Local Food Environment Policy Index: City of Toronto

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Overview

The document was created as part of the Local Food Environment Policy Index (Local Food-EPI) process, an adapted evaluation method developed by the International Network for Food and Obesity/non-communicable diseases Research, Monitoring and Action Support (known as INFORMAS). INFORMAS group was founded by a group of international experts in the area of food and nutrition. The original INFORMAS group included researchers from 9 universities and 4 global NGOs, including Dr. Mary L'Abbé, and this network has since expanded to include dozens of researchers from over 20 countries across the globe. The objective of INFORMAS is to monitor and benchmark food environments and policies globally to reduce obesity, diet-related non-communicable diseases and their related inequalities, and the work aligns with overarching efforts of the United Nations and World Health Organizations to prioritize monitoring on NCDs and associated risk factors to improve population health¹.

The Local Food-EPI Project aims to assess municipal government progress in implementing policy recommendations established by evidence relating to the food environment. Using a standardized, common Food-EPI process², the information on food policies that is compiled in this document will be used by local government stakeholders from the City of Toronto and experts in the areas of food and nutrition to rate the extent of implementation by the City of Toronto compared to 'good practice' statements established for each indicator. This pilot study is also being run in the City of Greater Sudbury and the Region of Peel.

This document summarizes policy actions that the City of Toronto has taken related to the food environment <u>up until January 1, 2018</u>.

Any questions regarding this document can be sent to Kimiya Karbasy (kimiya.karbasy@utoronto.ca).

Acknowledgements

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We would like to extend our sincerest gratitude to the government representatives who have verified the information in this document. Our particular thanks to members of Toronto Public Health for reviewing the document.

As far as possible, when policy details are noted in the document, we have provided references to publiclyavailable sources or noted as a 'written communication' from relevant policy makers. While every effort has been taken to ensure the accuracy of the information in this document, any errors/omissions are the responsibility of the research team.





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LIST OF ABBREVIATIONS

CAI	Children's Advertising Initiative
CCHS	Canadian Community Health Survey
ССО	Cancer Care Ontario
CHMS	Canadian Health Measures Survey
CIHR	Canadian Institutes of Health Research
EDU	Ministry of Education
Food-EPI	Food Environment Policy Index
FPT	Federal, Provincial, and Territorial
GGH	Greater Golden Horseshoe
HDLH	How Does Learning Happen? Ontario's Pedagogy for the Early Years
HEIA	Health Equity Impact Assessment
HIA	Health Impact Assessment
HiAP	Health in All Policies
НКСС	Healthy Kids Community Challenge
HKRC	Healthy Kids Resource Centre
HST	Harmonized Sales Tax
INFORMAS	International Network for Food and Obesity/non-communicable diseases Research,
INFORMAS	International Network for Food and Obesity/non-communicable diseases Research, Monitoring and Action Support
INFORMAS KTE	
	Monitoring and Action Support
KTE	Monitoring and Action Support Knowledge Transfer and Exchange
KTE M2K	Monitoring and Action Support Knowledge Transfer and Exchange Marketing to Kids
KTE M2K MAH	Monitoring and Action Support Knowledge Transfer and Exchange Marketing to Kids Ministry of Municipal Affairs and the Housing
KTE M2K MAH MOHLTC	Monitoring and Action Support Knowledge Transfer and Exchange Marketing to Kids Ministry of Municipal Affairs and the Housing Ministry of Health and Long Term Care
KTE M2K MAH MOHLTC MTCS	Monitoring and Action Support Knowledge Transfer and Exchange Marketing to Kids Ministry of Municipal Affairs and the Housing Ministry of Health and Long Term Care Ministry of Tourism, Sport and Culture
KTE M2K MAH MOHLTC MTCS NCDs	Monitoring and Action Support Knowledge Transfer and Exchange Marketing to Kids Ministry of Municipal Affairs and the Housing Ministry of Health and Long Term Care Ministry of Tourism, Sport and Culture Non Communicable Diseases
KTE M2K MAH MOHLTC MTCS NCDs NGOS	Monitoring and Action Support Knowledge Transfer and Exchange Marketing to Kids Ministry of Municipal Affairs and the Housing Ministry of Health and Long Term Care Ministry of Tourism, Sport and Culture Non Communicable Diseases Non-Government Organizations
KTE M2K MAH MOHLTC MTCS NCDs NGOS NNC	Monitoring and Action Support Knowledge Transfer and Exchange Marketing to Kids Ministry of Municipal Affairs and the Housing Ministry of Health and Long Term Care Ministry of Tourism, Sport and Culture Non Communicable Diseases Non-Government Organizations Nutrition North Canada
KTE M2K MAH MOHLTC MTCS NCDs NGOs NNC NRC	Monitoring and Action Support Knowledge Transfer and Exchange Marketing to Kids Ministry of Municipal Affairs and the Housing Ministry of Health and Long Term Care Ministry of Tourism, Sport and Culture Non Communicable Diseases Non-Government Organizations Nutrition North Canada Nutrition Resource Centre
KTE M2K MAH MOHLTC MTCS NCDs NGOS NNC NRC ODPH	Monitoring and Action Support Knowledge Transfer and Exchange Marketing to Kids Ministry of Municipal Affairs and the Housing Ministry of Health and Long Term Care Ministry of Tourism, Sport and Culture Non Communicable Diseases Non-Government Organizations Nutrition North Canada Nutrition Resource Centre Ontario Dietitians in Public Health
KTE M2K MAH MOHLTC MTCS NCDs NGOS NNC NRC ODPH OHKS	Monitoring and Action Support Knowledge Transfer and Exchange Marketing to Kids Ministry of Municipal Affairs and the Housing Ministry of Municipal Affairs and the Housing Ministry of Tourisal Affairs and the Housing Ministry of Tourism, Sport and Culture Non Communicable Diseases Non-Government Organizations Nutrition North Canada Nutrition Resource Centre Ontario Dietitians in Public Health Ontario Healthy Kids Strategy

OPHS	Ontario Public Health Standards
OSDUHS	Ontario Student Drug Use and Health Survey
POS	Point-Of-Sale
PPM150	Policy Program Memorandum 150
RAC	Residential Apartment Commercial
RRFSS	Rapid Risk Factor Surveillance System
TCDSB	Toronto Catholic District School Board
TCGN	Toronto Community Garden Network
TDSB	Toronto District School Board
TFPC	Toronto Food Policy Council
ТРН	Toronto Public Health
ттс	Toronto Transit Commission
TTS	Toronto Shelter Standards
UL	Upper Limit

Policy area: Food Composition

Local Food-EPI vision statement: There are government systems implemented to ensure that out-of-home meals foods minimize the energy density and the nutrients of concern (salt, saturated fat, trans fat, and added sugar)

Local Food-EF Food composi	Pl good practice statement ition targets/standards/restrictions for <u>out-of-home meals in food service outlets</u> have been y the government for nutrients of concern in certain foods or food groups (trans fats, saturated fat, ed sugars)
Definitions and scope	 Out-of-home meals include foods sold at quick service restaurants, dine-in restaurants and take-away outlets, coffee, bakery and snack food outlets (both fixed outlets and mobile food vendors). It may also include supermarkets where ready-to-eat foods are sold. Includes legislated bans on nutrients of concern Includes mandatory or voluntary targets, standards (i.e. reduce by X%, maximum mg/g per 100g or per serving) Excludes legislated restrictions related to other ingredients (e.g. additives) Excludes mandatory out-of-home meal composition regulations related to other nutrients, e.g. folic acid or iodine fortification Excludes general guidelines advising food service outlets to reduce nutrients of concern Excludes the provision of resources or expertise to support food service outlets with reformulation (see 'COMM1" and/or 'RETAIL4')
Context	Federal context Mandatory Composition targets Partially Hydrogenated Oils On September 15, 2017, through a News Release from Health Canada, Minister of Health, the Honourable Ginette Petitpas Taylor, announced that the Government of Canada will ban partially hydrogenated oils in all foods, including those domestically produced and imported, and prepared and served in restaurants and food service establishments. The federal government has given industry and food outlet establishments 12 months to transition to the new law. The ban will officially come into effect September 18, 2018 ³ . This prohibition will be integrated under the Part 1 of the List of Contaminants and Other
	Adulterating Substances in Foods in the Health Canada website. Voluntary Reformulation/Composition targets Sodium In 2007, Health Canada created a multi stakeholder Sodium Working Group to identify approaches to decrease sodium consumption in Canada. This group developed the Sodium Reduction Strategy for Canada in 2010, which contained 33 recommendations, including 6 overarching recommendations, specific recommendations for the food supply, awareness and education activities, research and monitoring and evaluation, and a proposed structured voluntary sodium reduction strategy ⁴ .
	Since 2010, Health Canada has actively been working on increasing awareness of healthy eating, including specific messaging on sodium, which has included a voluntary approach to sodium reduction. In 2012, Health Canada published <i>Guidance for the Food Industry on Reducing Sodium in Process Foods</i> and <i>Guiding Benchmark Sodium Reduction Levels for Processed Food⁵</i> , with Phase 3 reductions concluding in December, 2016. The targets aim to reduce the sales-weighted average by approximately 25 to 30%, which would result in a reduction of sodium intake by the majority of the population to less than the recommended daily Upper Limit (UL) of 2,300 mg. The guidance is meant to encourage reductions in sodium levels in 94 categories of processed foods in Canada. The food industry was encouraged to work towards these voluntary benchmark levels by the end of 2016.

Health Canada has conducted targeted monitoring and evaluation of industry's progress towards the voluntary sodium reduction targets in 2016⁶, with a full evaluation planned for 2017 and ongoing monitoring and reporting to Canadians as part of the Healthy Eating Strategy. The interim evaluation identified progress towards reducing sodium in 15 priority food categories; however, the results varied across food categories. Overall, 13 of 15 categories decreased sodium levels by at least one-third, and 8 of 15 decreased by at least two-thirds of the expected reduction according to a sales-weighted average by December 31, 2016. Categories with little progress included frozen potatoes (e.g., French Fries) and some packaged deli meats. The report of results stated that the results should be interpreted with caution due to the small sample size⁶. No voluntary sodium reduction targets have been established for out-of-home meals, although Health Canada has held discussions with an expert panel to discuss establishing targets (October, 2016)⁶.

The sodium reduction approach outlined includes 'processed' foods only, and therefore includes: processed foods for consumer use; foods for further manufacturing, such as ingredients for processed foods; and foods for use by restaurants and foodservice in food preparation. Benchmarks were set for prepackaged products, as well as foods destined for foodservice or further processing (i.e. no specific levels set for foods being prepared and served in restaurant and foodservices settings)⁵.

Trans fat

In 2006, the Trans Fat Task Force, a multi-stakeholder group, developed recommendations for reducing *trans* fats in Canada. The Task Force recommended that *trans* fat in vegetable oils and soft, spreadable margarines be limited to 2% of total fat and that *trans* fat in all other foods be limited to 5% of total fat, in order to align with WHO recommendations that *trans* fat intakes be <1% of energy intake.

The 2% and 5% recommendations were adopted by Health Canada in 2007, and voluntary measures were established to encourage industry to reduce this amount within 2 years, with the threat of mandatory reduction if significant progress did not occur.

Findings from Health Canada's *trans* fat monitoring program from 2005 to 2009 of 1120 food samples in 31 food categories demonstrated that 78% of foods met the 2% and 5% targets⁷. More recent research showed that of approximately 10,000 prepackaged and restaurant foods on the Canadian market surveyed, 97% of foods were meeting the *trans* fat limits in 2010-2011⁸.

The recommended *trans* fat targets described apply to foods sold in restaurants and food services. The monitoring program described also includes restaurants, fast food chains, cafeterias, and establishments with ethnic cuisines.

Partially Hydrogenated Oils

On September 15, 2017, through a News Release from Health Canada, Minister of Health, the Honourable Ginette Petitpas Taylor, announced that the Government of Canada will ban partially hydrogenated oils in all foods, including those domestically produced and imported, and prepared and served in restaurants and food service establishments. The federal government has given industry and food outlet establishments 12 months to transition to the new law. The ban will officially come into effect September 18, 2018³.

This prohibition will be integrated under the Part 1 of the <u>List of Contaminants and Other</u> <u>Adulterating Substances in Foods</u> in the Health Canada website.

Healthy Eating Strategy

As part of the **Healthy Eating Strategy**⁹, Health Canada in October 2016 announced that they would include a specific focus on working with restaurants and food services to develop goals for reducing sodium in their food, which would include out-of-home meals

Provincial context

There are no food standards for out-of-home meals at the provincial level in Ontario.

While regulations for out-of-home meals are primarily based at the federal or provincial level, composition targets or standards for restaurants can potentially fit within the mandate of local governments.

Policy details	No polices were identified from the City of Toronto for the nutrients of concern (trans-fat, saturated fat, salt, and added sugars).
Comments/ notes	

Policy area: Food Labelling

Local Food-EPI vision statement: There is a regulatory system implemented by the government for consumer-oriented labelling on menu boards in restaurants to enable consumers to easily make informed food choices

LABEL1 Me	LABEL1 Menu labelling	
A consistent, si fast food chain	good practice statement ingle, simple, clearly-visible system of labelling the menu boards of all quick service restaurants (i.e. s) is applied by the government, which allows consumers to interpret the nutrient quality and energy ds and meals on sale	
Definitions and scope	 Quick service restaurants: In the Canadian context, this definition includes fast food chains as well as coffee, bakery and snack food chains. It may also include supermarkets where ready-to-eat foods are sold. Labelling systems: Includes any point-of-sale (POS) nutrition information such as total kilocalories; percent daily intake; traffic light labelling; star rating, or specific amounts of nutrients of concern Menu board includes menu information at various points of purchase, including in-store, drive-through and online purchasing Includes endorsement schemes (e.g., accredited healthy choice symbol) on approved menu items 	
Context	Federal context There is currently no federal policy on menu labelling in Canada. There is a Federal, Provincial and Territorial (FPT) Task Group on the Provisions of Nutrition Information in Restaurants and Foodservices; however, this group is not currently active and has not released any guidelines or recommendations regarding menu labelling. Provincial context The Government of Ontario passed the <i>Healthy Menu Choices Act</i> , 2015, which became effective by companies on January 1, 2017 ¹⁰ . Menus are defined as paper or electronic menus or menu boards, including drive-through menus, online menus or menu applications, advertisements or promotional flyers. Online menus can be exempted from the regulation if they do not list the price. The regulation requires calorie information to be displayed on menus, labels and tags adjacent to the price in a similar font color and size in all food service premises with 20 or more locations in Ontario. The legislation defines "restaurant-type food or drink item" as "a food or drink item that is either served in a regulated food service premise or processed and prepared primarily in a regulated food service premise, and that is intended for immediate consumption on the premises or elsewhere without further preparation by a consumer before consumption." ¹¹ Types of food service premises included in the regulations: Restaurants (including Quick service restaurants) Convenience stores Gorocery stores Movie theatres Other businesses that prepare meals for immediate consumption (bakeries, food trucks, buffets, ice cream shops, coffee shops, public-facing cafeterias, etc.) The regulation will also require labelling of calorie content of alc	

	A contextual statement is also required on a sign or menu that is visible when customers are ordering or serving themselves. The contextual statement was updated in late 2016 in a Proposed Regulation Amendment, ¹² and will be required to be fully implemented in January, 2018. Prior to January 1, 2018, each menu must contain the following information: "The average adult requires approximately 2,000 to 2,400 calories per day; however, individual calorie needs may vary." or "Adults and youth (ages 13 and older) need an average of 2,000 calories a day, and children (ages 4 to 12) need an average of 1,500 calories a day. However, individual needs vary." and, where the regulated food service premise sells or offers for sale standard food items that are targeted at children, may contain the following information: "The average child aged 4 to 8 years old requires approximately 1,100 to 1,500 calories per day; however, individual calorie needs may vary." As of January 1, 2018, each menu must contain the following information: "Adults and youth (ages 13 and older) need an average of 2,000 calories a day, and children (ages 4 to 12) need an average of 1,500 calories per day, and the average child aged 9 to 13 years old requires approximately 1,100 to 1,500 calories per day; however, individual calorie needs may vary." As of January 1, 2018, each menu must contain the following information: "Adults and youth (ages 13 and older) need an average of 2,000 calories a day, and children (ages 4 to 12) need an average of 1,500 calories a day. However, individual needs vary." The contextual statement must be on every page of the menu, or in a place on the menu that is in close proximity to the standard food items listed on the menu.
Dellas dete "	centres.
Policy details	This indicator will not be evaluated as a result of the provincial legislation described above.
Comments/ notes	Via public health inspectors, public health units are mandated through the Ontario Public Health Standards (OPHS) to monitor and enforce compliance to the Healthy Menu Choices Act, 2015 .

