

Encouraging Healthier Choices in Hospitals



*The nonprofit publisher of
Nutrition Action Healthletter*

April 2014

Table of Contents

Introduction	3
Tips for Successful Healthy Beverage Implementation from Hospitals	5
Hospital Summaries	6
Carney Hospital	6
Connecticut Mental Health Center	6
Dartmouth-Hitchcock Medical Center	7
Fairview Hospital.....	7
MacNeal Hospital, Weiss Memorial Hospital, West Suburban Medical Center, Westlake Hospital .	7
Oregon Health and Science University	8
Overlake Medical Center.....	8
Rady Children’s Hospital	9
Southern Maine Medical Center.....	9
St. Elizabeth’s Medical Center.....	10
St. Luke’s Hospital.....	10
Hospital Spreadsheets	11
Carney Hospital	11
Connecticut Mental Health Center.....	14
Dartmouth-Hitchcock Medical Center	16
Fairview Hospital.....	19
MacNeal Hospital, Weiss Memorial Hospital, West Suburban Medical Center, Westlake Hospital	21
Oregon Health and Science University	23
Overlake Medical Center.....	25
Rady Children’s Hospital	27
Southern Maine Medical Center.....	30
St. Elizabeth’s Medical Center.....	32
St. Luke’s Hospital.....	34

Introduction

Health care facilities across the country are recognizing that the food system — how our food is produced and distributed — is misaligned with dietary guidelines, and is largely reliant on methods of production and distribution that harm public and environmental health. By purchasing foods and beverages that are produced, processed, and transported in ways that are protective of public and environmental health, hospitals can make a profound difference in the market and in the food environment of the people they serve. They also have the ability to influence other institutions to increase the nutritional quality of their food and beverage options.

Many hospitals are making steps to decrease sales of sugar-sweetened beverages (SSBs) for both nutritional and environmental reasons. From a health standpoint, carbonated soft drinks are one of the biggest sources of calories in the American diet, providing about 7 percent of calories. Consumption of these beverages can lead to weight gain, obesity, and diabetes. As health care institutions, it is important that hospitals work to remove these beverages from their premises. The production and waste associated with sugar-sweetened and bottled beverages also have numerous negative environmental consequences. Tap water in the United States has been proven to be just as safe, or safer, than its bottled version. By supporting and promoting publicly-owned water infrastructure and not offering SSBs, the health care community can assist in creating a food environment that supports health for both the community it serves and the environment.

By sharing success stories and suggestions for implementation, the Center for Science in the Public Interest and Health Care Without Harm hope to encourage nutritionally and environmentally healthier policies in hospitals. The information below was gathered during the summer of 2013 through interviews with 11 hospitals in various stages of implementation of healthier policies. For a comprehensive list of their policies, see pages 11-34. If you would prefer to see this list in one excel spreadsheet, please contact amusicus@cspinet.org.

Center for Science in the Public Interest

The Center for Science in the Public Interest is a nonprofit consumer advocacy group based in Washington, D.C., that seeks to educate the public, advocate government policies that are consistent with scientific evidence on health and environmental issues, and counter industry's powerful influence on public opinion and public policies. CSPI works to reduce the consumption of sugar-sweetened beverages through legislation, education, research, publications, conferences, and meetings with the industry, government, and communities. In addition, CSPI works with states, localities, hospitals, and other large institutions to improve the nutritional quality of foods and beverages served and sold on their property and through their programs. Learn more at <http://cspinet.org/>.

Healthy Food in Health Care Program

The Healthy Food in Health Care (HFHC) Program is a national initiative of Health Care Without Harm (HCWH), developed in conjunction with its member organizations, which

mobilizes advocates to work with hospitals across the country to help improve the health and sustainability of their food services. Founded in 2005, the program provides education, tools, resources, and support to health care facilities making the connection between the health of their patients, staff, and community, and the food they serve. Ultimately the program works to support hospitals in leveraging their purchasing power and health expert status to promote a healthier food system. HFHC is also a technical assistance provider of the Healthier Hospitals Initiative (HHI), a national campaign to implement a completely new approach to improving public and environmental health in the health care sector. Learn more at www.healthyfoodinhealthcare.org and www.healthierhospitals.org.

Tips for Successful Healthy Beverage Implementation from Hospitals

- Recognize the benefits: strengthened community partnerships, positive press, and often increased revenue.
- Try experimenting with easy ways to start, such as pricing and placement, and then work on phasing out sugar-sweetened beverages.
- Strong, persistent, and passionate leadership is crucial.
- An internal committee to drive change is recommended, with representation across hospital departments, including food services, upper management, medical staff, and marketing.
- Make sure that hospital administrators and leadership are on board with the idea; work with them and educate them about the benefits of the program, emphasizing health promotion.
- Employee and public education is critical; taste testing, educational materials, displays, and surveys are all useful ways to inform people about the program and to receive feedback, while making the process enjoyable.
- It is important to have lines of communication open to those who express concerns to mitigate backlash.
- Healthier policies often have no effect on revenue or can lead to an increase in revenue. However, some hospitals may experience an initial decrease in revenue. To mitigate potential negative impacts [try these additional techniques](#) for successful implementation.

Hospital Summaries

Carney Hospital (Steward Health Care System)

Dorchester, MA

<http://steward.org/Carney-Hospital>

Contact: Michelle Reid, Community Health Manager: Michelle.Reid@steward.org

In April 2011, Carney Hospital in Dorchester, Massachusetts removed sugar-sweetened beverages (SSBs) from its cafeteria, vending machines, fast food restaurants, meetings, conferences, and catering services. It also reduced the availability of SSBs from patient meals. Working with the Boston Public Health Commission, it introduced a stoplight labeling system for beverages, removed posters and vending machines advertising SSBs, and educated employees and patients with displays showing the amount of sugar in popular beverages. Since the implementation of its Healthy Beverage Program, there has been a significant increase in the sales of unflavored skim and 1% milk, unsweetened tea, water, and seltzer water. In the future, the hospital hopes to examine and address sodium content in its cafeteria. For a comprehensive list of its policies and actions, see pages 11-13.

Connecticut Mental Health Center

New Haven, CT

<http://medicine.yale.edu/psychiatry/care/cmhc/index.aspx>

Contact: Pamela Dalton: pamelad@ct.gov

Connecticut Mental Health Center began its Sound Mind Sound Body Initiative in the spring of 2012. Working with the Yale Rudd Center for Food Policy and Obesity and Fresh Advantage consultants, it created a Health and Wellness Committee to oversee the process. Its goal is to increase healthy beverage sales by 20 percent; that includes the sales of water, coffee, tea, skim milk, and 100% no-sugar-added juice in 6-ounce containers. Patient meals are accompanied only by the above beverages. In its cafeteria, placement and pricing strategies along with the Boston Public Health Commission's traffic light labeling system are used to increase sales of healthy beverages. Meetings rarely feature SSBs; spa water (water flavored with real fruit) is typically served instead. To promote these changes, the health center released a Wellness Newsletter, did taste-testing with healthier options for staff and clients, and displayed the amount of sugar in popular beverages. Healthy beverage sales increased by 44 percent and 72 percent respectively in the first two quarters of 2013. The health center is currently constructing a new cafeteria, and seeking the assistance of a nutritionist. It hopes to provide more opportunities for feedback, and begin to grow produce in its courtyard garden for inpatients to tend to. For a comprehensive list of its policies and actions, see pages 14-15.

Dartmouth-Hitchcock Medical Center

Lebanon, NH

<http://www.dartmouth-hitchcock.org>

Contact: Deb Keane, Food & Nutrition Director: deborah.p.keane@hitchcock.org

In January 2012, Dartmouth-Hitchcock Medical Center (DHMC) eliminated the sale of all SSBs (except for sweetened milk products) on its Lebanon campus; this applies to the dining room and café, vending machines, on-site retail catering, retail stores, and fast food restaurants. Strong support from DHMC's Healthy Living Committee and leadership team, along with an employee survey, educational information booth, posters, educational materials, and displays helped to ease the transition. Within the first four months post-implementation, 33,701 fewer 20-ounce bottles of SSBs were sold. Sales of bottled water increased by 36.7 percent. On January 1, 2014, all Dartmouth-Hitchcock Community Group Practice locations throughout the state began implementing this same healthy beverage program and SSB elimination. For a comprehensive list of the medical center's policies and actions, see pages 16-18.

