

Smart Food Choices: How to Implement Food Service Guidelines in Public Facilities



National Center for Chronic Disease Prevention and Health Promotion
Division of Nutrition, Physical Activity, and Obesity



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Preface: Purpose, Use, and Users



The purpose of this document is to help you implement food service guidelines in your government work site or other public facility^a to increase the availability of healthier choices at food service venues, including cafeterias, concession stands, snack bars, and vending machines. The Centers for Disease Control and Prevention recommends using the *Health and Sustainability Guidelines for Federal Concessions and Vending Operations* from the US Department of Health and Human Services (HHS) and the General Services Administration (GSA), but the action steps in this document are applicable to any food service guideline. The HHS/GSA guidelines include specific food and nutrition standards that are based on the *Dietary Guidelines for Americans 2010* and sustainability standards for food and food service operations.

This document does not address sustainability standards.

Audiences for this document include state and local health departments and other interested partners working to implement food service guidelines in government work sites and other public facilities.

Smart Food Choices: How to Implement Food Service Guidelines in Public Facilities recommends action steps that are based on published evidence and on state and local experiences in implementing food service guidelines. It also provides brief examples. This guide complements the following documents:

- *Health and Sustainability Guidelines for Federal Concessions and Vending Operations*
http://www.cdc.gov/chronicdisease/pdf/Guidelines_for_Federal_Concessions_and_Vending_Operations.pdf
- *Building and Implementing Healthy Food Services*
http://thefoodtrust.org/uploads/media_items/healthyfoodservices.original.pdf
- *Healthier Vending Machine Initiatives in State Facilities*
http://www.cdc.gov/obesity/stateprograms/pdf/healthy_vending_machine_initiatives_in_state_facilities.pdf
- *Improving the Food Environment Through Nutrition Standards: A Guide for Government Procurement to Help Create Healthier Food Environments*
http://www.cdc.gov/salt/pdfs/DHDSPProcurement_Guide.pdf
- The “Under Pressure” series on strategies to reduce sodium in the following settings:
 - » Schools: http://www.cdc.gov/salt/pdfs/sodium_reduction_in_schools.pdf
 - » Work sites: http://www.cdc.gov/salt/pdfs/Sodium_Reduction_Work_sites.pdf
 - » Hospitals: http://www.cdc.gov/salt/pdfs/sodium_reduction_in_hospitals.pdf
 - » Institutions: http://www.cdc.gov/salt/pdfs/institutional_sodium_reduction_guide.pdf

^a A public facility can be any facility, including but not limited to buildings, property, recreation areas, and roads that are owned, leased, or otherwise operated or funded by a governmental body or public entity. See <http://definitions.uslegal.com/p/public-facility/>.

Introduction



Every day, millions of Americans get their food from government work sites or other public facilities. Making changes in the types of food and beverages available in these settings can improve the diets of people who eat there. This guide can help you implement food service guidelines to provide and promote healthier choices in your agency and partner agencies.

Food service guidelines like the *Health and Sustainability Guidelines for Federal Concessions and Vending Operations*, from the US Department of Health and Human Services (HHS) and the General Services Administration (GSA), can be used to create a food environment that makes healthier choices easier for consumers. Implementing these guidelines can increase the availability and prominent display of healthier food and beverages so that customers can choose healthier options more easily. These guidelines should be part of a comprehensive strategy to promote health and wellness.

The most effective workplace health promotion programs are comprehensive, multicomponent efforts that involve a combination of individual and organizational approaches.^b Some work sites and community settings have implemented food service guidelines in alignment with a larger strategic plan or mission to promote healthy choices in the workplace and in their programs and services.

Potential Benefits of Implementing the HHS/GSA Food Service Guidelines

- Contribute to the health and wellness of employees.
- Set a positive example for employees, stakeholders, community members, and other employers.
- Increase the availability of healthier foods from suppliers to meet new consumer demand.
- Strengthen local food systems.
- Build awareness and support among decision makers, budget managers, and purchasing staff for healthier food and beverage options.

^b CDC's *WorkLife Initiative: Essential Elements* identifies 20 components of a comprehensive work-based health protection and health promotion program and includes both guiding principles and practical direction for organizations seeking to develop effective workplace programs.

Description of the HHS/GSA Guidelines

The HHS/GSA guidelines call for food and nutrition standards that support healthier choices, such as

- Seasonal vegetables and fruits.
- Whole-grain options, including pasta.
- Vegetarian entrees.
- Lean meat entrees.
- Low-fat milk, yogurt, and cottage cheese.
- High-fiber, low-sugar cereals.
- 100% fruit juice.
- Drinking water offered at no charge at all meal service events.
- Foods with less sodium.
- Foods free of synthetic sources of trans fats.

By making these healthier options more available and limiting less healthy foods, and by labeling foods and beverages with calorie content, agencies can make the healthier choice the easier choice.

Standards in the guidelines include

- Offer at least three whole or sliced fruit options daily.
- Offer at least one raw, salad-type vegetable option daily.
- Offer at least one steamed, baked, or grilled vegetable that is seasoned without fat or oil.
- Offer more low-sodium options.
- At least half of all beverage offerings (excluding 100% juice and unsweetened milk) should have 40 calories or less per serving.
- Deep-fried foods must not be marketed or promoted as the special or feature of the day.
- Provide no more than one deep-fried entrée per day.

Where to Use the HHS/GSA Guidelines

The HHS/GSA guidelines are being used for food sold in concessions (on-site snack bar, grill, café, and cafeteria food service) and vending operations (vending machines and packaged foods) in government work sites and other public facilities. The HHS/GSA guidelines are also appropriate for use by private-sector work sites and community organizations.

Government work sites include

- Federal, state, and local government facilities.
- Hospitals.

Other public facilities include

- Parks and recreational facilities.
- Transportation welcome centers and rest areas.
- Colleges and universities.
- Senior centers and after-school programs.