Policy area: Food Promotion

Local Food-EPI vision statement: There is a comprehensive policy implemented by the government to reduce the impact (exposure and power) of promotion of unhealthy foods to children (<16 years)

PROMO1	Restrict promotion of unhealthy food through non-broadcast media
Effective polic foods to childr	I good practice statement ies are implemented by the government to restrict exposure and power of promotion of unhealthy ren across non-broadcast media (e.g. print, outdoors and on/around public transport, cinema rect marketing, product design and packaging or point-of-sale (POS) displays)
Definitions and scope	 Non-broadcast media promotion includes: print (e.g. children's magazines), outdoors and on/around public transport (e.g. signage, posters, billboards, transit shelters, in or on a bus, train, pedicab, or any other vehicle, wall or any other surface or material), direct marketing (e.g. fundraising in schools, provision of show bags, samples or flyers), product design and packaging (e.g. use of celebrities or cartoons, competitions and giveaways) or point-of-sale (POS) displays Where the promotion is specifically in publicly-funded settings, this should be captured in 'PROMO2'
Context	Federal contextHealth Eating StrategyAs part of the Healthy Eating Strategy announced in October 2016, the proposal to restrict the marketing to children is a key initiative under the pillar of Protecting Vulnerable Populations. Public webinars were held February 29 and March 1, 2017 by Health Canada with regards to marketing to children, and experts have been engaged to develop preliminary policy and nutrient profile model (personal communication, April 2017).The Canadian Code of Advertising Standards applies to all forms of advertising, including internet, social media, sponsorship, outdoor advertising, etc., but does not apply to packaging, wrappers and labels or point of sale displays within retail establishments ¹³ . The voluntary Food and Beverage Children's Advertising Initiative (CAI) does restrict promotion of unhealthy foods via Internet advertising, including company-owned websites, video and computer games, DVDs of movies, and mobile media among participants unless voluntarily included in commitments by the
	 Proposed Bill S-228 Senate Bill S-228, the <i>Child Health Protection Act</i> was introduced into the Senate on September 27, 2016. This Act would prohibit marketing of any food to children under 13 years of age, including broadcast advertisements or media.
	Non-governmental context The Stop Marketing to Kids (Stop M2K) Coalition ¹⁴ was established by the Heart and Stroke Foundation and the Childhood Obesity Foundation. " <i>The Stop M2K Coalition is made up of twelve</i> <i>non-governmental organizations with written endorsement from dozens of additional organizations</i> <i>and individuals.</i> " Their goal is, " <i>To restrict all food and beverage marketing to Canadian children</i> <i>age 16 and younger.</i> "
	The Ontario Dietitians in Public Health (ODPH), previously named the Ontario Society of Nutrition Professionals in Public Health, includes a Marketing to Kids adhoc workgroup, which advocates for restrictions on food and beverage marketing to children and youth. The group's mission is to support and promote municipal, provincial and federal action regarding restricting commercial marketing of food and beverages to children and youth in creating supportive food environments to foster lifelong healthy habits ¹⁵ .

Policy details	No policies were identified regarding promotion of unhealthy foods to children through non- broadcast media.
Comments/ notes	In 2010, the Board of Health recommended to the Toronto Transit Commission (TTC) and the City of Toronto Public Realm Section, Transportation Services restrict the advertising of food and beverages targeted to children under 13 years of age. Although no explicit policies came about after Board of Health's <u>recommendation</u> , their report did state that TPH was not able to identify any consistent advertising to children on property owned by the TTC or the City's Street Furniture program.

PROMO2 F	Restrict promotion of unhealthy foods in public sector settings
Effective polici	good practice statement es are implemented by the government to ensure that unhealthy foods are not commercially hildren in public sector settings
Definitions and scope	 Public sector settings include: Local government-funded or managed services where the government is responsible for the provision of food, including public hospitals and other in-patient health services (acute and sub-acute, including mental health services), schools, child care centers, recreation centers, residential care homes, aged and disability care settings, correctional facilities, custodial care facilities, and home/community care services Local government-owned, funded or managed services where the general public purchase foods including health services, parks, sporting and leisure facilities, community events etc. Public sector workplaces Includes restrictions on marketing in government-owned or managed facilities/venues (including within the service contracts where management is outsourced) Includes online (e.g. social media, branded education websites, online games, competitions and apps identified by the city government) Includes restriction on unhealthy food sponsorship in sport (e.g. junior sport, sporting events, venues)
Context	
Policy details	In December 2012, Toronto Public Library implemented a policy surrounding advertising, specifically on publications, websites, video screens, trucks and other spaces identified by the Library. It includes restrictions on "… <i>Commercial advertising primarily targeted to children, including but not limited to the commercial advertising of food and beverages directed to children.</i> " Note that this policy does not include sponsorships ¹⁶ .
Comments/ notes	

Policy area: Food Prices

Local Food-EPI vision statement: Food pricing policies (e.g. taxes and subsidies) are aligned with health outcomes by helping to make healthy eating choices the less expensive choices

PRICES1 In	crease taxes on unhealthy foods
Taxes or levies to increase the	good practice statement on unhealthy foods (e.g. sugar-sweetened beverages, foods high in nutrients of concern) are in place retail prices of these foods and discourage unhealthy food choices where possible, and these taxes to improve population health
Definitions and scope	 Includes differential application of excise tax on high calorie foods or foods that are high in nutrients of concern Note that the percentage of tax is dependent on State/Provincial or Federal regulations
Context	 National context Taxes on products in Canada are governed by the Excise Tax Act and its regulations, which are also typically applied to food products. Although there have been proposals and recommendations for taxation of sugar-sweetened beverages from both government and nongovernmental organization (e.g., Canadian Cancer Society, Heart and Stroke Foundation of Canada, Diabetes Canada, and Dietitians of Canada), there are currently no federally or provincially-imposed taxes or levies on unhealthy foods or nutrients of concern. Municipal context Under the Municipal Act, 2001, municipalities in Ontario have access to two primary sources of own source revenue - property taxation, and fees/charges. The only sales tax municipalities are given authority to levy is the transient accommodation tax¹⁷. In addition to these tools, the City of Toronto has broad authority under the City of Toronto Act, 2006 to implement a variety of municipal taxes, subject to limitations, such as: No tax on personal or corporate income; No tax on gas; and No sales tax, except for taxes on the sale of entertainment, alcohol, tobacco or transient accommodation. Under existing legislation, municipalities may not impose a sales tax on non-alcoholic beverages. Carbonated and/or sweetened beverages are subject to 13% harmonized sales tax (HST) in Ontario.
Policy details	This indicator will not be evaluated as a result of the provincial legislation (<i>Municipal Act, 2001</i>) described above.
Comments/ notes	

PRICES2 Existing food subsidies and food-related income supports favour healthy foods

	Pl good practice statement ent ensures that subsidies and food-related income support programs are for healthy foods
Definitions and scope	 Includes agricultural input subsidies, such as free or subsidized costs for water, fertilizer, seeds, electricity or transport (e.g., freight) where those subsidies specifically target healthy foods Includes programs that ensure that farmers receive a certain price for their produce to encourage increased food production or business viability Includes grants or funding support for food producers (i.e. farmers, food manufacturers) to encourage innovation via research and development where that funding scheme specifically targets healthy food Includes funding support for wholesale market systems that support the supply of healthy foods Includes population level food subsidies at the consumer end (e.g. subsidizing staples such as rice or bread) Includes programs such as 'food stamps' or other schemes where individuals can utilize government-administered subsidies, vouchers, tokens or discounts in retail settings for specific food purchasing Excludes general programs that seek to address food insecurity such as government support for, or partnerships with, organizations that provide free or subsidized meals (including school breakfast programs) or food parcels or redistribute second grade produce for this purpose Excludes incentives for the establishment of, or ongoing support for retail outlets (including greengrocers, farmer's markets, food co-ops, etc. See 'RETAIL1')
	 Excludes subsidized training, courses or other forms of education for food producers
	 Excludes subsidized training, courses of other forms of education for food producers Excludes the redistribution of excess or second grade produce
	 Population nutrition goals related to the prevention of obesity and diet-related NCDs (e.g.,
	reducing intake of nutrients of concern, not related to micronutrient deficiencies)
Context	Federal context The federal Nutrition North Canada (NNC) program was established in 2011 to provide increased food access to isolated Northern communities in Canada. Registered retailers in the North, country food processors/distributors located in eligible communities, and food suppliers in the South who supply small retailers, institutions and individuals in these eligible isolated communities, can apply for a subsidy based on the weight of eligible foods shipped by air to eligible northern communities. These subsidies are to be passed on to northern consumers by appropriate reductions in the selling prices of eligible foods. There are 27 NNC-eligible communities in Ontario.
	In Canada, social assistance is administered at the provincial/territorial level, and there are no national income support programs specific to food-related support.
	 Provincial context In 2014 a Food Donation Tax Credit for Farmers¹⁸ was developed by the Ministry of Agriculture, Food and Rural Affairs (OMAFRA), as part of the Local Food Act, 2013¹⁹. The program gives farmers a tax credit valued at 25% of the fair market value of agriculture products that they donate to community food programs such as food banks or student nutrition programs. Eligible products include: Fruits and vegetables Eggs and dairy Meat and fish Grains and pulses
	 Grains and purses Herbs Honey and maple syrup Mushrooms Nuts or anything else that is grown, raised or harvested on a farm and that may, in Ontario, legally be sold, distributed or offered for sale at a place other than the premises of its producer as food are all
	eligible. (Processed products, including pickles, preserves and sausages are not eligible).

Policy details	The City of Toronto supports FoodShare Toronto , which provides the Good Food Box program, a subsidized fresh fruits and vegetables distribution program. Residents are able to order weekly Good Food Boxes online and pick it up at their nearest community drop off point. The Toronto Food Strategy Team worked with community partners to develop <u>FoodReach</u> , which was designed with the intent to support community organizations which have limited budget and access to healthy food. It is an online portal which provides healthy and fresh produce at wholesale prices, with free next day delivery. In addition, the organization offers educational and training supports to members. There are 260 registered members and 70 daily orders on a regular basis as of 2017 ²⁰ .
	lower-income residents in the city. Members of the pilot were able to shop for more affordable healthy food items ²⁰ .
Comments/ notes	Established in 1985, FoodShare Toronto ²¹ is a non-profit organization geared towards helping communities and schools in the city have access to healthy, fresh and nutritious foods. The organization works with the City of Toronto on initiatives such as the Toronto student nutrition programs and Mobile Good Food Market. Other programs include student nutrition program education workshops, resources to establish community gardens, increasing access to fresh produce to low-income neighbourhoods.

Policy area: Food Provision

Local Food-EPI vision statement: The government ensures that there are healthy food service policies implemented in publicly-funded settings to ensure that food provision encourages healthy food choices, and the government actively encourages and supports private companies to implement similar policies

PROV1 Po	licies in public settings promote healthy food choices	
The governme (canteens, foo	Local Food-EPI good practice statement The government ensures that there are clear, consistent policies in public sector settings for food service activities (canteens, food at events, fundraising, promotions, vending machines, water availability, public procurement standards etc.) to provide and promote healthy food choices	
Definitions and scope	 Public sector settings as defined in 'PROMO2' Includes private businesses that are under contract by the government to provide food Excludes 'public settings' such as train stations, venues, facilities or events that are not funded or managed by the local government (see 'RETAIL4') Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices, going above and beyond policy and standards placed by State/Provincial or Federal government (i.e., school food and beverage standards) Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognized healthy symbol) Includes modifying ingredients to make foods and drinks healthier, or changing the menu to offer healthier options 	
Context	In Canada, education is largely decentralized to the provinces and territories, and there is no federal Department of Education. Therefore, setting nutrition standards in schools currently falls largely on provincial/territorial governments, and Ministries of Education and/or Ministries of Health (or equivalent) in each province are responsible for developing criteria for nutritional standards in schools. National Context In 2013, the Federal/Provincial/Territorial Nutrition Working Group on Improving the Consistency of School Food and Beverage Criteria created a technical document, the Provincial and Territorial Guidance Document for the Development of Nutrient Criteria for Foods and Beverages in Schools 2013, to guide and support provinces as they create and revise policies or guidelines ²² . Provincial context Schools: In 2010, the government of Ontario created Policy Program Memorandum 150 (PPM 150) Ontario School Food and Beverage Policy ^{23, 24} . This incorporates 3 categories: Sell Most (80%), Sell Less (20%) and Not Permitted for Sale. Criteria are based on food group servings or characteristics (i.e., fruit and vegetable is the first ingredient, or whole grains are used) as well as fat, saturated fat, sodium, sugar, fibre, calcium, protein, as well as serving size, and this varies between food groups and types. The nutrition standards apply to all foods and beverage sold in all venues, through all programs, and at all events. There are 10 days for which the school principal may designate an exemption to the policy.	
	Since 2008, the Government of Ontario has enacted the <u>Healthy Food for Healthy Schools Act</u> ²⁵ amended the Education Act to introduce a <u>Trans Fat Regulation</u> which bans the sale of food that contain levels of trans fat greater than the nutrition standards (5% of total fat content for all foods beverages or ingredients other than vegetable oils or soft, spreadable margarine, and 2% of total fat content for vegetable oil or soft, spreadable margarine. ²⁶	

School Feeding Programs:

The Government of Ontario supports voluntary **Student Nutrition Programs**^{27, 28} that are delivered locally and supported by 14 lead agencies through the Ministry of Child and Youth Services. The Ontario Student Nutrition Program reached nearly 850,000 school-aged children and youth during the 2014/2015 year. This includes programs that are being expanded or enhanced in over 120 program sites in 63 First Nation communities.

In 2016, <u>the Ministry of Children and Youth Services contracted the Ontario Public Health</u> <u>Association, with expertise from the Nutrition Resource Centre and in collaboration with the</u> <u>Ontario Dietitians in Public Health</u>, to update the *Student Nutrition Program Guidelines 2016* for school food programs²⁹. The guidelines are grounded in the guiding principle that programs strive to provide the most healthful foods possible to children and youth participating in the program by meeting evidence-based recommendations, including:

- Serve vegetables and/or fruit with every meal and/or snack
- A meal contains one serving from 3 out of the four good groups and must include at least one serving of vegetables and fruit and one serving of milk and alternatives
- Snacks must contain on serving of 2 out of 4 food groups

An overview of the definitions of foods to serve and not to serve and tables of foods to serve and not to serve for each food group are provided. The Ministry of Children and Youth Services strongly encourages the programs to use the nutrition guidelines, but there is no mandate that the programs must follow the guidelines (e.g., program funds are not dependent on compliance).