Fairview Hospital (Berkshire Health Systems)

Great Barrington, MA

www.berkshirehealthsystems.org

Contact: Roger Knysh, Nutrition and Food Services Department Director: rknysh@bhs1.org

Fairview Hospital was the first hospital in the nation to phase out SSBs. With the help of Health Care Without Harm, the hospital began its Sugar-Sweetened Beverage Initiative in February of 2010, phasing out SSBs from its cafeteria, meetings, catering services, vending, gift shops, and patient menus. The CEO and food service director consulted with the management team before implementation at a leadership meeting. Employees were informed of the change with a detailed letter, and brochures were used to educate the public. The large Coca-Cola-branded refrigerator previously used to sell drinks was replaced with a neutral open-air refrigerator. The hospital experienced no revenue loss after the change. In the future it plans to bring water dispensers into the hospital, and reduce the standard portion size of juice in the cafeteria from ten to four ounces. For a comprehensive list of its policies and actions, see pages 19-20.

MacNeal Hospital, Weiss Memorial Hospital, West Suburban Medical Center, Westlake Hospital (formerly Vanguard Health Chicago Hospitals)

Chicago, IL

www.macneal.com

Contact: J. Scott Steiner, CEO of MacNeal Hospital: ssteiner@macneal.com; Marie O'Brien, Assistant to CEO: mobrien@macneal.com

In July 2012, MacNeal Hospital, Weiss Memorial Hospital, West Suburban Medical Center, and Westlake Hospital eliminated SSBs from patient meals, cafeterias, vending machines,

meetings, catering services, gift shops, and a Walgreens on site. After consulting with Health Care Without Harm, the Illinois Public Health Institute, and the American Heart Association, pricing and placement techniques were used to increase sales of water, seltzer water, unsweetened tea, and 1% and skim milk in cafeterias and vending machines. At MacNeal Hospital, large jugs of fruit-infused water were offered outside of the cafeteria, and two public water fountains tallied how many gallons of water were distributed in total. Initially, a Healthy Beverage Work Group was created to assess the beverage environment, taste-test new options, and ultimately decide upon ten healthier beverages to serve. Educational materials explaining Boston Public Health Commission's traffic light approach, along with educational sessions in the cafeteria and sugar displays, were used to inform employees and the public about the changes. There was no drop in overall revenue after the change, and employees experienced health benefits, including weight loss. Community partnerships were strengthened, and the hospitals received positive media responses. In the future, they hope to make healthier beverages less expensive, and eventually only serve water, seltzer water, and skim milk. For a comprehensive list of the hospitals' policies and actions, see pages 21-22.

Oregon Health and Science University (OHSU)

Portland, OR

<http://www.ohsu.edu/xd/>

Contact: Eecole Copen, Sustainable Food Programs Coordinator and Farmers Market

Manager: copene@ohsu.edu

In the fall of 2012, Oregon Health and Science University began its plan to phase out 80 percent of the SSBs in patient meals and its main café by July 2015 using placement and pricing initiatives. So far, the main cafeteria's soda fountain has been replaced with an ice and water fountain, and reusable water bottles are sold in the Hospital's Farmer's Market. The hospital is now working on assessing inventory and looking at alternative products that fit its criteria and are marketable. OHSU is also hoping to sell reusable water bottles at the point of sale in the main cafeteria, and to put a water fountain with a water bottle refilling station on the main hospital floor, accompanied by educational information. For a comprehensive list of OHSU's policies and actions, see pages 23-24.

Overlake Medical Center

Bellevue, WA

<http://www.overlakehospital.org>

Contact: Chris Linaman, Executive Chef: Christopher.Linaman@overlakehospital.org

As part of a Health Care Without Harm pledge signed in 2008, Overlake Medical Center changed to sustainable packaging, added more fruits and vegetables to cafes, reduced meal portion sizes, and brought in local and organic foods. The hospital then eliminated all bottled beverages containing high fructose corn syrup (HFCS) from its main lobby café, and raised the prices of its fountain drinks. The hospital also eliminated energy drinks from all

of its cafeterias and eliminated beverages containing HFCS from patient menus. To implement this change, it did taste-testing of healthier beverages, and conducted one-on-one education with employees by email, phone, and in person, as opportunities presented themselves. After remodeling the main café, it switched out some of the Coca-Cola-branded coolers for plain coolers to allow for better opportunities to market other beverages. The hospital is currently working on reducing its dollars spent and dependence on Coca-Cola by working with local vendors in order to offer healthier beverages. For a comprehensive list of its policies and actions, see pages 25-26.

Rady Children's Hospital

San Diego, CA

www.rchsd.org

Contact: Cheri Fidler, Center for Healthier Communities Director: cfidler@rchsd.org

In October of 2012, Rady Children's Hospital began a Rethink Your Drink promotion to phase out SSBs, with the goal of decreasing sales of SSBs in the hospital by 30 percent from FY 13 Qtr 1 to FY 13 Qtr 4. SSBs are now only available upon request in patient meals, meetings, and catering services. SSBs are limited and placement strategies are implemented in the cafeteria, deli, vending machines, grab n go restaurants, and gift shops in order to increase sales of healthier beverages. The hospital educated its staff and patients with a traffic light approach, taste-testing, employee surveys, fact sheets, websites, presentations, posters, flyers, and displays. By FY 13 Qtr 4, SSB sales were reduced by 35 percent, and overall sales revenue increased. The hospital is currently working on expanding the Rethink Your Drink Campaign into the community and launching an initiative to increase consumption of fruits and vegetables in the hospital. For a comprehensive list of its policies and actions, see pages 27-29.

Southern Maine Medical Center

Biddeford, ME

<http://www.smmc.org/>

Contact: Michael Sabo, Director of Hospitality Services and Food Service Director:

dt.mas@smmc.org

Southern Maine Medical Center initially began working with a task force of food service directors as a part of MaineHealth's nationally-lauded "Let's Go" Program in 2006. This group drafted a Healthy Food in Healthcare Pledge that was modeled after the Health Care Without Harm Pledge. This initiated the transition to serving healthier beverages in its facilities. Ginger ale is the only SSB listed on patient menus, and pricing and placement strategies are used in the cafeteria and vending machines. Water and flavored seltzer are served at meetings and conferences. To educate and inform employees and the public of the change, the hospital conducted surveys, held nutrition fairs, provided healthy recipes, and hosted events with dietitians. It also utilized signage and displays to promote water. The hospital has not experienced any revenue loss, and the overall response from the

public has been very positive. In 2012, it signed an agreement to participate in the national Partnership for a Healthy America. Specific goals for the coming two years will be to eliminate the unhealthiest items from its sales mix and increase consumption of healthier beverages. For a comprehensive list of the medical center's policies and actions, see pages 30-31.

St. Elizabeth's Medical Center (Steward Hospital)

Brighton, MA

<http://steward.org/St-Elizabets>

Contact: Sasha Corken, Director of Community Health: sasha.corken@steward.org

Inspired by Health Care Without Harm, St. Elizabeth's Medical Center began to reduce sales of SSBs in March of 2011. The goal was to reduce sales of SSBs from 30 down to 15 percent of all beverage sales, and increase sales of water, seltzer water, and unflavored 1% and skim milk. SSBs were removed from patient meals, and traffic light labeling, placing, and pricing were utilized in the cafeteria, meetings, catering services, gift shops, and fast food restaurants on site. Unbranded vending machines were used with traffic light labeling. The hospital utilized handouts, posters, newsletter articles, and signage to ease the transition. During the first year of implementation, the hospital saw a 36.1 percent increase in sales of water, seltzer water, and unflavored 1% and skim milk, and a 41 percent decrease in SSB sales. The program served as a catalyst for other hospitals and community groups to launch similar programs. In the future, the hospital hopes to prohibit SSBs and decrease sodium consumption. For a comprehensive list of its policies and actions, see pages 32-33.

St. Luke's Hospital

Duluth, MN

<http://www.slhduluth.com/>

Contact: Mark Branovan, Director of Hospitality Services

In 2012, St. Luke's Hospital eliminated all beverages with added sugar from patient meals, the cafeteria, vending machines, meetings, catering services, and gift shops. It also eliminated bottled water and sold stainless steel water bottles (not for profit) to encourage tap water consumption, and got rid of its deep-fat fryers. Although there was a decrease in beverage sales, it is probable that it was due to the success of their tap water campaign; 95 percent of the feedback the hospital received was positive. The hospital aims to continue decreasing the availability of unhealthy foods on its premises in the future. For a comprehensive list of its policies and actions, see pages 34-35.

