

RENFREW COUNTY AND DISTRICT BOARD OF HEALTH

Regular Board Meeting

Tuesday, June 28, 2016

The regular Board meeting of the Renfrew County and District Board of Health was held in Pembroke at 10:00 a.m. with the following members present.

Present:

Mayor Janice Visneskie Moore	Chair
Ms. Carolyn Watt	Vice-Chair
Mayor Michael Donohue	Member
Mr. J. Michael du Manoir	Member
Mayor Jane Dumas	Member
Mr. Wilmer Matthews	Member
Councillor Christine Reavie	Member
Mayor John Reinwald	Member
Ms. Marcia Timm	Member

Staff:

Dr. Kathryn Reducka	Acting Medical Officer of Health/Chief Executive Officer
Ms Marilyn Halko	Executive Assistant

Regrets:

Warden Peter Emon	Member
p.m.	
Councillor Christine Reavie	Member
Mayor John Reinwald	Member

1. Call to Order

Chair Janice Visneskie Moore called the meeting to order at 10:00 a.m.

2. Agenda Approval

A motion by Ms Marcia Timm, seconded by Mr. Wilmer Matthews,
To approve the agenda.

Carried

3. Declarations of Conflict of Interest

No conflicts of interest were declared.

4. Minutes of Previous Meeting (Approval)

i) Regular Board meeting, May 31, 2016

A motion by Mayor Michael Donohue, seconded by Mr. Michael du Manoir,
That the minutes of the Regular Board of Health meeting of May 31, 2016 be
approved as amended.

Carried

5. Staff Reports

- i) Report from Dr. Kathryn Reducka, Acting Medical Officer of Health/Chief Executive Officer (A/MOH/CEO)

Dr. Reducka reported that Casual Friday, for RCDHU staff, began on the first Friday of June, with a loonie donation to charity. Over \$100 was collected during the month of June for the Canadian Cancer Society. This charity was chosen in honour of a RCDHU staff member who died recently.

- ii) Report from Managers

Carla Walters, Manager of Health Promotion and Clinical Services Division and Michael Grace, Acting Manager of Environmental Health reviewed a report that was circulated to the Board members that was included in the Board material. The two managers presented their business plan to the Resources Committee at the meeting held June 15, 2016. Further discussion of their plan will take place during the Board Committee Report portion of the meeting.

- iii) *Immunization of School Pupils Act (ISPA) Update*

A report, appended to these minutes, was presented by Vicki Benoit, Coordinator of Health Promotion and Clinical Services with Erin Vereyken, Registered Nurse, and Heather Yolkowskie, Public Health Nurse.

Ontario's *Immunization of School Pupils Act (ISPA)* required that parents of children attending primary or secondary school provide their local medical officer of health proof of their child's immunization against the following designated diseases: Tetanus, diphtheria, polio, pertussis, measles, mumps, rubella, meningococcal, and varicella.

RCDHU assessed immunization coverage and contacted parents of students for whom they did not have a complete immunization record. Exemptions from immunization requirements were allowed for medical reasons (i.e., prior immunity or medical contraindication) or based on an affidavit of conscience or religious belief. Children for whom RCDHU did not have required immunization records or a valid exemption could be suspended from school.

Summary of Activities Related to Enforcement of ISPA in the 2015 – 2016 School Year

4,975 - first notices were sent from December 2015 to April 2016

1,956 - final notices were sent from April 2016 to May 2016

1,006 - suspension orders issued were issued in May 2016

2,267 - ISPA enquiries were received by Health Info Line from April 2016 to May 2016

1,836 – students who received immunizations at RCDHU during April to May 2016

As a result of collaboration and support from parents, principals, school boards, health care providers and enhanced internal response from RCDHU staff Vicki

Benoit reported that the immunization assessment, notification and school suspension process was completed on June 5th, 2016. This means that RCDHU has the required immunization records or a valid exemption on file for students attending schools in Renfrew County and District. Therefore, RCDHU is in full compliance with the Immunization of School Pupils Act.

iv) Carolyn Froats-Emond, Registered Dietitian, RCDHU

A PowerPoint presentation by Carolyn Froats-Emond, Registered Dietitian, RCDHU, is appended to these minutes. She proposed a resolution focused on increasing incomes in Ontario in an effort to reduce food insecurity and poverty rates be distributed to key politicians with endorsements by the RCDHU Board of Health.