More Information

- *The HHS/GSA Health and Sustainability Guidelines for Federal Concessions and Vending Operations*
http://www.cdc.gov/chronicdisease/pdf/Guidelines_for_Federal_Concessions_and_Vending_Operations.pdf
- *10 Reasons to Offer Healthier Options at Public Places*
<http://www.cspinet.org/nutritionpolicy/10-reasons-to-adopt-procurement-policy.pdf>
- *Healthier Food Choices for Public Places*
<http://www.cspinet.org/nutritionpolicy/HFCPP-Factsheet.pdf>
- *Healthcare Can Lead the Way: Making the Healthy Choice the Easy Choice*
<http://www.publichealthlawcenter.org/sites/default/files/resources/MN.healthcare.Healthcare%20Can%20Lead%20the%20Way.pdf>
- Sodium Reduction Community Program: Practice Stories From the Field
<http://www.cdc.gov/salt/guides.htm>
- Healthy Hospital Practice to Practice Series (P2P)
http://www.cdc.gov/nccdphp/dnpao/hwi/resources/hospital_p2p.htm
- State Stories: Sodium Reduction and Healthy Procurement Efforts
<http://www.astho.org/Programs/Prevention/Obesity-and-Wellness/Sodium-Reduction/>

Action Steps



State and local health departments are often the agencies responsible for developing and implementing food service guidelines at government work sites and other public facilities in the community setting. The following action steps, which are based on published research and state and local experience in implementing food service guidelines, can guide health department staff:

- Build the team.
- Establish a goal.
- Develop a logic model and a work plan.
- Assess the current food service environment.
- Understand policy options.
- Educate stakeholders on food service guidelines.
- Include food service guidelines in contracts.
- Identify marketing and promotion strategies.
- Develop an evaluation plan.

Build the Team

Stakeholders

To put food service guidelines into practice, you will need to engage stakeholders who represent different responsibilities and backgrounds. Stakeholders may be anyone who is affected by the guidelines, as well as those involved in implementing the guidelines. Several state and local government initiatives that deal with food service guidelines have designated the Department of Health as the coordinating agency. Some require the Department of Administration to develop model purchasing policies that are based on food service guidelines, with input from the Department of Health. To engage stakeholders, you may need to create a new work group or expand the responsibilities of an existing work group, such as a work site wellness committee.

Stakeholders may include

- Agency leaders.
- Public health department staff.
- Building facilities manager.
- Wellness coordinator.
- Purchasing director.
- Legal department.
- Food service staff.
- Nutrition experts.
- Evaluation staff.
- Food vendors.
- State licensing agency (Randolph-Sheppard Act).^c
- State Committee of Blind Entrepreneurs (Randolph-Sheppard Act).
- Employees of affected agency.

^cThe Randolph-Sheppard Act [34 CFR Part 395-Vending Facility Program for the Blind on Federal and Other Property] is a federal law that mandates a priority to have blind people operate vending facilities on government property.

Try to understand the perspectives of the stakeholders and listen to their ideas for implementing food service guidelines. Stakeholders can share expertise about what works and what doesn't, and explore different options for implementing food service guidelines. The number and type of work group representatives may depend on the scale (e.g., whether the food service guidelines are for one agency or all state agencies). Engaging people from all levels of the food service operations increases the likelihood that the guidelines will be successful and sustainable.

The work group can

- Conduct a baseline assessment of food services.
- Create an implementation plan with goals, strategies, and timelines.
- Develop language to include food service guidelines in purchasing requests for proposals.
- Provide technical assistance on food service guidelines.
- Monitor implementation.
- Evaluate progress.
- Communicate potential positive changes throughout the agency.

Examples of Stakeholder Work Groups

The Iowa Capitol Complex Vending Project work group represents the state's Department of Public Health, Department of Administrative Services, and Department of the Blind state licensing agency, as well as blind entrepreneurs and consumers/employees.

In Massachusetts, an internal Department of Public Health ad hoc committee worked closely with an interagency advisory group to implement state agency food standards. The internal committee included staff from the Commissioner's Office, Department of Public Health, Purchase of Service Office, and Legal and Policy Offices. The interagency advisory group included the highest level of management responsible for food services among the affected agencies. Both the internal committee and advisory group provided critical guidance on the development of baseline assessments and the implementation, monitoring, and evaluation of the food standards.

The Los Angeles County Department of Public Health convened an advisory committee of food service experts to guide development and implementation of nutrition standards and other recommended practices in food procurement. Committee members are experts in food service, food procurement, and nutrition.

Champions

A recognized leader can champion the implementation of food service guidelines. A champion is someone who uses his or her expertise and professional contacts to promote the use of best practices like food service guidelines. This leadership can help to ensure that food service guidelines are supported in the organization and that resources are allocated appropriately. Champions can be helpful participants throughout the

process. Governors, mayors, local council members, wellness coordinators, public health staff, and blind entrepreneurs have all championed the adoption and implementation of food service guidelines.

Examples of Champions

The director and the chief of business services of the Department of Natural Resources and Environmental Control were the champions for an intervention called Munch Better at Delaware State Parks. The director introduced the intervention at a kickoff event at Killens Pond State Park and sent a letter to all park superintendents asking them to participate in the intervention. The chief of business services implemented new procurement and purchasing procedures to ensure the availability of healthier food options.

The Chicago Park District Wellness Unit staff were the champions for improved vending guidelines in Chicago parks. The unit recruited administrators to generate support for the guidelines and to ensure accountability.

Blind entrepreneurs and volunteers from work site wellness committees were the champions who promoted the Iowa Capitol Complex Vending Project. Wellness committee volunteers monitored vending machines to ensure the availability and promotion of healthier options.

Partners

You may need to develop partnerships with other people and groups outside of your organization that share your common goal. The key to a successful partnership is that both partners bring something to the table—knowledge, skills, or resources—and stand to benefit in some way from the success of the project.

Examples of Partners

The Chicago Parks District collaborated with Robert Wood Johnson Foundation Healthy Kids, Healthy Communities grantees working on obesity prevention strategies in parks. These partners—staff from community-based organizations in the [Consortium to Lower Obesity in Chicago Children](#)—helped Chicago parks develop snack vending standards, provided feedback about essential parts of the request for proposals (RFP), and supported the project and its evaluation. ChangeLab Solutions provided consultation on the RFP language.

The Massachusetts Department of Public Health partnered with Framingham State University, which helped develop an online course on how to implement state agency food standards.

In Delaware, the chief of business services of the Department of Natural Resources and Environmental Control worked with Nemours Prevention and Health Services and used its *Healthy Vending Guide* to promote healthier food and beverages to park visitors.

Establish a Goal

Establishing a goal and getting buy-in from stakeholders is the next step in your efforts to implement food service guidelines. A goal helps answer the questions, “Where are we going?” and “What are the desired outcomes?” associated with using food service guidelines.

A goal may be to

- Ensure that foods are consistent with the *Dietary Guidelines for Americans 2010*.
- Inform customers about what they are eating and which choices are healthier.
- Establish food service guidelines as part of standard operating procedures and best business practices in all food service.
- Create a food service environment in which the healthy choice is also the easy choice.



Examples of Goals

The goal of the New York City Food Standards is to improve the health of all New Yorkers served by city agencies by **decreasing the risk of chronic disease related to poor nutrition**.

The goal of the Healthy Food Promotion in Los Angeles County Food Service Contracts policy is to **increase access to healthy food and beverages** for Los Angeles County employees and patrons who buy food from county venues, and for populations to whom the county serves food (e.g., youth, seniors, inmates).

