



**Broader Public Sector Investment Fund Project**

**Local Foods to Health Care Facilities  
Final Report**

**March 26, 2012**

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## **1. Executive Summary**

### **1.1 Project Background and Scope**

Norfolk County's Local Foods to Health Care Facilities Project was funded by the Greenbelt Fund, a sister organization of the Friends of the Greenbelt Foundation. With funding from the Ontario Government, the Fund is helping to increase the amount of Ontario food served in the Broader Public Sector (BPS). A leader in promoting locally grown food, Norfolk County expanded its work into the County's health care facilities. Upon completion of the four phases (March 2012), there were three local health care facilities and one processor remaining in the project. For this project, the Foodland Ontario definition of local was used and included all products of Ontario.

### **1.2 Objectives**

There were six objectives during the project's seven-month timeframe:

- Increase the amount of Ontario food in all categories (produce, meat, dairy, other);
- Create a sustainable partnership with a competent food distribution company that can fulfill the requirements of the project;
- Create new supply partnerships with Norfolk Growers;
- Increase processing of local Ontario food products in a format that is not only consistent with existing processes, but also financially economical as compared to current suppliers;
- Amend institutional purchasing policies and procedures that support buying local Ontario foods;
- Develop resources to communicate key messages and project results which broaden awareness.

### **1.3 Partners**

Norfolk County was the lead partner for the project, contributing both in-kind and financially. The Project Coordinator was hired by Norfolk County for the timeline of the project. Norfolk District Business Development Corporation (NDBDC) was both an in-kind and financial contributing partner to the project. There were three separately operated health care partners who contributed their in-kind time: Cedarwood Village (a private long-term care and retirement apartment complex), Norfolk General Hospital and Nursing Home (a full-service, community-based hospital with a nursing home attached) and Norview Lodge (a County-operated long-term care facility). Each facility has a separate Group Purchasing Organization (GPO) and their own philosophy and engagement of the local foods initiative. The remaining processor was VG Meats, contributing both financially and in-kind time to the project. The Project Steering committee involved the partners' designated staff and met on a monthly basis with the Project Coordinator. This allowed for collaborative environment among the project partners. Due to internal company financial and restructuring limitations, both 100 Mile Market and Naturally Norfolk ceased their contribution (as of Q3) to the project.

## 1.4 Results

The original aim of 30% of total menu items to feature local products was a very aggressive goal and was not achieved within the project timeframe. A more realistic goal was 10% within the timeframe of the project and 30% within the next five years. The objective of implementing 10 new local products and 25 replacement local products was achieved in total by the two partners– Norfolk General Hospital and Norview Lodge –in great collaboration with VG Meats. All three health care facilities are committed to increasing their local purchases by a total of 5% over the next year and possibly 10% over the next three years.

After 100 Mile Market ceased operation, two produce wholesalers with an emphasis on local produce and who deliver to Norfolk County– Bamford Product and Green City Produce –were investigated. All three health care facilities are considering Green City Produce for their fresh produce business. Many of the larger Norfolk Growers are well established with the mainline distributors such as Gordon Food Services, Bamford and Sysco.

VG Meats received the majority of the equipment fund to purchase a commercial oven and chilling system. This equipment purchase has given them the ability to complete a wide range of ‘made to orders’ for the health care partners. It is estimated that VG Meats will increase their reach and sales by 5 to 10% in the next year. In addition, the equipment has created greater efficiencies (time, labour cost and food safety) at the processor level (VG Meats), allowing for the health care facilities, chefs and cooks to use their skill sets more effectively and efficiently on-site. Both Cedarwood Village and Norfolk General Hospital purchased a Blixer that will allow them to puree more local food on-site. Norview Lodge purchased a mixer to make mashed Ontario potatoes, and desserts with local ingredients like blueberries.

The health care partners will continue to ask for more Ontario vendors from their GPOs and mainline distributors. They will request a specified Ontario product list from their distributors for ease of searching and tracking their local purchases. They plan to implement changes to the criteria on how they select a vendor when purchasing independently of their GPO. The health care partners were surprised by the increased cost of the local food in comparison to the contracted price of a similar product through their GPOs. If they wanted to purchase a local food, sometimes it was a special order which added complexity into their daily routine. Moving forward, they will consider purchasing local when all other attributes (food safety, quality, delivery and pricing) are considered comparable.

During the project, Norfolk County installed Ontario’s Garden gateway signage to promote local food to tourists as well as members of the community. A variety of communication resources, including flyers and grocery pads, were developed during the project. The Recipe Challenge was a great success to further raise awareness and communicate the project to a broader audience. The video created from the Recipe Challenge is available on Norfolk County’s website and is part of the final communication package for the partners.

## **1.5 Final Conclusions and Recommendations**

Without this funded project, none of the three health care facilities could have coordinated the effort to identify product of origin, researched and sourced Ontario products. The coordinated 'Purchase Ontario Food initiative for BPS facilities' is in a startup stage. All areas of the food service value chain still need assistance to understand the best practices, procurement models (including engagement and commitment from GPOs), food safety practices and distribution logistics to get the food from the Ontario field to the Ontario BPS table. Now that a system is in place, the health care facilities can continue with purchasing local to meet the goals of 10% in the next three years and possibly 30% in the next five years.