A motion by Mr. Wilmer Matthews, seconded by Mayor Jane Dumas,

To receive the Nutritious Food Basket report, *Cost of Eating Well in Renfrew County and District - 2015* for information and sharing with the community.

Carried

A motion by Councillor Christine Reavie, seconded by Mr. Wilmer Matthews,

To move that a letter of endorsement be sent to the Ontario Society of Nutrition Professionals in Public Health re: *Position Statement on Responses to Food Insecurity*.

Carried

A motion by Mayor Michael Donohue, seconded by Mayor Jane Dumas,

To move that a letter stating support for the announcement of a Basic Income pilot in the 2016 Ontario Budget be sent to the Honourable Chris Ballard, Minister Responsible for the Poverty Reduction Strategy.

Carried

A motion by Ms. Marcia Timm, seconded by Mr. Wilmer Matthews,

To move that a letter be sent to the Honourable Helena Jaczek, Minister of Community and Social Services, urging the government to raise social assistance rates immediately, indexed to inflation to reflect the costs of nutritious food and adequate housing as informed by annual results from the Ministry of Health and Long-Term Care's Nutritious Food Basket survey and the Canada Mortgage and Housing Corporation Rental Income (Ontario) reports.

Carried

A recommendation was made to revisit the food insecurity and poverty topic in the fall. At that time, a letter would be sent to newly appointed Special Advisor on Basic Income Pilot for Ontario, the Honourable Hugh Segal.

6. Delegations

- i) The guest delegation of Jennifer Layman, Publisher and Kallie Doering, Coordinator, of **Health Matters** presented to the Board. They were invited to speak to the Board on the recommendation of the Strategic Planning and Stakeholders Communication Committee about their publication **Health Matters – The Ottawa Valley’s Health Magazine** that is published three times a year. It has been produced and designed by **Forward Thinking Marketing Agency**, since 2013. 15,000 magazines are printed and distributed to businesses in the region that include: hospitals, grocery stores and other areas where people pick up health information. **Health Matters** is produced entirely with the support of businesses and organizations, ensuring that the publication will continue to be a sustainable source for local health information. The publisher encourages all healthcare professionals to participate in the magazine that sends out health messages to people in the region. The free magazine is a print-version option for individuals interested in topics related to health. The magazine can be accessed on-line at ovhealth.ca.

A motion by Mayor Michael Donohue, seconded Ms. Carolyn Watt,

To refer to the Strategic Planning and Stakeholders Communication Committee for the discussion of the allocation of strategies and tactics regarding the Health Matters magazine.

Carried

7. Correspondence

See appended letters.

8. Board Committee Reports

- i) **Governance Committee**

A motion by Mr. Wilmer Matthews, seconded by Ms. Marcia Timm,

To accept the Governance Committee meeting minutes from Monday, May 9, 2016.

Carried

A Special Board meeting, “**Governance as Leadership Model**” workshop, facilitated by Dr. James Nininger has been approved for September 23, 2016.

Mr. Wilmer Matthews, Chair of the Governance Committee, reported that the Public Appointments Secretariat will appoint a replacement for the upcoming vacancy on the Board of Health in September. Another appointee will be added later at the Minister’s discretion.

It was shared by Dr. Reducka that Paula Stewart has suggested that the Eastern Ontario Health Units could organize a risk management workshop, in order to share resources as a group.

There was a discussion by the Board regarding the status of meetings.