The goal of the Chicago Park District Healthier Snack Vending Initiative is to **establish a 100% healthier snack vending** contract.

The goal of the HHS/GSA guidelines is to help contractors **increase offerings of healthier and sustainable food and beverages**, while eliminating industrially produced trans fats, decreasing the sodium content in existing offerings, **and allowing customers to make informed choices** about what they are buying and eating by labeling menu items.

Develop a Logic Model and a Work Plan

Now that you have a team and a goal, you can develop your work plan for implementing food service guidelines. Logic models can be used as both strategic planning tools and evaluation tools. In the planning stage, you should use the logic model to engage stakeholders to answer the following questions:

- What does the program need? (Inputs: resources, contributions, investments.)
- What does the program do? (Activities and outputs: activities and immediate products, e.g., provide training to staff on food service guidelines.)
- Who or what will change because of the program? (Short-term, intermediate-term, and long-term outcomes: changes related to your activities.)
- What external factors may influence your ability to achieve particular outcomes? (External or contextual factors: influence of the environment, political context, social determinants of health.)

The sample planning logic model on page 10 shows the processes and outcomes for implementing food service guidelines for food sold in government work sites and other public facilities in the community. Many components of the example apply to other settings.

You can use the planning logic model to guide the development of your work plan, which further defines how, when, and what will be done in a set time frame to accomplish your program goals and objectives. The work plan includes goals, objectives, strategies, and time-phased action steps. It also identifies resources and responsible individuals, groups, or organizations. When you develop a work plan with partners and stakeholders, it is easier to confirm activities and identify personnel, financial resources, and other inputs that are important to implementing the proposed food service guidelines.

Example of Work Plan Goal, Objective, and Strategy

Goal: Improve the health of state government employees by creating a food environment in which the healthy choice is also the easy choice.

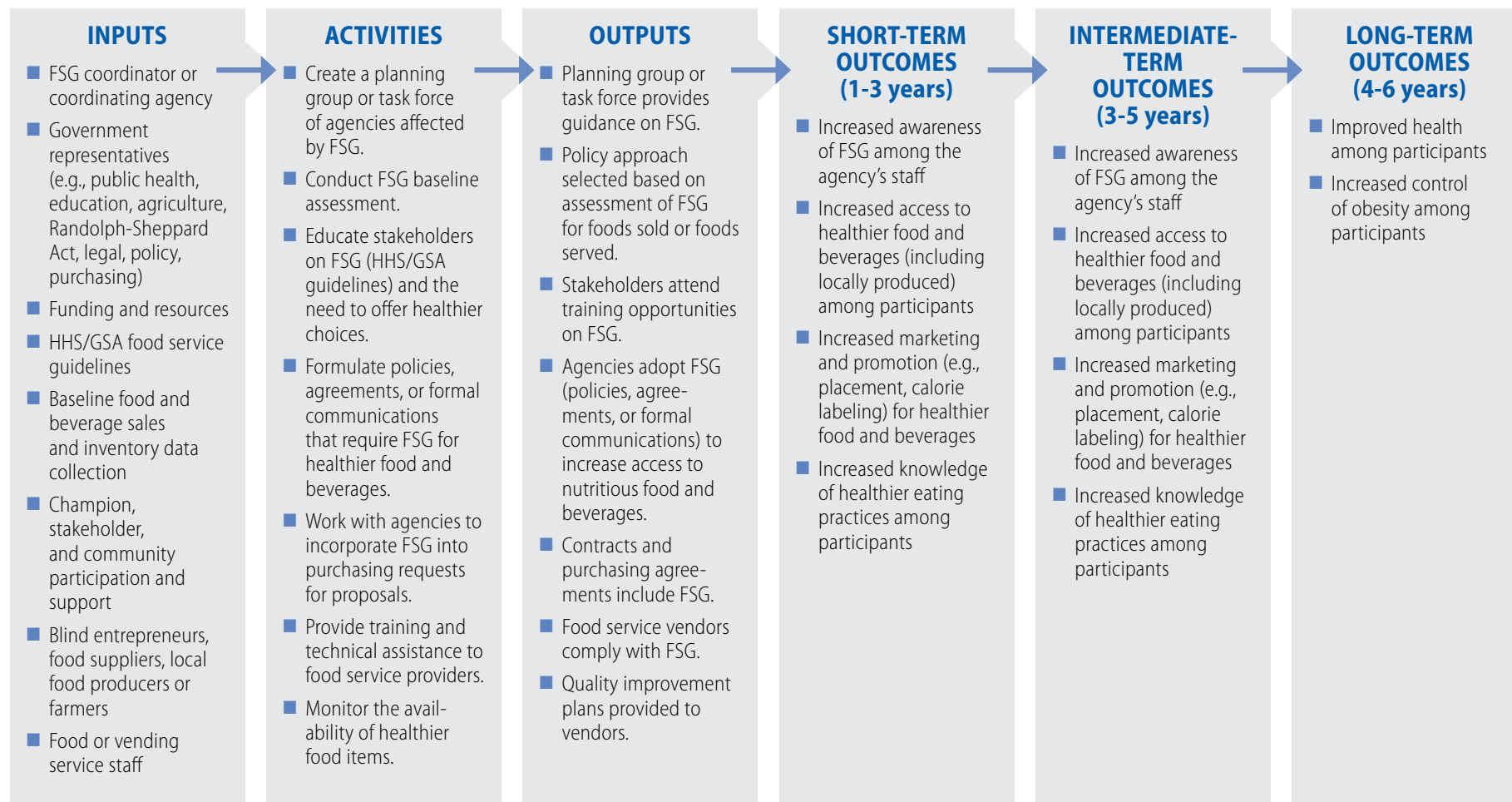
Objective: All vending machines, snack bars, and cafeterias on state properties will comply with the HHS/GSA *Health and Sustainability Guidelines for Federal Concessions and Vending Operations* by 2016.

Strategy: Adopt and implement HHS/GSA guidelines in all settings that provide food and beverages.

More Information

- Appendix A: Sample Food Service Guidelines Work Plan
- *Developing and Using a Logic Model*
http://www.cdc.gov/dhdsp/programs/nhdsp_program/evaluation_guides/logic_model.htm

Sample Planning Logic Model for Food Service Guidelines (FSG)



Abbreviations: HHS, US Department of Health and Human Services; GSA, General Services Administration.

Assess the Current Food Service Environment

Your assessment of the current food service environment will include an assessment of food services and an assessment of specific foods and beverages offered in food service venues. These assessments can help you make decisions about what changes and resources may be needed to implement the food service guidelines.

Assessment of Food Services

The food service assessment (see Appendix B: Sample Food Service Assessment Tool) is used to collect information about where food is prepared, served, and sold and whether there are existing nutrition policies or standards. Engage stakeholders who understand your agency's food procurement and food preparation practices to complete the assessment.

