Children’s Hospitals Working Together to Improve their Food Environments

CDC supports making the healthy choice the easy choice. As major employers and health leaders, hospitals can help establish norms for promoting healthy and active living.

IN THIS ISSUE...
Read how several children’s hospitals engaged in the Children’s Hospital Association’s “FOCUS on a Fitter Future” project have introduced healthier options in their cafeterias.

FOCUS on a Fitter Future
In 2008, the Children’s Hospital Association convened FOCUS on a Fitter Future (FFF), a team from 15 pediatric health care professions, to define the role children’s hospitals can play in combating pediatric obesity. FFF encourages and supports children’s hospitals in their efforts to become leaders in addressing childhood obesity by modeling wellness in their own environments and administrative practices.

As a result, 23 hospitals agreed to focus on providing healthier food options in their hospital cafeterias and vending machines, offering consumers healthier choices.

FFF also works to advance the quality of childhood obesity care and management.

Children’s Hospital of Colorado

It Takes More than Just Healthier Food
The Children’s Hospital of Colorado (Children's Colorado) has worked hard to become a healthier organization. The effort began several years ago when Children's Colorado conducted a community needs assessment and identified obesity prevention as a hospital priority. The assessment found there was a need for an interdepartmental Healthy Hospital task force to integrate healthy lifestyle education and choices into the hospital and its activities and culture. Their goals were to encourage patients, staff, and visitors to make healthy choices at home and in the hospital.

The task force also included representatives from the University of Colorado Anschutz Health and Wellness Center and other partners. It established comprehensive goals for employee wellness, including goals for healthy food, physical activity, and emotional and spiritual health.
Following the creation of the task force, the hospital marketing group created a logo and templates to identify initiatives. “Our Healthy Hospital efforts have continued to grow, with new ideas and a new passion for healthy changes. It keeps going,” said Renee Porter, clinical nutritionist at Children’s Colorado and one of the leaders. She points out, that while the initiative has cost little money, its success relied on significant time investments from several departments.

The task force took on several nutrition projects. In January 2012, Children’s Colorado’s cafeteria offered few healthy meals, snacks, or beverages. Two months later, the task force, with support from food services, launched a new cafeteria menu with a healthy meal for lunch, Monday through Friday, at a designated “Light Side” station. Food services also revamped the salad bar with healthier items.

Clearly, the hospital needed to educate food service staff on appropriate portion sizes. Training staff, buying pre-portioned food, using portion control serving utensils, and changing other purchasing practices helped ensure more consistent portion sizes.

The HH task force also campaigned to reduce consumption of sugar-sweetened beverages (SSBs). In 2012, and through the first quarter (Q1) of 2013, the hospital:

- Increased non-SSBs sold in the cafeteria and vending machines; 7 of 10 beverages offered were non-SSBs.
- Labeled beverages with the stoplight signage.
- Changed SSB placement in vending machines.
- Increased the price of SSBs over non-SSBs.

During Q1 2012–Q1 2013, 81% of bottled beverage sales in the cafeteria were non-SSBs. In vending machines, just 10% of beverages were non-SSBs, but they comprised 34.4% of beverage vending sales during Q3 2012–Q1 2013.

At the hospital’s annual meetings in 2012 and 2013, the usual array of pastries were replaced with healthy snacks, smoothies, and fresh fruit. At the 2012 annual employee holiday dinner a healthier buffet along with a menu guide was provided for employees.

Based on their experience, Children’s Colorado advises organizations that plan to implement health and wellness in a meaningful way to prioritize decreasing availability of less healthy items, including SSBs, and reducing portion sizes. Other approaches include gaining management support, monitoring sales data and food purchases, gauging employee satisfaction, and using marketing strategies to educate staff members.

The task force then surveyed employees to gauge employee interest and how much cultural change the hospital needed. Seventy-four percent said they wanted healthier food in the hospital. The task force looked to the FFF collaborative for guidance. In the fall of 2012, they found inspiration from peers in FFF and implemented the group’s stoplight signage using red yellow and green signs at all vending machines and throughout the cafeteria, thereby identifying healthier and less healthy options for employees.

Food services also increased their offerings of healthy entrées and snacks. It took some time to implement portion standards; at first staff had served larger average portions of the healthier entrée, leading to higher calorie and sodium content. Staff had over-served proteins and underserved vegetables.

