PUBLIC HEALTH POLICY CHANGE

Rising to the Challenge—Why and How Health Care Facilities Are Implementing Nutrition Strategies on their Campuses to Prevent and Reduce Obesity

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Public Health Policy Change Webinar Series

• Providing substantive public health policy knowledge, competencies & research in an interactive format

• Covering public health policy topics surrounding tobacco, obesity, school and worksite wellness, and more

• Visit http://publichealthlawcenter.org/ for more information

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All participants are muted. Type a question into the Q & A panel for our panelists to answer. Send your questions in at any time.

This webinar is being recorded. If you arrive late, miss details or would like to share it, we will send you a link to this recording after the session has ended.
Introductions

Warren Larson

Vice-Chair,
Minnesota Cancer Alliance
Steering Committee
A coalition of over 100 organizations dedicated to reducing the burden of cancer across the continuum from prevention and detection to treatment, survivorship, and end of life care.

Members include public health and health care organizations, cancer centers, culturally diverse organizations, researchers, non-profit organizations, cancer survivors, caregivers, and advocates.
Introductions

Dr. Nancy Beery, DO

Pediatrician,
Essentia Health
Duluth Clinic
Introductions

Jamie Harvie, P.E.

Executive Director,
Institute for a Sustainable Future (ISF), Duluth, MN
Introductions

Stacia Clinton, RD. LDN.
Healthy Food in Health Care Program Coordinator,
Health Care Without Harm
Introductions

Julie Ralston Aoki
Staff Attorney,
Public Health Law Center
Webinar Objectives

Participants will learn about:

• Sugary drinks, obesity, & cancer

• Why hospitals should be concerned

• Work in Minnesota hospitals on this issue

• Work in hospitals around the country

• Tools and resources to support this work
Sugar sweetened beverages (SSBs)

- “SSB” defined
- What health conditions are linked to consuming excess sugar sweetened beverages
- Pediatrician’s experience
Sugar sweetened beverages defined (SSBs)

Examples of sugar-sweetened beverages are:
- regular sodas, energy drinks, sports drinks
- sweetened iced teas, coffees, lemonades, and punches
- fruit or vegetable drinks that are not 100% juice
- flavored waters containing calories
SSB and our diet

- Sugar sweetened beverages are the number one source of added sugars in our diet.
- Children often drink sugary drinks between meals and don’t think about the added calories.
Health risks with SSBs

- Weight gain/obesity, diabetes, hypertension
- SSBs detrimental to cardiovascular health
- Sugary drink per day increased men’s heart disease risk by 20% (*Circulation*; March 2012)
Obesity/SSBs/Cancer risk

- Consumption of high calorie foods, SSBs and portion sizes are contributing to obesity epidemic
- Weight control, dietary choices and physical activity- controllable factors to decrease cancer risk.
Soda and sugar consumption

- Soda consumption up 300% in last 30 years
- 4 grams = 1 teaspoon; 10 teaspoons of sugar in every 12 oz. can.
- 1-3 year olds consume about 12 tsp sugar/day.
- 4-8 year olds consume about 21 tsp sugar/day.
- Teenaged boys average 3 cans per day
- (>34 teaspoons sugar/day)
Sports drinks and energy drinks ARE NOT THE SAME

- Sports drinks- contain carbohydrates, minerals, electrolytes to replace what is lost through sweating, use if >90 minutes of prolonged vigorous physical activity

- **WATER** best source for hydration

- Energy drinks- contains stimulants (caffeine, guarana, taurine) *never* consumed by children or adolescents, not recommended for athletes.
Rising to the Challenge—Why and How Health Care Facilities Are Implementing Strategies to Reduce Sugary Drink Consumption on their Campuses

Jamie Harvie, P.E.
Executive Director
Institute for a Sustainable Future
September 18th, 2012
Public Health Law Center Webinar
harvie@isfusa.org
2009

Source: Center for Disease Control (CDC)

Obese adults in population %
- 30 – 40%
- 20 – 30%
- 10 – 20%
- 5 – 10%
- 0 – 5%
- No data

An obese adult is classified as having a Body Mass Index equal to or greater than 30

Source: World Health Organization, 2005
According to the CDC, obesity-related diseases alone account for nearly ten percent of all US medical spending, or an estimated $147 billion annually.

Hospital costs for coronary artery disease alone in the US in 2006 were estimated at nearly $42 billion.