This project has raised awareness with local growers. It has given smaller, local growers another option/channel to consider for their products. In order for smaller growers to move forward, a level of coordination and collaboration is needed, especially for producers delivering their own product. There needs to be focused attention and perhaps funding for Ontario Farming/Agriculture to put in best practices both on the farm (emphasis on quality, e.g. cooling/storage practices) and distribution logistics from the farm to a central location (other than the Toronto Food Terminal).

The project has connected the partner, VG Meats, to other Broader Public Sector Investment Fund recipients, creating the opportunity for them to expand their business outside the community of Norfolk County. This project has gained much local media attention, which has stimulated interest from within and outside the community.

Another conclusion for this project was to celebrate the small successes. The original objectives were too aggressive for the project time period. A more realistic timeframe for this project was a three year completion stage based on the following three factors: the current Ontario food service distribution system, including how Ontario food is identified (and available); the level of collaboration among the Norfolk County farmers and those across a larger, manageable geographic region such as the South Central Ontario Region (SCOR) to allow for direct purchasing while considering the health care facilities' food safety and packaging requirements and the need for consistent delivery and quality; and the health care facilities' GPOs and distributors engagement point, contracts and supporting systems in the local food initiative.

Well defined, validated research to verify that local foods, specifically produce, have superior quality, freshness and nutritional value as compared to imported produce would be an excellent support document to have for this project and future projects of this nature. In addition, research to demonstrate the cost benefit (increased patient/resident satisfaction and health, less food waste, etc.) of implementing local food would be a valuable tool. Moving forward, it is recommended that this research be completed and these research study tools and articles be made available to the Broader Public Sector.

## 2. Project Background

The local food movement has been growing in recent years, for environmental, social, economic, and food quality reasons. Many provincial, municipal and regional governments and groups are promoting the increased purchasing of local food, especially in public institutions. Health care represents a large market for local foods, where more than 115,000,000 meals are served every year in Ontario's hospitals and Long Term Care (LTC) homes. Recently, many health care facilities have begun showing interest in increasing their procurement of local food.

A leader in promoting locally grown food, Norfolk County expanded its work into the County's health care facilities. Norfolk County's Local Foods to Health Care Facilities Project was funded by the Greenbelt Fund, a sister organization of the Friends of the Greenbelt Foundation. With funding from the Ontario Government, the Fund is helping to increase the amount of Ontario food served in the Broader Public Sector (BPS). Upon completion of the four phases (March 2012), there were three local health care facilities and one processor remaining in the project. For this project, the Foodland Ontario definition of local was used and included all products of Ontario. This report includes a variety of *tools* to assist with the process of increasing the amount of local foods in health care facilities.

### 2.1 Objectives

There were six objectives during the project's seven-month timeframe (August 2011 to March 2012):

- Increase the amount of Ontario food in all categories (produce, meat, dairy, other);
- Create a sustainable partnership with a competent food distribution company that can fulfill the requirements of the project;
- Create new supply partnerships with Norfolk Growers;
- Increase processing of local Ontario food products in a format that is not only consistent with existing processes, but also financially economical as compared to current suppliers;
- Amend institutional purchasing policies and procedures that support buying local Ontario foods;
- Develop resources to communicate key messages and project results which broaden awareness.

### 2.2 Partners

Norfolk County was the lead partner for the project, contributing both in-kind and financially. The Project Coordinator was hired by Norfolk County for the timeline of the project. Norfolk District Business Development Corporation (NDBDC) was both an in-kind and financial contributing partner to the project. The project involved three separately operated health care facilities (in-kind contribution to the project) in Simcoe, Ontario. Each facility has a separate Group Purchasing Organization (GPO) and their own philosophy and engagement of the local foods initiative:

- Cedarwood Village is a private long-term care facility with 91 residents and a retirement apartment complex with 40 one and two bedroom units. They have a conventional kitchen preparing 30% of their food from scratch;
- Norfolk General Hospital and Nursing Home is a full-service, community-based hospital with 80 acute beds, a complex continuing-care facility with 26 beds, and nursing home with 80 beds.

They have a cafeteria that is open during the lunch hours with 84 seats serving residents, visitors, staff and volunteers. They have a conventional kitchen and tray line, and they outsource about 90% of their food;

- Norview Lodge is a County-operated long-term care facility with 179 residents. They have a conventional kitchen preparing 30% of their food from scratch.

The project involved a local farmer/processor, VG Meats, who contributed both financially and in-kind time. VG Meats is a family-owned and operated business. It is a vertically integrated farm, abattoir, and value-added meats processor. Their product line includes beef, pork, poultry, hams, bacon, sausages, and made-to-order products.

The Project Steering Committee involved the partners' designated staff and met on a monthly basis with the Project Coordinator. This allowed for collaborative environment among the project partners.

*Due to internal company financial and restructuring limitations, both 100 Mile Market and Naturally Norfolk ceased their contribution (as of Q3) to the project.*

### **3. Phase 1 – Product of Origin Assessments**

#### **3.1 Purpose**

To undertake audits of existing food service purchasing and document product origins in order to establish a baseline at each of the health care facility locations. This would identify products which were imported that could be replaced with locally produced products.

