

Introduction

**Welcome to the 2017 Healthy Food in Health Care Survey**

**This on-line survey is designed to:** Serve as the primary tool to gather data on progress made by our [Healthy Food in Health Care](#)(HFHC) partners throughout the United States, both [HFHC Pledge Signers](#) and non-Pledge signers.

**Information sharing:** Responses will be confidential, with results published only in aggregated form. We may, with your permission, include success stories reported in this survey in the 2017 Menu of Change Report. Your detailed survey response will be provided to the HFHC coordinators in your region.

### Instructions

Thank you in advance for your time. We estimate that the HFHC Survey will take 20-25 minutes to complete if you have your data available.

- **Surveys must be completed by:** Midnight, April 14th, 2017.
- **Target Calendar Year 2016:** All questions refer to work accomplished/purchases made in Calendar Year 2016.
- **Re-entering Survey/Application:** This survey has been designed so that you can exit the survey, if needed, and return at another time to revise or complete responses without losing data already entered. However, you must be using the same computer on which cookies haven't been cleared and make changes before midnight on April 14, 2017. Just click on the survey link again and it will take you to the first page of your previously completed survey. You can also print a question by right clicking anywhere on the survey and selecting "print". This will allow you to work off-line to determine your response, if needed, before returning to the survey.
- **One Survey/Application Per Facility:** Please complete only one survey per facility. This means that each facility within a health system needs to complete a separate survey/application. Provision of system level-data will skew the survey results.
- **Tools to support data gathering/tracking:** This survey asks about your food service purchasing. The following tracking tools may be of help: [Meat Reduction Tracking Tool](#); [Local & Sustainable Tracking Tool](#); [Healthy Beverage Tracking Tool](#).
- **Need Assistance?** Send an email to [mgiangreco@hcwh.org](mailto:mgiangreco@hcwh.org).

Facility Location

**\* 1. What state is your facility located in? If your facility is in Canada, please choose "Canada" in the list below.**

Facility Information

**\* 2. Your facility**

**\* 3. Primary Contact**

Name:

Title:

Department:

Email Address:

Phone Number:

**\* 4. Please provide the following information. (Enter numbers without punctuation, letters or symbols, e.g., 1500 instead of 1,500 and 20000 instead of \$20,000.)**

a. Total beds

b. Number of **Patient** meals/meal equivalents served in 2016

c. Number of **Cafeteria** meals/meal equivalents served in 2016

d. Total dollars spent on food and beverages for facility in 2016

*Please note: In the online version of the survey, the questions on this page are repeated for each state. The PDF version only includes these questions once.*







**Less  
Meat**

Most hospitals buy substantial amounts of meat, typically through large distributors who source from the U.S. commodity beef, pork, and poultry markets. Significant costs are associated with industrialized meat and poultry production and distribution, including antibiotic resistance, air and water contamination, and global climate change through methane and transportation emissions.

Americans eat more than twice the global average for meat consumption. Hospital food service operations often mirror this trend. Reducing the overall amount of meat served in hospitals provides health, social, and environmental benefits that are consistent with prevention-based medicine. Hospitals can deliver an important preventive health message to patients, staff, and communities by reducing the amount of meat and poultry they serve and by purchasing sustainably-produced meats as an alternative.

**11. Has the facility reduced the amount of meat and poultry purchased for cafeteria/retail and patient service?**

- Yes
- No

**12. Please fill out the following questions on meat and poultry purchasing data in 2015 (before implementation) and current year (after reduction program implementation).**

a. Pounds of meat and poultry purchased annually in 2015

b. Pounds of meat and poultry purchased in 2016

c. Please estimate annual **savings** (in dollars) from reduced meat procurement in 2016. (If costs have increased please indicate a negative number).

d. Number of meals served in 2015

e. Number of meals served in 2016



**13. Which of the following strategies has your facility used to reduce meat? Please select all that apply.**

- Decreased portion size
- Meatless Monday
- Substitute with poultry or seafood
- Substitute with plant based proteins (beans, nuts, seeds, soy, etc.)
- Blended Burger
- Other (please specify)

**Better  
Meat**

The routine/non-therapeutic use of antibiotics in animal agriculture (where otherwise healthy animals are given antibiotics to promote growth and prevent disease in overcrowded and unsanitary conditions) is contributing to the rise in antibiotic resistant bacterial infections. Purchasing of meat and poultry raised without this routine/non-therapeutic antibiotic use can help to shift the market for production practices that protect the efficacy of antibiotics for both human and animal care.