A motion by Mr. Michael du Manoir, seconded by Ms. Carolyn Watt,

That the following recommendations be accepted: that Board decisions cannot be made by email; emails are for information sharing only and no issue resulting from an email can be materially advanced; all Board meetings requiring decisions must be attended in person; all committee meetings can be held through teleconferencing; In-camera meetings require in person attendance, no teleconferencing.

Carried

Procedural By-law 2016-02 will need to be revised and approved at a Fall meeting, to reflect the Board's decisions.

Summer coverage, in the absence of MOH, is as follows:

- July 13, 2016 to August 14, 2016 - Dr. Ian Gemmill, Medical Officer of Health and Chief Executive Officer, Kingston, Frontenac, Lennox & Addington Public Health
- August 15, 2016 to August 31, 2016 - Dr. Paula Stewart, Medical Officer of Health, Leeds, Grenville & Lanark District Health Unit.

ii) **Resources Committee**

Mayor Michael Donohue, Chair of the Resources Committee, reported that Carla Walters, Manager of Health Promotion and Clinical Services Division and Michael Grace, Acting Manager of Environmental Health had presented a business case to the committee at the June 15, 2016 meeting. The report "***Need for Additional Health Promotion and Clinical Services Division Manager***" is appended to the minutes. The committee recommended that the non-union management position be created.

A motion by Mayor Michael Donohue, seconded by Ms. Carolyn Watt,

That the current position of Manager, Health Promotion and Clinical Services and Chief Nursing Officer (CNO) be amended to Manager, Health Promotion and Family Health and CNO and that the position of Acting Manager, Clinical Services be created with direct reporting line to the Medical Officer of Health and that the position of Coordinator, Clinical Services will be held vacant pending review in one years' time and these changes shall be effective July 4, 2016.

Carried

Ms. Heather Daly signed a contract as the new Director of Corporate Services, with a start date of July 4, 2016.

Job Descriptions to be updated at yearly performance appraisals and will be reviewed ongoing. There is an absence of description for senior management positions.

The Human Resources electronic files are being created and are ongoing. They

need to be reviewed and revised.

On June 21, 2016, a letter of counter offer was sent by Dr. Reducka and Mayor Michael Donohue regarding the head office lease.

iii) **Strategic Planning and Stakeholder Communications Committee**

A motion by Mayor Jane Dumas, seconded by Ms. Carolyn Watt,

To accept the minutes of the Strategic Planning and Stakeholder Communications Committee held on Friday, June 17, 2016.

Carried

Mayor Jane Dumas, Chair of the Strategic Planning and Stakeholder Communications Committee (SPSC), gave a report regarding the committee's first meeting.

Renfrew County and District Strategic Plan 2015-2019 were colour printed and laminated, per Councillor Christine Reavie's suggestion. The Plan will be displayed at each Board member's place at the table, during regular and committee meetings, then collected and stored for the next meeting.

Website and social media presence needs to be closely monitored. The committee recommended forwarding to the Governance Committee oversight to determine how to control message, media modality, site monitoring, and responses – develop an overarching vision

Currently, Dr. Reducka has sent out requests for website quotes. She requested that Renfrew County website designers tell the committee how to enhance and make the RCDHU website more appealing. The committee is recommending the use of photographs taken in Renfrew County and District.

With the hire of Ms. Heather Daly, as Director of Corporate Services the committee is hopeful that staff will be part of communication plan with an IT component.

It was suggested by Mayor Michael Donohue that the **Annual Report** be reviewed by the Board before being distributed to the community.

iv) **Ad-Hoc Hiring Committee**

The Ad-Hoc Hiring Committee was struck to hire, review and decide on the candidate for Director of Corporate Services. Ms. Heather Daly will begin as RCDHU's Director of Corporate Services starting Monday, July 4, 2016. Her probation period will be for 6 months.

Bring back to September Board of Health meeting to determine if work of the committee complete and to the sunset the committee.

9. **By-Laws**

- i) None

10. Business Arising

i) HAST Audit Follow-up

Renfrew County and District Health Unit Audit Follow-up Draft Report June 2016 was received prior to this meeting.