#### **3.2 Outcome**

The product of origin assessments conducted at each of the three facilities focused on produce (fresh and frozen), meat, fish and poultry (fresh and frozen), eggs (shelled, processed and liquid), dairy (fluid milk, hard cheese, cottage cheese, yogurt and sour cream) and other frozen foods (entrée and further processed proteins). Not all the information was available (due to distributor tracking methods and manufacturers' willingness to source and share the information). The percentage of local foods purchased varied from each facility. Based on the data that was available during the timeframe of the project, it was estimated that, from all three health care facilities, 15% of the produce was local, 10% of the meat, fish and poultry was local, 20% of the eggs was local, 25% of the dairy was local and 5% of other frozen foods was local.

#### **3.3 Lessons Learned**

The product of origin phase was the most challenging and time consuming part of the project. It added complexity that the Project Coordinator was representing all of the three health care facilities to gather this information, and some of the collective efforts were more successful than others. The coordinated 'Purchase Ontario Food initiative for BPS facilities' across the Province is in a startup stage. An example of this was that the partner's distributors did not have product of origin information in their system, nor did they have a tracking tool for the Ontario purchases. When the manufacturers were contacted, some of them were not able to source, or were not willing to share, the product of origin information. The timeframe for this phase of the project was underestimated due to the following two factors: the information needed to be gathered for the three separate facilities and the limited product tracking and product of origin information available in the value chain.

#### **3.4 Recommendations**

It is important to keep in mind that at the time of this project, the 'Purchase local Ontario' initiative was still in the startup stage. The engagement, commitment level, and the information availability and sharing from GPOs and their vendors varied within the health care sector. It is recommended that each partner have an on-site individual (staff) conduct the audit. A very useful guide called '*How to conduct the Product of Origin Audit*' was developed during the BPS initiative and is included in the Appendices of this report. It is recommended the guide be used during a similar product of origin phase of future projects.

## **4. Phase 2 – Increase Local Foods**

### **4.1 Purpose**

To work closely with the project health care partners to review their existing menus in order to increase the number of menu items used for local products with 10 new menu items that feature Ontario products, and replace 25 products with local substitutes. In addition, have 30% of total menu items feature local products.

### **4.2 Outcome**

The 10 new menu items and 25 replacement products were achieved in total by two of the partners, Norfolk General Hospital and Norview Lodge, in great collaboration with VG Meats. Twelve of the replacement products were supplied by VG Meats. The original deliverable to have 30% of the total menu items feature local products was too aggressive for the project time period. Now that a system is in place, the health care facilities can continue with purchasing local to meet the goals of an increase of 5% over the next year, then 10% in the next three years and finally 30% in the next five years.

There was outreach to the Norfolk County growers throughout the project. A growers' lunch meeting coordinated during the project revealed that there are logistics and distribution challenges to and from the County for getting Norfolk's produce to the Broader Public Sector. Norfolk County has some very successful growers with retail contracts both in Canada and the USA. Two of these growers were contacted but neither was interested in the food service market, specifically with health care's limited budgets. The Project Coordinator attended on-farm tours and Norfolk County Agriculture Advisory Committee meetings. The <http://www.norfolkfarms.com/> website is an excellent resource for a list of the farms and foods available in Norfolk County.

### **4.3 Lessons Learned**

The health care partners were surprised by the cost of the local food in comparison to the contracted price of a similar product through their GPOs. Often, if the local food was not contracted, it was more expensive. If they wanted to purchase a local food, sometimes it was a special order which added complexity into their daily routine. There was good collaboration with value chain partners to find opportunities to increase local food purchases through product substitution. The project has connected the partner, VG Meats, to other Broader Public Sector Investment Fund recipients, creating the opportunity for them to expand their business outside the community of Norfolk County.

This project has raised awareness with local growers. It has given smaller, local growers another option/channel to consider for their products. In order for smaller growers to move forward, a level of coordination and collaboration is needed, especially for producers delivering their own product. There needs to be focused attention and perhaps funding for Ontario Farming/Agriculture to put in best practices both on the farm (emphasis on quality e.g. cooling/storage practices) and distribution logistics from the farm to a central location (other than the Toronto Food Terminal). Many of the larger Norfolk

Growers are well established with the mainline distributors such as Gordon Food Services, Bamford and Sysco.

#### **4.4 Recommendations**

The health care partners will continue to ask for more Ontario vendors from their GPOs and mainline distributors. They will continue to sample new Ontario products using the '*New Product Review Sheet*' in the Appendices of this report. They will request a specified Ontario product list from their distributors for ease of searching and tracking their local purchases. They plan to implement changes to the criteria on how they select a vendor when purchasing independently of their GPOs. There are two helpful checklists '*Checklist for Choosing a Grower/Farmer as a Supplier*' and '*Checklist for Choosing a Distributor/Manufacturer*' in the Appendices of this report.