Fresh from the Farm

Fresh from the Farm is a partnership between the Dietitians of Canada, the Ontario Fruit and Vegetable Growers' Association, Ministry of Education (EDU), and OMAFRA. Fresh from the Farm provides schools the opportunity to raise funds by selling Ontario fruit and vegetables to the community, while supporting Ontario's economy. Since 2013, 665 schools have participated in Fresh from the Farm selling almost \$1.7million of local produce to Ontario families representing over 1.6 million pounds (lbs) Ontario apples, carrots, onions, potatoes, and sweet potatoes! From this total, over \$868,000 has been returned to Ontario growers, and over \$626,000 has been retained by Ontario schools. Fresh from the Farm has sold 38,863 bundles of apples, and 97,224 bundles of root vegetables. Based on Canada Food Guide Servings, this translates into almost 9 million individual servings of Ontario fruit and vegetables to Ontario families³⁰. Note that these foods are sold as part of a fundraiser and foods are purchased by families but not consumed at school.

Ontario After-School program

The **Ontario After-School program** is supported by the Ministry of Tourism, Culture and Sport (MTCS). Organizations funded to deliver the Ontario After School Program must dedicate 20% of programming time to healthy food choices and nutrition education (including the provision of a healthy snack). The **Ontario After School Program Guidelines**, which all funded organizations receive, provide direction on the delivery of the healthy snack component of the program, including the following language:

"All food should meet Canada's Food Guide to Healthy Eating or Eating Well with Canada's Food Guide – First Nations, Inuit and Métis."

The program is an inter-ministerial collaboration with the Ministries of Tourism, Culture and Sport; Education; Child and Youth Services; OMAFRA; Aboriginal Affairs and Citizenship and Immigration, and collaborates with a number of non-profit organizations throughout the province^{31, 32}.

Early Childhood Education:

According to the *Child Care and Early Years Act 2014*: All meals, snacks and beverages must meet the recommendations set out in the Health Canada documents "Canada's Food Guide", "Canada's Food Guide – First Nations, Inuit and Métis" or "Nutrition for Healthy Term Infants", amended from time to time, as the case may be¹⁰. The updated regulations for CCEYA 2014 are being rolled out in phases and include revision of regulations around nutrition and food safety in childcare settings.) EDU has collaborated with ODPH to develop healthy eating <u>guidelines</u> (Menu Planning and Supportive Nutrition Environments in Child Care Settings – Practical Guide) for childcare providers which would support the providers in planning healthy food and beverage menu options for childcare settings.

	 <u>Procurement standards:</u> According to Bill 36 – <i>Local Food Act, 2013¹⁹</i>, the Minister must set goals and targets in the following areas: Improving food literacy in respect of local food
	 Improving food interacy in respect of local food Encouraging increased use of local food by public sector organizations Increasing access to local food
	This Bill does not include any provisions with respect to the healthfulness of foods included in this bill, but rather the geographical location of production.
	The Government of Ontario considers environmental factors in all contracts worth more than \$10,000; however, there is no provision for health. The Government of Ontario has introduced a <i>Local Food Procurement Policy</i> that requires ministries and agencies to consider purchasing local food for purchases over \$25,000. This does not include any provisions for the healthiness of food items.
	<u>Recreation Centers</u> : The Government of Ontario does not have any nutrition standards or programs for recreation centres.
	<u>Other:</u> Greenbelt fund
	The Greenbelt fund has supported initiatives around procurement – through the Ontario Ministry of Agriculture and Food Broader Public Sector Grant Stream. The Broader Public Sector Grant Stream focuses on increasing the amount of Ontario food purchased by public institutions. Its goals are:
	 To increase the amount of Ontario food products purchased by Ontario's broader public sector, specifically municipal, colleges, university, school boards, and hospital foodservices.
	 To enhance the capacity of the agri-food sector (farms, processors, distributors, and others) to access the broader public sector foodservice industry to highlight the availability and increase the purchases of local products.
	From 2010-2015, the government invested \$8.6 million through the Greenbelt Fund to support 111 projects across Ontario. These investments are linking more farmers to new markets and putting more Ontario food in daycares, schools, universities, colleges and restaurants. These efforts have resulted in over \$110 million of additional local food purchases - or a 13-to-one return for every dollar invested. Building on this success, the province allocated another \$6 million over three years (2015-2018) to the Greenbelt Fund to continue to deliver programming, including the new Local Food Investment Fund. To date, more than \$3 million has been allocated to 56 projects to further local food literacy, access to local food, and local food purchases by broader public sector organizations. For a list of all grants made, visit: http://www.greenbeltfund.ca/grants .
	angunzations. For a list of all grants made, visit. <u>http://www.greenbertrand.ca/grants</u> .
Policy details	School Feeding Programs: Since 1998, Toronto Student Nutrition Program ^{27, 28} grants, which are funded by the City of Toronto and Ontario Ministry of Child and Youth Services, are offered to all schools in Toronto. The program is run by Student Nutrition Ontario – Toronto, a partnership between Ontario Ministry of Child and Youth Services, Toronto Public Health (TPH), Toronto District School Board (TDSB), Toronto Catholic District School Board (TCDSB), Toronto Foundation for Student Success, Angel Foundation for Learning, and FoodShare Toronto. TPH manages the application process, provides support to programs through visits from Registered Dietitians to help programs follow the <u>Toronto</u>
	Student Nutrition Program Guidelines 2016, adapted from the guidelines set by the province of Ontario, and TPH Public Health Inspectors ensure that programs are following food safety practices. In addition, Student Nutrition Ontario – Toronto provides training and ongoing support for monthly financial reporting and fundraising, and free workshops on food safety, nutrition, and skill development. According to the official program website, more than 190,000 children and teens participate in the program everyday across Toronto.
	Procurement standards:

	In 2011, the City of Toronto adopted the <i>Local Food Procurement Policy</i> ³³ to reduce greenhouse gas emissions and support local food producers and processors. Under the policy, Request for
	Proposals and Request for Quotations for city division food purchases that exceed \$3000 must
	include at least 51% of all food products to be grown in Ontario, and 80% of all processing costs to
	be returned to the province.
	Recreation Facilities: In April 2011, the City of Toronto adopted the following motions ³⁴ recommended by the city's
	Parks, Forest and Recreation:
	1. City Council request the General Manager of Parks, Forestry and Recreation to issue a Request for Proposal for a five-year term for the purpose of entering into a license agreement for the operation of beverage services for cold drink vending machines and pouring within Parks and Recreation facility locations.
	 City Council direct that the criteria for cold drink vending sales and distributions be limited to 50 percent healthy vending.
	3. City Council request the Medical Officer of Health to periodically review and report to the Board of Health on the content of the 50 percent healthy criteria.
	4. City Council request the General Manager, Parks, Forestry and Recreation to ensure there is an abundant supply of drinking water available in all recreation centres and arenas prior to its proposed elimination from vending machines in December 2011.
	<u>Communities:</u> Toronto Shelter Standards ³⁵ (TSS) include the following criteria for City-run shelters, drop-in
	programs, and for rooming houses under Food, Diet, and Nutrition:
	a) Offer clients safe and nutritious food to meet their dietary needs
	b) Refer clients, particularly pregnant, breast feeding and elderly clients, to food and nutrition supports (e.g., prenatal program, community kitchen, etc.) to supplement their diet, if necessary
	 Ensure meals and snacks are of a size, quality, variety and nutritional value to meet the recommended guidelines of Canada's Food Guide (see Appendix D: Links to References and Resources)
	 d) Avoid serving food with poor nutritional value (e.g., foods high in processed sugar, fat and salt) e) Not use food or the withholding of food to influence behaviour (either as reward or punishment)
	f) Consult with a registered dietitian, on an annual basis or more frequently as needed, for support in menu planning, training and other food services, and other food security and nutrition-related supports
	g) Post in a conspicuous place in or near the dining area of each shelter a copy of TSS section 10.8 Food, Diet and Nutrition, a current copy of Canada's Food Guide, a daily menu that will list potential allergens (e.g., peanuts, nuts, eggs and shellfish) in the listed menu items (where possible) and a notice stating that shelters cannot guarantee allergen- free food.
	Under their Meal Programs, it states: Adult and youth clients will be offered three (3) meals and a minimum of one (1) healthy snack per day.
	Children must be served three (3) meals and two (2) to three (3) healthy snacks per day. Shelter providers must be able to provide food to a client outside of a shelter's regularly scheduled meal times.
	Shelters providers will ensure that a mechanism is available that allows clients to provide input and feedback (e.g., residents' meetings and surveys) and to incorporate this feedback into menu planning whenever possible.
	Public Sector Workplaces: The City of Toronto has their own internal policies around food/nutrition (written communication, March 2018).
Comments/	
notes	

PROV2 Sup	oport and training systems (public sector settings)
The governme	I good practice statement ent ensures that there are good support and training systems to help schools and other public sector and their caterers meet the healthy food service policies and guidelines
Definitions and scope	 Includes support for early childhood education services Public sector organizations include settings defined in 'PROMO2' Support and training systems include guidelines, toolkits, templates (e.g. policy/guidelines or contracts), recipes and menu planning tools, expert advice, menu and product assessments, online training modules, cook/caterer/other food service staff information and training workshops or courses
Context	 Provincial context <u>Schools:</u> The Government of Ontario provides a number of tools to support implementation of PPM 150 on its website, including a Quick Reference Guide³⁶ (2010) for nutritional criteria for each of the food categories, and a number of resource guides for elementary and secondary school teachers: Ontario School Food and Beverage Resource Guide³⁷ (2010) was created with the intentions of being used as a portable resource for purchasing food and beverages to offer for sale in schools. Resource has foods fit into one of three criteria: sell most, sell less, not permitted for sale and is based on their nutrient, salt, and fat composition. Teacher Resource Guides have been developed for elementary and secondary school teachers to support implementation³⁸. Serve It Up! Recipes that Meet the School Food and Beverage Policy Nutrition Standards for Ontario School (2013) incorporates Canada's Food Guide, Trans Fat Standards Regulation and School Food and Beverage Policy to provide recipes commonly used in school settings [PDF only]³⁹. On-line modules for School board staff, principals and vice-principals, and individuals who sell food, as well as a specific module for elementary school teachers and a quiz module for secondary school teachers⁴⁰. The Ministry has created several interactive online tools, including the Online Nutrition Standards tool⁴¹, and the Online Creating a Healthy Menu⁴² tool to help with menu planning and establishing whether or not food items meet the nutritional criteria. The Nutrition Resource Centre at Ontario Public Health Association, supports knowledge transfer and exchange around provincial legislation, including the developmen
	 In addition to ensuring healthy food choices are available, the Government of Ontario also supports early-years programs in creating positive eating environments to foster children's overall well-being. How Does Learning Happen? Ontario's Pedagogy for the Early Years, 2014⁴⁴ (HDLH) is the provincial framework to guide programming and pedagogy in licensed child care and child and family programs. A child's well-being is one of the four foundational pillars for HDLH, intended to provide every child the opportunity to develop a sense of self, health and well-being. Outlined in HDLH are a variety of ways in which early-years programs can have a positive influence on child health and well-being, such as by: Providing nutritious foods that incorporate family and cultural preferences; Creating positive eating environments with foods and portion sizes that are responsive to children's cues of hunger and fullness; Increasing children's physical activity and decreasing the amount of time spent in sedentary activities;

F	
	 Respecting and finding ways to support each child's varied physiological and biological rhythms and needs for active play, rest, and quiet time.
	Communities
	<u>Communities:</u> The Government of Ontario endorsed the Healthy Kids Community Challenge (HKCC), which includes 45 communities across Ontario to receive resources from the province to encourage healthy eating, physical activity and healthy behaviours for children ⁴⁵ . The HKCC is part of the Healthy Kids Strategy. The second theme of the HKCC was 'Water does Wonders' to encourage water consumption in place of sugary beverages.
	SUPPORT ORGANIZATIONS The Nutrition Resource Centre (NRC) is funded by the Ministry of Health and Long-Term Care, and has operated under the Ontario Public Health Association (OPHA) since 1999. They are one of 14 health promotion resource centres operating in Ontario. The NRC provides support in Ontario for training and systems in the public sector around healthy eating and nutrition promotion.
	NRC's mission is "to strengthen the capacity of health promotion professionals and community partners involved in healthy eating and nutrition across the health continuum. Through networking and collaboration, the NRC is fostering knowledge transfer and exchange (KTE) and building a centre of excellence in evidence-based resources and tools that will support program and policy development throughout Ontario."
	NRC provide capacity building, training and supports to health promotion and public health to support policy both at the local level and provincial policy in Ontario (e.g., menu labelling, PPM 150 etc.) NRC also supports policy development, implementation and evaluation in collaboration with a number of partners across Ontario. For example, through OPHA, and in partnership with DC and OSNPPH, NRC has provided technical advice/consultation to Ontario Ministry of Health and Long Term Care (MOHLTC) regarding the menu labelling (Bill 45) regulations and also supported the MOHLTC to coordinate a training webinar with public health sector staff to support implementation of the legislation. NRC has also hosted a series to support capacity building among health intermediaries to make changes in the food environment, including webinars, workshops and a provincial forum on the food environment.
	Additionally, NRC is one of four resource centres that comprise a collaborative called the "Healthy Kids Resource Centre" (HKRC). The HKRC is tasked, by the MOHLTC, specifically to support and build capacity among the local project managers (and their team) in the 45 HKCC communities to plan, implement and evaluate their theme-based activities/interventions throughout the HKCC.
	Note that NRC no longer receives funding from MOHLTC as of January 2018.
Policy details	Early Childhood Education
	Early Childhood Education: Toronto Children's Services provides Nutrition Guidelines (Early Learning and Care Assessment for Quality Improvement) ⁴⁶ for early childcare centres as a to ensure that Child Care and Early Years Act 2014 standards are met. The guideline includes 7 sections: meal/menu planning, centre meal requirements, snack planning and requirements, menu and/or snack adaptations, food substitutions, preparation, handling and transportation of food, and health and safety kitchen and/or food preparation area. Each section includes standards listed in a table divided up into 3 columns: Does Not Meet Expectations (1 point); Meet Expectations (2 points); Exceeds Expectations (3 points), followed by a column to list the total score.
	In addition to the above guidelines, Toronto Children's Services provides Nutrition Guidelines (Home Child Care Assessment for Quality Improvement) ⁴⁷ . In similar format, the guideline includes 4 sections: meal/menu planning, food substitutions and restrictions, food preparation and handling, and health and safety.
	<u>School Feeding Programs:</u> Student Nutrition Ontario – Toronto provides numerous types of support to Toronto Student Nutrition Programs, as outlined in PROV1.
	<u>Communities:</u>

	The City of Toronto oversees 4 agencies that were selected to deliver HKCC across Toronto including Rexdale, Humber-Downsview, Central Scarborough, and Danforth-East York.
Comments/ notes	