Key Considerations from Children’s Hospital of Colorado

- Just changing the food isn’t enough; educating staff about healthy eating and healthy serving size is just as important.
- It is important to gauge employee interest in healthy options as part of the process.
Lucile Packard Children’s Hospital at Stanford

Turning an Unforeseen Event into an Opportunity

When the cafeteria at the Lucile Packard Children’s Hospital Stanford flooded on December 20, 2011, the Healthy Hospital Initiative group, composed of leaders and champions at Packard, decided to turn the disaster into an opportunity. Over the last several years, Karen Kemby, the Administrative Director of Strategy and Business Development, Dr. Thomas Robinson, a Professor of Pediatrics and Director of the Center for Healthy Weight, and the food service team of dietitians and managers worked to improve the cafeteria.

Several changes had been made previously, but it was slow going. With the cafeteria closed after the flood, the group saw an opportunity to make additional changes without interfering with daily operations. The team used the Federal Government Concessions Procurement Guidelines as the model to develop their own guidelines. When the cafeteria was reopened in February 2012, food sold complied with the guidelines. To help reorient staff to the changes, the hospital’s communications group produced a video featuring Dr. Robinson that discussed the reasoning behind the hospital’s decision to make the changes. The key message was, “As a children’s hospital, we have a responsibility to model healthy behavior to the community, and we made the changes to reflect that responsibility.”

At first, the Healthy Hospital Initiative team tried to communicate the importance of the change to the cafeteria as it related to the prevention of obesity. However, this message wasn’t resonating with employees, so they shifted the message to reflect the value of the children’s hospital: to promote children’s health.

One additional motivator for the team was a story about a child from the hospital’s pediatric weight program who was delayed getting into his classroom because of a celebration of Hospital Week. Inside the room, the table was covered with cake, cookies, and sugar-sweetened beverages. The child found the contradiction unexplainable and said to his behavior coach, “But this is a children’s hospital.” This story got back to the team and they used it to demonstrate how the hospital was not being consistent – particularly in the eyes of their most important audience, the children themselves. The Healthy Hospital Initiative team used this story in presentations and discussions to make healthier changes in the cafeteria.

Communication was a key factor. The team knew that some of the changes would be challenged and that there would be some dissatisfied customers, but they decided not to back down and they made no modifications to the original plan. The CEO himself could be seen walking the halls and communicating regularly with staff about the changes.

Karen Kemby said that they were lucky that the procurement group, who helped with the development of the guidelines, was a great team of champions that ranged from the vice president to the manager of the cafeteria. The cafeteria manager also enlisted grass roots support. The marketing and communications staff assisted the team with developing messages, brochures, and Web information.

A drop in sales was expected upon reopening after the flooding because of the prolonged closure making it impossible to know the immediate effects of the cafeteria changes themselves. However, when CEO, Christopher Dawes, was asked about whether he was concerned about sales and revenue from the cafeteria, he said, “What-ever happens, we will take the hit.”
There was an initial 19% drop in sales, but the cafeteria is now back to the previous levels. The cafeteria also drew back patrons through inventive programs such as sushi day, food demonstrations, celebrity chefs, and produce markets.

As part of the Children’s Hospital Association’s FFF group, Packard played a leadership role in helping other children’s hospitals by sharing their guidance documents and success stories, many of which were re-used verbatim. For example, they developed the 7P’s of Marketing (policy, preparation, portion size, placement, promotion, pricing, and purchasing practices) as a guide to develop strategies to promote healthier options.

Key Considerations from Lucile Packard Children’s Hospital
- CEO leadership is essential. It is difficult to achieve change without executive leadership support.
- Marketing and communications should appeal to the values of all stakeholders.
- Sharing documents describing successes can be helpful to others.

Connecticut Children’s Medical Center

If at First You Don’t Succeed...

Connecticut Children’s Medical Center, became involved with the FFF group to see what other hospitals were doing to create a healthier environment. Claire Dalidowitz, the Clinical Children’s Nutrition Manager, explained how the hospital’s first attempt at making a change was not successful. “A group of interested hospital staff convened to work on eliminating sugar-sweetened beverages (SSBs) from the cafeteria and vending machines. The program called Less Sugar Please received pushback from other staff members,” she said. The group didn’t give up and decided to regroup and try a new approach. Using Lucile Packard’s 7 P’s of Marketing, they assessed the current food and beverage environment and started making changes in more subtle ways starting with the placement of unhealthy items. Regular soda was moved to the bottom of the refrigerators, fruit replaced cookies at the point of purchase, and the salad bar became the prominent station upon entering the cafeteria. They also introduced “spa water” dispensers at all hospital celebrations after observing a consistent uptick in sugary beverage sales during these events. “Spa water” is made using fruit/herbs and serves as a healthy alternative to sugary drinks.