The questions will vary depending on the needs of your agency, but generally they include information about

- The type of organization, setting (work site or community), number of employees or patrons, and work site health promotion programs offered.
- The food service venues where food is prepared, served, and sold.
- The existing policies, standards, and practices that affect purchasing and nutrition.
- The scope of your authority over what foods are sold.
- The contracting process and procedures for buying foods and food services.
- The capacity to implement food service guidelines.

Example of Food Service Assessment

The Los Angeles County Department of Public Health developed a tool called Assessment of Food Service Environments in County of Los Angeles Departments/Programs. This tool was used to conduct interviews with key personnel at 12 county departments affected by the Healthy Food Promotion in Los Angeles County Food Service Contracts motion. The interviews provided information on types of food venues in the county, terms of contracts, number of vendors, existing nutrition guidelines pertaining to a department's food services, number of meals served or sold, populations served, staff capacity, and barriers to improving the nutritional content of meals. The information was used to assess food service program needs and to develop a 5-year implementation work plan. This work plan allowed the Department of Public Health to appraise its workload and anticipate the capacity needed to provide case-by-case technical assistance and training to department staff.

More Information

- Appendix B: Sample Food Service Assessment Tool

Assessment of Specific Foods and Beverages Offered

Before you begin using food service guidelines, try to determine the extent to which food and beverages offered in your agency meet these guidelines. This information provides a baseline that can be used to

- Determine what percentage of foods and beverages already meet specific food and nutrition standards in the guidelines.
- Establish objectives for implementing the food service guidelines that can be phased in over time.
- Track changes over time with repeated measurements for program improvement.
- Monitor compliance with food service guidelines.

More Information

- Appendix C: HHS/GSA Guidelines Food and Nutrition Concessions Checklist.
- Appendix D: HHS/GSA Guidelines Food and Nutrition Vending Operations Checklist.
- Nutrition Environment Measures Survey (includes Restaurant Measures and Vending Tool)
<http://www.med.upenn.edu/nems/measures.shtml>
- Healthy Hospital Environments Toolkit (includes an overview to changing environments, the Healthy Hospital Food and Beverage Environment Scan, and a Step-by-Step Guide for assessing the options for healthier food and beverages in hospitals)
<http://www.cdc.gov/obesity/hospital-toolkit/index.html>

Understand Policy Options

In general, states implement food service guidelines from either a regulatory or voluntary policy. The option being used in your agency may affect the flexibility and authority to implement specific changes. A few state and local governments have passed laws or issued executive orders requiring state agencies to meet food and nutrition standards for the foods sold on government property. State and local governments that have issued executive orders often charge the health department as the agency with authority and responsibility for guiding the adoption and implementation of food and nutrition standards and sometimes for monitoring compliance with the standards.

However, many states and communities have implemented food service guidelines without regulatory policy. For example, state and local health department staff have worked closely with the Randolph-Sheppard Vending Facility Program for the Blind and blind entrepreneurs to voluntarily implement food and nutrition standards to promote healthier food and beverages in vending machines on government property.



Examples of Policies

Regulatory Policy

In 2011, the Los Angeles County Board of Supervisors passed a motion called the Healthy Food Promotion in Los Angeles County Food Service Contracts. The motion requires all county departments involved in buying, distributing, or selling food and beverages in county facilities and programs to consult with the county's Department of Public Health to incorporate nutrition standards before releasing any requests for proposals for food and vending contracts.

Voluntary Policy

Iowa's Department of Public Health worked closely with the Department for the Blind state licensing agency and the Department of Administrative Services to develop and implement procurement guidelines that are based on the nutritional criteria included in the Nutrition Environment Measures Survey Vending Tool. The procurement guidelines are voluntary, and the Iowa Department of Public Health and the Department of the Blind are developing a memorandum of understanding to further support the work.

More Information

- CDC Policy Process
<http://www.cdc.gov/policy/process/>
- CDC Chronic Disease State Policy Tracking System
<http://nccd.cdc.gov/CDPHPPolicySearch//Default.aspx>
- *Making Change: A Guide to Healthier Vending for Municipalities*
http://changelabsolutions.org/sites/default/files/MakingChange_HealthierVending_Guide_FINAL_20120806.pdf
- Model Fact Sheet: Healthy Vending Legislation
<https://www.cspinet.org/nutritionpolicy/foodstandards.html>
- Model Bill: Healthy Vending on Government Property
<http://www.cspinet.org/nutritionpolicy/Model-Vending-Standards-Bill.pdf>
- Model Bill: Healthy Government Properties Act
<http://www.cspinet.org/nutritionpolicy/model-procurement-bill.pdf>

Educate Stakeholders on Food Service Guidelines

You will need to provide stakeholders—including agency leaders, public health staff, purchasing directors, food service staff, and food vendors—with information about food service guidelines and their specific food and nutrition standards. Some executive orders that require food and nutrition standards for food sold on government property also state that the health department is responsible for providing consultation on the standards. Health departments and their partners have provided face-to-face technical assistance and training, web-based training, and formal communication to educate stakeholders about food service guidelines.

Examples of Stakeholder Education

Los Angeles County

The Los Angeles County Department of Public Health (DPH) conducted several activities to implement the Healthy Food Promotion in Los Angeles County Food Service Contracts motion. The DPH interviewed key personnel at 12 county departments affected by the policy to assess the departments' food service program needs, staff capacity, and potential barriers to implementing the policy. This information was used to develop a 5-year implementation work plan, which allowed the DPH to appraise its workload and anticipate the capacity needed to provide case-by-case technical assistance and training to department staff. Trainings and technical support opportunities included annual food policy forums sharing best practices in the procurement, promotion, and placement of healthy foods. The DPH has also developed implementation guides for the affected departments.

Massachusetts

The Massachusetts Department of Public Health worked with partners to develop web-based resources to inform state agencies about the food standards and to help staff who buy and prepare food to increase their knowledge and skills on healthy food preparation. The web-based tools included fact sheets and an online course on the five areas identified as challenges during the baseline survey: healthy beverages, healthy snacks, sodium reduction, increased fiber, and healthy food preparation tips. The online course was developed in partnership with the Department of Public Health's academic partner, Framingham State University.

Iowa

Division of Nutrition and Health Promotion staff in the Iowa Department of Public Health trained blind entrepreneurs who participate in the Randolph-Sheppard Vending Facility Program how to track the sales of healthier options and how to modify the mix of products from least healthy to most healthy, as needed, to stay profitable. They helped blind entrepreneurs identify products that meet the food service guidelines from food distributor catalogs and retail stores and conduct taste tests of new products. A "healthy choices" calculator was developed at the request of a blind entrepreneur that classifies food and beverages into categories by the colors green, yellow, and red, with green being "healthiest" and red being "not as healthy." Two online videos and a fact sheet describe strategies to influence the vending machine options in the workplace.