The following Certification and Label Claims assure meat and poultry has been raised without routine/non-therapeutic antibiotics:

Third Party Certifications: USDA Certified Organic, Food Alliance Certified, Certified Humane Raised and Handled, Animal Welfare Approved, Global Animal Partnership, Certified American Grass-Fed; and USDA Label claims: Raised without antibiotics/No antibiotics administered; Never Ever 3; American Grassfed.

**14. Does the facility preferentially purchase meat (beef, poultry, pork and lunch meat) produced without the use of routine, non-therapeutic antibiotics?**

Yes

No

**Better  
Meat**

**15. Please fill out the following questions on the purchase of meat and poultry raised without the routine use of non-therapeutic antibiotics in 2016.**

a. Pounds of meat and poultry purchased in 2016 that were produced without the use of routine, non-therapeutic antibiotics:

b. Total pounds of meat and poultry purchased in 2016:

**16. Which of the following certifications or label claims did your facility use to verify meat and/ or poultry items purchased were raised without routine, non-therapeutic antibiotics? Please select all that apply.**

- American Grassfed Certified
- Certified Humane (Raised and Handled)
- Certified Organic
- Certified Responsible Antibiotic Use (CRAU) chicken standard
- Global Animal Partnership
- USDA Label Claims such as Raised Without Antibiotics or No Antibiotics Ever
- Other (please specify)

**17. Please describe highlights of these efforts to reduce the amount of meat and poultry produced without the use of routine, non-therapeutic antibiotics.**

**Better  
Meat**

**18. Has your facility developed a supporting policy or resolution to purchase meat (beef, poultry, pork and lunch meat) produced without the use of non-therapeutic antibiotics?**

- Yes
- No
- I don't know

For more information on the public and environmental health impacts of the use of routine, non-therapeutic antibiotics in food animals, visit the Healthy Food in Health Care [Antibiotics in Animal Agriculture webpage](#). For information on label claims and certifications please visit our [Understanding Labels: Meat and Poultry webpage](#).

### Local and Sustainable Food and Beverage Procurement

Procurement of sustainably produced foods has many far reaching effects. The way food is produced, processed, and distributed has significant impacts on human health, air and water pollution, climate change, and the viability of future agricultural production. Purchasing sustainable foods can reduce many harmful effects related to food growth and distribution that contribute to public and environmental health problems. While not synonymous with sustainable, local food procurement is a key component of sustainable purchasing. Local food procurement is often attributed with benefits such as increased consumption of fruits and vegetables and increased economic activity. For information on local and sustainable food procurement see the HFHC [Environmental Nutrition white paper](#). For information on local and sustainable food definitions, see the [Sustainable Food Definitions Criteria Checklist](#).

For help with Tracking and Traceability, download the [Green Guide for Health Care Food Service Credits Toolkit](#).

**Health Care Without Harm uses the following definitions for local and sustainable food systems.**

**Local:** Farms, ranches, and production/processing facilities located within a 250-mile radius of the facility (Note: For processed foods with multiple ingredients like breads, the product must have the majority of ingredients (> 50% by weight) produced within the 250-mile radius).

**Sustainable:** Approved to carry one or more of the following:

- **Third-party Certified Labels:** USDA Certified Organic, Food Alliance Certified, Salmon Safe, Rainforest Alliance Certified, Protected Harvest, Fair Trade Certified, Certified Humane Raised and Handled, Animal Welfare Approved, American Grass Fed Certified, Marine Stewardship Council, NON GMO Project Verified, Global Animal Partnership, or other eco-label that has transparent and meaningful standards and independent verification processes.
- **Label Claims Allowed by USDA or FDA:** "Raised without antibiotics", "No antibiotics administered", "Raised with therapeutic antibiotics only" (poultry and meat products); "Raised without added hormones" or "No hormones added" (beef and lamb only); "rBGH-free"

