive specific protocols and guidance documents will reinforce healthy eating, including food skills, as a substantial contributor to achieving the goals and outcomes of the Standards. Healthy eating has relevance to most of the Standards, notably for Chronic Disease, Wellness and Substance Misuse, Healthy Environments, Healthy Growth and Development, School Health, Population Health Assessment, Health Equity, and Effective Public Health Practice. It can be argued that healthy eating can contribute in a meaningful way to achieving goals and outcomes of Emergency Preparedness, Food Safety, and Safe Water Standards as well.

The **Healthy Environments** protocol and guidance document will reinforce the potential for environments, in addition to reducing health hazards, to promote health, particularly through increasing access to healthy foods. To accomplish this end, the scope should include food environments and food systems. OSNPPH already has produced and has available a suite of resources and tools to promoting healthy eating in different environments/settings and life course stages. Some of these resources include, but are not limited to the Workplace Toolkit, Bright Bites in schools, and Nutrition Recommendations for Licensed Child Care Providers in Ontario.



The **Nutritious Food Basket (NFB)** has provided an essential role in ensuring consistent data collection methodology and implementation across Ontario for pivotal information reflective of the key health equity factor of food security. A new, updated NFB protocol and guidance document should be overtly included within the Population Health Assessment Standard, integrated within the Health Equity Standard, and should incorporate a food costing spreadsheet to be updated and provided annually by the MOHLTC.

An updated **Population Health Assessment** protocol with specific guidance on healthy eating indicators and how to collect nutrition information regarding food consumption, food systems, food affordability etc. needs to be included.

NutriSTEP® is an excellent validated, best practice tool to assess child health and school readiness and nutritional screening. NutriSTEP® requires its own protocol and guidance document and should also be stated as a Program Outcome for the Health Growth and Development Standard.

Protocols and guidance documents related to **Incorporating Sustainability Principles** are needed to guide health units in applying sustainability, both in specific terms of their role within a sustainable health system, as well as in the greater implications of how the promotion of the public's health and sustainability factors (e.g., environmental, economic, food systems, social, etc.) affect each other.

Ensuring Evidence-Informed Public Health Practice

The establishment of valid and reliable indicators for nutritional health collected through population health assessments can be used to guide program planning and evaluate outcomes. The provision of frameworks to integrate research and evaluation (developmental, process, and outcome) activities into the work of Public Health nutrition practitioners is key. Methodologies on how to collect nutrition information on food systems, food literacy, food affordability, emergency preparedness, climate change, etc. may need to be provided to staff collecting this important local data.

Variability within standardization strengthens local population health assessment, but for evidence-informed planning and best practice, this raises the need for protocols and guidance documents for obtaining relevant data and applied research, for community/population-level needs assessments, and for health indicators, which are substantially lacking for healthy eating purposes. There are several healthy eating-related data and applied research needs to be explored and implemented within the public health nutrition context, as outlined in **Appendix B**.

There is a need for additional research in the area of nutrition and healthy eating. Please see Appendix B for a list detailing these needs. Public Health Ontario is well positioned to support local health units through research and evidence gathering and interpretation. For example, PHO could assist health units by providing complete comprehensive literature reviews and environmental scans on emerging nutrition/healthy eating issues with recommendations of possible interventions.



Clarified Terminology

The modernized Standards provide a wealth of information to be digested by Public Health practitioners. In order to strengthen practitioners' understanding of the Standards and how to implement them correctly and effectively, some of the terminology within the document needs clarification.

For example, while it is understandable that Program Standards have "Program Outcomes", it is confusing that Foundational Standards also have "Program Outcomes." Frequent use of terms "programs and services" does not sufficiently depict the potential breadth of health promotion strategies utilized within public health practice. That is, Public Health is more than just the provision of "programs and services" and "adoption of healthy living behaviours", which tend to be overly generalized and individually focused. Health promotion fundamentally includes as its strategies advocacy, building healthy public policy, creating supportive environments, and strengthening community action. These strategies represent a more comprehensive approach to achieving Public Health goals.