Local Food-EP	I good practice statement
Government actively encourages and supports private companies to provide and promote healthy foods and meal n their workplaces	
Definitions and scope	 For the purpose of this indicator, 'private companies' includes for-profit companies and extends to non-government organizations (NGOs) including not-for-profit/charitable organizations, community-controlled organizations, etc. Includes healthy catering policies, fundraising, events Includes support and training systems including guidelines, toolkits, templates (e.g. policy/guidelines or contracts), recipes and menu planning tools, expert advice, menu and product assessments, online training modules, cook/caterer/other food service staff information and training workshops or courses (where relevant to the provision of food in a workplace) Excludes the provision or promotion of food to people not employed by that organization (e.g. visitors or customers) Excludes support for organizations to provide staff education on healthy foods
Context	Provincial context Non-governmental and not-for-profit organization, Ontario Dietitians in Public Health (ODPH), formerly Ontario Society of Nutrition Professionals in Public Health, has developed a Workplace Nutrition Advisory Workgroup and a <u>Creating a Healthy Workplace Nutrition Environment Toolkit</u> to provide resources for workplaces to develop and implement strategies to support healthy eating at work. This group is not funded by or affiliated with the Ontario government.
Policy details	 The City of Toronto website provides support on various workplace health topics, including <u>Healthy</u> Eating. Under this topic, the following tips are offered to employers: Create a bulletin board in a high traffic area and post information and posters on various nutrition topics Offer lunch and learns that contain a skill building component such as label reading, planning meals for the week, and food budgeting Improve the nutritional quality of food offered in cafeterias, cafes, vending machines, during meetings, and celebrations Conduct a health needs and interest assessment to determine the health priorities of employees Develop a written nutrition policy that supports a physical and social healthy eating environment Provide adequate time and space to eat, and facilities to allow employees to store and prepare their own food External resources are linked on the website such as <i>Eating Well with Canada's Food Guide</i> and ODPH's <i>Creating a Healthy Workplace Nutrition Environment Toolkit</i>, with the following 10 sections: Management Support Committee Approach Food Offered in the Workplace Education Education Education Education Education Edugiment
	 Meal Breaks Food Sold in the Workplace Workplace Policy

Comments/	Comments/
notes	notes

Policy area: Food Retail

Local Food-EPI vision statement: The government has the power to implement policies and programs to support the availability of healthy foods and limit the availability of unhealthy foods in communities (outlet density and locations) and instore (product placement)

RETAIL1 R	obust government policies and zoning laws (unhealthy foods)	
The local gove selling mainly	Local Food-EPI good practice statement The local government has placed limits on the density or placement of quick serve restaurants or other outlets selling mainly unhealthy foods in communities by making community health and wellbeing an enforceable objective of the planning system	
Definitions and scope	 Includes the policies, priorities and objectives to be implemented at the local government level through their planning schemes, under the consideration of the State/Province Includes the consideration of public health in local government subordinate planning instruments and policies Includes a local government guideline that sets the policy objective of considering public health when reviewing and approving fast food planning applications 	
Context	National context In Canada, planning and zoning laws are typically administered at the provincial or local level. Although this varies between provinces, provincial or territorial governments typically set overarching zoning legislation, and local governments are responsible for creating, implementing and enforcing municipal policies that are in line with the provincial mandates.	
	Provincial context Local governments in the province of Ontario have to follow general policies consistent with the Provincial Policy Statement issued under the <i>Planning Act</i> ⁴⁸ . The <i>Provincial Policy Statement</i> under Section 3 of the Planning Act several statements relating to public health, i.e., section 1.1.1c discusses 'avoiding development and land use patterns which may cause environmental or public health safety concerns' and section 4.4 states that "In implementing the Provincial Policy Statement, the Minister of Municipal Affairs and Housing may take into account other considerations when making decisions to support strong communities, a clean and healthy environment and the economic vitality of the Province"; however, the statement does not contain any special provisions for zoning relating to food or nutrition ⁴⁹ .	
	The Ministry of Municipal Affairs and the Housing (MAH) began a <u>co-ordinated land use planning</u> <u>review</u> of the following plans in February 2015: Growth Plan for the Greater Golden Horseshoe (GGH), 2006, Greenbelt Plan, 2005, Oak Ridges Moraine Conservation Plan, 2002 and the Niagara Escarpment Plan, 2005. The final plans came into effect on July 1, 2017. Public Health Registered Dietitians and Nutritionists from Niagara, Halton, Hamilton, Peterborough and submitted <u>recommendations</u> to the Ministry of Municipal Affairs and Housing through ODPH. The final plans include increased reference to healthy, local food and preservation of agriculture. They also include, to a lesser extent, reference to urban agriculture and food systems planning. While Complete Communities include "access to healthy food" in some parts of the document, this is not consistent throughout. Recommendations put forth by the ODPH that were not reflected in the final plans include comments related to health assessments, health indicators, multi-modal access to food, consideration to food deserts and swamps and adding certain definitions.	
	Municipal context In the 2015 Toronto Food Strategy update ⁵⁰ , TPH mapped the food retail environment to identify the types of food stores, availability of healthy food in stores, its affordability, and variety of foods available to meet cultural preferences relative to residential areas in the city to help guide Food Strategy initiatives. Results indicate that there almost 31,000 households in low-income areas that are more than 1km away to the closest supermarket and many low-income areas are dominated by stores with unhealthy food.	

Policy details	 In May 2005, Toronto Urban Development Services released Urban Design Guidelines For Sites with Drive-Through Facilities⁵¹. The document states that, "[z]oning By'laws throughout the City of Toronto prohibit development of drive-through facilities: In residential or mixed-use zones containing residential permissions; In designated Centres of North York, Scarborough, Etobicoke, Yonge/Eglington and the Downtown of the former City of Toronto."
	However, drive-through facilities are permitted in industrial and commercial zones. Note that public health was not the intent behind this regulation, but rather the, "beautification and enhancement and creation of a comfortable, safe and vital pedestrian environment which encourages walking and transit use, as well as specific built form policies as they relate to drive-through uses."
	The City of Toronto permits Ice cream trucks to operate at least 30 meters from a school, and food carts at least 30 meters from a place of worship or the property line of a school.
Comments/ notes	

RETAIL2 Robust government policies and zoning laws (healthy foods)

	I good practice statement
-	nd related policies provide robust mechanisms are being used, where needed, by local governments the availability of outlets selling fresh fruit and vegetables, with a special focus on low-income ds
Definitions and scope	 Outlets include supermarkets, produce markets, farmers' markets, greengrocers, food co-operatives Includes fixed or mobile outlets Includes community gardens, edible urban or backyard gardens Includes municipal policies to streamline and standardise planning approval processes or reduce regulatory burdens for these outlets Includes the provision of financial grants or subsidies to outlets and organizations Excludes the provision of financial grants or subsidies to outlets and organizations, where the financial support was offered by the State/Provincial government or Federal government Excludes general guidelines on how to establish and promote certain outlets
Context	National context In Canada, planning or zoning laws are typically administered at the provincial or local level. Although this varies between provinces, provincial or territorial governments typically set overarching zoning legislation, and local governments are responsible for creating, implementing and enforcing municipal policies that are in line with the provincial mandates.
	Provincial context Local governments in the province of Ontario have to follow general policies consistent with the Provincial Policy Statement issued under the <i>Planning Act</i> ⁴⁸ . The <i>Provincial Policy Statement</i> under Section 3 of the Planning Act contains several statements relating to public health. As examples, section 1.1.1c discusses 'avoiding development and land use patterns which may cause environmental or public health safety concerns' and section 4.4 states that "In implementing the Provincial Policy Statement, the Minister of Municipal Affairs and Housing may take into account other considerations when making decisions to support strong communities, a clean and healthy environment and the economic vitality of the Province"; however, the statement does not contain any special provisions for zoning relating to food or nutrition ⁴⁹ .
	The MAH began a <u>co-ordinated land use planning review</u> of the following plans in February 2015: Growth for the GGH, 2006, Greenbelt Plan, 2005, Oak Ridges Moraine Conservation Plan, 2002 and the Niagara Escarpment Plan, 2005. The final plans came into effect on July 1, 2017. Public Health Registered Dietitians and Nutritionists from Niagara, Halton, Hamilton, Peterborough and submitted <u>recommendations</u> to the Ministry of Municipal Affairs and Housing through ODPH. The final plans include increased reference to healthy, local food and preservation of agriculture. They also include, to a lesser extent, reference to urban agriculture and food systems planning. While Complete Communities include "access to healthy food" in some parts of the document, this is not consistent throughout. Recommendations put forth by the ODPH that were not reflected in the final plans include comments related to health assessments, health indicators, multi-modal access to food, consideration to food deserts and swamps and adding certain definitions.
	Municipal context In the 2015 Toronto Food Strategy update ⁵⁰ , TPH mapped the food retail environment to identify the types of food stores, availability of healthy food in stores, its affordability, and variety of foods available to meet cultural preferences relative to residential areas in the city to help guide Food Strategy initiatives. Results indicate that there almost 31,000 households in low-income areas that are more than 1km away to the closest supermarket and many low-income areas are dominated by stores with unhealthy food.
Policy details	In December 2013, amendments were made to the Official Plan for the City of Toronto (<i>Amendment NO. 231; By-law NO. 1714-2013</i> ⁵²) including promoting a strong and diverse retail sector (Chapter 3) by, "[e]ncouraging stores selling fresh food in areas currently lacking pedestrian access to fresh food."

	In 2013, the <u>Residential Apartment Commercial (RAC) Zoning</u> bylaw was adopted in the City of Toronto to allow food markets, shops, small businesses, classes, community services, cafes, and other resources in Tower Neighbourhoods with the goal to create healthier communities. In more detail, RAC Zone provides the opportunity for community gardens, markets, food ovens, healthier street food, grocers, and pharmacies set up show in these type of neighbourhoods across the city. In 2016, the Ontario Municipal Board approved the zone. In 2012, TPH, under their food strategy, established a partnership with Foodshare Toronto, United Way Toronto, and the Food Policy Research Initiative to increase access to fresh, affordable fruits and vegetables in low-income neighbourhoods, through the Mobile Good Food Markets project ⁵⁰ . Low-income communities without a supermarket within a 1km walking radius were targeted in the pilot. In the <i>Toronto Food Strategy</i> update, 72,926 pounds of produce were sold through 394 mobile market visits in 2016 ²⁰ . Similarly, in 2015, TPH established a partnership with Foodshare Toronto to create and operate the Grab Some Good: TTC Pop Up Market pilot project. The program provides healthy pop-up food markets in subway stations, to sell local, fresh produce ⁵⁰ . From January to August 2017, 135,000 pounds of healthy produce was sold through this program, resulting in 37,000 transactions. <i>Note that Foodshare Toronto was unable to continue its role in operating the pop up markets and therefore the initiative ended in 2017</i> (written communication, March 2018). The Toronto Community Garden Network (TCGN) is made up of individuals and organizations from across the Greater Toronto Area and responsible for overseeing community gardens in the city, with the overall mission to encourage healthy community gardening within the City of Toronto. Community members can contact the city's Supervisor of Community Gardens Program to either join or establish a community garden, including identifying fina
Comments/ notes	affordable, culturally diverse and flavourable food available for all."

RETAIL3 In	-store availability of healthy and unhealthy foods
The governme	I good practice statement nt ensures support systems are in place to encourage food stores to promote the in-store availability ds and to limit the in-store availability of unhealthy foods
Definitions and scope	 Food stores include supermarkets, convenience stores (including 'general stores' or 'milk bars'), greengrocers and other speciality food retail outlets Support systems include guidelines, resources, expert support, or programs/ initiatives directly funded by the local government In-store promotion includes the use of key promotional sites such as end-of-aisle displays, checkouts and island bins as well as the use of shelf signage, floor decals or other promotional methods In-store availability includes reducing or increasing supply (volume) of a product such as reducing the amount of shelf-space dedicated to sugar-sweetened drinks and confectionary, or offering fresh produce in a convenience store
Context	Municipal context In the 2015 Toronto Food Strategy update ⁵⁰ , TPH mapped the food retail environment to identify the types of food stores, availability of healthy food in stores, its affordability, and variety of foods available to meet cultural preferences relative to residential areas in the city to help guide Food Strategy initiatives. Results indicate that there almost 31,000 households in low-income areas that are more than 1km away to the closest supermarket and many low-income areas are dominated by stores with unhealthy food.
Policy details	In 2014, the City of Toronto received funding from Public Health Agency of Canada to launch the Grab Some Good: Healthy Corner Stores pilot ⁵⁰ under the Food Retail Environments Shaping Health (FRESH) project. The purpose of the program is to provide healthier food options, such as fresh fruits and vegetables, in convenience stores located in low-income neighbourhoods where access to supermarkets is limited. In collaboration with city staff (Toronto Food Strategy team), landlords, community agencies, retail experts, and academic advisors, participating store owners were connected with local produce distributors, received material and support for promotion, and tracking consumer interaction and sales data. There were 4 corner stores participating in the pilot project.
Comments/ notes	

RETAIL4 Fo	RETAIL4 Food service outlet availability of healthy and unhealthy foods	
The governme	good practice statement nt ensures support systems are in place to encourage food service outlets to increase the promotion of healthy foods and to decrease the promotion and availability of unhealthy foods	
Definitions and scope	 Food service outlets include for-profit quick service restaurants, eat-in or take-away restaurants, pubs, clubs Support systems include guidelines, resources or expert support Includes settings such as train stations, venues, facilities or events frequented by the public Excludes settings owned or managed by the government (see 'PROV1' and 'PROV2') Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol) Includes modifying ingredients to make foods and drinks more healthy, or changing the menu to offer more healthy options 	
Context	Municipal context In the 2015 Toronto Food Strategy update ⁵⁰ , TPH mapped the food retail environment to identify the types of food stores, availability of healthy food in stores, its affordability, and variety of foods available to meet cultural preferences relative to residential areas in the city to help guide Food Strategy initiatives. Results indicate that there almost 31,000 households in low-income areas that are more than 1km away to the closest supermarket and many low-income areas are dominated by stores with unhealthy food.	
Policy details	No policies have been set to address the availability of healthy and unhealthy foods in food service outlets by the City of Toronto.	
Comments/ notes	TPH Public Health Inspectors conduct monitoring of <i>Healthy Menu Choices Act</i> .	

INFRASTRUCTURE SUPPORT

Policy area: Leadership

Local Food-EPI vision statement: The political leadership ensures that there is strong support for the vision, planning, communication, implementation and evaluation of policies and actions to create healthy food environments, improve population nutrition, and reduce diet-related inequalities

LEAD1 Stro	ong, visible, political support	
Local Food-EPI good practice statement There is strong, visible, political support (at the level of the office of the Mayor or Medical Officer of Health or Chair of the Board of Health) for improving food environments, population nutrition, diet-related NCDs and their related inequalities		
Definitions and scope	 Visible support includes statements of intent, election commitments, budget commitments, establishing priorities and targets, demonstration of support in the media, other actions that demonstrate support for new or strengthened policy (e.g., Council Reports, Council resolutions) Documents that contain evidence of strong political support include media releases, speeches, pre-election policy papers, introduction of a bill, local-level strategic plans with targets or key performance indicators 	
Context	National context In 2010, Federal/Provincial/Territorial Ministers endorsed Curbing Childhood Obesity: A Federal, Provincial and Territorial Framework for Action to Promote Healthy Weights, which included a mandate to "increasing the availability and accessibility of nutritious foods and decreasing the marketing to children of foods and beverages that are high in fat, sugar and/or sodium" ⁵³ .	
	Federal context Prime Minister Justin Trudeau included aspects of public health nutrition and food environment policy in the Mandate Letter to the Minister of Health, published in November 2015, which included introducing new restrictions on the commercial marketing of unhealthy food and beverages to children; bringing in tougher regulations to eliminate trans fats and to reduce salt in processed foods; and improving food labels to give more information on added sugars.	
	In October 2016, the Minister of Health Jane Philpott announced Health Canada's Healthy Eating Strategy ⁵⁴ . The strategy employs various policy levers, including legislation, regulation, guidance and education in a consistent and mutually reinforcing manner to more effectively achieve public health objectives. This is part of the Government of Canada's Vision for a Healthy Canada , which includes components of Healthy Eating, Healthy Living, and Healthy Mind.	
	The Chief Public Health Officer's Report on the State of Public Health in Canada 2017 – Designing Healthy Living raises awareness about how our built environment provides a foundation for healthy living and ultimately our health. <u>Section 3B</u> explores research that relates to how governments can design communities that promote healthy eating and food access.	
	Provincial context In 2012, the Ontario government, led by Premier Dalton McGinty published <i>Ontario's Action Plan</i> <i>for Health Care</i> which included ambitious targets for obesity reduction (20% over 5 years) and advocated for a childhood obesity strategy and assembled a Healthy Kids Panel. The same government also introduced an <i>Ontario Diabetes Strategy</i> . This government changed leadership in 2013 (Kathleen Wynne) and continues to be in control of the provincial legislature. <i>The Healthy</i> <i>Kids Strategy for Ontario</i> was officially developed in 2014, including recommendations from the Healthy Kids Panel. The effort was led by the MOHLTC as a cross-government approach to improving the health of children. This effort is ongoing, and has received support from the Premier and the MOHLTC.	