More Information

- Healthy Food Procurement Resources, Los Angeles County
<http://www.publichealth.lacounty.gov/chronic/>
- Massachusetts Executive Order 509 Food Standards Resources
<http://www.mass.gov/eohhs/gov/departments/dph/programs/community-health/nutrition-standards-for-state-agencies.html>
- Nutrition Environment Measures Survey Vending Tool (NEMS-V) work site kit on how to promote healthy snacking habits in the workplace
<http://nems-v.com/NEMS-VPromotionalIdeas.html>

Include Food Service Guidelines in Contracts

Once you have decided to use food service guidelines for food sold in cafeterias, concession stands, snack bars, or vending machines, you can work with the appropriate authorities in your agency and other officials involved in the contracting and permitting processes to acquire food service. Contracting and permitting requirements are likely to vary by location and type of setting. The contracting, procurement, or acquisitions office (or equivalent in your agency) can provide basic language for most contracting requirements.

Foods Sold on Government Properties and the Randolph-Sheppard Act

If you are planning to use food service guidelines for food sold in government facilities, you will most likely need to work with the Randolph-Sheppard Vending Facility Program. The Randolph-Sheppard Act [34 CFR Part 395-Vending Facility Program for the Blind on Federal and Other Property] is a federal law that mandates a priority to have blind people operate vending facilities on government property. In addition, most states have passed laws mirroring the Randolph-Sheppard Act that broaden the vending facilities program to include state, county, and municipal facilities. The Randolph-Sheppard Act contracting process for providing food service differs from other contracting processes for acquiring food service.

Therefore, the first step in assessing the feasibility of adding food service guidelines in government facilities is to determine whether the food service is operated by a Randolph-Sheppard Vending Facility Program. The Randolph-Sheppard Act applies to concessions (snack bar, grill, café, and cafeteria food service) and vending operations (vending machines, sundry shops, and prepackaged foods) on government properties. If a government facility is housing a Randolph-Sheppard Act vending facility, the regulation requires the property manager to work with the state licensing agency to develop a permit to operate the vending facility in all concession types except for a full cafeteria, which requires a contract. The permit or contract is the legal document between the government property management or entity seeking service and the licensing agency or business enterprise program to allow blind entrepreneurs to operate a business at the property. Permits are issued for an indefinite period. Contracts for full cafeterias run for specified periods.

If the government property management does not have the permit or contract on file, then you can request one from the licensing agency. Permits include criteria for space in the building, level of services, equipment, number and location of vending machines, products offered, hours of operation, and special conditions related to an operation. Food service guidelines covering food, nutrition, and sustainability standards may be included in contracts or new permits that are created or existing permits that are amended to meet the changing needs of the property management.

Permits are usually created or revised when

- A new government building is acquired (purchased or leased).
- Remodeling results in a need for a different level of service or a relocation within the building.
- Stakeholders want to revise the permit, and the property manager and the licensing agency or building enterprise program agrees.

It is important for blind entrepreneurs to understand the value of supporting food service guidelines. However, the process of acquiring concessions and vending operations for facilities operating the Randolph-Sheppard Vending Facility Program is between the property manager and the licensing agency. Although the blind entrepreneur is not a party to the permit or contract process, the licensing agency should negotiate the best circumstances to help ensure the blind entrepreneur's success.

Examples of the Randolph-Sheppard Vending Facility Program

State Example

In Iowa, the Department of Public Health (DPH) worked with the Department for the Blind state licensing agency and the Department of Administrative Services to voluntarily implement in state facilities a policy to provide at least 30% of food and beverage choices in vending machines as healthy options based on the Nutrition Environment Measures Survey Vending Tool (NEMS-V) guidelines. The NEMS-V guidelines are based on the Institute of Medicine's Nutrition Standards for Food in Schools. DPH staff have also met with blind entrepreneurs regularly and have provided training on product identification, taste testing of new products, and promotional materials for healthier options. In addition, the DPH developed a "healthy choices calculator" phone or tablet application to help blind entrepreneurs identify products that meet healthy guidelines.

Federal Example

The GSA has written the HHS/GSA guidelines into multiple contracts for cafeterias and concessions in federal facilities across its 11 regions. GSA facilities operate in accordance with the Randolph-Sheppard Act by working with the state licensing agency to contract with blind entrepreneurs for food service. The GSA is not a regulatory body for the vendors, but rather oversees implementation and provides guidance on progress toward meeting the goals and objectives in the guidelines.

More Information

- Randolph-Sheppard Vending Facility Program
<http://www2.ed.gov/programs/rsarsp/index.html>
- Randolph-Sheppard Vendors of America
<http://randolph-sheppard.org/>
- *Healthier Vending Machine Initiatives in State Facilities*
http://www.cdc.gov/obesity/stateprograms/pdf/healthy_vending_machine_initiatives_in_state_facilities.pdf
- *The HHS Hubert H. Humphrey Building Cafeteria Experience: Incorporation of the Dietary Guidelines for Americans, 2010 into Federal Food Service Guidelines*
<http://aspe.hhs.gov/sp/reports/2012/CafeteriaStudy/rpt.cfm>



Foods Sold in Other Settings

Different purchasing rules may apply to food services not subject to the Randolph-Sheppard Act. Therefore, you should be aware of the processes for food service contracting that already exist in your agency. The authority and means of a government's purchase tend to depend on price-sensitive regulations in a given jurisdiction. A request for proposals or an invitation for bids specifies the goods or services sought, bidder qualifications, instructions for bidding, and evaluation criteria to be used in granting awards. Contractors and vendors submit bids or proposals to the government unit that rates the proposals, makes a selection based on price or price and service, and then negotiates a contract.

In many instances, changes in food service can occur without change in regulatory policy because existing procurement laws and rules may provide sufficient flexibility to develop a solicitation with certain public health aims. Consequently, a government agency may need only to develop a new set of standards for its solicitation and then accept the lowest bid that complies with those standards. This change could be made without any changes to "low bidder" or other rules because all interested vendors will be competing within the framework of the same set of new standards. However, you should work closely with your chief operating officer or purchasing department to determine if it is possible to include language related to specific food and nutrition standards.

For food services that are not subject to the Randolph-Sheppard Act, the agency may buy healthier food items through contracts with food suppliers such as

- A vending machine company that provides the vending machines, foods, and beverages.
- A food distribution company that provides a wide variety of foods.
- A food service management company that provides food and some management services, such as staff to prepare the food.
- A local produce farmer, dairy, or bakery that provides locally grown foods.

These all represent opportunities to develop food specifications that meet the HHS/GSA guidelines.