The auditors will visit the Health Unit for a follow-up on July 5, 2016 from 2:30 to 3:30 p.m. Mayor Janice Visneskie Moore will attend with Dr. Reducka.

ii) alPHa AGM

See alPHa Dispositions of Resolutions. It was requested that resolutions for next years' alPHa conference be circulated through the Governance Committee before representatives attend.

Mayor Visneskie Moore reported that Dr. Eric Hoskins spoke at the alPHa conference regarding the LHINs. He said that they would establish programming but would not control funding. More information regarding the LHINs will be available in the Fall, and legislation will be passed in the Spring.

11. New Business

i) Accounts Payable

A motion by Mayor Jane Dumas, seconded by Mr. Wilmer Matthews,

That the schedule of accounts payable for Renfrew County and District Health Unit operations for the period May 31, 2016 – June 15, 2016 be approved for payment in the amount of \$832,768.75.

Carried

Reconciliation forms were circulated and seen by Board. They are appended to minutes.

12. Committee of the Whole

A motion by Mayor Michael Donohue, seconded by Ms. Carolyn Watt,

That the meeting move to Committee of the Whole.

Carried

A motion by Mayor Michael Donohue, seconded by Ms. Carolyn Watt,

To move in-camera.

Carried

Dr. Reducka excused herself from the meeting.

A motion by Ms. Marcia Timm, seconded by Mayor Jane Dumas,

To offer Dr. Kathryn Reducka a 6 months less a day contract, from September 1, 2016 to February 27, 2017, as Acting Medical Officer of Health and Chief Executive Officer of Renfrew County and District Health Unit.

Carried

Signing authority effective July 20, 2016 will include Ms. Heather Daly, Director of Corporate Services and the Chair of the Board, Mayor Janice Visneskie Moore or the Vice-Chair of the Board, Ms. Carolyn Watt. If direction is needed for signing authority then a Special Board meeting will be called.

If there is an outbreak during the summer the covering MOH may need to be on-site at the health unit.

13. Date of Next Meeting

Special Meeting to be held September 23, 2016, at 10:00 a.m. for a workshop by Dr. James Nininger.

The next regular Board of Health meeting is scheduled for Tuesday, September 27, 2016, at 10:00 a.m.

14. Confirmatory By-Law

A motion by Mr. Michael du Manoir, seconded by Ms. Carolyn Watt,
To accept confirmatory by-law.

Carried

15. Adjournment

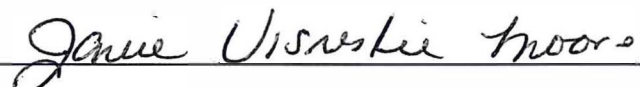
A motion by Ms. Marcia Timm, seconded by Mr. Wilmer Matthews,
That the meeting be adjourned.

Carried

The meeting adjourned at 3:55 p.m.



Acting, MEDICAL OFFICER OF HEALTH



CHAIR



RENFREW COUNTY AND DISTRICT HEALTH UNIT (RCDHU)

Health Promotion and Clinical Services Division

Vaccine Preventable Diseases Program

Board of Health Report

June 28, 2016

Immunization Requirements for School Attendance:

Ontario's *Immunization of School Pupils Act* (ISPA) requires that parents of children attending primary or secondary school provide their local medical officer of health proof of their child's immunization against the following designated diseases:

Tetanus, diphtheria, polio, pertussis, measles, mumps, rubella, meningococcal, varicella

- RCDHU assesses immunization coverage and contacts parents of students for whom we do not have a complete immunization record.
- Exemptions from immunization requirements are allowed for medical reasons (i.e., prior immunity or medical contraindication) or based on an affidavit of conscience or religious belief.
- Children for whom RCDHU does not have required immunization records or a valid exemption may be temporarily suspended from school.