Policy details	 In 2016, the Medical Officer of Health released the report, <i>Primary Prevention of Childhood</i> <i>Obesity in Toronto</i>⁵⁵, describing the efforts TPH has made and will continue to make to address risk factors associated with childhood obesity. The report outlined local efforts in obesity prevention across 3 age spans: Preconception and the Prenatal Period (Reproductive Life Plan online resources, Healthiest Babies Possible program) The Early Years (Toronto's Peer Nutrition Program, NutriSTEP[®] screening) Elementary School-age Years (Student Nutrition Programs, TDSB initiatives like Fit for Life and <i>Health Action Teams</i> by TCDSB, and <i>Into Kid's Health</i> pilot project) Other sections include policy initiatives (TPH is a member of the Stop M2K Coalition) and creating supportive environments (i.e., healthy corner store project and Savvy Diner Menu Labelling initiative, and implementing HKCC).
Comments/ notes	

LEAD2 Comprehensive implementation plan linked to municipal needs

Local Food-EPI good practice statement

There is a comprehensive, transparent, up-to-date food strategy/food charter (including priority policy and program strategies) linked to local needs and priorities, to improve food environments, achieve a local and sustainable food system, reduce the intake of the nutrients of concern to meet WHO and national recommended dietary intake levels, and reduce diet-related NCDs

Definitions and scope	 Includes documented plans with specific actions and interventions (i.e. policies, programs, partnerships)
	 Plans should be current (i.e. maintain endorsement by the current government and/or are being reported against)
	 Plans may be at the department/branch/unit/team level and ownership may or may not be shared across government
	• Plans should refer to actions to improve food environments (as defined in the policy domains above) and should include both policy and program strategies
	 Plans can refer to actions to promote a shorter, more visible food chain, more sustainable food production and consumption, the creation of more social added value for food initiatives, reduce food waste, and/or optimize reuse of food waste as raw materials Excludes overarching frameworks that provide general guidance and direction
Context	Federal context
	Healthy Eating Strategy
	The Minister of Health announced a new Healthy Eating Strategy on October 24, 2016 ⁹ . This
	includes revising Canada's Food Guide, restricting marketing of unhealthy foods to children,
	increasing health claims regarding fruits and vegetables, changes to the Nutrition Facts table and
	implementation of Front of Package labelling, continued voluntary sodium reduction in packaged foods with government oversight and evaluation of progress, and elimination of industrially
	produced <i>trans</i> fat from the food supply. The Strategy also includes supporting increased access to
	and availability of nutritious foods through the Nutrition North Canada program, and references
	the expansion to 37 additional isolated northern communities effective October 2016.
	National Food Policy
	There is currently a national food policy being development by Agriculture Canada, chaired by Greg Meredith, the assistant deputy minister at Agriculture Canada. The committee is currently focusing
	on 4 key areas: food security, the environment, sustainable growth in the food and agriculture
	section, and health.
	Provincial context
	Ontario Healthy Kids Strategy ⁵⁶ The Ontario Healthy Kids Strategy (OHKS) was launched in 2014 as a cross-government strategy to
	improve the well-being of children in Ontario, in response to the No Time to Wait report. One of the 3 pillars of the OHKS is Healthy Food. The strategy included several difference policy domains,
	including:
	 The <i>Healthy Choices Menu Act</i> (implemented January 1, 2017) Consultation on marketing to children legislation (no current policy)
	 Increased support for Ontario's Student Nutrition Program (implemented)
	 The program also supports the Healthy Kids Community Challenge, which supports 45
	communities in Ontario to help children eat better and be active (implemented)
	• Support for preconception, pregnancy and early years (e.g., breastfeeding supports,
	preconception health care tool, preventing childhood obesity tool for healthcare providers prenatal education project)
	2015 Patients First
	In 2015, the Action Plan for Health Care was revised to be called Patients First: Ontario's Action
	Plan for Health Care ⁵⁷ . This plan did not specifically target obesity, but does continue to promote the Healthy Kids Strategy.
	Ontario's Local Food Strategy, and the Local Food Act
	The <i>Local Food Act, 2013</i> ¹⁹ legislation, the first of its kind in Canada - is designed to help build
	Ontario's economy, create more jobs and expand the agri-food sector - by making more local food

available in markets, schools, cafeterias, grocery stores and restaurants throughout the province. Although there is no specific focus on providing healthy foods, this strategy promotes short food supply chains and promote the sale of foods typically considered healthy, such as fresh fruits and vegetables and unprocessed foods (but also includes alcoholic beverages and processed foods). The local food strategy promotes local food production and sales; however, this strategy lacks specific linkages to promote food security or improve health. It includes goals for food literacy specific to local foods as well as access to local foods (neither specified local and "healthy" foods).

Under the context of the Local Food Act, 2013, the aspirational food literacy goals are as follows:

- Goal 1: Increase the number of Ontarians who know what local foods are available.
- Goal 2: Increase the number of Ontarians who know how and where to obtain local foods.
- **Goal 3:** Increase the number of Ontarians who prepare local food meals for family and friends, and make local food more available through food service providers.

"Local food" is defined within the act as follows:

- a. food produced or harvested in Ontario, including forest or freshwater food, and
- b. subject to any limitations in the regulations, food and beverages made in Ontario if they include ingredients produced or harvested in Ontario;

Local Food access goals:

In February, 2016, the Lieutenant Governor proclaimed paragraph 3 of s. 4(1) of the Local Food Act, 2013 making "increasing access to local food" the next area of focus under the <u>act</u>. Consultations were held with agri-food stakeholders and the public throughout the spring 2016 to help draft goals focusing on increasing access to local food.

Increasing Access to Local Food Goals

As required by the *Local Food Act, 2013*, the minister has established three aspirational goals to help increase access to local food:

- **Goal 1:** Increase opportunities for all Ontarians to choose local food.
- **Goal 2:** Increase the variety of local food offerings to celebrate the diversity of Ontario and its foods.
- **Goal 3:** Increase collaborations and strengthen partnerships among producers, communities, and the public and private sectors to enhance local food availability.

The minister will report on the three local food access goals in the annual Local Food Report in collaboration with stakeholders, the initial focus will be on establishing baselines for measuring progress related to the goals.

The Ontario Public Health Standards

The **Ontario Public Health Standards** (OPHS) are published as the guidelines for the provision of mandatory health programs and services by the MOHLTC, pursuant to Section 7 of the **Health Protection and Promotion Act, R.S.O. 1990, c. H.7.** According to the document:

The Ontario Public Health Standards establish requirements for fundamental public health programs and services, which include assessment and surveillance, health promotion and policy development, disease and injury prevention, and health protection. The Ontario Public Health Standards outline the expectations for boards of health, which are responsible for providing public health programs and services that contribute to the physical, mental, and emotional health and well-being of all Ontarians. Boards of health are responsible for the assessment, planning, delivery, management, and evaluation of a variety of public health programs and services that address multiple health needs, as well as the contexts in which these needs occur⁵⁸.

The OPHS include a goal to **reduce the burden of preventable chronic diseases of public health importance,** including obesity, cardiovascular diseases, cancer, respiratory diseases, diabetes, intermediate health states (such as metabolic syndrome and prediabetes). Risk factors for chronic diseases include, but are not limited to, poor diet, obesity, tobacco use, physical inactivity, alcohol misuse, and exposure to ultraviolet radiation.

 As part of the Chronic Diseases and Injuries Program Standards for Chronic Disease prevention, <u>Board of Health Outcomes</u> that are expected that relate to healthy eating include: Food premises are in compliance with the <i>Healthy Menu Choices Act, 2015</i> <u>Requirements</u> of the Board of health include: conduct epidemiological analysis of surveillance data, including monitoring of trends over time, emerging trends, and priority populations, in accordance with the <i>Population Health</i> <i>Assessment and Surveillance Protocol, 2018</i> (or as current), in the areas of healthy eating behaviours, built environment, etc. The board of health shall work with school boards and/or staff of elementary, secondary, and post-secondary educational settings, using a comprehensive health promotion approach, to influence the development and implementation of healthy policies, and the creation or enhancement of supportive environments to address healthy eating behaviours and food safety
Most recently, the modernized OPHS, Accountability Framework and Organizational Requirements came into effect January 1 st , 2018 after a 2-year long development and consultation process with various stakeholders and expert committees.
 Toronto's Food Charter⁵⁹ is designed around food security, which contributes to the overall health of the local population. To promote food security, Toronto City Council will champion the right of all residents to adequate amounts of safe, nutritious, culturally-acceptable food without the need to resort to emergency food providers advocate for income, employment, housing, and transportation policies that support secure and dignified access to the food people need support events highlighting the city's diverse and multicultural food traditions promote food safety programs and services sponsor nutrition programs and services that promote healthy growth and help prevent dietrelated diseases ensure convenient access to an affordable range of healthy foods in city facilities adopt food purchasing practices that serve as a model of health, social and environmental responsibility partner with community, cooperative, business and government organizations to increase the availability of healthy foods encourage community gardens that increase food self-reliance, improve fitness, contribute to a cleaner environment, and enhance community development protect local agricultural lands and support urban agriculture encourage the recycling of organic materials that nurture soil fertility foster a civic culture that inspires all Toronto residents and all city departments to support food programs that provide cultural, social, economic and health heefts work with community agencies, residents' groups, businesses and other levels of government to achieve these Toronto Food Strategy²⁰ (most recent update in 2017) was released by TPH, outlining details of progress in the past year and looking ahead to 2018. The current strategy describes goals under 6 themes to achieve a healthy food system. Supports the Toronto Strong Neighbourhood S
3. Culture Shift - Move the beliefs, thoughts and behaviours of decision makers and key stakeholders toward policies and programs that support healthy food systems and consumer choices.

	 Community Building and Engagement - Create opportunities for community development of food-related activities through partnerships with not-for-profit agencies, community health centres, schools, business and government. Land and Property - Leverage the potential in City land, properties and spaces to create a healthier, more sustainable food system. Local Economic Development - Foster the growth of local food economies and fair wage employment through skills development, business incubation, industry partnerships, and food handler training and certification.
	2017 initiatives to address above themes: Subway and Mobile Food Markets (RETAIL2&3), FoodReach, Community Food Works for Newcomer Settlement, Urban Agriculture, and Food Retail Research.
	 TPH's 2015-2019 Strategic Plan⁶⁰ (detailed in LEAD3) envisions a healthy city for all with the mission statement to reduce health inequities and improve the health of the whole population including: Priority Direction 2: Champion healthy public policy, action plans include promotion of healthy food system change including: food access, food retail environments and food literacy
Comments/ notes	

Local Food-EPI good practice statement Government priorities have been established to reduce inequalities or protect vulnerable populations in relation to didt, nutrition, obesity and NCDs Definitions and scope Frameworks, strategies or implementation plans specify aims, objectives or targets to reduce inequalities including taking a preventive approach that addresses the social and environmental determinants of health Praneworks, strategies or implementation plans identify vulnerable populations or priority groups Implementation plans specify policies or programs that aim to reduce inequalities for specific population groups Excludes priorities to reduce inequalities in secondary or tertiary prevention Context Provincial context Ontario's first Poverty Reduction Strategy 2014-2019¹⁰. The strategy specifically focuses on reducing poverty among children and youth, and also focuses on closing the education gap First Nations, Metis and inuit students. Goals include: to recommit to the original Strategy's goal of lifting 25 % of Ontario children out of poverty in five years; to move towards employment and income security for vulnerable groups (including women, single parents, people with disabilities, youth, newcomers, visible minorities, seniors and Indigenous people); to end homelessness; and to end homelessness; and to end homelessness; and to end homelessness; and to build the evidence base required to guide effective poverty reduction policies and programs. The strategy includes support for the Student Nutrition, chronic diseas	LEAD3 Price	prities for reducing inequalities
and scope inequalities including taking a preventive approach that addresses the social and environmental determinants of health • Frameworks, strategies or implementation plans identify vulnerable populations or priority groups • Implementation plans specify policies or programs that aim to reduce inequalities for specific population groups • Excludes priorities to reduce inequalities in secondary or tertiary prevention Context Ontario's first Poverty Reduction Strategy was released in 2008. Ontario has recently renewed the Poverty Reduction Strategy 2014-2019 ⁶¹ . The strategy specifically focuses on reducing poverty among children and youth, and also focuses on closing the education gap First Nations, Métis and Inuit students. Goals include: • to recommit to the original Strategy's goal of lifting 25 % of Ontario children out of poverty in five years; • to move towards employment and income security for vulnerable groups (including women, single parents, people with disabilities, youth, newcomers, visible minorities, seniors and Indigenous people); • to end homelessness; and • to build the evidence base required to guide effective poverty reduction policies and programs. The strategy includes support for the Student Nutrition Program (see PROV1 for additional details of this program). There are no other mentions of nutrition, chronic disease prevention or population health in the Poverty Reduction Strategy as it relates to food: Develop a food security strategy that addresse physical and economic access to sufficient, safe and nutritious food, including in remote First Nations c	Government p	riorities have been established to reduce inequalities or protect vulnerable populations in relation to
Ontario's first Poverty Reduction Strategy was released in 2008. Ontario has recently renewed the Poverty Reduction Strategy 2014-2019 ⁽¹⁾ . The strategy specifically focuses on reducing poverty among children and youth, and also focuses on closing the education gap First Nations, Métis and Inuit students. Goals include: • to recommit to the original Strategy's goal of lifting 25 % of Ontario children out of poverty in five years; • to move towards employment and income security for vulnerable groups (including women, single parents, people with disabilities, youth, newcomers, visible minorities, seniors and Indigenous people); • to end homelesses; and • to build the evidence base required to guide effective poverty reduction policies and programs. The strategy includes support for the Student Nutrition Program (see PROV1 for additional details of this program). There are no other mentions of nutrition, chronic disease prevention or population health in the Poverty Reduction Strategy. Ministerial Mandate The Mandate for the Minister Responsible for the Poverty Reduction Strategy as it relates to food: Develop a food security strategy that dadresses physical and econnelia caces to sufficient, safe and nutritious food, including in remote First Nations communities. To achieve this, you will work with the ministers of Community and Social Services, Health and Long-Term Care, Agriculture, Food and Rural Affairs, Indigenous Relations and Reconciliation and Children and Youth Services. Policy details The City of Toronto's 20-year TO Prosperity: Toronto Poverty Reduction Strategy ⁶² was released in 2015, where goals are set in 4-year increments. The city envisions that, "By 2033, Toronto is a city with opportunities for all: leader in the collective pursuit of justice, fairness and equity. We [inequalities including taking a preventive approach that addresses the social and environmental determinants of health Frameworks, strategies or implementation plans identify vulnerable populations or priority groups Implementation plans specify policies or programs that aim to reduce inequalities for specific population groups
 2015, where goals are set in 4-year increments. The city envisions that, <i>"By 2035, Toronto is a city with opportunities for all: a leader in the collective pursuit of justice, fairness and equity. We</i> [city government] <i>want to be renowned as a city where everyone has access to good jobs, adequate income, stable housing, affordable transportation, nutritious food, and supportive services."</i> The strategy focuses on initiatives in 6 areas: housing stability, service access, transit equity, food access, quality jobs and livable incomes, and systemic change. In the strategy, child hunger and nutrition is prioritized through the 2015-2018 Term Action Plan: 1) Recommendation: eliminate hunger 	Context	 Ontario's first Poverty Reduction Strategy was released in 2008. Ontario has recently renewed the <i>Poverty Reduction Strategy 2014-2019</i>⁶¹. The strategy specifically focuses on reducing poverty among children and youth, and also focuses on closing the education gap First Nations, Métis and Inuit students. Goals include: to recommit to the original Strategy's goal of lifting 25 % of Ontario children out of poverty in five years; to move towards employment and income security for vulnerable groups (including women, single parents, people with disabilities, youth, newcomers, visible minorities, seniors and Indigenous people); to end homelessness; and to build the evidence base required to guide effective poverty reduction policies and programs. The strategy includes support for the Student Nutrition Program (see PROV1 for additional details of this program). There are no other mentions of nutrition, chronic disease prevention or population health in the Poverty Reduction Strategy. Ministerial Mandate The Mandate for the Minister Responsible for the Poverty Reduction Strategy as it relates to food: Develop a food security strategy that addresses physical and economic access to sufficient, safe and nutritious food, including in remote First Nations communities. To achieve this, you will work with the ministers of Community and Social Services, Health and Long-Term Care, Agriculture, Food and Rural Affairs, Indigenous Relations and Reconciliation and Children and Youth Services.
 Expand student nutrition programs in collaboration with school boards, community agencies and other orders of government Develop mechanisms that make it easy and cost-effective for public sector and community organizations to procure healthy food Expand provision of nutritious food in City-run and supported programs 2) Recommendation: Increase access to affordable, nutritious and culturally appropriate food 	Policy details	 2015, where goals are set in 4-year increments. The city envisions that, <i>"By 2035, Toronto is a city with opportunities for all: a leader in the collective pursuit of justice, fairness and equity. We</i> [city government] <i>want to be renowned as a city where everyone has access to good jobs, adequate income, stable housing, affordable transportation, nutritious food, and supportive services."</i> The strategy focuses on initiatives in 6 areas: housing stability, service access, transit equity, food access, quality jobs and livable incomes, and systemic change. In the strategy, child hunger and nutrition is prioritized through the 2015-2018 Term Action Plan: 1) Recommendation: eliminate hunger Expand student nutrition programs in collaboration with school boards, community agencies and other orders of government Develop mechanisms that make it easy and cost-effective for public sector and community organizations to procure healthy food Expand provision of nutritious food in City-run and supported programs