Examples of Procurement Activities

State Park

In Delaware, the Department of Natural Resources and Environmental Control's Division of Parks and Recreation implemented the food and nutrition standards in the Nemours *Healthy Vending Guide*. The division's Office of Business Services has the direct purchasing and contracting authority for food sold to the visiting public in Delaware state parks. The Nemours guidelines were used for buying food and beverages for five camp stores and the Killens Pond State Water Park concession and for contracting with six concession food vendors and two beverage vending machine vendors throughout the parks.

County

In Los Angeles County, the Healthy Food Promotion in Los Angeles County Food Service Contracts motion stipulates that all new requests for proposals (RFPs) include new food service requirements. The Los Angeles County Department of Public Health is the coordinating agency to develop the nutrition standards and healthy food procurement practices in new and renewing RFPs for food service and vending contracts across county departments. Food vendors can submit proposals only if they comply with the new nutrition guidelines.

More Information

- *Improving the Food Environment Through Nutrition Standards: A Guide for Government Procurement to Help Create Healthier Food Environments*
http://www.cdc.gov/salt/pdfs/DHDSP_Procurement_Guide.pdf
- *Understanding Healthy Procurement: Using Government's Purchasing Power to Increase Access to Healthy Food*
http://changelabsolutions.org/sites/phlpnet.org/files/Understanding_Healthy_Procurement_2011.pdf
- *Food for the Parks: Case Studies of Sustainable Food in America's Most Treasured Places*
<http://www.parksconservancy.org/assets/programs/igg/pdfs/food-for-the-parks-report.pdf>

Identify Marketing and Promotion Strategies

Establishing a food service guideline policy with food and nutrition standards and including these standards in contracts for foods sold and served are important ways to increase the availability of healthier food and beverages. In addition, you will need to market and promote the healthier options to help customers make healthy choices. The goal of marketing and promotion is to increase the demand for healthier food and beverages until the sale and consumption of these items become the norm. To accomplish this goal, the customer must first know what foods and beverages are healthier and then be motivated to buy the healthier items. Placement, promotion, pricing, and food labeling can be used to make the healthier choice the easier choice.

Placement

Design your cafeteria or vending operations to encourage selection of healthier options. The physical layout of a food operation and the placement of food influence which foods are more likely to be bought. Customers are more likely to buy items that are easier to see and access. Placement strategies include

- Place healthier entrées at the front of cold and hot sections.
- Place healthier items at eye level or just below eye level.
- Place the salad bar where it is easily visible in the cafeteria, and move less healthy salad bar items to the middle of the salad bar.
- Place healthier items at the beginning of the serving line and next to the cash register.
- Provide a convenience line that features healthier options only (e.g., sliced fruit).



Example of Placement

The Los Angeles County Department of Public Health is working with county departments to label healthier menu options and place healthier snacks closer to the cash register. Additionally, water is placed at eye level in beverage cases and vending machines.

Promotion

Promotion strategies are often used with placement strategies to promote healthier choices. Customers should be educated about changes to food offerings so they understand why changes were made and who is responsible. Consumers can also be educated on how to build a healthy meal or snack based on the day's selections.

Promotion strategies include

- Establish healthier options as the default standard throughout the menu. For example, offer a piece of fruit instead of potato chips or a side salad instead of French fries.
- Use signs, point-of-purchase displays, menu labeling, and color-coded labeling systems to highlight healthier foods.
- Use lighting to draw attention to healthier items, such as spotlights on grab-and-go healthier items or cafeteria displays that feature healthier items.
- Use smaller plates and bowls to promote healthier portion sizes.
- Use tongs and smaller serving spoons in the food service operations and at any self-service points.
- Offer a variety of healthier entrées and other options.
- Host taste-testing events to introduce new products and let customers try samples before buying.



Example of Color-Coded Labeling

Iowa uses the Nutrition Environment Measures Survey Vending Tool (NEMS-V) to classify food and beverages as green, yellow, and red, with green being “healthiest” and red being “not as healthy.” The NEMS-V Mix It Up [campaign materials](#) include

- Food and beverage vending machine signs and toppers.
- Brochures.
- Signs to post throughout the building.
- Yellow and green stickers and product pushers that can be used to mark healthy products in all machines.

Pricing

Pricing strategies that make healthier items more affordable may encourage sales. Pricing strategies in the institutional setting include

- Offer the healthier food and beverages at an equal or a lower price than the less healthy items.
- Offer temporary price reductions or “buy one, get one free” discounts on newly introduced food and beverage items to encourage customers to try them.

Examples of Pricing Strategies

The Munch Better at Delaware State Parks intervention provided water at a lower cost than soda in some parks. Because the park system was unable to adjust prices in beverage vending machines, water in 20-ounce bottles sold for the same price as 12-ounce canned beverages. However, the system was able to sell bottled water in park stores for half the price of soda.

Labeling

Labeling foods allows consumers to make informed choices. Food service operators are responsible for ensuring that labeling complies with US Food and Drug Administration (FDA) regulations for both packaged and restaurant foods. The menu and calorie labeling standards in the HHS/GSA guidelines are based on FDA’s proposed labeling requirements in Section 4205 of the Patient Protection and Affordable Care Act. The proposed FDA rule requires the following labeling information:

- Restaurants or similar retail food establishments with 20 or more locations, doing business under the same name and offering for sale substantially the same menu items, must list calorie content information for standard menu items on restaurant menus or menu boards, including on drive-through menu boards or adjacent to the standard menu item for food that is on display.
- Restaurants must provide written nutritional information upon customer request, including total calories, calories from fat, fat, saturated fat, trans fat, cholesterol, sodium, total carbohydrates, sugars, dietary fiber, and protein.
- Vending machine operators with 20 or more food vending machines must prominently display each food’s calorie content.

This menu and calorie information can help consumers choose healthier foods. FDA has also proposed terms and conditions for food establishments and vending machine operators not covered by Section 4205 of the Affordable Care Act that may elect to become subject to its requirements by voluntarily registering biannually with FDA.

More Information

US Food and Drug Administration Section 4205 of the Patient Protection and Affordable Care Act of 2010 proposed Menu and Vending Machines Labeling Requirements

<http://www.fda.gov/Food/IngredientsPackagingLabeling/LabelingNutrition/ucm217762.htm>

Develop an Evaluation Plan

You usually should develop an evaluation plan at the same time you develop your logic model and work plan. Begin by defining the purpose of the evaluation and who will use the evaluation findings. The purpose of an evaluation may be to

- Determine progress toward achieving outcomes.
- Improve programs and policies.
- Get resources and support.
- Provide accountability to funders.