Immunization Assessment, Notification and School Suspension Process

Phase 2 update from the March 29th, 2016 Board of Health presentation:

- Press release was issued, informing parents of immunization reminder notices to be issued and potential suspension notices, as required.
- Assessment of immunization student records completed and notifications forwarded to parents of students from Pembroke, Renfrew, Arnprior and Barry's Bay and area schools for whom we did not have complete immunization records.
- Students in Deep River, Eganville, Cobden, Beachburg, Westmeath, Douglas and Petawawa area schools received a *Final Suspension Notice*. Parent(s) were informed that the suspension would come into effect on **May 11, 2016** for up to 20 school days.
- Students in Pembroke, Renfrew, Arnprior and Barry's Bay area schools who still had outstanding immunization information were sent a *Final Suspension Notice*. Parent(s) were informed that the suspension would come into effect on **May 18, 2016** for Arnprior, Barry's Bay and Pembroke schools and **May 25, 2016** for schools in Renfrew and remainder of Pembroke schools for up to 20 school days.
- Dedicated telephone lines were established due to the increased volume of calls.
- Several staff from Pembroke and Renfrew offices were deployed to assist with calls, immunization record assessments, walk-in inquiries, data entry and immunization clinics. In addition, nursing services were utilized by contracted agency.
- Additional immunization clinics were scheduled to meet demands for immunizations, including evening clinics. Drop-in clinics were offered during the month of May.

- In May, suspension orders were issued to school principals for students for whom we still did not have a complete immunization record. If the missing immunization information was provided by the parent(s) before the suspension date, the suspension order was cancelled.
- A total of 1,006 suspension orders were issued by the Acting MOH. Suspension dates were as follows: on May 11, 2016, 368 orders were issued; on May 18, 2016, 486 orders were issued; and on May 25, 2016, 152 orders were issued.
- As a result of collaboration and support from parents, principals, school boards, health care providers and enhanced internal response from RCDHU staff we are pleased to report that the immunization assessment, notification and school suspension process was completed on June 6th, 2016. ie. RCDHU has the required immunization records or a valid exemption on file for students attending schools in Renfrew County and District.
- RCDHU is in full compliance with the *Immunization of School Pupils Act*.

**Summary of Activities related to Enforcement of the
Immunization of School Pupils Act, 2015/16 School Year
Renfrew County and District Health Unit**

	Number
First notices sent (Dec 2015-April 2016)	4975
Final notices sent (April-May 2016)	1956
Suspension orders issued (May 2016)	1006
Calls received on Health Info Line about ISPA requirements (April-May 2016)	2567
Clients who received immunizations from Health Unit (April-May 2016)	1,836

Respectfully Submitted By,



Vicki Benoit, Coordinator, Health Promotion and Clinical Services

Staff Report: Food Insecurity in Renfrew County and District – Action Required

To:	Dr. Reducka, MD Acting Medical Officer of Health and CEO Chair and Members of the Board of Health, Renfrew County and District Health
From:	Carolyn Froats-Emond, RD
Date:	June 22, 2016
Prepared by:	Carolyn Froats-Emond, RD

A. Recommendations:

1. The Board of Health receive the Nutritious Food Basket report, *Cost of Eating Well in Renfrew County and District - 2015* for information and sharing with the community.
2. The Board of Health send a letter of endorsement to the Ontario Society of Nutrition Professionals in Public Health re: *Position Statement on Responses to Food Insecurity*.
3. The Board of Health send a letter to Chris Ballard, Minister Responsible for the Poverty Reduction Strategy stating support for the announcement of a Basic Income pilot in the 2016 Ontario Budget.
4. The Board of Health send a letter to Helena Jaczek, Minister of Community and Social Services urging the government to raise social assistance rates, indexed to inflation to reflect the costs of nutritious food and adequate housing as informed by annual results from the Ministry of Health and Long-Term Care’s Nutritious Food Basket survey and the Canada Mortgage and Housing Corporation Rental Income (Ontario) reports.

B. Implications and Impact

There are no financial implications for the board of health arising from this report.