	Support innovative business models that help retailers cell healthier feed in underserved
	Support innovative business models that help retailers sell healthier food in underserved communities
	• Establish enabling policies and processes to facilitate food initiatives on City land and in City facilities
	• Ensure rules related to commercial food production, preparation and sales are clear and accessible
	Remove barriers to expand urban agriculture on government lands
	 Empower residents with food skills and information Invest in community-based food infrastructure that increases access to affordable, nutritious
	and culturally appropriate food
	Toronto's First Indigenous Health Strategy 2016-2021 ⁶³ details the ways in which TPH and Toronto Central Local Health Integration Network work to improve the health of the Indigenous community in the city. One of the strategy's overarching themes include reinforcing a population health approach by aiming to "reduce health inequities in Indigenous health in order to ensure well-being across the population."
	Strategic Directions: 1. Reduce Health Inequities for Indigenous Peoples
	 2. Influence the Social Determinants of Indigenous Health: Including through the Food Systems by advocating, "for affordable, healthy food for Indigenous people in Toronto using an Indigenous lens (including through the Toronto Food Strategy)" by a) Creation of community garden initiatives are supported b) Policies for green spaces for food sustainability are researched and reported c) Strategies to increase access to affordable, healthy food developed and implemented d) Advocacy work underway and demonstrable regarding free access to prenatal vitamins
	3. Harmonize Indigenous and Mainstream Health Programs and Services Including supporting, "new and existing public health promotion programs focusing on physical activity, healthy eating, mental health promotion, healthy parenting, youth resilience and chronic disease prevention to be culturally appropriate."
	The Toronto Public Health 2015-2019 Strategic Plan: A Health City for All ⁶⁰ envisions a healthy city for all with the mission statement to reduce health inequities and improve the health of the whole population. Specifically, under health equity, the plan states, <i>"TPH is a leader in reducing health inequities by working to address unfair and avoidable differences in health outcomes between groups. TPH collaborates to identify and respond to health needs of vulnerable populations by providing accessible services and advocating for policies that address the social determinants of health."</i>
	 The following are 2 among 5 Priority Directions that have action plans related to reducing inequalities and improving the health of the whole population: Priority Direction 1: Serve the public health needs of Toronto's diverse communities, action plans include Identify key public health interventions to address the needs of seniors Implementation of an Aboriginal Health Strategy based on collaborative, community-led assessment of needs of the urban aboriginal population
	 Priority Direction 2: Champion healthy public policy, action plans include promotion of healthy food system change including: food access, food retail environments and food literacy
Comments/ notes	
	1

LEAD4 Sup	port for State/Provincial or Federal policy agenda
There is strong	good practice statement advocacy from local government to improving food environments, population nutrition, diet-related related inequalities pushing State/Provincial or Federal level policy agenda
Definitions and scope	 Advocacy can come from head of any local government (i.e., office of the Mayor, Medical Officer of Health, Directors in Public Healthetc.) Includes documents that contain evidence of strong political advocacy through media releases, speeches, pre-election policy papers, local-level strategic plans with targets or key performance indicators to urge introduction of high level legislation
Context	
Policy details	 Federal initiatives <u>Healthy Eating Strategy</u> TPH has actively participated in Health Canada's <i>Healthy Eating Strategy</i> consultations to: Advise the revisions of Canada's Food Guide Inform Front-of-Package labelling Changes to the Nutrition Facts Table Support the elimination of Partially Hydrogenated Oils from the food supply (written communication, March 2018)
	<u>Child Health Protection Act</u> In 2016, the City of Toronto's Medical Officer of Health recommended to the city's Board of Health to urge the Government of Canada to restrict all types of marketing of foods and beverages to children sixteen years of age and younger to combat childhood obesity. The Medical Officer of Health endorsed the Minister of Health's Mandate Letter of November 12, 2015 and the Senate Report on Obesity in Canada, as well as the recommendations outlined in the provincial Healthy Kids Panel report to implement restrictions on marketing to children ⁶⁴ .
	Provincial initiatives <u>Healthy Menu Choices Act</u> In 2013, the City of Toronto's Medical Officer of Health recommended to the city's Board of Health to urge the Ontario Premier and the Minister of Health and Long-Term Care to introduce the mandatory labelling of calories on menus and menu boards. The report summarized the effectiveness of the legislation by citing the 2008 New York City menu labelling policy and evaluations conducted by TPH, on consumer and key stakeholder readiness ⁶⁵ . The city planned on implementing menu labelling regardless of provincial government action, but in January 2017, the <i>Health Menu Choices Act, 2015</i> (LABEL1) was phased into chain restaurants with 20 or more locations in Ontario, requiring the display of calories ⁶⁶ .
	School Food and Beverage Policy In 2008, the City of Toronto's Medical Officer of Health recommended to the city's Board of Health to urge the Ontario Minister of Education and the Minister of Health Promotion to establish mandatory and comprehensive nutrition standards in schools across the province. In the interim, TDSB had introduced its own nutrition standards, the Nutrition Policy Statement ⁶⁷ . In 2010, the province of Ontario introduced regulations for cafeterias under the <i>PPM 150 School Food and</i> <i>Beverage Policy</i> (PROV1).
	Income Assistance TPH's annual reports on the cost of the nutritious food basket contain equity focused recommendations. Most recently, in a <u>report</u> from October 2017, "[t]he Board of Health reiterate[d] its request to the Ministry of Community and Social Services to increase social assistance rates to a level that supports basic needs, including household food security, and also reiterate its support for a living wage."

Comments/	TPH and the Board of Health respond to provincial and federal policy agendas regularly including
notes	responses to consultation, letters of support or opposition, advocacy to move forward, promoting through social media (written communication, March 2018).

Policy area: Governance

Local Food-EPI vision statement: Governments have structures in place to ensure transparency and accountability, and encourage broad community participation and inclusion when formulating and implementing policies and actions to create healthy food environments, improve population nutrition, and reduce diet-related inequalities

GOVER1 R	estricting commercial influence on policy development		
There are robu	Local Food-EPI good practice statement There are robust procedures to restrict commercial influences on the development of policies related to food environments where they have conflicts of interest with improving population nutrition		
Definitions and scope	 Includes government policies, guidelines, codes of conduct or other mechanisms to guide actions and decision-making by government employees, for example conflict of interest declaration procedures Includes procedures to manage partnerships with private companies or peak bodies representing industries that are consulted for the purpose of developing policy, for example committee procedural guidelines or terms of reference Includes publicly available, up-to-date registers of lobbyist and/or their activities 		
Context	 Federal context There is currently a ban on political contributions from corporations, trade unions, associations and groups federally. Provincial context Provincially, Alberta, Manitoba, Quebec, Ontario and Nova Scotia prohibit corporate and union donations. Municipal context The Lobby Registry is established pursuant to Section 223.9 of Part V.1 of the Municipal Act, 2001, which, "authorize[s] the municipality to establish and maintain a registry in which shall be kept such returns as may be required by the municipality that are filed by persons who lobby public office holders." The City of Toronto has broad authority under the City of Toronto Act, 2006 All municipalities in Ontario must adhere to the Municipal Conflict of Interest Act, 1990.		
Policy details	According to the Toronto Municipal Code ⁶⁸ (Chapter 140, Lobbying), the designated filer (most senior officer in the lobbying firm) in respect of an undertaking entered into with a client by a consultant lobbyist at the firm is required to file an initial return with the Registrar not later than 3 days after the undertaking is entered. For organizations whose directors, officers or employees lobby on behalf of the organization (in-house lobbyists), the senior officer of the organization is required to file an initial return with the Registrar the day on which one or more individuals in that organization becomes an organization lobbyist. An in-house lobbyist is a director, officer or employee of the organization who lobbies or has the duty to lobby on behalf of the organization. Voluntary unpaid lobbyist (includes directors and shareholders), much like an inhouse lobbyist, lobbies on behalf of the interests of an organization, falls under the same requirements. The Toronto Lobbyist Registry is publicly available on the website of the City of Toronto at http://app.toronto.ca/lobbyistsearch/searchInput.do		

	All city employees are bound to <i>The Toronto Public Service By-Law</i> (2015), which a <u>Conflict of</u> <u>Interest and Confidentiality</u> section that states, "[a] City or Agency employee may not engage in any outside work or business activity that conflicts with their duties to the City or City Agency". The policy also states that employees with financial interest in any business transaction must not represent or advise the organization in the transaction or participate in City or Agency decision- making where they could benefit from the decision. Failure to comply to any of these regulations can lead to disciplinary action.
Comments/ notes	

GOVER2 U	se of evidence in food policies
	good practice statement ocedures are implemented requiring the use of evidence in the development of food policies
Definitions and scope	 Includes policies, procedures or guidelines to support government employees in the use of evidence for policy development including best practice evidence review methodology (including types and strength of evidence needed) and policy implementation in the absence of strong evidence (where the potential risks or harms of inaction are great) Includes policies, procedures or guidelines that stipulate the requirements for the establishment of a scientific or expert committee to inform policy development Includes the use of evidence-based models, algorithms and tools to guide policy development or within policy to guide implementation (e.g. nutrient profiling model) Includes government resourcing of evidence and research by specific units, either within or across government departments
Context	
Policy details	 TPH's 2015-2019 Strategic Plan⁶⁰ (outlined in LEAD3) includes the following: Priority Direction 4: Lead innovation in public health practice. Action plans include: Improve service through evidence, innovative practice and technology Build the evidence base for public health practice through research Exchange knowledge with other public health organizations, academic institutions, government, city divisions, community agencies and the private sector Enhance capacity to measure and improve service quality Increase public understanding of the vital role played by TPH in achieving a healthy city for all No specific procedure on evidence in policy implementation was identified online. TPH requires evidence to support all of their decision-making whether it is for policies, initiatives or health promotion activities. They have a performance management framework, trainings (e.g., Exchange knowledge is a service with the base of the service management framework, trainings (e.g., Exchange knowledge knowledge is a service of the service in the base of the service of
	Evidence Informed Decision making model), and staff support to guide policy development (written communication, March 2018). In 2012, based on TPH's 2010-2014 Strategic Plan: <i>A Healthy City for All</i> , the Board of Health established the Healthy Public Policy Directorate, specifically it states:
	The Healthy Public Policy Directorate was established to address social and environmental determinants of health through policy, research, and advocacy. The Directorate produces and synthesizes evidence to inform TPH and Board of Health decisions. In addition, develops policies that impact health and advocates for the implementation of healthy public policies by municipal, provincial and federal agencies. The establishment of the Directorate is a concrete acknowledgement of the key role that healthy public policy continues to play in making Toronto a healthy city for all ⁶⁹ .
Comments/ notes	

GOVER3 Tr	GOVER3 Transparency for the public in the development of food policies	
	good practice statement ocedures are implemented for ensuring transparency in the development of food policies	
Definitions and scope	 Includes policies or procedures to guide the online publishing of private sector and civil society submissions to government around the development of policy and subsequent government response to these Includes policies or procedures that guide the use of consultation in the development of food policy Includes policies or procedures to guide the online publishing of scoping papers, draft and final policies Include policies or procedures to guide public communications around all policies put forward but not progressed 	
Context	 Provincial context Ontario has a <i>Public Engagement Framework</i> to engage Ontarions in policy development. The framework includes a variety of different engagement approaches, including: Share Consult Deliberate Collaborate The government has created an online forum that allows for specific feedback on policy consultations. Additionally, there is a Consultations Directory and the website lists dates and locations for in-person consultations. Municipal context According to <i>Municipal Act, 2001</i> , <i>Section 270</i> , municipalities are required to adopt and maintain a policy which ensures that any action the local government decides to embark in, they are held	
Policy details	Among the duties of the TFPC [PLATF1], the council posts dates of meetings of the council, which are open to public involvement. Before meetings, the details of the meeting agendas are published online, and subsequently the minutes are made available to the public. TFPC's website also archives every food policy decision that was established for the city (passed and not passed) since 1985 ⁷⁰ . The Board of Health and City Council follow the same procedure as TFPC.	
Comments/ notes		