Hospital Spreadsheets

Carney Hospital

Sugary Drink Guidelines and Policies in Health Care Facilities	
Hospital Information	
Hospital name	Carney Hospital (Steward Health Care System)
Location	Dorchester, MA
Website	http://steward.org/Carney-Hospital
Key contact	Michelle Reid, Community Health Manager: Michelle.Reid@steward.org
Basic Campaign Information	
Name/theme of campaign	Healthy Beverage Program
Participant in any other health campaigns?	No
Goal of the campaign	Eliminate all red beverages and increase green beverage purchases (see "Beverage Guidelines" section for description of red and green beverages) [Across Steward Health Care System of 11 hospitals: reduce the overall amount of red beverages made available to employees, patients, and visitors by 15 percent]
Date of implementation	April, 2011
Was the policy phased in in steps?	No
Beverage Guidelines	
General beverage criteria	Boston Public Health Commission's Traffic Light Approach: Red (Prohibited): > 150 calories, > 12 g sugar or > 12 g of fat per 12 oz Yellow: 6 to 12 g sugar per 12 oz, or contains artificial sweeteners Green: 0 to 5 g sugar per 12 oz
Specific beverage criteria	Red (Prohibited): Regular soda, energy drinks, sports drinks, fruit drinks, sweetened tea (> 12 g sugar), whole milk (depending on size) Yellow: Diet soda, low calorie/low sugar drinks, 100% juice Green: Water, seltzer water, unsweetened tea, skim, 1%, and 2% milk (unflavored)
Is free water available in the cafeteria?	Yes (in beverage fountains)
Did you promote tap water? Did you encourage bottled beverage waste reduction?	No water promotion
In the following situations and locations, do the guidelines apply, and if so, how are/were they implemented? Include bans, limits, specific placement, pricing, and serving size limits	
Patient meals	Working to reduce availability of red beverages
Cafeteria	Red beverages prohibited; use placement techniques with yellow and green beverages [Across all Steward Hospitals: no ban on red beverages, but traffic light labeling; placement techniques (moved red and yellow beverages near bottom of cooler and away from the cash register, put the green beverages at eye level); increased the prices of red beverages and decreased the price of water by \$0.25 both ways]
Vending machines	Red beverages prohibited

Meetings/conferences & catering	Red beverages prohibited
Gift shops	No beverages sold in gift shops
Fast food vendors on hospital property	Dunkin Donuts: The manager voluntarily agreed to only sell yellow and green bottled beverages. Fountain beverages are unaffected.
Comments	It was difficult to change the standards for catering services, because employees requested red beverages.
Program Implementation	
Who was in charge of program implementation? Describe the workgroup.	The Community Benefits Department developed the idea, and the workgroup for implementation included the Food Service Director, Hospital President, and Senior Leadership Team. [Across all Steward Hospitals, the workgroup included the Vice President of Community Health and Ethics]
Was an Advisory committee/group consulted?	Partnered closely with the Boston Public Health Commission
What resources did you use in developing your program?	Referred to online resources
What were the initial steps of program implementation?	Mayor Menino's executive order to end sales of sugary drinks on city property was helpful to this initiative
Did you conduct employee surveys prior to action?	No
What communication methods did you use to explain and publicize the campaign to staff and the public?	Boston Public Health Commission's materials including the Commission's brochure (made available throughout the hospital including the cafeteria); weekly newsletters (4 to 5 articles) starting in March, national nutrition month; nutritionists' educational presentations in cafeteria at lunchtime for employees, patients, and visitors (i.e. displays showing the amount of sugar packets in one bottle of Coca-Cola)
Did you use posters, flyers, or other types of displays to promote the campaign? Describe.	Red, yellow, and green stickers on beverages; Boston Public Health Commission's materials including the Commission's brochure; sugar displays
Did you make any environmental or policy changes as part of your program? Describe.	Took soda advertisements off vending machines, resulting in clear machines or machines advertising water; took down all sugar-sweetened beverage (SSB) advertisements in the hospital
Program Evaluation	
Did you evaluate the program?	Yes
What methods of data collection did you use?	Purchasing data (did not examine revenue)
Results (including any financial impact)	A significant increase was seen in green beverage purchases; in April 2012, 13.4 percent of beverages purchased were green beverages, while in April 2013, 21.4 percent of beverages purchased were green beverages. [Across Steward Hospital network: A significant increase was seen in green beverage purchases; in April 2012, 10.35 percent of beverages purchased were green beverages, while in April 2013, 25.76 percent of beverages purchased were green beverages.]
How did employees and the public react to the changes?	There was initial frustration with a perceived lack of freedom of choice, but complaints were mitigated over time.
Future Plans	
Future directions	<ul style="list-style-type: none"> • Bring the program to community partners, such as the Dorchester YMCA • Continue to encourage the purchase of green beverages instead of yellow • Examine and address sodium content in the cafeteria

Recommendations for other hospitals

- A strong education campaign is very important
- Make the process fun by involving nutritionists and food directors, including displays
- Employee surveys are important
- Leadership must be involved and invested
- Utilize placement and pricing strategies

Connecticut Mental Health Center

Sugary Drink Guidelines and Policies in Health Care Facilities	
Hospital Information	
Hospital name	Connecticut Mental Health Center
Location	New Haven, CT
Website	http://medicine.yale.edu/psychiatry/care/cmhc/index.aspx
Key contact	Pamela Dalton: pamela.dalton@ct.gov
Basic Campaign Information	
Name/theme of campaign	Sound Mind Sound Body Initiative
Participant in any other health campaigns?	Healthier Hospitals Initiative Healthy Food Challenge Participant
Goal of the campaign	Increase healthy beverage sales by 20 percent and promote consumption of water
Date of implementation	Began discussion in Spring, 2012
Was the policy phased in in steps?	Yes
Beverage Guidelines	
General beverage criteria	Boston Public Health Commission's Traffic Light Approach: Red: > 150 calories, > 12 g sugar or > 12 g of fat per 12 oz Yellow: 6 to 12 g sugar per 12 oz, or contains artificial sweeteners Green: 0 to 5 g sugar per 12 oz
Specific beverage criteria	Red: Regular soda (Coke, Pepsi, and ginger ale) Yellow: Diet soda, low calorie/low sugar drinks (Hint, Hope, Naked Juice), 100% juice (6 oz or less), unsweetened tea, coffee Green: Water, coconut water, skim and 1% milk (unflavored) Not Available: Energy drinks, sports drinks, fruit drinks, seltzer water, sweetened tea, 2% and whole milk
Is free water available in the cafeteria?	Yes (filtered tap water available throughout facility and at satellite sites)
Did you promote tap water? Did you encourage bottled beverage waste reduction?	Filtered tap water available throughout facility and at satellite sites
In the following situations and locations, do the guidelines apply, and if so, how are/were they implemented? Include bans, limits, specific placement, pricing, and serving size limits	
Patient meals	Sugar-sweetened beverages (SSBs) not offered on menu; only water, coffee, tea, skim milk, and 100% fruit juice (6 oz) are offered
Cafeteria	Placement and pricing strategies (decreased cost of healthier beverages and increased cost of unhealthier beverages) used with traffic light labeling
Vending machines	Contracted with vending companies to limit unhealthy choices; in cafeteria vending machines, there are no sports drinks, and only two choices of soda
Meetings/conferences & catering	No formal rule, but serve fresh fruit-flavored water in large containers; rare to serve SSBs
Gift shops	None
Fast food vendors on hospital property	None
Comments	Currently renovating the cafeteria and purchasing local, organic and hormone/antibiotic-free foods as much as possible
Program Implementation	

Who was in charge of program implementation? Describe the workgroup.	CMHC Health and Wellness Committee, Co-Chairs: M Sernyak MD, CEO and Pamela Dalton RN, Nurse Consultant
Was an Advisory committee/group consulted?	Worked with a consultant from Fresh Advantage, Rudd Center for Food Policy and Obesity (Yale University)
What resources did you use in developing your program?	None
What were the initial steps of program implementation?	Consulted with the Rudd Center and Fresh Advantage consultants, created a Health and Wellness Committee, and began working on other issues prior to the Sound Mind Sound Body Initiative; institutional food and beverage policy adopted; Health Food in Health Care pledge signed by CEO
Did you conduct employee surveys prior to action?	Yes
What communication methods did you use to explain and publicize the campaign to staff and the public?	Health and Wellness Committee Newsletter, bulletin board, Fresh Advantage led taste testing of healthier food for staff and clients during breakfast, lunch, and dinner, educational "meet ups"
Did you use posters, flyers, or other types of displays to promote the campaign? Describe.	Display showing amount of sugar in popular drinks
Did you make any environmental or policy changes as part of your program? Describe.	Added a community garden offsite to teach people how to grow their own food; courtyard garden has raised beds for inpatients to work with plants; host a farmers' market every Friday
Program Evaluation	
Did you evaluate the program?	Yes
What methods of data collection did you use?	Sales data (business office tracks sales)
Results (including any financial impact)	Exceeded goal of increasing healthy beverage sales by 20 percent: healthy beverages sales increased by 44 percent and 72 percent in the last two quarters of FY 13, respectively. These figures exclude the increase in water consumption, which is free.
How did employees and the public react to the changes?	Employees were initially upset with food environment changes (no more fryer, coffee rolls, candy, ice cream), and many complained about the increase in soda prices. All of the complaints were mitigated over time.
Future Plans	
Future directions	<ul style="list-style-type: none"> • Construct a new cafeteria and engage new staff /food service management company • Seek nutritionist assistance for program • Grow produce in courtyard garden for inpatients to tend to • Provide more opportunities for feedback
Recommendations for other hospitals	<ul style="list-style-type: none"> • Leadership support is crucial • It is important to work closely with staff and patients during implementation to ensure that new products will be accepted