The stage of development of your program also influences the purpose of the evaluation and the choice of evaluation questions. Stage of development describes the maturity of a program or policy. With a new program, you will probably want to conduct a process evaluation to help improve the program. With a mature program, you will probably want to conduct an outcome evaluation to assess your program's effectiveness. Ideally, outcome evaluation should include and build on process evaluation.

- Process evaluation focuses on the quality and implementation of the intervention and identifies strengths, weaknesses, and areas for improvement. This evaluation is conducted periodically during the intervention to examine its implementation, including which activities are taking place, who is conducting the activities, and who is reached through the activities. Process evaluations assess whether inputs or resources have been allocated or mobilized and whether activities are being implemented as planned.
- Outcome evaluation assesses whether the expected outcomes were achieved. Outcome evaluation should build on process evaluation. Outcome evaluations are used to assess the intervention's short-term, intermediate-term, and long-term outcomes.

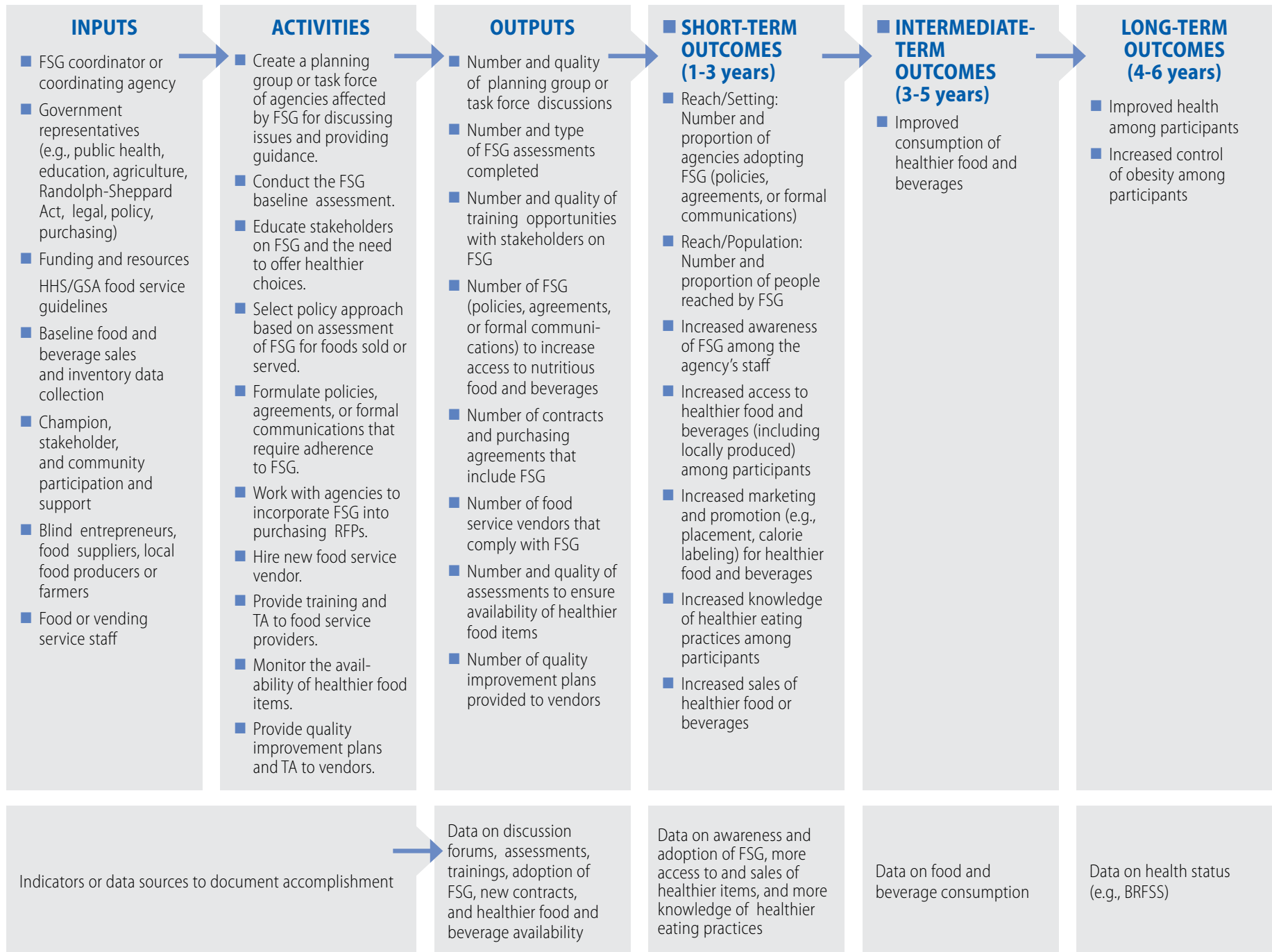
Additionally, consider who will use the evaluation results. The information needs of intended users will determine how you focus the evaluation. These users need to be identified and given a chance to help design the evaluation. The intended users for the evaluation of food service guidelines may include the coordinator or coordinating agency responsible for implementing the food service guidelines, the agencies that are affected by the guidelines, or the food service staff or vendor that is providing the healthier food and beverages.

After you have identified the evaluation users, you must determine what is important to them and design your evaluation questions to meet their needs. For example, the coordinator or coordinating agency may want to identify and address barriers to implementation and train staff at affected agencies. The contracting agency and vendor may want to have profit and loss information to make adjustments to the food provided through the food service contract.

Evaluation Logic Model

The program planning logic model from the earlier section of this guide (Develop a Logic Model and Work Plan, page 10) can be used to develop the evaluation logic model in this section (page 23). The logic model has been expanded to include measures for the outputs and outcomes to help answer the evaluation question, "Why are we doing well or poorly?"

Sample Logic Model for Evaluation of Food Service Guidelines (FSG)



Abbreviations: HHS, US Department of Health and Human Services; GSA, General Services Administration; RFPs, requests for proposals; TA, technical assistance; BRFSS, Behavioral Risk Factor Surveillance System.

Evaluation Plan

The evaluation plan will help you develop an overall picture of evaluation activities so you can estimate the staff time and resources needed. Just as the work plan is a road map for implementing your program, the evaluation plan is a road map for evaluation activities. This plan should be based on the program objectives and activities stated in the work plan. It should also describe how you will assess whether those objectives and activities have been achieved.

Quantitative information collected during the implementation phase of food service guidelines can include

- Baseline data on the foods sold.
- The ability to translate guidelines into requests for contractual service, such as which aspects of the food service guideline were added.
- The number of vendors bidding on these requests.
- The level at which vendors commit to meeting guidelines.

Once a contract is awarded and the food service guidelines are in place, quantitative information collected may include follow-up data on foods offered (e.g., the number and percentage of foods that meet the guidelines, the number of foods that have calorie labeling, the number of healthier items promoted with signs or symbols, revenue changes). Qualitative data that can be collected include feedback from stakeholders, vendors, staff, and customers about the availability, affordability, and acceptability of foods offered.