More collaboration and information sharing among all of the BPS recipient projects is recommended to identify the best Ontario food service distribution in order to get the food from the Ontario field to the BPS table. For the smaller growers in Norfolk County, an increased level of collaboration may allow for direct purchasing, while considering the health care facility's food safety and packaging requirements, and need for consistent delivery and quality. One of the three health care facilities could champion working with the Norfolk County growers and other BPS facilities to order produce prior to the season and assist with delivery logistics during the season. There is a '*List of Norfolk County Growers*' in the Appendices of this report. These growers expressed interest in working with the BPS during the project timeframe.

It is recommended that VG Meats continue to expand their business within and outside the community of Norfolk County to other BPS facilities to create the opportunity for more local meats options.

It is recommended that Norfolk County monitor Naturally Norfolk's (the processor and packager of individually quick frozen fruits and vegetables) status to determine if there is potential for them to support the Broader Public Sector's needs locally and within the larger region.

## **5. Phase 3 – Equipment**

### **5.1 Purpose**

To identify the equipment requirements to competitively process recommended Ontario products to increase local food options.

### **5.2 Outcome**

VG Meats received the majority of the equipment fund to purchase a commercial oven and chilling system. This equipment purchase has given them the ability to complete a wide range of made-to-order products for the health care partners. It is estimated that VG Meats will increase their reach and sales by 5 to 10% in the next year. In addition, the equipment has created greater efficiencies (time, labour cost and food safety) at the processor level (VG Meats), allowing for the health care facilities, chefs and cooks to use their skill sets more effectively and efficiently on-site. Both Cedarwood Village and Norfolk General Hospital purchased a Blixer that allowed them to purée more local food on-site. Norview Lodge purchased a mixer to make mashed Ontario potatoes, and desserts with local ingredients like blueberries.

### **5.3 Lessons Learned**

Project partner VG Meats learned the required specifications of the BPS sector, specifically health care, including size, packaging, format (cooked) and price, to competitively offer products. This information was translated into the purchasing of the equipment to better position VG Meats as a 'go-to' supplier.

The health care partners recognized the value in the equipment purchase to allow for more local options to meet their menu complexity, for example, puréed diets.

### **5.4 Recommendations**

It is recommended that the Province provide funding to assist the smaller farmers to purchase the proper equipment (e.g. coolers) and implement more sophisticated process controls on the farm to enable them to compete on a national (and global) scale for quality, freshness, food safety and nutritional value using Ontario products.

## 6. Phase 4 – Communications, Procedures and Policies

### 6.1 Purpose

#### *Communications*

To develop a marketing and promotion program for the partner institutions in addition to broader community awareness.

#### *Procedures and Policies*

To encourage the institutions to modify their operations and policies to facilitate the use of more local and sustainable food. To communicate with key decision makers about the importance of buying and serving locally sourced foods and ensuring that procurement decision making includes consideration for quality and method of production.

### 6.2 Outcome

#### *Communications*

- There was a project launch in September 2011 to bring together all key stakeholders and decision makers, including growers, distributors, partners, residents, the Mayor of Norfolk County and media.
- There has been significant local media attention about this project. This included three articles in the Simcoe Reformer, an article in Silo, two interviews on 98.9, an interview and article with Easy 101 FM and an article in the Ontario Farmer.
- Throughout the project, the Project Coordinator posted on a designated blog on the NorfolkFarms site. This allowed for project dissemination beyond the project partners and the BPS.
- There were requests for the Project Coordinator to speak at the Norfolk County Economic Development Symposium (January 2012) and present a webinar (February 2012) about Local Foods to Health Care Facilities in cooperation with Agri-food for Healthy Aging.
- Norfolk County installed Ontario Garden gateway signage 'From Our Fields to your Table' to promote local food to tourists as well as members of the community during the project. Smaller Norfolk County Gateway Signs were made available for each partner to hang at their facility to promote Ontario's Garden and support the project initiative.
- A variety of communication resources, including flyers and grocery pads, were developed during the project.
- Throughout the project, the Ontario's Garden Tradeshow Booth was displayed at each of the three health care facilities to raise awareness about the project with staff, visitors, residents and patients. The Project Coordinator spent time at each facility at the booth discussing local foods and giving out project flyers, grocery pads and recipe books.
- One of the final marketing and communication activities included the Recipe Challenge. Chefs from Cedarwood Village, Norfolk General Hospital and Norview Lodge squared off in a competition for the best recipe to serve to their residents and patients. The Challenge was a

great success to further raise awareness and communicate the project to a broader audience. The video created from the Recipe Challenge is available on Norfolk County's website.

- A final communication package was developed for the partners with the Recipe Challenge video and information sheets about local foods and the project.
- The Project Coordinator has been asked to speak at two industry events as well as a South Central Ontario Region (SCOR) meeting post project timeframe.