A change of personnel and the lack of a structured proposal made it difficult to find a champion to help support the alterations being made. Using the data collected from the different hospitals working with the FFF group and presenting it in a business plan format, the group was able to show the senior leadership how Connecticut Children’s compared to other hospitals in providing healthier options. Upon receiving support of a champion from leadership they were able to commit to working on the changes.

Moving forward, Connecticut Children’s worked closely with a major vendor to increase healthy options, and implemented a fruit club card where customers can buy 9 pieces of fruit and get the 10th free.
Water was also substituted for regular soda in the combo meal deals, and soup options were expanded to include low sodium soups and crackers.

Adding these options spurred a ripple effect on other committees throughout the hospital, including the worksite wellness committee, which now distributes fresh fruit to participants who climb to the fourth floor during a stair climb event. The group found that having a quick, 30-second presentation that can be used with both staff and visitors is critical to the success of the program.

The group continues to work on new changes as they move forward. They recently rolled out healthy children’s meal options in the cafeteria, and have plans to post vending machine pictures promoting healthy options, and will eventually reduce the price of healthy food options such as bottled water. They are now collecting data on changes in purchases of SSBs and fruit and are seeing many positive changes.

**Key Considerations from Connecticut Children’s Medical Center**

- Strategic communication about the issue can help gain the support of a champion.
- A short speech to share with stakeholders can help promote the goals of the program.

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**Florida Hospital for Children**

**Making Major Strides**

The Florida Hospital for Children, also participated in the FFF group organized by the Children’s Hospital Association. In August 2012, Jennifer Ketchersid, Nurse Research Coordinator at the hospital, worked with a small group of hospital employees to evaluate the cafeteria and vending options there. They piloted the CDC Healthy Hospital Environment Assessment Tool to determine what healthier options were available. They realized that in the cafeteria and vending machines, SSBs were:

- Large, about 20–24 ounces.
- Promoted at eye level.
- Often cheaper than non-SSBs.

Jennifer Ketchersid stated, “Conducting the environment assessment created a pause-for-the-cause reaction amongst leadership and key stakeholders within the hospital.”

When the group compared their assessment results to those of other hospitals in the FFF group, they learned that their hospital ranked as one of the lowest of the 23 hospitals that participated in the pilot. The hospital had not educated their employees or the parents and children in their community about healthful eating.

In response to the assessment, champions and leaders began a slow, step-by-step process to change the cafeteria and vending options to healthier ones.

1. Displayed educational signage regarding the food choices in each section of the cafeteria.
2. Reduced SSB serving sizes in the refrigerated cases.
3. Relocated water, juices, and milk to eye level and removed all bagged chips that were not baked.
4. Increased the sale price of the larger sized cups from the soda fountain.
5. Removed candy bars and other bagged candy items from the point of sale area.
The cafeteria reduced the size of all SSBs to 8 ounces, with no free refills, and increased their price by 22%, or 30 cents per serving. They quickly saw a decrease in sales of sodas and an increase in flavored water and 100% juices. The water bottles, milk, and 100% fruit juice were moved to eye level instead of the bottom of the refrigerated cases. For Nurse’s Appreciation Week, the hospital gave out water tumblers that could hold added fruit to infuse the water with flavor. These have now become a regular employee gift on the Orlando campus.

In 2011, the hospital launched the Healthy 100 program, helping employees live to be a healthy 100 years old. They began providing free employee health assessments and health coaches. Systematic changes were made to address healthier lifestyles in their institution.

In 2012, the hospital replaced several of the old vending machines with healthier vending machines which contain only options like dried fruit snacks and pure oatmeal; these have been selling quite well. By the second quarter, the less healthy vending machine was removed entirely.

Ketchersid said, the hospital started “putting money where their mouth is” when it came to the hospital employees. The hospital also realized that they needed to reach out to the community, so they started the Healthy 100 Kids program. They devised a Mission Fit program and trained Edu-tainers to go out into the schools and preschools among target populations to teach about healthier lifestyles.