Together, health care costs of cardiovascular disease and diabetes are about $600 billion annually. Cardiovascular disease alone accounts for 17% of overall health expenditures.

A recent study in the journal Circulation concluded that expenditures to treat heart disease will triple by 2030. The estimate does not assume that we will continue to make new discoveries to reduce heart disease.

United Health Group estimates that half of Americans will be diabetic or prediabetic by 2020. This will account for about 10% of all health care spending at the end of the decade or about $500 billion annually.
“Climate change is the largest health threat in the 21st century” – The Lancet
The UN World Health Organization reports that around 150,000 people die each year from factors related to climate change. Health experts suggest that this number could dramatically increase with further global warming. Potential health impacts of climate change are:

**Additional threat by malaria (2020, 2050, 2080)**

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<tr>
<th>Year</th>
<th>plasmodium falciparium</th>
<th>plasmodium vivax</th>
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In comparison to 1990, the worldwide number of people threatened by Malaria will increase up to 300 mio (by parasite plasmodium falciparium) and 150 mio (plasmodium vivax).

“...The worst-case scenario would be if we continue to ignore this broad-scale environmental health risk. If we just continue to do business as usual and ignore the long-term environmental risks, they will turn around and bite us in the future. Kyoto Protocol is just a first step, but absolutely not enough...”

Jonathan Patz, public health expert and Professor at the University of Wisconsin-Madison

**Vector-borne Diseases**
- Climate change could widen the geographic distribution of mosquitoes, flies and worms that malaria, Dengue Fever, and West Nile Virus.
- Malaria afflicts up to 500 million people worldwide. Changes in weather patterns and prolonged hot seasons could increase this number by millions.

**Drought**
- Reduced access to water will have health impacts, particularly in the developing world.
- Droughts affect migration, agricultural production, environmental degradation, loss of biodiversity, and civil conflict.

**Heat Waves**
- Heat waves can kill thousands of people, even in developed countries.
- Heat waves cause dehydration and heat stroke and increase mortality, particularly among elderly people.

**Asthma and Respiratory Diseases**
- The prevalence of asthma in the United States has quadrupled since 1980.
- Climate-related factors – concentrations of atmospheric CO2, wildfires, pollution, heat waves, desertification, and distribution of pollen and molds – are at least partially responsible for increases in asthma and other respiratory diseases, like asthma.
Ecological Model of Health / Disease

GBPSR – Healthy Aging Report
“Often little correlation between cost and quality--lowest cost systems often have outcomes as good as or better than highest cost systems”

Donald Berwick, M.D. former administrator for Medicare/Medicaid programs and former president and CEO, Institute for Healthcare Improvement (IHI)
Buy any Salad Bar or Entree & receive a large fountain soda for $1.00

$1
We are All in This Together

$709,000,000  Annual Health Care Spending Greater Duluth*

$140,000,000  20% of Healthcare Costs Associated w/Obesity**

$75,000,000  Annual City of Duluth Budget

Roads? Affordable Housing? Parks? Schools?

*Population one hundred thousand multiplied by per capita spending in Minnesota ($7,090/capita Minnesota Department of Health 2012)

**January issue of the Journal of Health Economics January, 2012
Commons Health Care

“Ultimately it is the communities that are going to need to take responsibility to define their healthcare commons, set goals, develop metrics, and establish a healthcare solution.”

Don Berwick M.D., IHI “Squirrel Speech”

• Less healthcare actually better healthcare.
• Prevention oriented
• A sense of agency
• Community driven
• Anchor Institution engagement
## Transformation of the Delivery System

<table>
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<tr>
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<td>early intervention and preventative care</td>
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<td>health and well-being</td>
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<td>healing environments</td>
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<td>decision making based on today’s finances</td>
<td>an integrated value of the future which accounts for the impacts on society and nature</td>
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<td>single indicators and out of date measures</td>
<td>multiple score card information and in real time</td>
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<td>sustainability as an add on</td>
<td>integration in culture, practice and training</td>
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<tr>
<td>waste and over use of all resources</td>
<td>a balanced use of resources where waste becomes a resource</td>
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<tr>
<td>nobody’s business</td>
<td>everyone’s business</td>
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Hospital Employees Are Less Healthy and Accrue Higher Healthcare Costs than the General Workforce, According to Thomson Reuters Study

Ann Arbor, MI  September 12, 2011 - Healthcare spending is 10 percent higher for hospital employees than it is for the general employee population.