This report addressed the following requirements of the Ontario Public Health Standards (Revised October 2015): Foundational Standard 3, 4, 5, 8, 9, 10; Chronic Disease Prevention 2, 7, 11, 12

C. Issue Background

C.1 Nutritious Food Basket

The Ontario Public Health Standards (OPHS), Chronic Disease Prevention Standards Requirement #2, states: “The board of health shall monitor food affordability in accordance

with the Nutritious Food Basket Protocol, 2008 (or as current) and the Population Health Assessment and Surveillance Protocol, 2008 (or as current).”¹

The Nutritious Food Basket (NFB) is a standardized provincial survey tool that measures the cost of basic healthy eating. Each year, the Renfrew County and District Health Unit conducts the NFB survey as mandated by the OPHS. NFB survey results are used as a benchmark measure of the local cost of basic healthy eating and to assess whether or not low-income households have sufficient income to pay for a healthy diet when the cost of housing is considered.

Comparing the cost of the Nutritious Food Basket to individual/family incomes provides a realistic snapshot of barriers to healthy eating for people living in poverty. See Appendix A for the full report *The Cost of Eating Well in Renfrew County and District – 2015*.

C.2 Household Food Insecurity

Household food insecurity is defined as inadequate or insecure access to food because of financial constraints.² Food insecurity is measured on the household level, so more precisely the term is ‘household food insecurity’ but it often is used interchangeably with ‘food insecurity’ for simplification.

Food insecurity is a serious public health problem. In 2013, 624,200 Ontario households (12.5 per cent) experienced food insecurity.³

Food insecurity is a local issue. According to combined 2011-2013 data from Cancer Care Ontario, the prevalence of household food insecurity was 11.6 per cent for Renfrew County and District, similar to the combined Ontario average (12.0 per cent).⁴ Compared to the provincial average the prevalence of household food insecurity was significantly lower in Eastern Ontario (7.5 per cent) and Ottawa (7.3 percent).⁵

Food insecurity is the strongest predictor of nutritional inadequacies.⁶ People experiencing food insecurity worry about not having enough to eat, compromise the quality or quantity of food consumed, or reduce their food intake (e.g., skip meals).

Food insecurity greatly impacts health and well-being. Adults who are food insecure have poorer self-rated health and are more likely to suffer from chronic conditions such as diabetes, high blood pressure and anxiety. Children who experience food insecurity have an increased risk of developing asthma and depression in adolescence and early adulthood.⁷ Food insecurity can be harmful to a child’s growth, with potential health risks due to lower consumption of fruits and vegetables, milk products, or other important sources of vitamins and minerals.⁸

It is also more difficult to manage chronic conditions for people who are food insecure.⁹ Significantly, being food insecure is strongly associated with becoming a high-cost user of health care.¹⁰

C.3 Local Food Insecurity

In May 2015, the Registered Dietitian conducted the NFB pricing across Renfrew County and District. According to the 2015 NFB data, the cost of healthy eating for a reference family of four in Renfrew County and District was \$201.54 per week, or approximately \$873 per month.

The Cost of Eating Well in Renfrew County and District 2015 (Appendix A) provides detailed information about the NFB survey and the corresponding income scenarios. Annually, the Ontario Society of Nutrition Professionals in Public Health (OSNPPH) Food Security Workgroup disseminates the NFB Income Scenario Spreadsheet (created by the North Bay Parry Sound District Health Unit) to support public health dietitians with their determinants of health work related to the cost of healthy eating.

Table 1: Monthly Income and Cost of Living Scenarios for 2015 compares the average cost of food and rent for families and individuals who receive a limited income from Ontario Works (OW), minimum wage, Ontario Drug Disability Support Program (ODSP), and the Old Age Security/Guaranteed Income Supplement.

As Table 1 demonstrates, when housing and food costs account for a high proportion of income or exceed income, little or no income remains to cover the cost of other basic needs. A reference family of four accessing Ontario Works would spend approximately 43% of their monthly income towards rent, and 40% on food. This leaves only 17% to cover basic expenses including bills.