#### *Procedures and Policies*

- The procurement processes vary from partner to partner. All of the partners were members of Group Purchasing Organizations (GPO), which allowed the facilities to leverage the purchasing power of a group of businesses in order to obtain volume-based discounts from vendors. Both Silver Group and Health Pro, as national companies were not engaged in the local initiative at the beginning of the project. The Project Coordinator spoke to both groups, and while there was enthusiasm about local foods, none had developed a specific local policy or a procedure to request information from vendors about product of origin. The GPOs are a contractual agreement, which can mandate what products are purchased and from whom.
- The day to day purchasing by the partners for dairy, meat, poultry, fish, eggs and frozen foods was done via wholesale distributors and manufacturers such as Sysco, Summit Foods, Gordon Food Services and Natrel Milk etc. Norfolk General Hospital sourced low fat cheese from Jensen's. Some of the distributors and manufacturers were engaged in the local initiative, providing product tracking information and product of origin to the partners. The project coordinator spoke to all the distributors and asked for improvements to this information for the partners.
- Produce was not as strictly controlled and discounted by the GPOs, and as a result, the partners had relationships with smaller local wholesalers, such as J P Forte's Inc., located in Brantford. With the small produce wholesalers commitment to the local foods initiative, product of origin identification, food safety and product tracking was a concern.
- Norview Lodge had been engaged in purchasing locally since 2009. However, none of the partners had developed an explicit, documented policy to increase the portion of the purchases they source locally.
- The partners were interested in purchasing locally, and in some cases, they would purchase food locally on a seasonal basis, either by having staff visit a local farm gate establishment or by developing seasonal relationships with certain producers for particular products. The level of local purchasing in the produce category seemed to vary based on staff efforts, interest and time availability to source, price and process these items.
- The following elements were mentioned repeatedly as major factors in buying decisions: tight budgets, lack of staff time, ease of ordering (online, order guides, etc.), delivery logistics and the labour associated with the additional processing local food often requires. All were seen as major challenges to increasing the facility's local purchases.

## 6.3 Lessons Learned

### *Communications*

- Each health care partner had a different level of engagement for the project based on a number of factors. However, all the communications efforts assisted in raising awareness for and educating staff about the project.
- The media outreach allowed for the increased community awareness in Norfolk County.
- This project has raised awareness with local growers. It has given smaller, local growers another option/channel to consider for their products.
- The Recipe Challenge introduced a fun, collaborative element to the project, empowering the chefs to become involved.

### *Policies and Procedures*

- The coordinated 'Purchase Ontario Food initiative for BPS facilities' is in a startup stage. All areas of the food service value chain still need assistance to understand the best practices, procurement models (including engagement and commitment from GPOs), food safety practices and distribution logistics to get the food from the Ontario field to the Ontario BPS table.
- The Long Term Care Homes Act 2007 –O.Reg.79/10 Menu Planning 71. part (2) (b) states that the licensee of a long-term care home shall ensure that each menu *provides for a variety of foods, including fresh seasonal foods each day from all food groups in keeping with Canada's Food Guide as it exists from time to time.*
- The current supply chain offers different access points to producers based on production volumes, pricing and business services such as invoicing, delivery, etc.

## 6.4 Recommendations

### *Communications*

- It is recommended that some level of ongoing local foods communications be continued.
- It is recommended that this report be shared with the Broader Public Sector of South Central Ontario Region (SCOR) and the networks/associations of the health care facilities across the Hamilton, Brant, Niagara, Haldimand LHIN and the South West LHIN.
- It is recommended that the Recipe Challenge video be referred to and used as often as possible to convey the scope of the project to a broader audience.
- It is recommended that the Recipe Challenge become an annual event.

### *Policies and Procedures*

- Demand drives supply; making Ontario requests clear to suppliers and distributors will compel them to deliver good customer service. Working with suppliers to identify local products is the fast track to getting more local on the menu and more local product development happening at the manufacturing level.

- It is encouraged to continue to review the GPO's true commitment to the local initiative in order to leverage buying power into desirable procurement options such as local foods, while considering quality and price.
- It is recommended that GPOs without a local food policy, consider establishing a local policy to offer choice to their members. The policy would include vendor product of origin information during the RFP and tender process. This would allow vendors to identify their locally sourced foods and offer local food options to the GPO's purchasing members.
- Each health care partner was unique and was operated independently, therefore, careful consideration will be necessary to develop an explicit policy to increase the portion of the purchases sourced locally.
- It is encouraged that the health care partners consider implementing a minimum percentage of locally sourced fresh produce and protein as part of their purchasing policies.
- It is recommended to implement 'local criteria' for selecting a vendor independently of GPOs with a statement such as, *'Our facility will purchase local when all other attributes (food safety, quality, delivery and pricing) are considered comparable.'*
- It is requested the Province review its legislation which governs or influences purchasing policies of municipalities and other BPS organizations to ensure that such legislation in no way prohibits or discourages 'buy local' programs for food purchases.

## 7. Final Conclusions and Recommendations

Without this funded project, none of the three health care facilities could have coordinated the effort to identify product of origin, researched and sourced Ontario products. The coordinated 'Purchase Ontario Food initiative for BPS facilities' is in a startup stage. All areas of the food service value chain still need assistance to understand the best practices, procurement models (including engagement and commitment from GPOs), food safety practices and distribution logistics to get the food from the Ontario field to the Ontario BPS table. In order to increase local food procurement in a health care facility, it is important to first study how much of the food currently purchased is already of local origin. This can be determined by conducting a food origin audit, which helps establish baseline values for local food purchases. These baselines can then be used for setting targets for increases in procurement, and for tracking changes in the purchase of local, Ontario foods. Now that a system is in place, the health care facilities can continue with purchasing local to meet the goals of 10% in the next three years and 30% in the next five years.