Dartmouth-Hitchcock Medical Center

Sugary Drink Guidelines and Policies in Health Care Facilities	
Hospital Information	
Hospital name	Dartmouth-Hitchcock Medical Center
Location	Lebanon, NH
Website	http://www.dartmouth-hitchcock.org/
Key contact	Deb Keane, Food & Nutrition Director: deborah.p.keane@hitchcock.org
Basic Campaign Information	
Name/theme of campaign	Healthy Beverage Initiative
Participant in any other health campaigns?	Healthier Hospitals Initiative Healthy Food Challenge Participant, Life is Sweeter without Sugary Drinks
Goal of the campaign	Eliminate all sales of sugar-sweetened beverages (SSBs) in the retail setting except for sweetened milk; reduce the selection of SSBs in patient meals
Date of implementation	January, 2012
Was the policy phased in in steps?	No
Beverage Guidelines	
General beverage criteria	All beverages with added sugar are prohibited in the retail setting
Specific beverage criteria	<p>Prohibited: Regular soda, energy drinks, sports drinks, fruit drinks, low calorie/low sugar drinks, sweetened tea</p> <p>Available: Diet soda, 100% juice, water, seltzer water, unsweetened tea, skim, 1% and 2% milk, soy and lactose-free milk</p>
Is free water available in the cafeteria?	Yes
Did you promote tap water? Did you encourage bottled beverage waste reduction?	Yes
In the following situations and locations, do the guidelines apply, and if so, how are/were they implemented? Include bans, limits, specific placement, pricing, and serving size limits	
Patient meals	SSBs not offered on menu, but available if approved by health care provider
Cafeteria	SSBs prohibited
Vending machines	SSBs prohibited
Meetings/conferences & catering	SSBs prohibited from on-site retail caterers; outside caterers are allowed to provide SSBs
Gift shops	SSBs prohibited
Fast food vendors on hospital property	SSBs prohibited (applies to Allan's Vending, Au Bon Pain, Sbarro and Cravin's General Store)
Comments	Establishing categories of beverages that were consistent with the report guiding their program was instrumental in creating a clear, concise message. In 2011, pre-implementation, the hospital began offering 4 oz juices and 8 oz cans of soda in addition to the 12 oz and 20 oz bottles in the cafeteria. Prices were also increased for regular and diet sodas, large juices and large cartons of milk. Prices remained the same for plain water, while prices decreased for 8 oz cartons of milk and 4 oz juices. Sweetened milk products were not restricted because of milk's nutritional benefits.
Program Implementation	
Who was in charge of program implementation? Describe the workgroup.	High level DHMC Leadership, DHMC Healthy Living Committee (composed of Lebanon hospital staff, including nursing, occupational medicine, food service, public affairs, security, administration, and senior leadership; expanding to include community members such as local recreation departments, community

	health groups, and Dartmouth College's Wellness Coach); Live Well/Work Well Employee Wellness Program; Food and Nutrition Services
Was an Advisory committee/group consulted?	Conversed with Cleveland Clinic and Gifford Medical Center (two hospitals that have already implemented a healthier beverage program) for implementation suggestions
What resources did you use in developing your program?	None
What were the initial steps of program implementation?	DHMC Dietitian from Live Well/Work Well program presented her research and recommendations to DHMC's Healthy Living Committee, and then that committee worked with the leadership team to gather support. Once certain of the policy change, and knowing they would not back down, they gave the public two weeks' notice prior to implementation. Support from their leadership team and existence of evidence-based research aided in successful program implementation. Allowing employees to bring their own SSBs to work to support their freedom of choice mitigated backlash, and support and clear communication from DHMC leadership and Food and Nutrition Services as well as the voluntary cooperation of outside retailers aided in program success.
Did you conduct employee surveys prior to action?	Yes: Employees could complete a 3-question voluntary survey outlining their present and future SSB consumption and practices. Survey was distributed via the hospital's weekly newsletter. Survey was repeated six months post implementation to assess behavior change.
What communication methods did you use to explain and publicize the campaign to staff and the public?	"Let's Talk Nutrition" information booth was held outside the main dining room for employees one week prior to implementation and roughly one month post implementation, to educate employees on the health effects of SSBs and to answer nutrition questions. Other communication methods used included employee feedback email, FAQs, seltzer water samples, written communication at point-of-sale, written communication in hospital's online newsletter
Did you use posters, flyers, or other types of displays to promote the campaign? Describe.	Pre-designed educational materials: Boston Public Health Commission's "Traffic Light", CDC's "Rethink Your Drink", and Alliance for a Healthier Vermont's "How Much Sugar is in Your Drink?"; graphic models; signs above coolers introducing the initiative, outlining what beverages are available, and suggesting the best beverage choices
Did you make any environmental or policy changes as part of your program? Describe.	Eliminated all sales of SSBs, with exception of sweetened milk (on-site outside vendors and the vending company voluntarily discontinued selling SSBs in retail locations); point-of-purchase written educational info; went from 7 cooler doors of beverages to 6 cooler doors and put healthy food options in the extra cooler (pre-made salads and side dishes).
Program Evaluation	
Did you evaluate the program?	Yes
What methods of data collection did you use?	Pre- and post-implementation employee survey, monthly sales data, and quarterly ounces/caloric consumption values
Results (including any financial impact)	First 4 months of implementation (compared to previous year): cold beverage sales (seltzers, sodas, sport drinks, vitamin water) decreased 16 percent; plain bottled water sales increased 36.7 percent; sales of 8 oz milk increased 3 percent (note: no elimination of flavored milks); 674,029 fewer ounces of SSBs sold, equaling 33,701 fewer 20 oz bottles sold (less waste); 4,754,184 fewer calories of SSBs sold, equaling 1,358 fewer pounds of body weight; positive publicity and community attention.
How did employees and the public react to the changes?	Created an email solely for employees to pose any questions, comments or concerns. Each email was responded to individually. Much of the feedback questioned the perceived promotion of artificial sweeteners and taking away the right to choose.

Future Plans	
Future directions	<ul style="list-style-type: none"> · On January 1, 2014, all Dartmouth-Hitchcock Community Group Practice locations throughout the state implemented the healthy beverage program · Healthy Living Committee will continue to research artificial sugars and adjust policies if needed
Recommendations for other hospitals	<ul style="list-style-type: none"> · Recognize the possibility of revenue loss, but also recognize that the message being sent to the hospital community is powerful · "Just do it. It's the right thing to do."

Fairview Hospital

Sugary Drink Guidelines and Policies in Health Care Facilities	
Hospital Information	
Hospital name	Fairview Hospital, Berkshire Health Systems
Location	Great Barrington, MA
Website	www.berkshirehealthsystems.org
Key contact	Roger Knysh, Nutrition and Food Services Department Director: rknysh@bhs1.org
Basic Campaign Information	
Name/theme of campaign	A Call to Action/Sugar-Sweetened Beverage (SSB) Initiative
Participant in any other health campaigns?	Healthier Hospitals Initiative Healthy Food Challenge Participant, Health Care Without Harm's Healthy Food in Health Care Pledge
Goal of the campaign	Eliminate all beverages with added sugar, improve employee and patient health, create healthier communities, and lead by example
Date of implementation	February, 2010
Was the policy phased in in steps?	Yes
Beverage Guidelines	
General beverage criteria	Limit access to and eventually discontinue the sale of SSBs
Specific beverage criteria	Phased Out: Regular soda, diet soda (in cafeteria), energy drinks, sports drinks, fruit drinks Available: Sugar-free energy drinks, sports drinks, fruit drinks, water, seltzer water (price raised), unsweetened tea, skim and 1% milk, whole milk (not listed on patient menus)
Is free water available in the cafeteria?	Yes (hot and cold)
Did you promote tap water? Did you encourage bottled beverage waste reduction?	Waived the cost (\$0.05) of paper cups to encourage the use of tap water from ice machine
In the following situations and locations, do the guidelines apply, and if so, how are/were they implemented? Include bans, limits, specific placement, pricing, and serving size limits	
Patient meals	SSBs not offered on menu, but available if approved by health care provider
Cafeteria	SSBs prohibited
Vending machines	SSBs prohibited; only 100% juice, bottled water, and diet beverages available
Meetings/conferences & catering	SSBs prohibited, water dispenser available
Gift shops	None
Fast food vendors on hospital property	None
Comments	
Program Implementation	
Who was in charge of program implementation? Describe the workgroup.	Nutrition and Food Services, CEO, Communications Officer
Was an Advisory committee/group consulted?	Inspired by the Massachusetts House of Representatives banning the sale of soft drinks in schools
What resources did you use in developing your program?	Health Care Without Harm helped develop the policy
What were the initial steps of program implementation?	Took SSBs off patient menus in 2006 (available by request/special situations only); in 2007, signed The Healthy Food in Healthcare pledge to bring in healthier food choices; in 2009, raised price of bottled soda from \$1.25 to \$1.50 largely to meet market standard pricing. New price slowed volume of soda purchased.

