

Working with Food Service Management Companies to Improve Healthy Food Offerings: Considerations for State Public Health Agencies

Background

Food service management companies (FSMCs) serve millions of meals each day across multiple institutions and sites in the United States, from entertainment venues to hospitals. Because of their extensive reach, these companies play a major role in determining what is available for Americans to consume each day. Several state health agencies are implementing healthy food service guidelines to improve the nutritional quality of foods and beverages served and sold by FSMCs, other food industry partners, and blind vendors, who operate kitchens, prepare food, and implement nutrition guidelines in a multitude of sites.

The Association of State and Territorial Health Officials (ASTHO) and the National Association of Chronic Disease Directors (NACDD) partnered on the [Reducing Sodium and Added Sugar Through Partnerships](#) project to better understand states' experiences working with the food industry to improve nutrition standards. This issue brief outlines key insights for state health agencies to consider when working on food service guidelines and industry partnerships. To formulate these insights, ASTHO and NACDD interviewed FSMCs, surveyed state chronic disease directors, and hosted virtual roundtable discussions. These activities are summarized below.

ASTHO interviewed three food service companies—Sodexo, Aramark, and Compass Group—to learn about their approaches to health and nutrition, procuring healthy foods, developing nutritious menus, and satisfying clients and customers. For more information, see ASTHO's issue brief [Food Service Management Company Insights and Opportunities to Improve Nutrition in the Food Supply](#). In addition, to learn how health agencies work with FSMCs, either directly or through partner agencies, NACDD contacted state chronic disease units and interviewed staff for nutrition and physical activity, worksite wellness, cardiovascular health, and school health programs. In December 2015 and March 2016, NACDD and ASTHO administered two surveys to state chronic disease units and partners, such as departments of education and the American Heart Association. The survey asked states about their experiences working with the food industry, including successes, challenges, and barriers to creating partnerships. After the National Network of Public Health Institutes hosted a [webinar](#) on leveraging public-private partnerships to reduce sodium, NACDD and ASTHO collaborated on a series of virtual roundtables. In these forums, state partners described opportunities to establish better partnerships with FSMCs, reaffirming many of the strategies and key themes captured in the previous surveys and state interviews.

Food Service Industry Partnerships: Key Insights

Throughout the project, ASTHO and NACDD gathered information from states to better understand the roles of state health agencies, their leadership teams, and their partners in improving the nutritional content of foods and in aligning with food industry priorities. The following section summarizes six key insights for state health agencies to consider when developing food service guidelines and industry partnerships.

- **Consumer demand and taste:** FSMCs report selling foods according to client demands. It will take time to work through product reformulation to address consumer preferences, and public health officials and food industry partners need to ensure open lines of communication.
- **Food safety:** It's important for all venues to follow the food safety guidelines by addressing the increased need for refrigeration and more frequent food purchasing.
- **Partnership development:** There are a number of different partners to engage, including a variety of vendors serving states. In addition, blind vendors are legislatively mandated to provide vending in many states and is an important partnership to develop.
- **Product availability:** Consumers report a need for low- or reduced-sodium products that taste good. Similarly, many vendors report that their food manufacturer or distributor have limited availability on healthy products, in appropriate *serving* sizes.
- **Revenue:** FSMCs can be resistant to lowering the price of healthy foods due to concerns about the profit margin and the perceived loss of revenue.
- **Training and technical assistance:** Food service staff may benefit from enhanced training on changing nutrition guidelines, including nutrition education and food preparation.

Leadership Support: According to NACDD's survey of state chronic disease directors, support from key leaders at the health department is fundamental to improving nutrition guidelines and standards.

States are saying:

"Leadership could support this effort by communicating to decision makers the importance of state health department capacity (e.g., funds, staff, etc.) in making these initiatives successful."

"The director of our agency has been very supportive of nutrition and physical activity efforts and has made sure that our nutrition coordinator has been invited to serve on procurement teams for food service options for [a large federal facility]."

"Our commissioner has been meeting with his peers in state government to ask them to adopt the healthy food standards used at the health department. To date, the human services and agriculture agencies have fully adopted these standards. The commissioner has presented this information to the governor's extended cabinet and is encouraging cabinet members to use the standards."