**19. Has the facility purchased locally grown and produced foods? (Local is defined as grown/raised and processed less than 250 miles from the facility.)**

Yes

No

Local and Sustainable Food and Beverage Procurement

**20. Please enter the total spend (\$) on local food and beverages (only including fluid milk, coffee and tea) in 2016.**

**21. How does your facility purchase food from local farmers? Please select all that apply.**

- On contract with GPO
- On contract with food service management company
- Food hubs
- Farm-direct purchasing
- Farmers Cooperatives
- Other (please specify)

Local and Sustainable Food and Beverage  
Procurement

22. Has the facility purchased sustainably grown and produced foods? Sustainable is defined as a product that has an [allowed sustainability certification or label claim](#).

Yes

No

Local and Sustainable Food and Beverage  
Procurement

**23. Please enter the total spend (\$) on sustainable food and beverages (only including fluid milk, coffee and tea) in 2016.**



**Local and Sustainable Food and Beverage  
Procurement**

**24. Which food categories has your facility prioritized for purchases this past year?**

- Produce (All forms: fresh, whole, or minimally-processed; frozen; canned)
- Meat & Poultry
- Seafood
- Dairy (including fluid milk)
- Grocery/dry goods

For detailed definitions of local and sustainable, please see the [Sustainable Food Definition Checklist](#).

**Sustainable Food Education and Promotion**

Hospitals can be excellent models and drivers for healthier food environments through their education and promotion of healthy foods. There is an emerging understanding that the “health” of a food choice is a combination of the nutritional benefits it provides, and the way in which that food was produced, transported and prepared.

**25. Does the facility use strategies for promotion and placement of healthy and sustainable food options to increase their sales?**

- Yes
- No

**Sustainable Food Education and Promotion**

**26. Please select all strategies utilized to promote healthy/sustainable food options.**

- Pricing incentives on healthy and sustainable food options
- Placement of healthier food options
- Food sampling
- Other (please specify)

**27. Does the facility include sustainability information (reference eco-labels and foods grown locally/regionally) on menu labeling for meals served in retail or patient service?**

- Yes
- No

**28. Has the facility conducted a facility-wide education campaign that improves the visibility of healthier, sustainable food?**

- Yes
- No

**29. Please select all methods used to educate on healthier/sustainable food.**

- Cafeteria signage
- Internal newsletters
- Featured events
- Catering
- Patient Trays
- Other (please specify)

**Supporting Local Farms and Increasing Healthy Food Access**

**30. How does your facility increase access to healthy food? Please select all that apply.**

- Host local farmers market
- Host on-site Community Supported Agriculture (CSA) food box program for patients, employees and/or community residents
- Support on-site hospital farm and/or garden
- Support off-site community garden or farm
- Develop and offered a fruit and vegetable prescription program
- Conduct food insecurity screenings
- Other

**31. Please use this space to describe any of the food access programs in greater detail, if appropriate.**

**32. In which ways does your facility utilize community benefits to promote healthy food access/healthy food systems in your community?**

- Financial Investments
- Grants
- Staff time
- In-kind support
- We do not have a community benefit requirement
- We do not engage in these activities
- I do not know

**Success  
Story**

Please describe any other innovative food programs or successes at the facility this past year (not mentioned above) that you would like to share in the spaces below.

**33. Food Success 1: Please describe.**

**34. Please attach any additional documentation (optional) for Food Success 1.**

No file  
chosen

**35. Food Success 2: Please describe.**

**36. Please attach any additional documentation (optional) for Food Success 2.**

No file  
chosen

**37. Food Success 3: Please describe.**

**38. Please attach any additional documentation (optional) for Food Success 3.**

No file  
chosen

**Thank  
You**

**Thank you** for your responses and for all that you are doing to support healthy people, healthy communities and healthy environments!

If you need to change a response, you have until midnight April 14, 2017 to do so.

**Please click "Done" below, when you are finished with the survey.** Note: Clicking "done" does not prevent you from re-entering the survey to change or add responses as long as you do so before the survey closes at midnight on April 14, 2017.

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