Did you conduct employee surveys prior to action?	No
What communication methods did you use to explain and publicize the campaign to staff and the public?	The CEO and food service director consulted with the management team before implementation. There was little to no discussion or opposition. Management was instructed to review the new policy with their department staff. Letters were later sent to staff to help clarify intentions: "We're not telling you that you can't drink SSBs; we are just choosing not to sell them." There was a local press release, an internal Berkshire Health System newsletter "Scope," press through Health Care Without Harm and Modern Healthcare Magazine, Soda/Canadian News Video on Fairview Soda Initiative and on the BBC radio network. Also presented "Call to Action" Poster Presentation at CleanMed 2013 Conference in Boston.
Did you use posters, flyers, or other types of displays to promote the campaign? Describe.	Brochure: Introducing a Healthier Way in the World of Healthcare, discusses Fairview's food services. Distributed in Mason's Café and to community, employees, and donors.
Did you make any environmental or policy changes as part of your program? Describe.	Replaced Coke-branded refrigerator (with Coke signage) with a non-branded refrigerator.
Program Evaluation	
Did you evaluate the program?	Yes
What methods of data collection did you use?	Sales data
Results (including any financial impact)	Beverage sales were not affected; no revenue loss
How did employees and the public react to the changes?	Employee opposition was mitigated with the employee education letter, and the CEO personally walked through the hospital to discuss new policies with staff.
Future Plans	
Future directions	<ul style="list-style-type: none"> • Reduce the standard portion size of juice in cafeteria from 10 oz to 4 oz (already reduced standard size from 16 oz to 10 oz) • Bring water dispensers into hospital (add fruits and vegetables to the water)
Recommendations for other hospitals	<ul style="list-style-type: none"> • Make sure leadership is on board and provide good education to staff that emphasizes program's mission of promoting health • It is important to have lines of communication open to those individuals who express concerns to mitigate backlash • Management support is key

MacNeal Hospital, Weiss Memorial Hospital, West Suburban Medical Center, Westlake Hospital

Sugary Drink Guidelines and Policies in Health Care Facilities	
Hospital Information	
Hospital name	MacNeal Hospital, Weiss Memorial Hospital, West Suburban Medical Center, Westlake Hospital (formerly Vanguard Health Chicago Hospitals)
Location	Chicago IL
Website	www.macneal.com
Key contact	J. Scott Steiner, CEO of MacNeal Hospital: ssteiner@macneal.com Marie O'Brien, Assistant to CEO: mobrien@macneal.com
Basic Campaign Information	
Name/theme of campaign	Healthy Beverage Campaign/Rethink What You Drink
Participant in any other health campaigns?	Healthier Hospitals Initiative Healthy Food Challenge Participant
Goal of the campaign	Eliminate all beverages high in sugar and increase consumption of low- and no-sugar drinks among hospital constituents; eventually eliminate all sugar and artificially-sweetened drinks
Date of implementation	July, 2012
Was the policy phased in in steps?	No
Beverage Guidelines	
General beverage criteria	Boston Public Health Commission's Traffic Light Approach: Red: > 150 calories, > 12 g sugar or > 12 g of fat per 12 oz Yellow: 6 to 12 g sugar per 12 oz, or contains artificial sweeteners Green: 0 to 5 g sugar per 12 oz
Specific beverage criteria	Red: Regular soda, energy drinks, sports drinks, fruit drinks, sweetened tea, 2% and whole milk (unflavored) Yellow: Diet soda, low calorie/low sugar drinks, 100% juice Green: Water, seltzer water, unsweetened tea, skim and 1% milk (unflavored)
Is free water available in the cafeteria?	Yes (two large 5-gallon vessels of water infused with vegetables or fruit)
Did you promote tap water? Did you encourage bottled beverage waste reduction?	At MacNeal: Two large five-gallon vessels of water placed outside of cafeteria infused with vegetables or fruit; two public water fountains that fill water bottles and tally how many gallons are distributed
In the following situations and locations, do the guidelines apply, and if so, how are/were they implemented? Include bans, limits, specific placement, pricing, and serving size limits	
Patient meals	Red beverages prohibited, but available upon doctor's request
Cafeteria	Red beverages prohibited; yellow and green beverages use pricing and placement to influence purchase (green drinks at eye level and yellow drinks off to the side; yellow drinks priced higher than green drinks)
Vending machines	Red drinks prohibited; pricing strategies used to increase healthier beverage consumption
Meetings/conferences & catering	Red drinks prohibited
Gift shops	Red drinks prohibited
Fast food vendors on hospital property	Walgreens prohibits red drinks
Comments	
Program Implementation	

Who was in charge of program implementation? Describe the workgroup.	Senior Management Team Members, Food and Nutrition Directors, Human Resources, Community Relations, Senior Administration Team Members, Market Office, Clinical Management, Market/Public Relations
Was an Advisory committee/group consulted?	Illinois Public Health Institute, American Heart Association, Health Care Without Harm
What resources did you use in developing your program?	None
What were the initial steps of program implementation?	Created Healthy Beverage Work Group to assess beverage environment and create program/policies (biweekly meetings); subgroups were created; attended Rethink Your Drink 2012 symposium; chose traffic light model; created implementation plan; inventoried beverages served and access points; reviewed vendor contracts; taste-tested new drink options (40-50 healthy beverages); workgroup picked ten beverages
Did you conduct employee surveys prior to action?	No
What communication methods did you use to explain and publicize the campaign to staff and the public?	Communication and education materials with color-coded definitions used by Boston Public Health Commission; Traffic Light Approach (Rethink What You Drink); several educational sessions in cafeteria displaying the amount of sugar in sugary drinks
Did you use posters, flyers, or other types of displays to promote the campaign? Describe.	Communication and education materials; sugar displays demonstrating the amount of sugar in certain soda beverages
Did you make any environmental or policy changes as part of your program? Describe.	Color-coded all drinks; reduced price of non-sugary beverages including water; removed sugary drink advertisements from vending machines and coolers; increased availability of potable drinking water
Program Evaluation	
Did you evaluate the program?	No formal evaluation
What methods of data collection did you use?	Observational
Results (including any financial impact)	No drop in vending machine revenue; CEO does not believe overall revenue has changed; employees shared improved health benefits including weight loss; community partnerships were strengthened and expanded; positive media responses
How did employees and the public react to the changes?	After The Chicago Tribune wrote an article on the campaign, Coca-Cola requested to meet with these hospitals. Together they met with the American Heart Association, the Illinois Public Health Institute, and Coca-Cola for a meeting, but refused to change their policies.
Future Plans	
Future directions	<ul style="list-style-type: none"> • Work to eliminate all sugar- and artificially-sweetened drinks (leaving just water, seltzer water, and skim milk) • In the next year, make green options less expensive and yellow options more expensive, and expand and intensify education efforts
Recommendations for other hospitals	<ul style="list-style-type: none"> • It is important to have someone who is passionate and fearless driving the campaign; "be brave with it" • Recognize this as an opportunity to educate