GOVER4 A	GOVER4 Access to government information	
The governme	good practice statement nt ensures public access to comprehensive information and key documents (e.g. budget documents, nance reviews and health indicators) related to public health nutrition and food environments	
Definitions and scope	 Includes policies and procedures to guide the timely, online publishing of government budgets, performance reviews, audits, evaluation reports or the findings of other reviews or inquiries Includes 'freedom of information' legislation and related processes to enable the public access to government information on request, with minimal restrictions and exemptions Includes policies or procedures to guide the timely, online publishing of population health data captured / owned by government 	
Context	Municipal context All municipalities in Ontario must adhere to the <i>Municipal Freedom of Information and Protection</i> of Privacy Act, 1990.	
	OPHS, established under the <i>Health Protection and Promotion Act, 1990</i> , requires public health units in Ontario to assess population health and make this information available to their local population.	
Policy details	The City of Toronto Information Access Requests is based upon the <i>Municipal Freedom of</i> <i>Information and Protection of Privacy Act, 1990</i> .	
	TPH captured and published population data ⁷¹ include child and adolescent health, chronic disease (including cardiovascular disease, diabetes, overweight and obesity, vegetable and fruits consumption), injury and substance misuse, mental health, overall health and well-being, and reproductive health.	
	The annual Nutritious Food Basket results are shared with the community online. Most recent <u>report</u> from May 2017.	
	Budget documents for the City of Toronto are publicly available online: <u>https://www.toronto.ca/city-government/budget-finances/</u>	
Comments/ notes		

Policy area: Monitoring & Intelligence

Local Food-EPI vision statement: The government's monitoring and intelligence systems (surveillance, evaluation, research and reporting) are comprehensive and regular enough to assess the status of food environments, population nutrition and diet-related NCDs and their inequalities, and to measure progress on achieving the goals of nutrition and health plans

MONIT1 M	Ionitoring food environments		
Monitoring sys (especially for	Local Food-EPI good practice statement Monitoring systems, implemented by the local government, are in place to regularly monitor food environments (especially for food promotion to children, and nutritional quality of food in schools and other public sector settings), against codes/ guidelines/ standards/ targets		
Definitions and scope	 Includes monitoring systems funded fully or in part by government that are managed by an academic institution or other organisation Includes regular monitoring and review of the impact of policies implemented by the government on food environments (as relevant to the local area, and described in the policy domains above), in particular: Monitoring of compliance with voluntary food composition standards related to nutrients of concern in out-of-home meals (as defined in the 'Food composition' domain) Monitoring of compliance with food labelling regulations (as defined in the 'Food labelling' domain above) Monitoring of unhealthy food promoted to children via non-broadcast media and in children's settings (as defined in the 'Food promotion' domain above) Monitoring of compliance with food provision policies in schools, early childhood services and public sector settings (as defined in the 'Food promotion' domain above) 		
Context			
Policy details	 Monitoring food composition for nutrients of concern No documents were identified. Monitoring of marketing of unhealthy foods to children No documents were identified. Monitoring of nutrition quality of food in schools and early childhood education services No documents were identified. Monitoring of nutritional quality of food in public sector settings No documents were identified. 		
Comments/ notes	TPH conducts monitoring of <i>Healthy Menu Choices Act</i> via inspectors. TPH measures the Nutritious Food Basket on an annual basis. The Nutritious Food Basket serves as a tool to monitor the cost and affordability of healthy eating. The Basket describes approximately 60 foods that represent a nutritious diet for individuals in various age and gender groups. Tool was developed by the Province of Ontario, for use by health units. TPH offers the NutriSTEP as a screening/education tool for childcare agencies and parents to evaluate the overall eating habits of young children 18 months to 5 years of age.		

MONIT2 Monitoring population health indicators

Local Food ED	I good practice statement
There is regula prevalence usi	I good practice statement or monitoring of adult and childhood nutrition status and population intakes, overweight and obesity ng anthropometric measurements, and prevalence of NCD risk factors and occurrence rates (e.g. cidence, mortality) for the main diet-related NCDs
Definitions and scope	 Includes monitoring of adult and child intake in line with national food guide (i.e., Canada's Food Guide) and national dietary recommendations Includes monitoring of adult and child intake of nutrients of concern and non-core/discretionary foods including sugar-sweetened beverages (even if there are no clear intake targets for all of these) Anthropometric measurements include height, weight and waist circumference Other NCD risk factors include level of physical activity, smoking, alcohol consumption Diet-related NCDs include, amongst others, hypertension, hypercholesterolaemia, Type 2 Diabetes, cardiovascular disease (including ischaemic heart disease, cerebrovascular disease and other diseases of the vessels), diet-related cancers May be collected through a variety of mechanisms such as population surveys or a notifiable diseases surveillance system 'Regular' is considered to be every five years or more frequently
Context	Federal context Federally, Statistics Canada and Health Canada conduct two annual surveys: The Canadian Community Health Survey (CCHS) and The Canadian Health Measures Survey (CHMS). THE CCHS is a nationally representative health survey conducted annually. The annual component includes one 6-question food frequency screener regarding dietary intake of fruits and vegetables. The Nutrition Focus component of CCHS collects one 24-hour recall from the entire sample, and two recalls among a subset of participants. The Nutrition focus was conducted in 2004, and again in 2015. The CHMS is a biospecimen survey that is conducted biannually. This information is available and considered representative at the provincial level.
	 Provincial context Cancer Care Ontario (CCO) is responsible for maintaining a database of incidence and prevalence of NCDs. CCO is governed by the <i>Cancer Act</i> and is accountable to the MOHLTC. The Ontario Healthy Study (OHS) also monitors a number of NCD risk factors including physical activity, smoking and alcohol, among others.
	Municipal context OPHS, established under the <i>Health Protection and Promotion Act, 1990</i> , requires public health units in Ontario to assess population health and make this information available to their local population.
Policy details	To access the City of Toronto population health data: <u>https://www.toronto.ca/community-people/health-wellness-care/health-inspections-</u> <u>monitoring/comprehensive-surveillance-indicators/</u> Types of population health data outlined in GOVER4. Typically based on Rapid Risk Factor Surveillance System (<u>RRFSS</u>), CCHS and Ontario Student Drug Use and Health Survey (OSDUHS).
Comments/ notes	

MONIT3 EV	valuation of major programmes
There is sufficie	good practice statement ent research and evaluation of major programs and policies to assess effectiveness and contribution e goals of the nutrition and health plans
Definitions and scope	 Includes any policies, guidelines, frameworks or tools that are used to determine the depth and type (method and reporting) of evaluation required Includes a comprehensive evaluation framework and plan that aligns with the key preventive health or nutrition implementation plan The definition of a major programs and policies is to be defined by the relevant government department Evaluation should be in addition to routine monitoring of progress against a project plan or program logic
Context	Provincial context The MOHLTC funds Public Health Ontario , which conducts some food environment research and provides evaluation leadership for several provincial food-related policies including the HKCC.
Policy details	 TPH's 2015-2019 Strategic Plan⁶⁰ (outlined in LEAD3) includes the following: Priority Direction 4: Lead innovation in public health practice. Action plans include: Improve service through evidence, innovative practice and technology Enhance capacity to measure and improve service quality TPH does regular and routine performance measures for a number of their programs which are outlined in their service plans, however, not all of them produce reports (written communication, March 2018). In 2012, based on TPH's 2010-2014 Strategic Plan: <i>A Healthy City for All</i>, the Board of Health implemented an organizational performance management framework that ensures continuous quality improvement. It states: TPH began to implement an Organizational Performance Management Framework by developing resources and conducting training across the organization in applying the framework. TPH has also been supporting the development of program and divisional performance measures that provide meaningful information for managing programs and developing continuous quality improvement initiatives. TPH programs have started to report on access and equity achievements using this Framework. This has been a key step in formally integrating performance measurement into TPH's equity focused programs and services⁶⁹. Progress about food environment programs and initiatives are regularly reported in the annual Toronto Food Strategy reports (LEAD3). For example: Healthy Corner Store Project⁷²
Comments/ notes	

Local Food-EPI	good practice statement
Progress towa	rds reducing health inequalities or health impacts in vulnerable populations and social determinants egularly monitored
Definitions and scope	 Monitoring of overweight and obesity and main diet-related NCDs includes stratification or analysis of population groups where there are the greatest health inequalities including Indigenous peoples and socio-economic strata Includes reporting against targets or key performance indicators related to health inequalities
Context	Municipal context OPHS, established under the <i>Health Protection and Promotion Act, 1990</i> , requires public health units in Ontario to assess population health and make this information available to their local population.
Policy details	 TPH's 2015-2019 Strategic Plan⁶⁰ (outlined in LEAD3) includes the following: Priority Direction 1: Serve the public health needs of Toronto's diverse communities, action plans include: Monitor and report on progress toward health equity
	TPH captured and published population data ⁷¹ on overweight and obesity is stratified based on sociodemographic factors such as sex, age, ethno-racial identity (excluding Aboriginal respondents) immigrants, and income level.
	First published in 2008, TPH released The Unequal City: 2015, Income and Health Inequalities in Toronto ⁷³ report, examining the health disparities between income levels within the city. 34 health status indicators were addressed in the report, including overweight and obesity, cardiovascular disease, and diabetes, which are further stratified based on sex. Aboriginal people were not examined in the report.
	In 2014, the Social Planning Analysis and Research section of the Social Development, Finance & Administration Division at the City of Toronto released the Neighbourhood Equity Index ⁷⁴ to provide a broad quantitative assessment of neighbourhood wellbeing and improvement areas in Toronto. The report is based on data from the Urban Healthy Equity Assessment and Response Too (HEART) @Toronto research initiative. Relevant indicators include assessing the average number of healthier food stores within a 10-minute walking distance from each residential block in a neighbourhood and the age and sex adjusted number of persons age 20+ with diabetes per 100 population.
	Above data is used in a number of ways, including city initiatives to reduce inequity and <u>Wellbeing</u> <u>Toronto</u> , a mapping application which stratifies indicator data based on neighbourhoods in the city.
	In 2013, TPH released Racialization and Health Inequities in Toronto ⁷⁵ report, examining the relationship between racialization and health inequity at the local level in order to better address related issues. Most notably, the report concluded that, "[c]ompared to non-racialized group members, people who identified as East/Southeast Asian were less likely to report being overweight or obese. People who identified as Black were more likely to report being overweight or obese." Aboriginal people were not examined in the report.
Comments/ notes	

Policy area: Funding & resources

Local Food-EPI vision statement: Sufficient funding is invested in 'population nutrition' to create healthy food environments, improved population nutrition, reductions in obesity, diet-related NCDs and related inequalities

FUND1 Po	pulation nutrition budget
The 'populatic	I good practice statement in nutrition' budget, as a proportion of total health spending and/or in relation to the diet-related sufficient to reduce diet-related NCDs
Definitions and scope	 'Population nutrition' includes promotion of healthy eating, and policies and programs that support healthy food environments for the prevention of obesity and diet-related NCDs The definition excludes all one-on-one and group-based promotion (primary care, antenatal services, maternal and child nursing services etc.), food safety, micronutrient deficiencies (e.g. folic acid fortification) and undernutrition Please provide estimates for the budget allocated to the unit within the Department of Public Health that has primary responsibility for population nutrition. The 'Population Nutrition' budget should include workforce costs (salaries and associated on-costs) and program budgets for the 2017-18 financial year (regardless of revenue source), reported separately. The workforce comprises anyone whose primary role relates to population nutrition and who is employed full time, part time or casually by the Department of Health or contracted by the Department of Public Health to perform a population nutrition-related role (including consultants or funding of a position in another government or non-government agency). Exclude budget items related to physical activity promotion. If this is not feasible (for example, a program that combines both nutrition and physical activity elements), please highlight where this is the case With regards to 'health spending', please provide the total budget of the Department of Public Health or relevant department/ministry for the 2017-18 financial year
Context	
Policy details	According to the website of the City of Toronto, in 2014, TPH published the 2014-2023 Capital Budget and Plan. Their Operating budget of \$246.259 million CDN gross and \$52.764 million net was prioritized into many programs and goals, including establishing initiatives to prevent chronic disease/injury prevention by promoting healthy eating to reach 60% of children and youth, increase nutrition education in schools, and menu analysis. TPH also acknowledged combatting rising rates of childhood obesity as an area of importance for their budget ⁷⁶ . In September 2017, a request was made by the City of Toronto's Medical Officer of Health to the Board of Health Budget Committee to update to TPH's 2018 operating budget for the Student Nutrition Program ⁷⁷ . The request included a total net increase of \$2,748,962. The focus of this investment would include strengthening the funding base of existing municipally funded programs, expanding to new programs in public schools and expanding to new programs in independent schools.
Comments/ notes	

FUND2 Res	FUND2 Research funding for obesity & NCD prevention	
Municipal fund	Local Food-EPI good practice statement Municipal funded research and evaluation is targeted for improving food environments, reducing obesity, NCDs and their related inequalities	
Definitions and scope	 Includes the clear identification of research priorities related to improving food environments, reducing obesity, NCDs and their related inequalities in health or medical research strategies or frameworks Includes identifying research projects conducted or commissioned by the government specifically targeting food environments, prevention of obesity or NCDs (excluding secondary or tertiary prevention) It is limited to research projects committed to or conducted within the last 12 months Excludes research grants administered by the government (including statutory agencies) to a research group where the allocation of a pool of funding was determined by an independent review panel Excludes evaluation of interventions (this is explored in 'MONIT3' and should be part of an overall program budget) 	
Context	 Federal context The main research funding for population nutrition in Canada is the Canadian Institutes of Health Research (CIHR). CIHR has funding opportunities for food environment, obesity and NCD research, as well as inequalities, primarily through the Institute for Nutrition, Metabolism and Diabetes and the Institution of Population and Public Health. Health Canada and Public Health Agency of Canada have some opportunities for funding the Grants and Contributions, etc., which are provided on a case-by-case basis. Provincial context The MOHLTC funds Public Health Ontario, which conducts some food environment research and provides evaluation leadership for several provincial food-related policies including the HKCC. 	
Policy details	The Healthy Public Policy Directorate, run and funded by the City of Toronto to conduct research for the city. Most recently, research was done on healthy supermarkets from a food environment perspective (written communication, March 2018). TPH recently funded research on assessing the " <u>effectiveness of self-regulation in limiting the</u> <u>advertising of unhealthy foods and beverages on children's preferred websites in Canada</u> ". The study was conducted by researchers from the University of Ottawa (written communication, March 2018). <i>Note that the journal article was released in February 2018.</i>	
Comments/ notes	Most of the work related to food environments is embedded in TPH's overall budget (written communication, March 2018).	