In addition to using more healthcare services, hospital employees and their dependents also were found to be less healthy.

A variety of factors at play including stress, circadian disruptions, diet
Reality Check: SSB and Health Promoting Healthcare?

- Vending machines were available in 79% of health care facilities.
- The most prevalent beverage was soda.
- Across health care facilities, 75% of beverages offered for sale in vending machines did not follow the California school nutrition standards.
- < 90% of the providers perceived home or neighborhood environments and parental resistance as barriers to their efforts to prevent childhood obesity in clinical practice.
- More than 75% of providers reported not having engaged in any policy/advocacy activities related to obesity-prevention.
The Responsibility of Healthcare (and Education) as Anchor Institution

• **Educate:** Hospitals serve as a model and influence the food choices individuals and communities make.

• **Move Markets:** Hospitals can use their considerable purchasing power to demand fresh foods, healthy modes of production, and strong local infrastructure.

• **Shift Policy:** The moral authority of health care can influence other sectors and provide leadership for broad-based agricultural system shift.

• **Scale/Anchor Institution:** In many communities, hospitals and higher education are the largest employer. Their engagement, from the perspective of scale, is necessary to shift the system. Each must play a role.
Commons Health Hospital Challenge

• The CHHC includes three initial components. These are:
  – The Elimination of Hospital Sugary Beverage Sales
  – Adoption of the World Health Organization Baby Friendly Hospital Guidelines
  – A Measureable Commitment to Source and Serve Local, Sustainable Food

• Hospital facilities that adopt any one or more of these components will be publically recognized.

• www.commonshealthchallenge.org
Fairview Medical Center, MA

- Adopted a no SSB sales policy
  - SSB includes sugared sodas, sports drinks, etc
- Support from the CEO
- No option of SSB on patient trays
- Catering policy includes no SSB
  - Promotes water
- To date revenue neutral
  - Sales went to SSB alternatives
- Received international media attention
Gifford bids adieu to sugary drinks

RANDOLPH, Jan. 4, 2011 – In 2005, Gifford Medical Center made the transition to professional chefs preparing healthier, often-local foods. Now, the Randolph hospital is once again enhancing its commitment to offering healthy alternatives by eliminating sugary drinks from its cafeteria, vending machines and patient meals.

As of Jan. 1, Gifford has replaced sugar sweetened beverages like soda with healthier alternatives.

The move, said Ed
The Cleveland Clinic food service is using locally grown foods, like these Rittman Orchard Apples in Doylestown. (Paul Tople/Akron Beacon Journal)
D-150.978 Sustainable Food

Our AMA: (1) supports practices and policies in medical schools, hospitals, and other health care facilities that support and model a healthy and ecologically sustainable food system, which provides food and beverages of naturally high nutritional quality; (2) encourages the development of a healthier food system through the US Farm Bill and other federal legislation; and (3) will consider working with other health care and public health organizations to educate the health care community and the public about the importance of healthy and ecologically sustainable food systems.
Professional Engagement

- American Public Health Association (2007)
  - Policy Statement “Toward a Healthy, Sustainable Food System

- American Dietetics Association (2007)
  - Primer - Healthy Land, Healthy People: Building a Better Understanding of Sustainable Food Systems for Food and Nutrition Professionals

- California Medical Association (2007)
  - Resolution - “Improving Health Through Sustainable Food Purchasing

- American Nurses Association (2008)
  - Resolution “Healthy Food in Healthcare”

- Minnesota Academy of Family Physicians (2008)
CDC National Survey of Maternity Practices in Infant Nutrition and Care

“..infant feeding should not be considered as a lifestyle choice but rather as a basic health issue.” AAP

Few birth centers have model hospital policies (14%) and support breastfeeding mothers after hospital discharge (27%). Only 37% of centers practice more than 5 of the 10 Steps and only 3.5% practice 9 to 10 Steps.
Lake Wobegon Health 2020?
Business as Usual Not an Option
2010 Food Risk Map
RESOURCES

• Institute for a Sustainable Future www.isfusa.org
• Commons Health Care wwwcommonshealthcareorg
• Commons Health Hospital Challenge wwwcommonshealthchallengeorg
• Lake Superior Good Food Network wwwgoodfoodnetworkorg
• Public Health Law Center http://publichealthlawcenterorg/
• Center for Science in the Public Interest http://www.cspinetorg/liquidcandy/
• Yale Rudd Center for Food Policy and Obesity http://www.yaleruddcenterorg
• Healthy Food in Health Care Workgroup wwwhealthyfoodinhealthcareorg
• Sip All Day, Get Decay – Minnesota Dental Association https://www.mndentalorg
Health Care Without Harm

- HCWH has grown to over 500 organizations in 53 countries.