Oregon Health and Science University

Sugary Drink Guidelines and Policies in Health Care Facilities	
Hospital Information	
Hospital name	Oregon Health and Science University (OHSU)
Location	Portland, OR
Website	http://www.ohsu.edu/xd/
Key contact	Eecole Copen, Sustainable Food Programs Coordinator and Farmers Market Manager: copene@ohsu.edu
Basic Campaign Information	
Name/theme of campaign	None
Participant in any other health campaigns?	Healthier Hospitals Initiative Healthy Food Challenge Participant (January 2013), Partnership for a Healthier America Food Challenge Participant (October 2012)
Goal of the campaign	Phase out 80 percent of sugar-sweetened beverages (SSBs) in main café by July 2015 (12 cafés total)
Date of implementation	September, 2012
Was the policy phased in in steps?	Yes
Beverage Guidelines	
General beverage criteria	Partnership for a Healthier America Standards: Phase out any drinks with added sugars by 80 percent
Specific beverage criteria	<p>Phased Out: Regular soda, energy drinks, sports drinks, fruit drinks, sweetened tea</p> <p>Available: Diet soda, low calorie/low sugar drinks (40 calories or less), sugar-free energy drinks, sports drinks, fruit drinks, 100% juice (< 140 mg sodium/serving, 8 oz), water, seltzer water, unsweetened tea, skim and 1% milk (< 12 oz)</p> <p>Not Offered: 2% and whole milk</p>
Is free water available in the cafeteria?	Yes
Did you promote tap water? Did you encourage bottled beverage waste reduction?	Reusable water bottles are sold at the Hospital's Farmer's Market. Hoping to sell reusable water bottles at point of sale in the main cafeteria, and to put a water fountain with a water bottle refilling station on the main floor, accompanied by educational information.
In the following situations and locations, do the guidelines apply, and if so, how are/were they implemented? Include bans, limits, specific placement, pricing, and serving size limits	
Patient meals	Included in goal of 80% healthy beverages
Cafeteria	Phase out SSBs, possibly placement and pricing techniques in the future
Vending machines	No guidelines
Meetings/conferences & catering	No guidelines (do not have control over this)
Gift shops	No beverages sold in gift shops
Fast food vendors on hospital property	No guidelines
Comments	
Program Implementation	
Who was in charge of program implementation? Describe the workgroup.	Retail Managers, Retail Dietitians, Sustainable Food Programs Coordinator, Farmers Market Manager, Clinical Nutrition Manager, Director of Food Services
Was an Advisory committee/group consulted?	No external group consulted

What resources did you use in developing your program?	Partnership for a Healthier America Guidelines
What were the initial steps of program implementation?	Baseline assessment
Did you conduct employee surveys prior to action?	No
What communication methods did you use to explain and publicize the campaign to staff and the public?	None yet
Did you use posters, flyers, or other types of displays to promote the campaign? Describe.	Not yet
Did you make any environmental or policy changes as part of your program? Describe.	Replaced soda fountain with an ice and water fountain in the main cafeteria
Program Evaluation	
Did you evaluate the program?	Not yet
What methods of data collection did you use?	Will use annual reports from distributors
Results (including any financial impact)	N/A
How did employees and the public react to the changes?	N/A
Future Plans	
Future directions	<ul style="list-style-type: none"> • Assess inventory and examine alternative products that fit the criteria and are profitable • Examine program's effect on revenue • Potentially sign on to HHI and/or PHA initiatives
Recommendations for other hospitals	<ul style="list-style-type: none"> • Sign on to initiatives that guide department towards healthier purchasing policies

Overlake Medical Center

Sugary Drink Guidelines and Policies in Health Care Facilities	
Hospital Information	
Hospital name	Overlake Medical Center
Location	Bellevue, WA
Website	http://www.overlakehospital.org/
Key contact	Chris Linaman, Executive Chef: Christopher.Linaman@overlakehospital.org
Basic Campaign Information	
Name/theme of campaign	None
Participant in any other health campaigns?	Healthier Hospitals Initiative Healthy Food Challenge Participant
Goal of the campaign	Eliminate all beverages that contain high-fructose corn syrup (HFCS)
Date of implementation	2010/2011
Was the policy phased in in steps?	No
Beverage Guidelines	
General beverage criteria	All bottled beverages containing high fructose corn syrup (HFCS) are prohibited in main café
Specific beverage criteria	<p>Prohibited: Soda with HFCS (bottled), diet soda (bottled), fruit drinks with HFCS (bottled), Naked and Odwalla juice (bottled)</p> <p>Available: Soda with cane sugar, soda fountain with regular soda, juice, and seltzer water, Golazo energy and sports drinks (no HFCS or GMOs), local fresh organic juices, water, sweetened and unsweetened tea (no HFCS), organic skim, 1%, 2%, and whole milk (unflavored), organic soy and almond milk</p>
Is free water available in the cafeteria?	Yes
Did you promote tap water? Did you encourage bottled beverage waste reduction?	Observed less bottle waste
In the following situations and locations, do the guidelines apply, and if so, how are/were they implemented? Include bans, limits, specific placement, pricing, and serving size limits	
Patient meals	HFCS beverages prohibited, but can be requested by patient
Cafeteria	<p>The hospital has three cafes:</p> <ul style="list-style-type: none"> • Stanza's (main lobby café): Bottled beverages with HFCS are prohibited, but fountain beverages could not be removed. Instead they may see price raises in the future. Placement strategies used for soda with cane sugar. • Atrium cafe (main visitor/staff cafe): Energy drinks are prohibited. • Third café (located in a clinic across the street, under a different contract): Energy drinks are prohibited.
Vending machines	Used h.u.m.a.n. Vending for 1.5 years but the machines were not utilized enough, so returned to Canteen Vending, but requested for a majority of healthier options. The hospital does not manage the machines.
Meetings/conferences & catering	HFCS beverages allowed if requested
Gift shops	No beverages sold in gift shops
Fast food vendors on hospital property	None
Comments	Contract with Coca-Cola makes things difficult: Coca-Cola wants the hospital to increase their cup sizes from 16 oz and 20 oz to 24 oz and 32 oz. Overlake resisted; Coca-Cola was surprised to hear that their focus was not solely on money.

Program Implementation	
Who was in charge of program implementation? Describe the workgroup.	Executive Chef, Director of Hospitality Services, previously had "Green Team" to help with implementation
Was an Advisory committee/group consulted?	Health Care Without Harm
What resources did you use in developing your program?	HFCS was targeted for elimination as part of the hospital's goal of getting rid of all ingredients/foods that contain genetically-modified organisms (GMOs)
What were the initial steps of program implementation?	Signed Health Care Without Harm pledge in 2008 and changed to sustainable packaging, added more fruits and vegetables to cafes, reduced portion sizes, and brought in local and organic foods. Around 2010/2011, the executive chef attended a conference that inspired him to take action on the hospital's beverage environment. He wrote a food policy to help get rid of beverages with HFCS.
Did you conduct employee surveys prior to action?	No
What communication methods did you use to explain and publicize the campaign to staff and the public?	Beverage company sales teams hosted tastings of new products, and products that tested well were sold by the hospital. Companies include Golazo, Columbia Gorge (local juice company), and Honest Tea (at least 6 Honest Tea tastings during 2013 summer). One-on-one education was used with employees by email, phone, and in person.
Did you use posters, flyers, or other types of displays to promote the campaign? Describe.	No
Did you make any environmental or policy changes as part of your program? Describe.	Replaced Coca-Cola-branded coolers in Atrium café (main café) with unbranded coolers. A few coolers advertise Dasani Water, Honest Tea, and Vitamin Water. Coca-Cola tried to push additional marketing materials, but Overlake has repeatedly refused them.
Program Evaluation	
Did you evaluate the program?	Annual report for Healthy Hospital Initiative
What methods of data collection did you use?	Point-of-sale reports
Results (including any financial impact)	Will have numbers for the next fiscal year. Reduced antibiotic use and increased sustainability.
How did employees and the public react to the changes?	Employees felt that they were being denied the right to choose.
Future Plans	
Future directions	<ul style="list-style-type: none"> • Work to limit dependence on Coca-Cola. Difficult because will require entire hospital to agree, and because it has been a long-standing relationship. • Look into Blue Sky (organic) beverage fountain program • Possibly further raise soda prices
Recommendations for other hospitals	<ul style="list-style-type: none"> • Phase in changes, and have a well-organized implementation plan • Phase out energy drinks first and find an alternative that is not coffee (there are many unique providers) • Bring in sales teams to educate consumers on new products and to conduct tastings

Rady Children's Hospital

Sugary Drink Guidelines and Policies in Health Care Facilities	
Hospital Information	
Hospital name	Rady Children's Hospital
Location	San Diego, CA
Website	http://www.rchsd.org/
Key contact	Cheri Fidler, Center for Healthier Communities Director: cfidler@rchsd.org
Basic Campaign Information	
Name/theme of campaign	Rethink Your Drink
Participant in any other health campaigns?	Healthier Hospitals Initiative Healthy Food Challenge Participant
Goal of the campaign	Reduce sugar-sweetened beverage (SSB) sales by 30 percent from FY 13 Qtr 1 to FY 13 Qtr 4
Date of implementation	October, 2012
Was the policy phased in in steps?	Yes
Beverage Guidelines	
General beverage criteria	Boston Public Health Commission's Traffic Light Approach: Red: > 150 calories, > 12 g sugar or > 12 g of fat per 12 oz Yellow: 6 to 12 g sugar per 12 oz, or contains artificial sweeteners Green: 0 to 5 g sugar per 12 oz
Specific beverage criteria	Red: Regular soda, energy drinks, sports drinks, fruit drinks 100% juice (> 4 oz), sweetened tea, whole milk Yellow: Diet soda, low calorie/low sugar drinks, 100% juice (4oz or less), 2% milk (for children) Green: Water, seltzer water (for employees), herbal unsweetened tea (for employees), decaf unsweetened tea (for children), skim and 1% milk
Is free water available in the cafeteria?	Yes
Did you promote tap water? Did you encourage bottled beverage waste reduction?	Tap water was encouraged in their Frequently Asked Questions
In the following situations and locations, do the guidelines apply, and if so, how are/were they implemented? Include bans, limits, specific placement, pricing, and serving size limits	
Patient meals	Red beverages not offered on menu, but available upon request
Cafeteria	Red beverages limited, placement techniques used to encourage green beverage purchases
Vending machines	Red beverages limited, placement techniques used to encourage green beverage purchases
Meetings/conferences & catering	Red beverages prohibited, but available upon request
Gift shops	Red beverages limited, placement techniques used to encourage green beverage purchases
Fast food vendors on hospital property	McDonald's participated in the Rethink Your Drink promotion, training staff and labeling their beverages. They also provided table tents, posters, flyers, and buttons for all food service employees.
Comments	
Program Implementation	