State and Local Examples of Improving Healthy Food Offerings

Below are examples and additional information about how state health agencies are improving nutritional environments in worksites, hospitals, institutionalized settings (e.g., prisons, nursing homes, etc.), and daycares. Many states are also working in faith-based institutions, food banks and pantries, convenience stores, parks, universities, and in prepared food settings in the community, including restaurants and food trucks. For many states, these relationships are still evolving and most of the work so far has been in developing relationships with the blind vendors. However, there are many opportunities for state health agencies and their agency partners to further engage the food industry.

Colorado Works in Government Buildings and Hospitals to Implement Nutrition Guidelines

The Colorado Department of Public Health and Environment's Healthy Eating and Active Living (HEAL) team works with state agencies to implement the [Health and Sustainability Guidelines for Federal Concessions and Vending Operations](#) and increase the availability of healthier food and beverage options in government settings. The team is working with blind vendors through the Compass Group and the Canteen Vending Service on both snack and beverage vending. They visit buildings at the Colorado State Capitol to count and develop a product list for all vending machines on the premises. During the audit, the HEAL team then compares these products to the HHS guidelines. Typically, beverages are easier to assess, whereas snacks are more challenging because the products are constantly changing.

The HEAL team is also working with Colorado hospitals to improve their nutrition environments through the [Healthy Hospital Compact](#). Hospitals are working voluntarily with their own food service management companies, such as Canteen, Aramark, and Compass Group, to earn recognition in four areas, including: healthier food, healthier beverages, marketing, and breastfeeding. HEAL brings together a hospital steering committee to provide a forum for networking, addressing challenges, and hosting educational opportunities.

Connecticut Builds on Relationships with Blind Vendors

Like many states, the Connecticut Department of Health (DPH) is working with blind vendors in state and local government buildings. This relationship began when the health department partnered with the American Heart Association (AHA) on legislation to offer healthier foods in state agencies, including the department of corrections, department of veterans affairs, and the technical high school system. The vendors for these agencies meet monthly, and DPH and AHA attend. Through this group, they discussed introducing legislation in 2015 to establish a [statewide food procurement policy](#) setting nutrition standards. DPH and AHA met with Connecticut's Bureau of Education and Services for the Blind (BESB) to discuss the legislation and get buy-in, referencing legislation passed in Washington state and Massachusetts. Ultimately, while the proposed legislation failed to pass, DPH is working with BESB to implement a pilot looking at the profitability of healthier food options, in one cafeteria in a state-owned building. Results from the pilot will help DPH and BESB implement nutrition standards in cafeterias operated by blind vendors, increasing the availability of healthier food options statewide.

Hawaii Develops Health Promotion Resources to Increase Access to Healthy Foods

The Hawaii State Department of Health (DOH) also has a relationship with blind vendors that grew out of a worksite wellness project focused on physical activity. After health department staff delivered a presentation on healthy vending, several vendors volunteered to participate in an initiative to provide healthier food and beverage options in federal, state, county, and military buildings. DOH provided signage and health promotion materials describing changes in the cafeterias. Blind vendors subcontracted with chefs for the cafeterias' dried foods and managed food service operations. DOH has also approached prisons and some state hospital administrators about farm-to-table options. Procuring locally-grown food has been challenging due to a long bidding process, however, DOH is working with the state procurement office to overcome the problem.

Hawaii is also working with Castle Medical Hospital and Queens Hospital to implement the [Choose Healthy Now!](#) healthy vending project that helps consumers choose healthier snack options by using a

traffic light color-coding system to identify foods with green (“healthiest”), yellow (“in between”) and red (“not as healthy”) labels. As the education campaign grows, Hawaii is moving to using the green label only to promote healthy choices. Ono, a local food processing company that sources food from local and off-island vendors, is considering adding the green label to products that meet the guidelines, i.e., foods that are nutritious and have minimal or no added sodium, sugar, or fat. DOH plans to provide technical assistance and develop a list of items that qualify for a green label.

DOH also works with food service providers on recipes and nutrition analyses. The health department is developing resources based on the [Nutrition Wellness Policy](#), encouraging departmental policies to support healthy meetings.