  Together with our partners around the world, Health Care Without Harm shares a vision of a health care sector that does no harm, and instead promotes the health of people and the environment. To that end, we are working to implement ecologically sound and healthy alternatives to health care practices that pollute the environment and contribute to disease.

- Program Areas
  - **Healthy Food Systems**, Waste Management, Toxic Materials, Safer Chemicals, Green Building & Energy, Climate & Health, Green Purchasing, Pharmaceuticals
    - www.healthyfoodinhealthcare.org
Healthy Food in Health Care Program

The movement towards healthy food and beverage environments,…

- Close to 400 hospitals have signed the Healthy Food in Health Care Pledge
- Over 40 hospitals committed to reducing the amount of meat protein on menus
- Buying local, seasonal, and organic foods
- Buying hormone and antibiotic free foods
- Growing food and/or hosting farmer’s markets on-site
- Preventing waste in food services
- Composting food waste
- Implementing healthy beverage programs
Cost of Processed Foods

High Fructose Corn Syrup (HFCS)


- Massive amounts of chemical fertilizers and pesticides are used to grow corn for HFCS in the United States.

By reducing consumption of beverages sweetened with HFCS, there is a subsequent reduction of the impact that production of this sweetener has on our health and the environment.
**Recommendation:** Federal and State agencies should prioritize research into the effects of possibly obesogenic chemicals.

The rise in the incidence in obesity matches the rise in the use and distribution of industrial chemicals that may be playing a role in generation of obesity, suggesting that endocrine disrupting chemicals may be linked to this epidemic.

Cost to the Community: Bottle Waste

- Single-serving packaging generates significant waste and disposal costs
- Polyethylene terephthalate (PET) bottles are accepted by most municipal recycling programs yet each year in the U.S., only 23% are actually recycled
- Six times as much water is used in the production of bottled water as actually ends up inside the bottles
What should Hospitals be Promoting?

Healthy Beverages

- Nutritious
- Hydrating
- Low environmental impact
- Supportive of community health
- In-line with hospital mission to promote health
Creating Healthy Beverage Environment

Program Specifications

- Naturally Sweetened Beverages
  - Limiting portions
- Concern with Artificially Sweetened Beverages
  - Emerging research on link to increased calorie consumption
- Tap Water
  - Increased education and awareness
  - Bottled water can cost up to 4,000 times more than tap water
- Beverage Waste Reduction
  - Reducing secondary impact to the community from increased bottled beverage usage

Hydrate for Health: A Call for Healthy Beverages in Health Care

Promoting human and environmental health by encouraging healthy beverage selections

Hospitals can play an important role by modeling healthy behaviors in the communities they serve. With their substantial purchasing dollars, hospitals can have a significant impact on market trends to support overall health. Despite the change to “first, do no harm”, many facilities serve high calorie, nutrient-poor food and beverages on patient trays, in cafeterias, and in vending machines. This document explores the negative health and environmental impacts associated with sugar sweetened beverage consumption, and the opportunities for hospitals to take a leadership role in transitioning to healthier options for their patients, staff and the community... hydration for health.

Many beverages provide a significant caloric contribution to a total diet and have been implicated in the degradation of health rather than the support of wellness. Sugar sweetened beverages (SSBs) contribute to the increased prevalence of obesity and associated chronic diseases that go along with weight gain. The dramatic
Culture Transformation

As Health Care Institutions,…

**Provide anticipatory guidance** to patients and families about the importance of healthy foods and beverage purchasing practices to support individual and community health.

**Work within health care facilities** to create a healthy food and beverage procurement and service model that is recognized as integral to a preventive health agenda.