Who was in charge of program implementation? Describe the workgroup.	Representatives from Center for Healthier Communities, Food Services, Nutrition, Communications
Was an Advisory committee/group consulted?	Representatives from Center for Healthier Communities, Food Services, Clinical Nutrition Services, Nursing, RCH Specialists and CPMG, Communications & Marketing, Gift Shop, Pharmacy, Parents, McDonald's, Administration, Human Resources, Government Affairs
What resources did you use in developing your program?	Case study reviews of SSB reduction and elimination initiatives at various health care facilities
What were the initial steps of program implementation?	Reviewed national models and best practices, and then established a work team and advisory group. They identified their approach (traffic light model), and established criteria for SSB regulation. They then designed a data collection methodology, trained staff, collected baseline data, and conducted an employee survey.
Did you conduct employee surveys prior to action?	Yes: Asked about beverage knowledge and opinion of hospital actions (completed by 1,328 employees); found most employees favored education and public messaging
What communication methods did you use to explain and publicize the campaign to staff and the public?	FAQs, fact sheet, website, employee website, traffic light labeling ("Stop. Rethink Your Drink. Go On Green."), beverage tastings, presentations to committees, medical staff, and management/department meetings
Did you use posters, flyers, or other types of displays to promote the campaign? Describe.	Large posters, table tents, flyers, Rethink Your Drink buttons, Rethink Your Drink displays (four rotating in Café, ACP, Lobby & Plaza), interactive traffic light display, wheelbarrow display (40 lbs sugar); water display
Did you make any environmental or policy changes as part of your program? Describe.	Repositioned and color-coded all drinks, added Rethink Your Drink color-coded strips in all coolers, increased yellow and green drinks while decreasing red drinks, added traffic light poster to parent/staff room service menu, Rethink Your Drink flyer on patient trays, incorporated Rethink Your Drink into Rady functions providing "mocktails" (fruit-infused water) as the beverage serving.
Program Evaluation	
Did you evaluate the program?	Yes
What methods of data collection did you use?	Sales data (used cash registers to document size/type of drink purchased in Café, Deli, Grab&Go, ACP, Starbucks cart, Parent/Staff Room service); employee feedback; quarterly dashboards
Results (including any financial impact)	From the initial roll out in October 2012 to November 2013, sales of SSBs (red beverages) decreased from 61.2 percent of net revenue to 39.9 percent of net revenue, for a decrease of 35 percent. Sales of non-SSBs (yellow and green beverages) increased by 55 percent, but it is most interesting to note that yellow beverages increased from 27.51 percent to 29.64 percent of net revenue, evidencing a slight increase of 7.7 percent, while green beverages increased from 11.27 percent of net revenue to 30.46 percent, documenting a 170 percent increase in revenue.
How did employees and the public react to the changes?	Most employees were supportive of the changes. Community organizations, including other health care systems, have responded with interest in replicating their efforts. The Dental Society of San Diego County adopted the campaign and created a poster for dental offices to use.
Future Plans	
Future directions	<ul style="list-style-type: none"> • Continue education with visitors and staff • Partner with Rady's specialists and primary-care physicians • Serve as resource for hospitals, clinics, health providers, hospital associations, schools, community-based organizations and other local, state, and national initiatives • The dental community would like to take the materials into Mexico for a

	binational initiative and are currently exploring adaptation of the materials and messages
Recommendations for other hospitals	<ul style="list-style-type: none">• Key to success was senior leadership buy-in• It is important to integrate education with environmental changes• Important to separate employee and visitor data in order to target strategies appropriately

Southern Maine Medical Center

Sugary Drink Guidelines and Policies in Health Care Facilities	
Hospital Information	
Hospital name	Southern Maine Medical Center
Location	Biddeford, ME
Website	http://www.smmc.org/
Key contact	Michael Sabo, Director of Hospitality Services and Food Service Director: dt.mas@smmc.org
Basic Campaign Information	
Name/theme of campaign	MaineHealth's "Let's Go: Spotlight on Nutrition" (on-site food-based program); Partnership for a Healthy America
Participant in any other health campaigns?	Health Care Without Harm's Healthy Foods in Hospitals Pledge
Goal of the campaign	Increase healthier offerings and encourage healthier beverage consumption
Date of implementation	MaineHealth's broader "Let's Go" program began in 2006
Was the policy phased in in steps?	Yes
Beverage Guidelines	
General beverage criteria	Partnership for a Healthier America Standards: Phase out any drinks with added sugars by 80 percent, applied to patient dining, catering, retail sales and vending
Specific beverage criteria	Prohibited on patient menus but available in café/vending: Regular soda, diet soda, low calorie/low sugar drinks (café), energy drinks, sports drinks, V8 Fusion drinks (café), sweetened and unsweetened tea Available: Ginger ale, diet ginger ale, 100% juice (4 oz on patient menus, 16-20 oz in retail areas), water, seltzer water, skim, 1%, and 2% milk (unflavored)
Is free water available in the cafeteria?	Yes
Did you promote tap water? Did you encourage bottled beverage waste reduction?	Provide cups and lids at ice water dispenser in café
In the following situations and locations, do the guidelines apply, and if so, how are/were they implemented? Include bans, limits, specific placement, pricing, and serving size limits	
Patient meals	Ginger ale and diet ginger ale are the only sugar-sweetened beverages (SSBs) on menu, but others available upon request
Cafeteria	SSBs available, but placement strategies used to decrease consumption
Vending machines	Worked with vendors to eliminate the unhealthiest items, and placed machines in low-traffic areas
Meetings/conferences & catering	Serve water or flavored seltzer
Gift shops	None
Fast food vendors on hospital property	None
Comments	Specified goal for coming year to reduce purchasing of least healthy items
Program Implementation	
Who was in charge of program implementation? Describe the workgroup.	Food Service Director's Task Force under Community Health's "Let's Go" Program, Wellness Group, VP of Community Health (liaison to all of the CEOs and Administrators), Maine Health's Food Service Task Force (consists of 10 hospitals)
Was an Advisory committee/group consulted?	Partnership for a Healthy America, Health Care Without Harm
What resources did you use in developing your program?	Health Care Without Harm (modified their suggestions), and other state programs, such as Michigan's and South Carolina's

What were the initial steps of program implementation?	Commenced with "Spotlight on Nutrition" which branched into "Let's Go," signed on with Partnership for a Healthy America
Did you conduct employee surveys prior to action?	Yes: Asked about retail areas to get feedback and ensure buy-in
What communication methods did you use to explain and publicize the campaign to staff and the public?	For employees, they held nutrition fairs, used hospital newsletter to inform people (including providing healthy recipes), and they had dietitians conduct multiple events every year.
Did you use posters, flyers, or other types of displays to promote the campaign? Describe.	Signage promoting water and seltzer water, sugar display (plastic cup filled with sugar cubes demonstrating amount of sugar in SSBs), point of purchase signage to promote bottled water
Did you make any environmental or policy changes as part of your program? Describe.	Discounted water prices: Bottled water for 50 and 75 cents; negotiated service contract with Coca-Cola and moved beverages in coolers so that the first door had water, the second door had the next healthiest beverage, and the last door had Coca-Cola and other SSBs
Program Evaluation	
Did you evaluate the program?	No formal evaluation
What methods of data collection did you use?	Sales revenue; data gathering regarding employee health
Results (including any financial impact)	No reported revenue loss, beverage sales remained steady.
How did employees and the public react to the changes?	Overall response to efforts to provide healthier options has been very positive.
Future Plans	
Future directions	<ul style="list-style-type: none"> · Increase price of SSBs to incentivize healthy beverage purchases
Recommendations for other hospitals	<ul style="list-style-type: none"> · It is important to plan for potential obstacles · Inform and influence the administrators so that everyone is on board · Must be committed and passionate · Must be prepared for possible revenue loss · Identify target group and cater the campaign toward them · It is helpful if everyone is working with the same technical system and software; it can be challenging to share information across food service departments at other hospitals if different nutrition software is being used.