Policy area: Platforms for Interaction

Local Food-EPI vision statement: There are coordination platforms and opportunities for synergies across government departments, levels of government, and other sectors (NGOs, private sector, and academia) such that policies and actions in food and nutrition are coherent, efficient and effective in improving food environments, population nutrition, diet-related NCDs and their related inequalities

PLATF1 Co	PLATF1 Coordination mechanisms	
There is a form	Local Food-EPI good practice statement There is a formal platform set in place to ensure policy coherence, alignment, and integration relating to food, obesity and diet-related NCD prevention	
Definitions and scope	 Includes a local government issued 'food policy council' where policy and program development relating to food, obesity and diet-related NCD prevention is the main focus Members can be from cross-government or cross-departmental to ensure collaborative planning, implementation or reporting processes, consultation processes for the development of new policy or review of existing policy Includes strategic plans or frameworks that map the integration and alignment of multiple policies or programs across governments and across departments 	
Context	National context All provinces and territories are part of the Federal, Provincial Territorial Group on Nutrition. This group includes representatives from all provincial governments and territorial governments departments of health, or the department responsible for health, and meets quarterly.	
	Provincial context For the Healthy Kids Community Challenge – there is a scientific reference committee consisting of researchers from university and health care sector involved in promoting healthy children and reducing childhood obesity (healthy eating, physical activity). There is an advisory committee for those working in the Indigenous communities. Four health promotion resources centers support the MOHLTC working with local project managers (Nutrition Resource Centre, Physical Activity Resource Centre, HC-Link and Health Promotion Capacity Building).	
Policy details	In 1991, the TFPC ⁷⁸ was established under the Board of Health as a formal platform to address food policy issues in the city. Under their mandate, it states: <i>The TFPC connects diverse people from the food, farming and community sector to develop</i> <i>innovative policies and projects that support a health-focused food system, and provides a</i> <i>forum for action across the food system. TFPC members identify emerging food issues that</i> <i>will impact Torontonians, promote food system innovation, and facilitate food policy</i> <i>development.</i>	
	 The TFPC acts as a community reference group to TPH, with members from cross city-government, as it focuses important food policy initiatives, including: <u>Toronto Food Strategy</u>: The Toronto Food Strategy Team, working alongside the [TFPC], partners with City staff, institutions, community agencies and the private sector to facilitate effective policy and regulatory change and to incubate initiatives to expand access to healthy, affordable and diverse food, and create good food jobs. 	
	Urban Agriculture	
	• <u>Greater Toronto Area Agriculture Action Committee</u> : <i>The</i> [Greater Toronto Area Agriculture Action Committee] was established in 2005 as a result of the foresight and funding from the provincial government and the four regional	

	 municipalities. [They] have since taken a prominent role as an organization committed to working on and advancing food and farming issues to ensure a thriving and integrated food and farming cluster both in the GTA and beyond. Greater Golden Horseshoe Farm and Food Action Plan
	 <u>Toronto Youth Policy Council</u>: [They] help build a just and sustainable food system by working with Toronto's diverse young communities to find solutions to food insecurity. [They] then raise awareness of these issues
	 through [their] seat at the [TFPC], by making deputations at City Hall, or through [their] advocacy work with other food justice organizations. Advocacy in a number of issues presented to Toronto City Council
Comments/ notes	

PLATF2 Pla	tforms for government and food sector interaction
	good practice statement al platforms between local government and the commercial food sector to implement healthy food
Definitions and scope	 The commercial food sector includes food production, food technology, manufacturing and processing, marketing, distribution, retail and food service, etc. For the purpose of this indicator, this extends to commercial non-food sectors (e.g. advertising and media, sports organisations, land/housing developers, private childcare, education and training institutes) that are indirectly related to food Includes established groups, forums or committees active within the last 12 months for the purpose of information sharing, collaboration, seeking advice on healthy food policies Includes platforms to support, manage or monitor private sector pledges, commitments or agreements Includes platforms for open consultation Includes platforms for the government to provide resources or expert support to the commercial food sector to implement policy Excludes joint partnerships on projects or co-funding schemes Excludes initiatives covered by 'RETAIL3' and 'RETAIL4'
Context	
Policy details	The City of Toronto has an established position, Food and Beverage Sector Specialist , who is an industry advisor and in charge of such things as advancing municipal issues related to food and beverage processors, consulting with the food industry, and support members and programs networks (such as the Golden Horseshoe Food and Farming Alliance) ⁷⁹ .
Comments/ notes	

PLATF3 Pla	PLATF3 Platforms for government and civil society interaction	
There are form	Local Food-EPI good practice statement There are formal platforms for regular interactions between government and civil society on food policies and other strategies to improve population nutrition	
Definitions and scope	 Civil society includes community groups and consumer representatives, NGOs, academia, professional associations, etc. Includes established groups, forums or committees active within the last 12 months for the purpose of information sharing, collaboration, seeking advice Includes platforms for consultation on proposed plans, policy or public inquiries Excludes policies or procedures that guide consultation in the development of food policy (see 'GOVER2') 	
Context	Provincial context Ontario Collaborative Group on Healthy Eating and Physical Activity The Ontario Collaborative Group on Healthy Eating and Physical Activity is a provincial collaboration of non-profit, health and academic organizations dedicated to addressing population-based issues relating to healthy eating, physical activity, healthy weights and the determinants of health, including food access, availability and adequacy. Partners on the Advocacy Subcommittee include Canadian Cancer Society, Canadian Diabetes Association, Dietitians of Canada, Heart and Stroke Foundation, Parks and Recreation Ontario, Ontario Public Health Association, OPHEA, and Sustain Ontario. Government representatives from (MOHLTC, OMAFRA, MTCS) have been part of this group in the past.	
Policy details	The TFPC posts dates of monthly meetings of the council, which are open to public involvement. Details of the meeting agendas are also advertised. Formal meetings often have a presentation about a current food topic relevant to the city. Informal meetings are opportunities for TFPC members to plan and work on on-going projects. TFPC archives every food policy decision that has even been proposed for the city (passed and not passed) since 1985 on their website ⁷⁰ . The Board of Health and City Council follows the same procedure as TFPC.	
Comments/ notes	TPH is currently conducting community consultations with regards to the Poverty Reduction Strategy, as well as some related to the sale of caffeinated and alcoholic drinks (written communication, March 2018).	

Policy area: Health-in-all-policies

Local Food-EPI vision statement: Processes are in place to ensure policy coherence and alignment, and that population health impacts are explicitly considered in the development of government policies

HIAP1 Asse	essing the health impacts of food and non-food policies
There are proc	good practice statement esses (e.g. health impact assessments) to assess and consider health impacts during the of food and non-food policies
Definitions and scope	 Includes a government-wide HiAP strategy or plan with clear actions for non-health sectors Includes policies, guidelines, tools and other resources that guide the consideration and assessment of health impacts prior to, during and following implementation of food and non-food-related policies (e.g. HIAs or health lens analysis) Includes the establishment of cross-department or cross-sector governance and coordination structures to implement a HiAP approach Includes workforce training and other capacity building activities in healthy public policy for non-health departments (e.g. agriculture, education, communications, trade) Includes monitoring or reporting requirements related to health impacts for non-health departments
Context	 Provincial context The MOHLTC has developed the Health Equity Impact Assessment (HEIA) tool. The tool is a template and workbook to help identify potential healthy equity impacts of decision making. The tool is meant to be used both within the MOHLTC and its affiliate programs and across all sectors that can implement policies that influence health. The tool provides a template and a workbook to complete the HEIA⁸⁰. The Centre for Addiction and Mental Health has created an online e-learning course to help complete the HEIA⁸¹.
Policy details	In 2014, TPH developed the Toronto Public Health – Health Impact Assessment Tool ⁸² , after the Board of Health recommended that health impact assessment be conducted in policy development across all city divisions. The tool is a workbook divided up into the following steps: 1) Screening – determining whether a health impact is necessary; 2) Scoping – determining the focus, methods, and work plan; 3) Assessment – establishing the health impacts; and 4) Prioritizing and reporting the findings. The document stating that health impacts should be assessed in all policies, as recommended by the Board of Health, was not located online.
Comments/ notes	

Policy area: Support for Communities

Local Food-EPI vision statement: The local government prioritizes coordinated support mechanisms and resources for community-based interventions to create healthy food environments, improved population nutrition, reductions in obesity, diet-related NCDs and their related inequalities

COMM1 M	echanisms to support community-based interventions
The local gover	good practice statement nment has put in place overarching structures to provide broad and coordinated support for aintaining healthy food environments at the community level across multiple settings
Definitions and scope	 Community settings include sporting clubs, recreation centres and groups (e.g. art, music, dance and drama; scouts and guides), youth groups, cultural and religious community groups, community centres and neighbourhood houses, service clubs, men's sheds, community groups involved in gardens or sustainable living, community markets and events, church and other nongovernment groups who provide support to others Includes comprehensive and flexible resources, guidelines and frameworks, expertise and workforce training to support implementation of community-based interventions Includes the establishment of workforce networks for collaboration, shared learning and support across settings Includes recognition or award-based programs to encourage implementation Excludes the implementation of programs that focus on one-on-one or group-based nutrition education or health promotion
Context	Municipal context The Government of Ontario endorsed the HKCC, which includes 45 communities across Ontario to receive resources from the province to encourage healthy eating, physical activity and healthy behaviours for children ⁴⁵ . The HKCC is part of the Healthy Kids Strategy. The second theme of the HKCC was 'Water does Wonders' to encourage water consumption in place of sugary beverages. The City of Toronto is overseeing 4 centers that were selected to deliver HKCC program in 4 communities across Toronto.
Policy details	The City of Toronto provides tips and recommendations for Grocery Shopping, Eating Well with Canada's Food Guide, and Nutrition and Food Access on their <u>website</u> . The City of Toronto provides annual <u>Community Investment Funding</u> to Toronto residents in three areas: Neighbourhood, Community Projects and Events, and Capacity Building grants. The Neighbourhood Grant program is focused on supporting residents who aim to support the 5 theme areas of the Toronto Strong Neighbourhood Strategy 2020, including Healthy Lives (i.e., nutrition workshop, wellness day, gardening event and more). Applicants can apply for the grant online, with funding ranging from \$1000 to \$3000, with a maximum of \$5000 for each Toronto's 39 neighbourhoods in 2018.
	TFPC runs the Food by Ward ⁸³ initiative to help residents identify where the closest food bank, community garden, and farmer's markets are located in their ward (here defined as divisions in the city that are represented by elected councillors). Additionally, the resource is meant to help city officials map under deserved areas experiencing food insecurity, calling for greater attention for aid and increased access to city resources.

	 Food by Ward goals: Highlight the complexity of food resources, networks, and systems in Toronto by mapping food assets. Showcase food assets and activities in each ward to help City Councillors see food assets in their communities and integrate this into broader planning and decision-making at the City. Build tools, skills, capacity, and channels so food leaders are able to move food priorities forward. Strengthen and connect local and city-wide food networks to facilitate conversations on food with City Councillors and city leaders. Advocate for the equitable distribution of food assets in all 44 wards across the city. Note that there will be 47 wards in Toronto by the end of 2018.
Comments/ notes	The <u>Toronto Farmer's Market Network</u> is a resource for residents to identify farmer's markets in the city around the year. The website allows for opportunity to link with producers or vendors and markets. The Network is not affiliated with the City of Toronto.

COMM2 Implementation of social marketing campaigns		
Local Food-EPI good practice statement The local government implements evidence-based public awareness, informational and social marketing campaigns across a range of broadcast and non-broadcast media to promote healthy eating		
Definitions and scope	 Includes television, radio, news media, web-based (including websites and social media), billboards and posters, etc. (see examples in the 'Food promotion' domain) Evidence-informed includes the use of peer-reviewed literature in the design and implementation of the campaign, the use of an existing successful campaign that has been evaluated, or the co-design and testing of campaign messages with the target audience(s) Includes campaigns that focus on promoting the intake of specific foods (e.g. fruit and vegetables, water), reducing intake of nutrients of concern, or supporting the public to make healthy choices (e.g. use of front-of-pack nutrition labels) Includes campaigns that are embedded within and complemented by broader policies and programs 	
Context	Municipal context The Government of Ontario endorsed the HKCC, which includes 45 communities across Ontario to receive resources from the province to encourage healthy eating, physical activity and healthy behaviours for children ⁴⁵ . The HKCC is part of the Healthy Kids Strategy. The second theme of the HKCC was 'Water does Wonders' to encourage water consumption in place of sugary beverages. The City of Toronto is overseeing 4 centers that were selected to deliver HKCC program in 4 communities across Toronto.	
Policy details	 Embedded in their HKCC initiative, the 4 communities run various promotional healthier eating campaigns by running challenges and contests designed for kids and families. The most recent healthy eating contests include: The Water Does Wonders Pledge Challenge to promote drinking water in order to reduce the consumption of sugary beverages The Healthy Kids Lunchbox Challenge to encourage elementary school kids to drink less sugary drinks and more water/white milk Families are able to sign up for challenges and contexts online, and enter for a chance to win prizes. The Savvy Diner campaign was launched in 2013 by TPH to inform local residents about calorie and sodium content in restaurant foods in order to promote menu labelling legislation, backed by effective results of the policy implemented in other cities (including New York City), 	
	reviewed by TPH and the University of Toronto. The goals of the initiative included advocating provincial legislation for menu labelling, educating the public on healthy eating, gaining public support for the campaign, and test-running the policy in small independent restaurants in Toronto ⁸⁴ . The campaign was circulated mostly through social media, posters, and a website, which allowed the public to voice their opinions. After the government of Ontario introduced Bill-45, <i>Healthy Menu Choices Act</i> , in January 2017, the campaign now focuses on providing resources to restaurants operators to support the effective and proper implementation of the policy ⁸⁵ .	

	In April 2009, TPH launched their Diabetes Prevention Strategy 2009-2012, after receiving funding from MOHLTC and the Chief Executive Officers of Toronto Central, Central East, Central, Central West, and Mississauga Halton LHIN. Interventions included a public awareness campaign and initiatives aimed to improve healthy eating. Overall, over three years, the program was able to reach around 2 million people through their public awareness activities ⁸⁶ .
Comments/ notes	TPH regularly does social medial posts that include those on food and nutrition (written communication, March 2018).

COMM3 Food and nutrition in education curricula		
Local Food-EPI good practice statement The local government provides guidance and support for the inclusion of food and nutrition programming for preschool, primary and secondary school children		
Definitions and scope	 Includes food and nutrition as a priority/focus area of the curriculum as a stand-alone component or embedded within other curriculum areas Includes the provision of training, resources, guidelines or expert support to educators to support them in educating students Includes government-funded education programs on healthy eating or growing and preparing food (e.g. kitchen garden programs) Includes government-supported programs that encourage healthy eating in the education setting (e.g. fruit and vegetable snack and water breaks) 	
Context	Municipal context The Government of Ontario endorsed the HKCC, which includes 45 communities across Ontario to receive resources from the province to encourage healthy eating, physical activity and healthy behaviours for children ⁴⁵ . The HKCC is part of the Healthy Kids Strategy. The second theme of the HKCC was 'Water does Wonders' to encourage water consumption in place of sugary beverages. The City of Toronto is overseeing 4 centers that were selected to deliver HKCC program in 4 communities across Toronto.	
Policy details	TDSB runs the <i>Healthy Learning. Healthy Living</i> . initiative which runs various program across schools within districts to enhance food literacy, encourage healthier eating habits, and overall healthy lifestyles. Some examples of programming include: <i>My Food My Way</i> , a nutrition campaign to teach high school students about food literacy; schoolyard gardens to teach children about food sustainability and healthy food choices ⁸⁷ . Toronto's Peer Nutrition Program ⁸⁸ is a free TPH nutrition education program for parents and caregivers with children six years old and under. The official program description states:	
	The program is led by Registered Dietitians and Community Nutrition Educators who facilitate nutrition workshops, training, food skills activities, nutrition screening and nutritional risk assessment. The nutrition workshops are language and culturally specific and are offered city-wide. The program staff also provide food and nutrition training for child minders, nutrition consultations and workshops to community partners.	
	Note that the Peer Nutrition Program has recently gone through a review process and changes to the program are taking place in 2018. The program will hold a more generic name and be integrated in TPH's Early Years work (written communication, March 2018).	
	TPH's Chronic Disease and Injury Prevention staff and the School Health staff both provide guidance and support for the inclusion of food and nutrition programming for primary and secondary school children. [Their] <i>Into Kids Health</i> program is a more intensive program where [they] work with elementary/middle schools and food/nutrition is a big focus area (written communication, March 2018).	
Comments/ notes		

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