**Work within the community** at a local, regional and national level to promote policies that support the development of an accessible, healthy, and fair food system.
Strength in Numbers

- 480 founding hospitals
- Represent over 90,000 beds
- 700,000 employees
- $20 billion spent in purchasing materials & supplies
- 9% of total hospital sector

www.healthierhospitals.org
Hospitals Leading Change

Advocate Health Care
Catholic Health Initiatives
Bon Secours Health System
Dignity Health
Formerly Catholic Healthcare West
HCA
Hospital Corporation of America
Kaiser Permanente
Tenet
Vanguard Health Systems
MedStar Health
Partners HealthCare
HHI Challenges

- Engaged Leadership
- Healthier Food
  - Healthy Beverage
  - Balanced Menus
  - Sustainable Procurement
- Leaner Energy
- Less Waste
- Safer Chemicals
- Smarter Purchasing

Tools and Resources: www.healthierhospitals.org
Hospital Internal Food Purchases Influence the Health of Patients, Staff and the Local & Global Communities

Retaining Employees and Improving Morale. According to the 2008 Society for Human Resource Management *Green Workplace Survey Brief* (www.shrm.org): "Companies that implement environmentally responsible programs cite improved employee morale, a stronger public image and a positive financial bottom line among other things."
Hospitals Leading Change

*Cleveland Clinic*

- 2007 regulation in place for 70% of beverages system-wide to have no added sugar
- 2009 Signed Healthy Food in Health Care Pledge
- 2010 - elimination of all SSB vending, catering, retail outlets
- Maintain an all-encompassing approach to create a **healthy hospital environment**
  - Bottled water removal pilot underway
  - Subsequent removal of high sugar added snacks from vending
  - Directed vendors to source anti-biotic free meat and local produce
Marketing works!

- Well run education campaigns can generate interest in purchasing healthy beverages.

Customers want it!

- Beverage industry itself notes an increasing proportion of beverage profits from water, 100% juice, and beverages other than SSBs.

Healthier Employees!

- Reduction in availability of sugar-sweetened beverages improves the health of employees, decreasing costs to employers in the form of lost productivity and health care expenditures.

Fairview Hospital in Great Barrington, MA saw no noticeable change in sales revenue after eliminating SSBs from its facility.
# Hospitals Leading Change

Mayor Menino and Ten Boston Hospitals Work Together to Reduce Consumption of Sugary Beverages Among Patients, Staff, Visitors

Partnership builds on the Mayor’s ongoing efforts to make healthy choices the easy choices in Boston

**For Immediate Release**

February 17, 2012

Released By: Mayor’s Office

For More Information Contact:

Mayor’s Press Office

Press.Office@cityofboston.gov

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**Boston Hospital Learning Network**

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<tr>
<td>Tufts New England Medical Center</td>
<td>Dana Farber Cancer Institute</td>
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“Point of Decision” Signage

http://www.bphc.org/programs/cib/chronicdisease/healthybeverages/Pages/Home.aspx
Hospitals Leading Change
Massachusetts General Hospital

Study: Colored Labels Help Cafeteria-Goers Eat Healthier

Simple but effective: red, yellow and green labels on food help diners make better choices.

By ALICE PARK @aliceparkny January 27, 2012 3

Remember the grade-school game ‘Red Light, Green Light?’ You had to run across the playground until someone said ‘red light,’ and then you had to freeze, unable to move again until you heard ‘green light.’

Nice idea, thought some researchers at Massachusetts General Hospital (MGH), could the same go-stop training manipulate the way people eat?

Source
“Changing the Context”: MAPPS Strategies

Media
- Eliminate SSB marketing within organizations

Access
- Less access to SSBs – vending, cafeteria, patient tray service, catering
- More access to healthier beverages

Price
- Increase for SSBs/Decrease for healthier drinks

Promotion and Placement
- Placement strategies in access locations

Support
- Utilizing the network of other facilities and organizations working on similar change
U.S. obesity rates could fall if soda pop prices rise

A study published in the American Journal of Public Health shows that raising the price of a can of soda by 35% cut soft drink sales in a hospital cafeteria by 26%, offering some evidence that adding a tax to soda pop may prod consumers into making better choices.
Sugar Sweetened Beverage (SSB) Reduction Initiative

St. Elizabeth’s Medical Center

Since early 2011, Steward Health Care has served as a strategic partner of the Boston Public Health Commission in their citywide Sugar Sweetened Beverages (SSB) reduction campaign, made possible by funding from the US Centers for Disease Control’s Communities Putting Prevention to Work (CPFW) program. While our program initiated in our Boston hospitals, we are in the process of expanding the program to our other institutions.