This project has raised awareness with local growers. It has given smaller, local growers another option/channel to consider for their products. In order for smaller growers to move forward, a level of coordination and collaboration is needed, especially for producers delivering their own product. There needs to be focused attention and perhaps funding for Ontario Farming/Agriculture to put in best practices both on the farm (emphasis on quality, e.g. cooling/storage practices) and distribution logistics from the farm to a central location (other than the Toronto Food Terminal). Operational challenges are largely concentrated around issues of certification, food safety, and traceability for smaller growers working with the health care partners due to the compromised immune systems of their patients and residents.

The project has connected the partner, VG Meats, to other BPS recipients, creating the opportunity for them to expand their business outside the community of Norfolk County. Although the BPS includes sectors from schools to jails to long-term care, the budgets and general product requirements can differ greatly among each sub-sector. This is a challenge for an Ontario food processor trying to accommodate the entire BPS for the attributes of product size, price and quality expectation. This project has gained much local media attention, which has stimulated interest from within and outside the community. This project has created a role for a project coordinator which has an economic impact on the Ontario workforce. The project has connected and supported other Norfolk County businesses, including a media group, two restaurants/catering companies and an equipment company.

Another conclusion for this project was to celebrate the small successes. The original objectives were too aggressive for the project time period. A more realistic timeframe for this project was a three year project based on the following three factors: the current Ontario food service distribution system, including how Ontario food is identified (and available); the level of collaboration among the Norfolk County farmers to allow for direct purchasing while considering the health care facilities' food safety and packaging requirements, and the need for consistent delivery and quality; and the health care

facilities' GPOs and distributors engagement point, contracts and supporting systems in the local food initiative.

The health care partners expressed that both time and budgets are challenges for them, as they continue on without the project coordinator in April (after the funding is complete). Their daily routine does not allow for extra work. As stated throughout this report, to realize the initial impact and start of this project, it is estimated that another two to four years would be beneficial to allow for the full implementation. In terms of budget, this is a challenge, as the health care facilities in general do not have extra budget to order a product just because it is from Ontario. Also, they must follow Ministry guidelines and set menus yearly.

Well defined, validated research to verify that local foods, specifically produce, have superior quality, freshness and nutritional value as compared to imported produce would be an excellent support document to have for this project and future projects of this nature. In addition, research to demonstrate the cost benefit (increased patient/resident satisfaction and health, less food waste, etc.) of implementing local food would be a valuable tool. Moving forward, it is recommended that this research be completed and these research study tools and articles be made available to the Broader Public Sector.

## 8. Appendices

## 8.1 Glossary

**Broker:** person or company that represents a number of manufacturers, suppliers, producers. Brokers market various brands of products in order to increase their distribution.

**Food Service Distributor:** companies that sell and deliver food and non-food products (for example Sysco, Summit, Gordon Food Services, Flanagans, etc.).

**Food Service Operator:** companies contracted to operate a food service department. In health care, most food service operators are contracted for retail food services (such as cafeterias), but in some cases, they can be contracted for patient food services as well. Both food service operators and food service departments get their food from Food Service Distributors.

**GPO:** a Group Purchasing Organization (GPO) leverages the significant buying power of its members in order to secure bulk rates and rebates through collective purchasing. A GPO awards contracts to food manufacturers and distributors on behalf of its members through a Request for Proposal process. These contracts are managed by the individual health care facilities and their food service operators.

**Local:** for the context of this document, “local” refers to definitions established by Foodland Ontario. In general, local foods are those that are grown/raised in the province of Ontario.

<http://www.foodland.gov.on.ca/english/industry/ind-definitions.html>

**Manufacturer/processor:** company that produces processed food products (can be minimally processed such as frozen chopped vegetables, or can be more highly processed such as canned soup). Some manufacturers and processors work with fixed suppliers, while others do not. For example, in a supply-managed system, the milk products for an Ontario-made cheese will always come from Dairy Farmers of Ontario. A pasta sauce maker may source their tomatoes from any number of suppliers, inside or outside of the province.

**RFP:** Request for Proposal. An RFP is the first stage in a contracted procurement process, where product information and price bidding is requested of suppliers for certain products/services. The information in these bids is used to make decisions on which supplier(s) win the contract for that product/service. The criteria used to select the supplier(s) are fair and transparent.

**SKU:** Stock-keeping unit. These are unique numbers or codes assigned to all items in order to track inventory or availability, or when ordering items. These numbers are used when a facility orders any items from their suppliers. The same product can have more than one SKU number if the distributor and manufacturer have not harmonized their systems.

**Supplier:** used informally to refer to the collective of people and companies on the supply-side of the food system who provide a buyer with a good or service (e.g. food distributors, manufacturers, processors, brokers, etc.).