Iowa Addresses the Challenge of Refrigeration through Micro-Markets

The Iowa Department of Public Health (IDPH) signed a memorandum of understanding in 2015 with the Iowa Department for the Blind’s Business Enterprise Program to provide healthy options that meet [NEMS-V criteria](#) in vending machines in state-owned and operated buildings. IDPH is also working on setting up micro-markets to provide healthy options in those buildings. Micro-markets contain sandwiches, salads, and other products, and they are located in a secure area where food items may be purchased at a kiosk. In the past, consumers were unable to purchase refrigerated, pre-packaged foods, but the new micro-markets provide these expanded options. IDPH is currently working with three primary distributors (Farner-Bocken, Master Wholesale, and Vistar) that work with blind vendors to obtain a list of healthy products to sell in the micro-markets. Vendors must currently meet [Smart Snacks in Schools](#) criteria if they supply to schools, which has been instrumental in helping IDPH develop a product list for its worksite micro-market program. IDPH believes the criteria for schools provide a model for vendors as they consider healthier options for other settings.

Washington State Adopts Healthy Nutrition Guidelines

In 2013, Governor Jay Inslee signed [Executive Order 13-06](#) requiring state executive agencies to implement the [Healthy Nutrition Guidelines](#) created by a food procurement workgroup at the Washington State Department of Health (DOH). With this executive order, Washington became the first state to adopt a comprehensive approach for providing healthier food on state property. Since fall 2013, 36 state agencies, boards, and commissions have adopted policies to meet the Healthy Nutrition Guidelines. They collaborate frequently with the Washington State Department of Services for the Blind, which operates cafeterias in state agencies and less with FSMCs. Full implementation of the Healthy Nutrition Guidelines is expected by December 2016. The health department also partnered with the University of Washington’s Center for Public Health Nutrition to measure uptake of the guidelines between [2014](#) and [2015](#).

Through the Sodium Reduction in Communities program, DOH funded Spokane Regional Health District to provide technical assistance to Eastern State Hospital, a state-run psychiatric hospital, to reduce sodium in foods sold in its employee cafeteria. A culinary professor at Spokane Community College trained cafeteria staff on ways to prepare food without adding salt. In 2014, Spokane Regional Health District [partnered](#) with Sodexo’s ZagDining operation at Gonzaga University to reduce sodium in targeted foods, including soups and tomato-based recipes. Spokane officials worked with Sodexo’s national wellness director and built relationships with brokers, distributors, and high-level executives at

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the company. For more information, access this [recorded session](#) from the Connecting Public Health and Food Service Providers web forum series.

As a result of the state examples and interviews of FSMCs, ASTHO will use the lessons learned to work with other national, state and local partners (such as CDC, National Network of Public Health Institutes, American Heart Association and others) to assist states in implementing healthy food service guidelines and offer recommendations on how state public health departments can build upon and strengthen these relationships. This project will offer an opportunity for several states to engage in a learning community, achieve sustained partnerships, and create policies that will improve the food environment in state operated buildings and venues. ASTHO will continue to work at the national and state/regional level by convening state health agencies and industry partners, increasing commitment to sodium and sugar reduction, and catalyzing change across a variety of institutions and settings. Key outputs from the project will be promising strategies and recommendations for public-private collaboration, and key training and technical assistance resources developed by states, FSMCs and ASTHO.

For more information on these resources, please continue to visit ASTHO's [Reducing Sodium and Added Sugar Through Partnerships](#) webpage.

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Resources:

ASTHO's Salt and Your State Healthy Food Purchasing Technical Assistance Project

[Project Summary](#)

[State Stories: Sodium Reduction and Healthy Procurement Efforts](#)

ASTHO's Reducing Sodium and Added Sugar Through Partnerships Project

[Issue Brief: Food Service Management Company Insights and Opportunities to Improve Nutrition in the Food Supply](#)

[Industry Snapshots: Reducing Sodium and Added Sugars at Leading Academic Institutions and FSMCs](#)

NNPHI Webinars on Connecting Public Health and the Food Industry

[Reducing Sodium Through Public-Private Partnership](#)

[Voluntary Commitments to Reduce Sodium and Understanding the Consumer](#)

[Reducing Sodium in Partnership with Food Service Vendors](#)

[Sodium Reduction in Food Service: A Resource for Public Health Professionals Partnering with Food Service Providers](#)

[CDC's Healthy Food Service Guidelines](#)