Many people don’t realize how much sugar and how many calories are in common beverages. Sugar-sweetened beverages, like soda and flavored drinks, are now the largest source of added sugar in Americans’ diets and can account for a large percentage of a person’s daily caloric intake. The SSB reduction program seeks to highlight the public health risk of over-consuming SSBs and to make healthier beverage consumption the easier choice.

At St. Elizabeth’s for instance, simple systems changes implemented through our SSB reduction initiative have created a profound environmental impact. With support from Boston Public Health Commission and Health Care Without Harm in the form of health information, technical assistance, and educational materials, our efforts have included the removal of more than 20 varieties of sugar-sweetened beverages from coolers and fountain drink machines in our cafeteria, the introduction of a color-coded beverage education system to inform consumers about healthy beverage choices, strategic product placement, and much more. The result has been over a 41% reduction in SSBs and over a 40% increase in healthier beverage consumption. These changes have not only had an overwhelmingly positive impact on the health of our employees, patients, and visitors, but have also served as a catalyst for other hospitals and community groups to launch similar SSB reduction initiatives.

At a time when health care costs and chronic disease rates continue to skyrocket both in Massachusetts and across the country, collaborative, prevention-based efforts, like those made possible by stimulus funding are critical to ensuring cost-containment and health improvement in our communities, and Steward Health Care and 1195CSE United Healthcare Workers East are proud to partner in those efforts.

Steward’s commitment to reducing SSB’s has lead other hospitals to follow suit, which ultimately will lead to healthier communities.

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Carney Hospital
No Red Beverages Sold Since March 2011

Norwood Hospital
47.1% Green Beverages
4.6% Yellow Beverages
18.3% Red Beverages

Good Samaritan Medical Center
Oct 2011

Saint Anne’s Hospital
Nov 2011

Merrimack Valley Hospital
Jan 2012

Nashoba Valley Medical Center
Jan 2012

Quincy Medical Center
Jan 2012

Morton Hospital
Jan 2012

I like my Coke but I believe it is a positive move that Steward is eliminating sweetened beverages and substituting healthier drinks. It is important that we have good health so we can take good care of our patients.

Cynthia Bates, St. Elizabeth’s Certified Nursing Assistant and 1195CSE Executive Council Member

Case Study available at: www.healthyfoodinhealthcare.org
Hospitals Leading Change
Vanguard Health Systems: Chicago

A message from the Market President

June 21, 2012

Committed to our Mission

Faithful to our mission, “Health for Life” we are going to start off our new fiscal year that begins on July 1 demonstrating our commitment to our mission through our actions. You have previously heard that we are moving away from providing and selling sugar-sweetened beverages in all of our facilities and we will be putting this plan in motion starting next month. We have already started increasing our offering of healthier beverage options and will continue to do so until we reach our goal of eliminating sugar-sweetened and artificially sweetened drinks in the coming year. We recognize that our employees, patients and visitors have the right to choose other beverage alternatives and these drinks can be brought into the facilities, we will simply not provide them. In the coming weeks you can expect to see and read more about this initiative.

Dates to Remember

- July 1, 2012 - Start of our Sugar-Free Beverage Environment Initiative

Also, as active members of the community, Vanguard Health Chicago has partnered with the American Heart Association to serve as a Signature Sponsor of this year’s Heart Walks. I am personally honored...
**Is It a Movement? Hospitals Ban Sugar Sweetened Beverages**

Across the country, hospitals are taking SSBs off the menu—for patients and staff.

By Katie Ayoub

- **Michigan:** 2010 Michigan Hospital Association and HCWH start a conversation about healthy beverages in health care with the launch of Healthy Food Charter

- **Boston:** April 2010 Boston Hospital Learning Network is formed

- **Chicago:** April 2012 Illinois Public Health Institute hosts a Rethink Your Drink Symposium at Rush Medical Center featuring an announcement from Vanguard Health System to eliminate SSBs from their Chicago facilities

- **Philadelphia:** June 2012 Einstein Medical Center hosts Rethink Your Drink Symposium to kick-start interest in their region

- **National:** HCWH Health Care Professional Pledge to support healthy beverages in health care reaches 550 signatories and growing!
Implementation & Best Practices

Resources Available

- **Healthy Food in Health Care Program**: Initiatives, Healthy Beverage Project [www.healthyfoodinhealthcare.org](http://www.healthyfoodinhealthcare.org)
  - Baseline Beverage Audit Tool
  - Purchasing Tracking Tools
  - Case studies
  - Health Care Beverage Toolkit

- **Healthier Hospitals Initiative**: [www.healthierhospitals.org](http://www.healthierhospitals.org)
  - Healthy Beverage Challenge
  - Reporting mechanism
  - Interactive healthcare blog
Key Questions

What types of food environments could you impact?