**Supply Management:** a federally regulated program that uses a **quota system** to control volumes produced by certain food industries. Supply management restricts production to ensure the market is not flooded with a certain good and guarantees the income of its producers. In Canada, the dairy, poultry (chicken and turkey), and egg (table and hatching egg) industries are supply-managed, along with the maple syrup industry in Quebec. These industries are represented by **marketing boards**, which promote the interests of their industry along with their product.

**8.2 How to Conduct the Product of Origin Audit**

### 8.3 New Product Review

|                                    |  |
|------------------------------------|--|
| Date                               |  |
| Product Category                   |  |
| Product Name                       |  |
| Manufacturer                       |  |
| Distributor                        |  |
| Local – Norfolk County or Ontario? |  |

**Visual Appeal**

1                      2    3    4    5  
 Poor    Average    Excellent

Other comments:

---

**Aroma**

1                      2    3    4    5  
 Poor    Average    Excellent

Other comments:

---

**Taste**

1                      2    3    4    5  
 Poor    Average    Excellent

Other comments:

---

**Texture**

1                      2    3    4    5  
 Poor    Average    Excellent

Other comments:

---

**Overall**

1                      2    3    4    5  
 Poor    Average    Excellent

Other comments:

---

### 8.4 Checklist for Choosing a Grower/Farmer as a Supplier

| Questions   | Yes | No |
|---|-----|----|
| Does the supplier have a food safety system in place?   |     |    |
| Can the supplier provide their most recent 3 <sup>rd</sup> party food safety audit?   |     |    |
| Is the supplier CanadaGAP certified?<br><a href="http://www.canadagap.ca/en/canadagap-program/overview.aspx">http://www.canadagap.ca/en/canadagap-program/overview.aspx</a> |     |    |
| Does the supplier provide food service packaging?   |     |    |
| Considering food safety factors, is the condition of the delivery vehicle suitable?   |     |    |
| Can the supplier provide consistent quality throughout the season?  |     |    |
| Can the supplier provide consistent delivery throughout the season?   |     |    |
| Does the supplier meet the price expectations of the facility?  |     |    |
| Other Notes:  |     |    |

### 8.5 Checklist for Choosing a Distributor/Manufacturer

| Questions  | Yes | No |
|--|-----|----|
| Does the supplier have a food safety system in place?                                  |     |    |
| Can the supplier provide their most recent 3 <sup>rd</sup> party food safety audit?    |     |    |
| Does the supplier have a local foods policy in place?                                  |     |    |
| Does the supplier have a system in place to track local purchases for their customers? |     |    |
| Is the supplier provincially inspected?  |     |    |
| Is the supplier federally inspected?   |     |    |
| Does the supplier provide food service packaging?                                      |     |    |
| Considering food safety factors, is the condition of the delivery vehicle suitable?    |     |    |
| Can the supplier provide consistent quality throughout the season?                     |     |    |
| Can the supplier provide consistent delivery throughout the season?                    |     |    |
| Does the supplier meet the price expectations of the facility?                         |     |    |
| Other Notes:   |     |    |

## 8.6 List of Norfolk County Growers

A list of Norfolk County Growers and products is available on the Norfolk Farms website and this link [http://www.norfolkfarms.com/index.php?Itemid=53&option=com\\_bdirectory&task=viewkeywords&Itemid=53](http://www.norfolkfarms.com/index.php?Itemid=53&option=com_bdirectory&task=viewkeywords&Itemid=53)

The following growers have shown an interest in working directly with the Broader Public Sector:

### Cedar Lane Blueberry Farm – *Blueberries*

1331 Charlotteville Road 7  
Simcoe, ON N3Y 4K5  
Jane Koluk  
Phone: 519-426-7987  
[cedarlanebbf@execulink.com](mailto:cedarlanebbf@execulink.com)

### EZ Grow Farms Ltd – *Blueberries and grape tomatoes*

1771 Norfolk County Road 23, RR#2  
Langton, ON N0E 1G0  
Helen and Darryl Zamecnick  
Phone: 519-875-4751  
[darryl@ezgrow.ca](mailto:darryl@ezgrow.ca)  
<http://www.ezgrow.ca>

### Heritage Lane Produce – *Weekly produce boxes*

1242 10th Concession Road  
Langton, ON N0E 1G0  
Gregory and Victoria Boyd  
Phone: 519-875-3177  
[info@heritagelaneproduce.com](mailto:info@heritagelaneproduce.com)  
<http://www.heritagelaneproduce.com>

### Kent Creek Orchard – *Apples and honey*

1725 McDowell Road East, RR#6  
Simcoe, ON N3Y 4K5  
Frank and Natalie Hahn  
Phone: 519-426-6148  
[franatan@kwic.com](mailto:franatan@kwic.com)

### Kent Kreek Berries – *Strawberries, blueberries, and raspberries*

3173 Highway 3 West, RR#1  
Simcoe, ON N3Y 4J9  
Phone: 519-426-0924  
Fax: 519-428-0774  
[zelem@kwic.com](mailto:zelem@kwic.com)  
<http://www.kentkreekberries.com>