Training Supports

There may be a need to assist some Public Health practitioners through various training opportunities. For example, training on local data collection methodologies for nutritional health and healthy eating information related to food systems, food literacy, food affordability, emergency preparedness, climate change, etc. As previously stated, there is a need for Public Health Ontario or the National Collaborating Centre on Methods and Tools to support local health units through research and evidence gathering and interpretation. Perhaps the MOHLTC could facilitate professional development opportunities or training webinars to this end.

OSNPPH to Provide Support and Guidance

Registered Dietitians working in public health have expertise and skills that are exceptionally well-suited to lead achievement of the Standards. OSNPPH members across the province contribute to a multitude of healthy eating promotion areas, crossing the lifespan, settings, and determinants. These efforts include screening for child health using NutriSTEP®, supporting household food security through collection of Nutritious Food Basket (NFB) data, comprehensive promotion of school nutrition, enhancing the health-promotion capacity of food systems, and a focus on the food environment in a variety of settings such as workplaces, recreation centres, food service establishments, and childcare settings. We plan, implement, and evaluate initiatives, as well as being adept at communications and knowledge exchange functions. The nature of our work and professional practice affords proficiency in collaborating and partnerships, and compels us to continuously strive for quality improvements.

As the professional organization for Registered Dietitians in public health, OSNPPH is the credible and independent voice for nutrition in Ontario. OSNPPH is consulted for its expertise by a range of health stakeholders and organizations, including but not limited to the Association of Local Public Health



Agencies, Dietitians of Canada, Ontario Public Health Association, and Cancer Care Ontario. To optimize operationalization of the new Standards, OSNPPH offers the following:

- OSNPPH is positioned to offer its members' highly-relevant expertise to the MOHLTC in developing the required guidance documents and/or protocols related to nutrition, healthy eating and the food environment.
- OSNPPH would like to provide consult to the Expert Panel, contribute to the development of the Public Health Accountability Framework and the Annual Service Plan template.
- OSNPPH would like to participate on the advisory committee which will support Public Health Ontario (PHO) in their new role.

Thank you for the opportunity to hear input from our professional association with respect to the practice of renewing the Standards which are based on solid evidence, reflect current best practices, and adhere to the accepted principles of good governance. We are honoured to be included in this important process to inform government policy that directly impacts our work. Our members are eager and ready to work with the MOHLTC in the development of new and revised protocols and guidance documents relevant to healthy eating. We welcome the MOHLTC to partner more closely with OSNPPH toward making healthy choices the easier choice for Ontarians. Please feel free to contact us at executive@osnpvh.on.ca.

Sincerely,

Candice Einstoss, RD
Co-Chair Year 2, OSNPPH

Erinn Salewski, RD
Co-Chair Year 1, OSNPPH
Chair, OSNPPH Advocacy Committee

cc:

Ms. Roselle Martino, Assistant Deputy Minister of Population and Public Health Division, MOHLTC
Dr. David Williams, Chief Medical Officer of Health of Ontario



Appendix A
An Example Using Canada's Food Guide of Comprehensive Healthy Eating Promotion
Applied to the Standards for Public Health Programs and Services

| Canada's Food Guide Promotion Initiative | Strategy Within Comprehensive Health Promotion | Applicability to Standards |
|---|--|--|
| Awareness-raising initiatives aim to move people from not knowing or caring about the Guide to becoming interested in it | Awareness-raising | <ul style="list-style-type: none"> Chronic Diseases and Injury Prevention, Wellness and Substance Misuse Effective Public Health Practice |
| Education about CFG is embedded in school curriculums to encourage healthy eating at early developmental stages | Education | <ul style="list-style-type: none"> School Health |
| Skill-building opportunities consistent with CFG recommendations allow people to practice food- and eating-related activities | Skill-building/Develop Personal Skills | <ul style="list-style-type: none"> Chronic Diseases and Injury Prevention, Wellness and Substance Misuse Food Safety |
| Community action is strengthened when public health helps to translate the messages of the Food Guide into food standards for public facilities, activities, etc. | Strengthen Community Action | <ul style="list-style-type: none"> Healthy Environments Chronic Diseases and Injury Prevention, Wellness and Substance Misuse Healthy Growth and Development Health Equity Effective Public Health Practice |
| Development and support of policy based on CFG can inform requirements for food provided for residents, including in more vulnerable situations such as boarding and lodging residences | Build Healthy Public Policy | <ul style="list-style-type: none"> Healthy Environments Chronic Diseases and Injury Prevention, Wellness and Substance Misuse Health Equity Effective Public Health Practice School Health |
| Food environments in many different settings can be more supportive of healthy eating when products made available are consistent with the Food Guide | Create Supportive Environments | <ul style="list-style-type: none"> Healthy Environments Chronic Diseases and Injury Prevention, Wellness and Substance Misuse Healthy Growth and |