What policies and/or strategies do you want to pursue?

What are possible obstacles?

What are the tools available to help?
What is vending?

vending facility

vending machine

food establishment
Legal and Policy Considerations

- Preemption
- Equal Protection
- First Amendment
- Randolph-Sheppard Act
- Menu labeling law(s)
- Regulation of food establishments
- Bidding and contracting
Bid and Contract Language

- Introduction to a healthy vending agreement
- Statement of goals and purposes
- Key definitions
- Pricing requirements
- Product placement
- Use of promotional space
- Updating standards
- Commissions
- Menu labeling
- Additional language
Helpful resources

Healthy Vending and the Randolph Sheppard Act

Vending machines are frequently encountered in many public places, such as schools, hospitals, and workplaces. The vending machines often sell snacks and beverages high in sugar, fat, and sodium, with little nutritional value. Federal law requires the U.S. Department of Labor to issue standards for vending machines operating in federal agencies and on federal property. vending machine operators are required to maintain vending machines in good working order, including the availability of healthy alternatives to high-sugar and high-fat snacks and beverages.

Decreasing Sugar-Sweetened Beverage Consumption

Policy Approaches to Address Obesity

OVERVIEW

America is in the midst of an obesity epidemic, with 30% of adults and 17% of children ages 2 to 19 considered obese. This epidemic is contributing to the rise of chronic diseases such as diabetes, heart disease, and cancer. In 2005, the American Heart Association (AHA) endorsed the need for policies to address obesity in the food environment. The AHA has identified sugar-sweetened beverages as a major contributor to the obesity epidemic.

THE CURRENT LANDSCAPE

Sugar-sweetened beverages are the single largest contributor to added sugars in the American diet, and the intake of these beverages has increased significantly over the past decade. The American Heart Association (AHA) recommends limiting daily intake of sugar-sweetened beverages to no more than 6 to 8 ounces for adults and children.

THE POTENTIAL FOR POSITIVE CHANGE

Experts suggest that reducing sugar-sweetened beverage consumption could improve public health outcomes. For example, a 10% decrease in sugar-sweetened beverage consumption could result in a 3% decrease in childhood obesity rates.

American Heart Association
Advocacy Department
1120 Dominick Street
Suite 400
Washington, DC 20036
Phone: (202) 636-7405; Fax: (202) 636-7423; www.americanheart.org
Next webinar:

Current Trends in "Roll-Your-Own" Tobacco Regulation

October 2, 2012
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Sugar-Sweetened Beverages

Americans consume 300 calories more each day than they did a generation ago. Some research indicates that almost half of these calories come from sugar sweetened beverages. As a result, these drinks, alone, may be responsible for at least one-fifth of the weight gained in the past three decades. Consuming sugar sweetened beverages is strongly associated with weight gain in all age groups. Drinking one additional serving of a sugar sweetened beverage per day significantly increases the chance a child will be obese. At the same time, reducing consumption of these drinks is linked to a reduction in body weight, with heavier individuals experiencing a greater weight loss than those who weigh less.

“Sugar Drinks” includes all beverages that are sweetened with various forms of sugars that add calories. Sugar drinks include, but are not limited to, carbonated sodas, sports and energy drinks, sweetened rice and dairy

SUBTOPICS

- Resources

FEATURED PUBLICATIONS

Taxing Sugar Drinks - A Policy Options Brief (2011)

This policy brief reviews the scientific evidence linking consumption of sugar drinks to obesity. It then evaluates the use of pricing policies as a tool to reduce consumption of these beverages and improve weight, while discussing potential drawbacks and likely industry opposition to these policies. Finally, this analysis summarizes some of the most recent national and state initiatives and considers future developments in the implementation of pricing policies to reduce the consumption of sugar drinks and improve health.