

Nutritious Food Basket Protocol

Preamble

The Ontario Public Health Standards (OPHS) are published by the Minister of Health and Long-Term Care under the authority of the Health Protection and Promotion Act (HPPA)¹ to specify the mandatory health programs and services provided by boards of health. Protocols are program and topic specific documents which provide direction on how boards of health must operationalize specific requirement(s) identified within the OPHS. They are an important mechanism by which greater standardization is achieved in the province-wide implementation of public health programs.

Protocols identify the minimum expectations for public health programs and services. Boards of health have the authority to develop programs and services in excess of minimum requirements where required to address local needs. Boards of health are accountable for implementing the standards including those protocols that are incorporated into the standards.

Purpose

The purpose of this protocol is to provide direction to boards of health in regard to fulfilling the requirement of monitoring food affordability. Boards of health can use the costing information for program planning; to inform policy decisions; and to support and promote access to nutritious, safe, personally acceptable foods.

This protocol replaces the *Monitoring the Cost of a Nutritious Food Basket Protocol, 1998*.

A nutritious food basket is a survey tool that is a measure of the cost of basic healthy eating that represents current nutrition recommendations and average food purchasing patterns. Food costing can be used to monitor both affordability and accessibility of foods by relating the cost of the food basket to individual and household incomes.

This protocol is intended to contribute to the maintenance and improvement of the health and well-being of the population, including the reduction of health inequities. This protocol requires boards of health to consider the determinants of health to assist in identifying priority populations and use population health data and information to focus public health action. Implicit in this protocol are the principles of Partnership and Collaboration, Need, and Impact as outlined in the Foundations of the OPHS.

For more information on the background and design of the nutritious food basket and the interpretation of the nutritious food basket data, refer to the *Nutritious Food Basket Guidance Document, 2008* (or as current).

Reference to the Standards

The table below identifies the OPHS program standard and requirement to which this protocol relates.

Standard	Requirement
Chronic Disease Prevention	Requirement #2: The board of health shall monitor food affordability in accordance with the <i>Nutritious Food Basket Protocol, 2008</i> (or as current) and the <i>Population Health Assessment and Surveillance Protocol, 2008</i> (or as current).

Operational Roles and Responsibilities

1) Personnel

The board of health shall:

- a) Assign a Registered Dietitian, employed by the board of health, to be responsible for the overall coordination of food costing. Note: boards of health without a Registered Dietitian on staff must contract the services of a Registered Dietitian.
- b) Conduct in-store costing through board of health staff or designates who have the food knowledge and math skills to act as surveyors.
- c) Have two surveyors conduct the costing of **each store independently, on separate forms, on the same day**, to avoid recording errors. For more information, refer to the *Nutritious Food Basket Guidance Document, 2008* (or as current).
- d) Have a Registered Dietitian conduct training for food surveyors. For more information on training, refer to the *Nutritious Food Basket Guidance Document, 2008* (or as current).

2) Identification of grocery stores

The board of health shall:

- a) Conduct food costing in a minimum of **six** grocery stores within its health unit catchment area. Exception: jurisdictions that have fewer than six grocery stores shall cost all available grocery stores.
- b) Review its list of selected stores on an annual basis to consider whether different stores or any new major chains/groups or independents need to be included.
- c) Divide its health unit into the planning areas customarily used for service delivery or planning purposes to achieve geographic representation.
- d) In health units with both **urban and rural areas**, determine what proportion of the population lives in urban and rural areas and use this as a guide to determine the proportion of urban or rural stores to be selected.
 - i) For the urban part of the health unit, follow the procedure outlined above; and
 - ii) For the rural part of the health unit, choose stores within or outside communities that draw many rural residents for grocery shopping.
- e) Choose grocery stores to cost in each of the planning areas selected.
- f) Refer to the *Nutritious Food Basket Guidance Document, 2008* (or as current) for more information on store selection procedures.

3) Data collection, reporting and information transfer

The board of health shall:

- a) Cost the food items that comprise a nutritious food basket, as deemed by the Ministry of Health Promotion, annually during the month of May, or at a frequency determined by the Ministry of Health Promotion. For the list of food items and food costing forms, refer to the *Nutritious Food Basket Guidance Document, 2008* (or as current).
- b) Survey selected stores within a two-week period.
- c) Complete the costing in any given store in a single visit.
- d) Review all food costing forms to ensure purchase units are correct and enter the information into the cost averaging spreadsheet.
- e) Submit electronic results from the food basket costing to the Senior Nutritionist at the Ministry of Health Promotion by July 1 of each year.

Glossary

Chain: An operator of four or more retail stores; stores are also called “corporate stores.”²

Designate: Includes students and individuals contracted by the board of health or volunteers with the board of health.

Food affordability: Food affordability is the economic sufficiency to procure an adequate diet that meets nutrient needs with safe, acceptable foods. Food affordability is heavily influenced by market forces, and impacts food accessibility and food security.

Food knowledge: Basic knowledge and experience in food selection, preparation and storage.

Grocery store: Any retail store selling a line of dry grocery, canned goods, or non-food items, plus some perishable items. Excludes stores that may not regularly have all the food basket items in the sizes specified (e.g., warehouse-type stores, stores that require membership, convenience stores).

Independent: Generally, an operator of fewer than four retail stores²

Nutritious food basket (NFB): A food costing tool that is a measure of the cost of healthy eating based on current nutrition recommendations; a list of foods that can be priced to estimate the average cost of feeding different age and gender groups. Food costing can be used to monitor both the affordability and accessibility of foods by relating the cost of the food basket to individual/family incomes³

Rural: As a general guideline, rural is the population living in towns and municipalities outside the commuting zone of larger urban centres (i.e., outside the commuting zone of urban centres with a population greater than 10,000)⁴

Urban: As a general guideline, an urban area is considered a self-sufficient community of at least 10,000 residents that for the most part, do not commute out daily. For less densely populated health unit jurisdictions, this may be areas with a population of greater than 10,000; for more densely populated health unit jurisdictions, this may be areas with a population greater than 100,000⁴

References

1. *Health Protection and Promotion Act*, R.S.O. 1990, c. H.7.
Available from http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_90h07_e.htm.
2. Condon GH, editor. Who's who: Canadian Grocer magazine's annual directory of chains and groups in Canada. Toronto: Rogers Media; 2007. p. 9.
3. Health Canada. A revised national nutritious food basket: final report. Ottawa, ON: Health Canada, Healthy Living Environment Directorate, Nutrition Programs Unit, 1997.
4. du Plessis V, Beshiri R, Bollman RD, Clemenson H. Definitions of “rural.” Ottawa, ON: Statistics Canada, 2002.
Available from <http://www.statcan.ca/english/research/21-601-MIE/2002061/21-601-MIE2002061.pdf>.