A single male accessing Ontario Works would find himself \$204 in the negative at the end of the month. Clearly, he would be unable to afford adequate housing, nutritious food and all of the other costs of living. In reality, people usually choose to pay their rent and other fixed expenses such as heat, electricity, transportation, child care, drug costs and clothing. Food becomes a discretionary expense, resulting in a diet of poor nutritional value.

The cost of living scenarios illustrate that individuals and families with a limited income must spend more than 30% of their income on rent, and this leaves them with inadequate funds to purchase sufficient nutritious food on a consistent basis. In Canada, housing is considered affordable if shelter costs account for less than 30 per cent of household income.¹¹

D. Responses to Food Insecurity

In November 2015, the Ontario Society of Nutrition Professionals in Public Health (OSNPPH) released its *Position Statement on Responses to Food Insecurity* (Appendix B). This document and its associated infographic (Appendix C) highlight the public health consequences as a result of food insecurity and the urgency of addressing food insecurity. The Position Statement highlights the inadequacies of food charity as a response to food insecurity, and calls for the implementation of a basic income guarantee as an effective, long term solution to reduce food insecurity rates.

The Position Statement has already been endorsed by the Association of Local Public Health Agencies and the Ontario Public Health Association, along with a growing list of public health units, community groups and noted food security researchers. It is recommended that the Board of Health endorse the Position Statement to support awareness raising on the health impacts of food insecurity and the need for long-term, policy solutions.

Support for the concept of a basic income is growing in Ontario. In June 2015, the Association of Local Public Health Agencies (ALPHA) demonstrated leadership by providing organizational endorsement for the concept of a basic income guarantee as a policy option for reducing poverty and for providing opportunities for those living with low incomes (Appendix D – ALPHA Resolution A15-4).¹²

Subsequently, the 2016 Ontario Budget identified as one of its priorities a commitment to working with communities, researchers and other stakeholders in 2016 to design and implement a basic income pilot project.¹³ It is recommended that the Board of Health send a letter of support to the provincial government recognizing this initiative.

Implementation of a basic income pilot and the mechanisms for coordination with current social assistance programs remain to be determined. It is common for social services case workers to refer their clients to charitable food programs such as food banks and soup kitchens to make up for inadequate social assistance rates. However, as the OSNPPH Position Statement demonstrates, charitable food programs are inadequate in many ways, and they do not decrease household food insecurity.

In the meantime, in 2012 64.5 per cent of households reliant on social assistance were food insecure in Ontario.¹⁴ The NFB results demonstrate the need to increase social assistance rates to a level that reflects the rising cost of nutritious food and safe housing. It is important that public health units use their NFB data to promote incomes that are adequate to reduce poverty and therefore food insecurity. While a basic income is being investigated as a policy option for reducing poverty, it is recommended that the Board of Health send a letter urging the Ontario

government to increase social assistance rates immediately, indexed with inflation to reflect the actual costs of living.

E. Conclusion

The Board of Health can be an effective and credible advocate for food security in Renfrew County and District, consistent with its mandate to address the social determinants of health. The findings presented in the *Cost of Eating Well in Renfrew County and District – 2015* and the OSNPPH *Position Statement on Responses to Food Insecurity* reinforce the need for continued leadership to reduce poverty, ensure equitable access to healthy food, and promote good health for all Ontarians.

F. Appendices

- A. The Cost of Eating Well in Renfrew County and District – 2015
- B. Ontario Society of Nutrition Professionals in Public Health Food Security Workgroup. *Position Statement on Responses to Food Insecurity*. 2015 www.osnpph.on.ca
- C. Ontario Society of Nutrition Professionals in Public Health Food Security Workgroup. Infographic: Food insecurity is a serious public health problem. 2015 www.osnpph.on.ca
- D. Association of Local Public Health Agencies. (2015) ALPHa Resolution A15-4; Public Health Support for a Basic Income Guarantee.
http://c.ymcdn.com/sites/www.alphaweb.org/resource/collection/CE7462B3-647D-4394-8071-45114EAAB93C/A15-4_Basic_Income_Guarantee.pdf

References

¹ Ontario. Ministry of Health and Long-Term Care. Ontario public health standards. Toronto, ON: Queen's Printer for Ontario; 2008 [revised 2015 Oct; cited 2016 June 1]. Retrieved from:

http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/ophs_2008.pdf [PDF].