Ketchersid said that it was helpful getting input from the other hospitals involved with the FFF group. She said this was why the Florida Hospital for Children did not have any false starts—they already had learned some of the barriers to avoid.

**Key Considerations from Florida Hospital for Children**

- Learn from those that have gone before you. That knowledge can help overcome barriers.
- Systematic changes to address healthier lifestyle are important.

**American Family Children’s Hospital**

**Changing the Culture**

The American Family Children’s Hospital, part of the University of Wisconsin, found that they had to totally renovate their cafeteria to start making the healthier choice the easy choice. Nan Peterson, the director of Child Health Advocacy said that when the hospital administration decided to lead the way in modeling healthy food choices for patients, families, visitors, and staff, they decided to “go for the gusto” and have a new Farmers’ Market Café serving local and fresh foods—a place where you couldn’t make an unhealthy choice.

All food items at the café meet the My Smart Choice recommendations based on the Dietary Guidelines for Americans® and incorporate best practices for product choices, pricing, placement, promotion, purchasing, and portion size. The Farmers’ Market Café totally eliminated SSBs, added a children’s menu, and promoted water by having free water dispensers with fruit/herb flavored water or plain water available. As part of the marketing and educational campaign they developed posters, sent email blasts, and made the nutritional components of foods readily available using an LCD screen with healthier eating messages.

A key component of the Farmers’ Market Café was the development of a partnership with REAP, their “buy fresh, buy local” food group that connects farmers and purveyors with restaurants and schools. For the employees, they also set up a weekly community supported agriculture program.

The spark for this change was the data that they collected working with the FFF group and piloting the CDC Healthy Hospital Environment Assessment Tool. In October 2012, it was difficult for the team to look at the results and realize how far from healthy the cafeteria really was.
A team of champions that included the executive chef, culinary services and wellness staff members, and vice president, developed the strategies to implement change. After the café renovation and the improvements that the team implemented, they feel that the results from the second assessment will give them the motivation to take on the next challenges.

Communicating these changes was critical and had to be done in many different ways for different audiences. Some hospital administrators wanted to see the data from the assessment tool. The patient and family advisory council needed the information in a more user-friendly format, and it was critically important that information available in the cafeteria for employees and families be easily and quickly understandable.

Lessons learned included the importance of having supportive leadership, the value of an assessment tool providing data that could help inform decisions, and the realization that communications need to be ongoing. The team found that just getting the renovations made didn’t mean they were finished. Staff members needed training on the new equipment and on ways to handle customer comments. Questions from parents prompted more in-depth staff training.

The team has begun to see a cultural shift, and has heard comments from parents who were thrilled to see healthy choices for their kids at American Family Children’s Hospital, so they wouldn’t have to “be the bad guy” when they say no to their kids.

Now the less healthy choices are not even available. In addition, using the Dietary Guidelines for Americans supported the choices that were made and depersonalized the decision on what menu items to include.

**Key Considerations from American Family Children’s Hospital**

- Leadership commitment to change is critical.
- The success of others and utilization of evidence-based resources can be effective in moving forward.
- Using different communication formats to different audiences is important.

**Children’s Mercy Hospital and Clinics**

**Communication is Key**

Children’s Mercy Hospital and Clinics in Kansas City has made great strides in creating a healthier hospital environment for their employees, visitors, and patients. In October 2012, the hospital joined the Partnership for a Healthier America (PHA) and made the Healthy Hospital Food Commitment. As part of this initiative, the hospital stopped selling sugar-sweetened beverages in all of its facilities including cafeterias, snack shops, vending machines, and catering services. They also are now offering more than five children’s wellness meals and five adult wellness meals during the week, using the PHA guidelines, that are priced less than or equal to other available meal options. The hospital has already shown a 400% increase in the sales of wellness meals during the first six months that the program was put into action.