Lake Erie Farms Inc. – *English cucumbers and greens for mixed salad*  
Box 247, 2373 Hazen Road, RR#1  
Tillsonburg, ON N4G 4H5  
Trish Fournier  
Phone: 519-875-2485  
[trishf@lef.infosathse.com](mailto:trishf@lef.infosathse.com)

Magalas Produce Ltd. – *Strawberries, zucchini, sweet corn, cantaloupe, tomatoes and roma tomatoes.*  
315 Concession 6, RR#1  
Waterford, ON N0E 1Y0  
Cheryl Magalas  
Phone: 519-443-4342  
Fax: 519-443-6564  
[magpro@kwic.com](mailto:magpro@kwic.com)

Norfolk Fruit Growers Association – *Apples and berries*  
99 Queensway East, Box 279  
Simcoe, ON N3Y 4L1  
Tom O'Neill  
Phone: 519-426-0640  
Fax: 519-426-2012  
<http://www.nfga.ca>

Pristine Gourmet c/o Persall Fine Foods Co. – *Oils, soy sauce, vinegars, bean and edamame*  
1211 Villa Nova Road  
Waterford, ON N0E 1Y0  
Jason Persall  
Phone: 519-443-4658  
[info@pristinegourmet.com](mailto:info@pristinegourmet.com)  
<http://www.pristinegourmet.com>

Round Plains Plantation – *Sweet potatoes*  
3515 Highway 24, north of Simcoe (Round Plains)  
Waterford, ON N0E 1Y0  
Bob and Juli Proracki  
Phone: 519-443-5847  
[proracki@kwic.com](mailto:proracki@kwic.com)  
<http://www.ontariosweetpotato.com>

Shabatura Produce – *Strawberries, sweet corn, field tomatoes, roma tomatoes, shepherd peppers, bell peppers, specialty peppers and cabbage*  
RR#1 Windham Centre, ON N0E 2A0  
Mary Shabatura  
Phone: 519-443-5919  
Fax: 519-443-4643  
[shabaturaproduce@xplornet.com](mailto:shabaturaproduce@xplornet.com)  
<http://www.shabaturaproduce.com>

Sovereign Farms – *Heirloom tomatoes, sweet and hot peppers, squash, beans and cucumbers*

130 Lutesville Road, RR#1

Waterford, ON N0E 1Y0

Brenda Sovereign

Phone: 519-443-4061

Fax: 519-443-4040

[info@sovereignfarms.ca](mailto:info@sovereignfarms.ca)

[sovereign.farms@silomail.com](mailto:sovereign.farms@silomail.com)

<http://www.sovereignfarms.ca>

Spearit Farms – *Asparagus*

1655 North Road, RR#5

Langton, ON N0E 1G0

Brenda Lammens

Phone: 519-875-4449

[spearit@kwic.com](mailto:spearit@kwic.com)

Wholesome Pickins – *June-bearing and ever-bearing strawberries, raspberries, tomatoes, peppers, pumpkins, melons, sweet corn and new potatoes*

Corner of Church Street and Brantford Road

Delhi, ON N4B 1V3

Jennifer VanDeVelde

Phone: 519-582-1114

[info@wholesomepickins.ca](mailto:info@wholesomepickins.ca)

<http://www.wholesomepickins.ca>

VG Meats – *Beef, pork, poultry, smoked, cured, special orders*

966 Concession 6 Woodhouse Road

Simcoe, ON N3Y 4K4

Cory Van Groningen

Phone: 519-426-2000

Fax: 519-426-0063

[info@vgmeats.ca](mailto:info@vgmeats.ca)

<http://www.vgmeats.ca>

## **Growers**

Ontario**fresh**.ca is a free business-to-business website designed to connect to Ontario's food value chain to source, buy and sell local. Some of Norfolk County Growers are listed on this service.

## 8.7 Food Waste Audit

Resident/Patient Area : \_\_\_\_\_

|           |       | None<br>consumed         | 20%<br>consumed          | 40%<br>consumed          | 60%<br>consumed          | 80%<br>consumed          | All consumed             |
|-----------|-------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Meal Item | Date  |                          |                          |                          |                          |                          |                          |
| _____     | _____ | <input type="checkbox"/> |
| _____     | _____ | <input type="checkbox"/> |
| _____     | _____ | <input type="checkbox"/> |
| _____     | _____ | <input type="checkbox"/> |

**Optional questions for resident/patient about the meal items.**

**Visual Appeal**

|      |   |         |   |           |
|------|---|---------|---|-----------|
| 1    | 2 | 3       | 4 | 5         |
| Poor |   | Average |   | Excellent |

---

**Aroma**

|      |   |         |   |           |
|------|---|---------|---|-----------|
| 1    | 2 | 3       | 4 | 5         |
| Poor |   | Average |   | Excellent |

---

**Taste**

|      |   |         |   |           |
|------|---|---------|---|-----------|
| 1    | 2 | 3       | 4 | 5         |
| Poor |   | Average |   | Excellent |

---

**Overall**

|      |   |         |   |           |
|------|---|---------|---|-----------|
| 1    | 2 | 3       | 4 | 5         |
| Poor |   | Average |   | Excellent |

## 8.8 Project Meeting Minutes