St. Elizabeth's Medical Center

Sugary Drink Guidelines and Policies in Health Care Facilities	
Hospital Information	
Hospital name	St. Elizabeth's Medical Center (Steward Health Care System)
Location	Brighton, MA
Website	http://steward.org/St-Elizabeths
Key contact	Sasha Corken, Director of Community Health: sasha.corken@steward.org
Basic Campaign Information	
Name/theme of campaign	Sugar-Sweetened Beverage (SSB) Reduction Program
Participant in any other health campaigns?	No
Goal of the campaign	Reduce sales of red beverages to 15 percent of all beverage sales, and increase sales of green beverages (see "Beverage Guidelines" section for description of red and green beverages); highlight the public health risk of over-consuming SSBs and make healthier beverage consumption the easier choice
Date of implementation	March, 2011
Was the policy phased in in steps?	Yes
Beverage Guidelines	
General beverage criteria	Boston Public Health Commission's Traffic Light Approach: Red: > 150 calories, > 12 g sugar or > 12 g of fat per 12 oz Yellow: 6 to 12 g sugar per 12 oz, or contains artificial sweeteners Green: 0 to 5 g sugar per 12 oz
Specific beverage criteria	Red: Regular soda, energy drinks, sports drinks, fruit drinks, sweetened tea, 2% and whole milk (unflavored) Yellow: Diet soda, low calorie/low sugar drinks, 100% juice, unsweetened tea Green: Water, seltzer water, skim and 1% milk (unflavored)
Is free water available in the cafeteria?	Yes
Did you promote tap water? Did you encourage bottled beverage waste reduction?	Tap water was promoted to limit waste from bottled water
In the following situations and locations, do the guidelines apply, and if so, how are/were they implemented? Include bans, limits, specific placement, pricing, and serving size limits	
Patient meals	SSBs prohibited
Cafeteria	Traffic light labeling, placement and pricing techniques
Vending machines	Clear, unbranded fronts; traffic light labeling
Meetings/conferences & catering	Traffic light labeling, pricing and placement techniques
Gift shops	Traffic light labeling, pricing and placement techniques
Fast food vendors on hospital property	Dunkin Donuts complied with campaign
Comments	
Program Implementation	
Who was in charge of program implementation? Describe the workgroup.	Internal Committee had membership from different departments: Senior leadership team (comprised of hospital executive team), food and nutrition services, human resources, employee health, facilities department, marketing and communications, and community health department
Was an Advisory committee/group consulted?	Steward Health Care System was consulted; Boston Public Health Commission and Health Care Without Harm were the inspiration for the campaign

What resources did you use in developing your program?	None
What were the initial steps of program implementation?	Strategic partner of the Boston Public Health Commission; Implemented campaign in phases: Phase 1 (spring, 2011): SSBs labeled with traffic light stickers and prices were altered. Phase 2 (late summer, 2011): Hospital funds could no longer be used to purchase SSBs at catered events. Phase 3 (fall, 2011): SSBs no longer available in patient kitchens. Phase 4 (March, 2012): SSBs not allowed on patient menus.
Did you conduct employee surveys prior to action?	No
What communication methods did you use to explain and publicize the campaign to staff and the public?	Newsletter articles introducing campaign and campaign's purpose
Did you use posters, flyers, or other types of displays to promote the campaign? Describe.	Handouts in cafeteria (for employees and patients), marketing in cafeteria using posters, signage, and marketing around vending machines
Did you make any environmental or policy changes as part of your program? Describe.	Removed more than 20 varieties of SSBs from cafeteria coolers and fountain drink machines; product placement; increased price of red beverages (by 50-75 cents) and decreased price of green beverages in cafeteria; posters, handouts and signage in cafeteria and on venders, traffic light stickers on bottled beverages, changed product placement (green beverages at eye level and red beverages on the bottom of cooler), switched to unbranded vending machines and coolers
Program Evaluation	
Did you evaluate the program?	Yes
What methods of data collection did you use?	Monthly purchasing data collection; red and green beverage sales; employee survey of free water availability (were they aware/using it as an alternative)
Results (including any financial impact)	First year: removed 40 varieties of red beverages and added 43 varieties of green beverages. After a year, there was a 41 percent decrease of red beverage sales, a 5.5 percent increase of yellow beverage sales, and a 36.1 percent increase of green beverage sales. Positive impact on health of employees, patients and visitors; program served as a catalyst for other hospitals and community groups to launch similar SSB reduction programs.
How did employees and the public react to the changes?	Some departments wanted to have waivers that allowed them to have red beverages, but the committee explained the campaign's purpose/objectives to those departments and they abided.
Future Plans	
Future directions	<ul style="list-style-type: none"> · Increase green beverage consumption · Work to ban red beverages · Help other organizations in the community implement similar campaigns · Conduct a salt assessment in the cafeteria to decrease sodium consumption
Recommendations for other hospitals	<ul style="list-style-type: none"> · Important to start with an internal committee that has representation from various hospital departments (i.e. food services, upper management, medical staff, marketing) · Try experimenting with easy ways to start (i.e. pricing and placement)

St. Luke's Hospital

Sugary Drink Guidelines and Policies in Health Care Facilities	
Hospital Information	
Hospital name	St. Luke's Hospital
Location	Duluth, MN
Website	http://www.slhduluth.com/
Key contact	Mark Branovan, Director of Hospitality Services
Basic Campaign Information	
Name/theme of campaign	None
Participant in any other health campaigns?	Healthier Hospitals Initiative Healthy Food Challenge Participant, Commons Health Hospital Challenge (MN)
Goal of the campaign	Eliminate all sugar-sweetened beverages (SSBs) and improve healthier beverage choices for patients and employees
Date of implementation	2012
Was the policy phased in in steps?	No
Beverage Guidelines	
General beverage criteria	All beverages with added sugar are prohibited
Specific beverage criteria	Prohibited: Regular soda, energy drinks, sports drinks, fruit drinks, low calorie/low sugar drinks, sweetened tea Available: Diet soda, sugar-free energy, sports, and fruit drinks, 100% juice, water, seltzer water, unsweetened tea, whole, 2%, 1% and skim, 1%, 2%, and whole milk (unflavored)
Is free water available in the cafeteria?	Yes
Did you promote tap water? Did you encourage bottled beverage waste reduction?	Eliminated bottled water (Dasani) and sold stainless steel water bottles (not for profit)
In the following situations and locations, do the guidelines apply, and if so, how are/were they implemented? Include bans, limits, specific placement, pricing, and serving size limits	
Patient meals	SSBs prohibited
Cafeteria	SSBs prohibited
Vending machines	SSBs prohibited
Meetings/conferences & catering	SSBs prohibited
Gift shops	SSBs prohibited
Fast food vendors on hospital property	None
Comments	
Program Implementation	
Who was in charge of program implementation? Describe the workgroup.	Food and Nutrition, Environmental Services, Hospitality Services, VP and Chief Medical Officer, Chief Nursing Officer
Was an Advisory committee/group consulted?	No: Nutrition Services brought the concept of removing SSBs to the administrative team. Administration made the final decision to go forward with it.
What resources did you use in developing your program?	Jamie Harvey (Institute for a Sustainable Future) put them in touch with other organizations that had already implemented the SSB restriction
What were the initial steps of program implementation?	2007: Banned tobacco products, eliminated deep-fat fryers, and edited patient room service menus. 2011: Switched to room service style of patient meal delivery. Patients can order what they want, when they want.

Did you conduct employee surveys prior to action?	No
What communication methods did you use to explain and publicize the campaign to staff and the public?	Educated staff via St. Luke's weekly newsletter, which included information explaining the initiative's purpose and clarifying the initiative's intentions
Did you use posters, flyers, or other types of displays to promote the campaign? Describe.	Stainless steel water bottles sold
Did you make any environmental or policy changes as part of your program? Describe.	Stainless steel water bottles sold
Program Evaluation	
Did you evaluate the program?	No formal evaluation
What methods of data collection did you use?	Sales data. Pre-implementation, 75 percent of the most sold beverages were diet drinks. Diet Coke was the most commonly sold drink; they therefore did not anticipate a large backlash
Results (including any financial impact)	Beverage sales dropped
How did employees and the public react to the changes?	Approximately 95 percent of feedback was positive/supportive. Some people felt that their rights were being comprised.
Future Plans	
Future directions	<ul style="list-style-type: none"> • Continue to improve patients' dietary selections • Decrease availability of less healthy foods
Recommendations for other hospitals	• Banning all SSBs at once was easier than transitioning people into the new regulation. There was some initial backlash but it calmed down.