The process of making these changes started with Kansas City’s Children’s Mercy Hospital and Clinics Executive Vice President Karen Cox. She suggested to the hospital wellness committee that the hospital join the PHA initiative.
Ms. Cox felt that as a leader in children’s health care, a major employer in the Kansas City area, and a community role model, offering healthier options in their hospital would show their leadership in promoting a culture of health for their patients, families, visitors, and employees. There were several key elements that helped the program be successful. One was the development of an extensive communication plan that the wellness committee developed six months before the planned changes. The plan included developing an internal campaign called Fill Better, Feel Better. All communications were branded with this name and the logo of a stick man fondly named Phil. Information was also posted in the new patient flyers and at the point of sale. New flyers were placed on cooler doors at the point-of-sale to make potential buyers aware that they will only find healthy drink options inside. Communication was also promoted through information and stories in the employee health and wellness newsletter.

Another key ingredient was making the proposed changes transparent to staff and visitors. A Web site was established to share information about PHA and the progress made toward meeting the Hospital Healthy Food Commitment. Employees and visitors were able to post questions, comments, and suggestions on the Web site. If an employee or visitor posted a question or a concern, a member of the internal wellness committee would respond to them within 24 hours. Presentations on the progress of the healthy changes made at key leadership meetings, family advisory board meetings, and staff meetings were effective at creating buy-in. These also helped the stakeholders stay involved with the efforts.

The hospital’s involvement with the FFF group helped the committee learn what other children’s hospitals are doing, which ultimately helped them put into action additional great ideas. Candice Gwin, employee wellness manager, said that she didn’t feel like the Lone Ranger doing this work because she had this group to help her.

Key Considerations from Children’s Mercy Hospital and Clinics

- It is important to have a detailed communication plan and to communicate the changes frequently to many different groups.
- Having evidence such as the lessons learned from the Focus on a Fitter Future program, that supports your changes helps create buy-in and improves transparency.

UCSF Benioff Children’s Hospital Oakland

Creating the Buzz

UCSF Benioff Children’s Hospital Oakland, joined the FFF group project because an earlier assessment of their cafeteria and vending ranked them near the bottom of California Children’s Hospitals for providing healthier food choices. Lydia Tinajero, pediatrician, and Sandy Jones, director of Food and Nutrition Services, were determined to improve this ranking and create excitement for healthier food selections offered in the cafeteria. Although some of the necessary changes were already underway in the hospital, these were accelerated when their food service organization, Morrison, signed a modified agreement with PHA to help them improve their menu options. With this agreement in place, the hospital started working initially by using the PHA’s template to start making the changes to healthier foods in the hospital cafeterias.

After forming a small committee, Sandy Jones led the effort forward. The committee used a pilot version of the Healthy Hospital Environment Assessment Tool from CDC to help see where they really were and what they were lacking.
A challenge for the committee was to insure sales and profits remained the same while introducing new, healthier menu options. For instance, at one point bacon was the top seller. The committee decided along with changing the menus, they would also have to use marketing strategies to encourage people to try a variety of healthier foods.

Some staff were appreciative of the changes because of their own health concerns.

There has been very positive feedback from customers regarding the removal of the fryers, offering homemade soups with reduced sodium content, and ensuring that there are fresh seasonal fruits available, not just the basic apples and oranges.

Morrison’s signing of the modified PHA agreement was an important facilitator for change as well because it provided a successful work framework and resources to better market the hospital’s efforts and ensure alignment with its goals.

For Dr. Tinajero, the key to success was enlisting the help of a champion like Sandy Jones. It couldn’t have been done without Sandy Jones’ desire to serve healthier foods in the cafeteria. After attending the FFF meetings, Sandy Jones and Lydia Tinajero would come back with new ideas and implement them. Lydia Tinajero said from the FFF meetings, they learned they could use a picture of water on the vending machine instead of a picture of a sugar-sweetened beverage. Another change made was to move the cafeteria’s salad bar to a more prominent place and promote it with more signage. As food service director, Sandy Jones was interested in providing a variety of foods and wanted to take advantage of the weekly farmers’ market across the street from the hospital. Food from the farmers’ market helped provide fresh food and seasonal produce for cooking demonstrations in the cafeteria. Sandy Jones was passionate about trying new foods and recipes and providing more offerings.

In the beginning, the changes were met with opposition from the staff. The managers made several efforts to get more engagement and buy-in by hosting competitions between departments to encourage healthy weight. They also offered the services of the hospital dietician to encourage healthier food selections.

Key Considerations from UCSF Benioff Children’s Hospital Oakland

- Having the food service organization sign a modified agreement with PHA was helpful in making change.
- Having a champion with passion to improve the food environment was critical.