² Tarasuk, V, Mitchell, A, Dachner, N. (2014). Household food insecurity in Canada, 2012. Toronto: Research to identify policy options to reduce food insecurity (PROOF). [cited 2016 June 1]. Retrieved from <http://nutritionalsciences.lamp.utoronto.ca/>

³ Tarasuk, V, Mitchell, A, Dachner, N. Household food insecurity in Canada, 2013. Toronto: Research to identify policy options to reduce food insecurity (PROOF). [cited 2016 June 1]. Retrieved from <http://nutritionalsciences.lamp.utoronto.ca/>

⁴ Cancer Care Ontario. Cancer Fact. Understanding regional food insecurity helps set system-level prevention priorities. (June 2015). [cited 2016 June1] Retrieved from <http://www.cancercare.on.ca/cancerfacts/>

⁵ Cancer Care Ontario. Cancer Fact. Understanding regional food insecurity helps set system-level prevention priorities. (June 2015). [cited 2016 June1] Retrieved from <http://www.cancercare.on.ca/cancerfacts/>

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- ⁶ Vogt J, Tarasuk V. Analysis of Ontario sample in Cycle 2.2 of the Canadian Community Health Survey (2004). Toronto: Public Health Research, Education and Development (PHRED) Program; 2007 [cited 2016 June 17] Retrieved from http://s3.amazonaws.com/zanran_storage/www.phred-redsp.on.ca/ContentPages/53476754.pdf
- ⁷ The Ontario Society of Nutrition Professionals in Public Health. (2015). Position Statement on Responses to Food Insecurity. [cited 2016 June 1]. Retrieved from: [http://www.osnp-ph.on.ca/upload/membership/document/position-statement-2015-final.pdf](http://www.osnp-ph.on.ca/upload/membership/document/position-statement-2015-final_1.pdf#upload/membership/document/position-statement-2015-final.pdf)
- ⁸ Roshanafshar S, Hawkins E. Food Insecurity in Canada. (March 2015). [cited 2016 June 20] Retrieved from <http://www.statcan.gc.ca/pub/82-624-x/2015001/article/14138-eng.pdf>
- ⁹ Vozoris NT, Tarasuk VS. Household food insufficiency is associated with poorer health. *J Nutr.* 2003;133(1):120-126S
- ¹⁰ Tarasuk V, Cheng J, de Oliveira C, Dachner N, Gundersen D, Kurdyak P. Association between household food insecurity and annual health care costs. *Can Med Assoc J.* 2015; 1-8. doi:10.1503/cmaj.150234.
- ¹¹ Canada Mortgage and Housing Corporation: Affordable Housing Definition. [cited 2016 June 1]. Retrieved from http://www.cmhc-schl.gc.ca/en/inpr/afhoce/afhoce_021.cfm
- ¹² Association of Local Public Health Agencies. (2015) aPHa Resolution A15-4; Public Health Support for a Basic Income Guarantee. Retrieved from REF http://c.ymcdn.com/sites/www.alphaweb.org/resource/collection/CE7462B3-647D-4394-8071-45114EAAB93C/A15-4_Basic_Income_Guarantee.pdf
- ¹³ Ontario Ministry of Finance. 2016 Ontario Budget. Making Everyday Life Easier. [cited 2016 June 1]. Retrieved from: <http://www.fin.gov.on.ca/en/budget/ontariobudgets/2016/bk5.html>
- ¹⁴ Tarasuk V, Mitchell A, Dachner N. Household food insecurity in Canada, 2013. Research to identify policy options to reduce food insecurity (PROOF). Retrieved from: <http://nutritionalsciences.lamp.utoronto.ca/.2015> [cited 2016 June 17].