| Canada's Food Guide Promotion Initiative | Strategy Within Comprehensive Health Promotion | Applicability to Standards |
|--|--|--|
| | | Development <ul style="list-style-type: none"> • Effective Public Health Practice • School Health |
| Identification of priority populations is informed by surveillance and assessment for healthy behaviours based on CFG key messages | Enable/Reduce Health Inequities | <ul style="list-style-type: none"> • Population Health Assessment • Health Equity • Chronic Diseases and Injury Prevention, Wellness and Substance Misuse • Healthy Growth and Development • Effective Public Health Practice |
| Advocacy drawing on CFG principles aims to protect vulnerable youth from being targeted with advertising of unhealthy foods | Advocacy | <ul style="list-style-type: none"> • Healthy Environments • Chronic Diseases and Injury Prevention, Wellness and Substance Misuse • Healthy Growth and Development • Health Equity • Effective Public Health Practice |
| Employing social marketing to provide actionable tips and enhance attitudes about the ease of adoption of CFG | Social Marketing | <ul style="list-style-type: none"> • Effective Public Health Practice • Chronic Diseases and Injury Prevention, Wellness and Substance Misuse • Effective Public Health Practice |
| Using social media such as Twitter and Facebook to promote messages and activities based on CFG | Social Media | <ul style="list-style-type: none"> • Effective Public Health Practice • Chronic Diseases and Injury Prevention, Wellness and Substance Misuse |
| Use of CFG as the standard for planning for communities to feed people and protect food resources during emergencies/natural disasters and for food access to return to pre-disaster levels as quickly as possible | Strengthen Community Action | <ul style="list-style-type: none"> • Emergency Preparedness, Response, and Recovery • Effective Public Health Practice |



Appendix B

Research Needs in Public Health

Food Literacy

- The relevant food literacy attributes needed by different priority populations of interest in the public health context
- The expected outcomes from food literacy programs
- The need for a validated measurement tool to measure food literacy among priority populations

Built and Food Environments

- The effects (positive and negative consequences) of menu labelling legislation
- Whether and how alternate food distribution and retail models would impact access to healthy foods
- The effects of food and beverage product, placement, price, and promotion within food outlets and food service premises
- The effectiveness of population-level interventions to reduce the harmful impacts of commercial advertising targeted to children
- The effectiveness of incentives for health-promoting food retail to locate in under-served/priority neighborhoods, and/or for existing retailers to offer more health-promoting products (e.g., increased shelf space for and easier access to healthier choices)
- The relative effectiveness of increasing the availability of healthy food choices, or decreasing the availability of unhealthy food choices, or of achieving a certain level of proportionality between the two

Health Equity and Nutrition

- The differences in food access based on SDOH factors
- The relationship of energy and nutrient density to food costs, and impact of this on affordability of healthy eating
- The relative effects and effectiveness of subsidies (e.g., government programs and taxation relief, designated funding for institutions/organizations) for health-promoting foods that increase affordability/availability; conversely, the effects and effectiveness of taxation, and also of both together

Healthy Weights

- The relative effectiveness of different community-level interventions to address obesity rates, particularly regarding which would have the most impact balanced with the least cost.
- Whether focusing on changing body weight most improves health outcomes, or if it more impactful to direct interventions towards improving overall health and lifestyle behaviours



Mental Health Research

- The bi-directional connections between nutrition and mental health, including such diverse aspects as weight bias/stigma, disordered eating/thinking, body image, cognitive development and cognitive decline, mindfulness and intentionality, stress and anxiety, etc.

Built Environment and its Impact on Healthy Eating

- The factors in the built environment that make the most substantial impact on the healthfulness of individuals' eating choices.

Capacity

- The knowledge, skills, competencies, and other attributes of, as well as the measurement of adequate and appropriate human resources to most efficiently achieve Public Health's mandate and goals for healthy eating promotion.