Eight Steps to an Evaluation Plan

1. Develop evaluation questions: What do you want to know?
2. Determine indicators: What will you measure? What type of data will you need to answer the evaluation question?
3. Identify data sources: Where can you find these data?
4. Determine the data collection method: How will you gather the data?
5. Specify the time frame for data collection: When will you collect the data?
6. Plan the data analysis: How will data be analyzed and interpreted?
7. Communicate results: With whom and how will results be shared?
8. Designate responsibility: Who will oversee the completion of this evaluation?

The following are examples of process evaluation questions and short-term outcome evaluation questions for food service guidelines.

Process Evaluation Questions

- To what extent were the coordinator or coordinating agency and the planning group or task force members successful in agreeing on a policy approach to implementing food service guidelines?

- How many and what agencies were affected by the food service guidelines?
- How many and what quality of training opportunities are provided to stakeholders on food service guidelines?
- How many agencies have written policy or formal communication that makes healthier food items available?
- How many and what proportion of the targeted agencies adopted the food service guidelines (policies, agreements, or formal communication)?
- How many and what proportion of the employees or clients are reached by the food service guidelines?
- How many contracts and purchasing agreements include the food service guidelines?
- How many food service vendors are in compliance with the food service guidelines?
- Is the coordinating agency conducting food assessments to ensure the availability of healthier food items?
- Is the coordinating agency providing quality improvement plans to vendors?
- What were barriers and facilitators to implementation of food service guidelines?

Short-Term Evaluation Questions

- How many and what percentage of the food and beverages offered meet the food service guidelines in food service venues (concession stands, cafeterias, snack bars, and vending machines)?
- How many and what percentage of the healthier food items are promoted with signs or symbols?
- How many and what percentage of packaged food and beverages or menu items in concession stands, cafeterias, snack bars, or vending machines have calorie information displayed?

Examples of Evaluation Logic Model and Evaluation Plan for Food Service Guidelines

The [Center for Training and Research Translation](#) developed an evaluation logic model and evaluation plan for a policy modeled after the Healthy Food Promotion in Los Angeles County Food Service Contracts Institutional Policy. The policy aims to increase access to and availability of healthy food and beverages in county departments and programs by including nutrition standards and healthy food promotion practices in food service contract requests for proposals.

More Information

- *Developing and Using a Logic Model*
http://www.cdc.gov/dhdsp/programs/nhdsp_program/evaluation_guides/logic_model.htm
- *Developing an Evaluation Plan*
http://www.cdc.gov/dhdsp/programs/nhdsp_program/evaluation_guides/evaluation_plan.htm
- *Introduction to Program Evaluation for Comprehensive Tobacco Control Programs*
http://www.cdc.gov/tobacco/tobacco_control_programs/surveillance_evaluation/evaluation_manual/pdfs/evaluation.pdf

Appendices



Appendix A: Sample Food Service Guidelines Work Plan

Appendix B: Sample Food Service Assessment Tool

Appendix C: HHS/GSA Guidelines Food and Nutrition Concessions Checklist

Appendix D: HHS/GSA Guidelines Food and Nutrition Vending Operations Checklist

Appendix A

Sample Food Service Guidelines Work Plan



Goal: Improve the health of state government employees by creating a food environment where making the healthy choice is the easy choice.

Objective: All vending machines, snack bars, and cafeterias on state properties will comply with the HHS/ GSA *Health and Sustainability Guidelines for Federal Concessions and Vending Operations* by 2016.

Strategy: Adoption and implementation of food service guidelines/nutrition standards where foods and beverages are available. Guidelines and standards should address sodium.

Food Service Guidelines Work Plan

Scope (select one)

- State Tribe/tribal organization City, county, local

Setting (select all that apply)

- Government Work Site
 Hospital
 Other public facility (specify, e.g., transportation sector) _____

Population of focus
(list all that apply) _____

Annual Activities:

Activity Description	Lead Personnel Assigned	Key Contributing Partner Assigned	Key Contributing Contractor/ Consultant Assigned (if any)	Timeframe: Start Quarter– End Quarter
Identify a coordinator/coordinating agency for Food Service Guidelines (FSG)	Coordinator/ coordinating agency	Stakeholders/ agencies impacted by the FSG		Q1
Create a planning group/task force of agencies impacted by the FSG for discussing issues and providing guidance	Coordinator/ coordinating agency	Stakeholders/ agencies impacted by the FSG		Q1

Annual Activities:

Conduct the FSG baseline assessment.	Coordinator/ coordinating agency; Planning group/ task force	Stakeholders/ agencies impacted by the FSG	Q2
Identify a champion and educate stakeholders on the FSG (HHS/GSA Guidelines) and the need to offer healthier choices.	Coordinator/ coordinating agency	Stakeholders/ agencies impacted by the FSG	Q3
Select policy approach based on assessment of FSG for foods sold.	Coordinator/ coordinating agency ; Planning group/ task force	Stakeholders/ agencies impacted by the FSG	Q3
Formulate policy, agreements or formal communication requiring adherence to new FSG for healthier foods and beverages.	Coordinator/ coordinating agency	Stakeholders/ agencies impacted by the FSG	Q4
Work with agencies to incorporate FSG into purchasing requests for proposals.	Coordinator/ coordinating agency; Purchasing department	Stakeholders/ agencies impacted by the FSG; Legal and policy depts.	3- 6 months or longer
Hire new food service vendor.	Purchasing department	Coordinator/ coordinating agency; Legal and policy depts.	3-6 months or longer
Provide training and technical assistance (TA) to food service providers.	Coordinator/ coordinating agency	Stakeholders/ agencies impacted by the FSG; Food service staff; vendors, etc.	Continuous
Monitor the availability of healthier food items.	Coordinator/ coordinating agency	Stakeholders/ agencies impacted by the FSG; Food service staff; vendors, etc.	Continuous
Provide quality improvement plans and TA to vendors.	Coordinator/ coordinating agency	Stakeholders/ agencies impacted by the FSG; Food service staff; vendors, etc.	Continuous

Appendix B

Sample Food Service Assessment Tool



This Food Service Assessment Tool can be tailored and used by state health departments and their partners to collect information about where food is served or sold in the agency and to assess the current status of food service guidelines and nutrition standards in places where food is served and sold. This tool has six categories of questions that address (1) agency background; (2) food service venues; (3) nutrition policies, standards, and practices in place; (4) authority over food services; (5) the contracting process; and (6) food environment and capacity.

This tool was partially adapted from the Assessment of Food Service Environments in County of Los Angeles Departments/Programs, a survey developed by the Division of Chronic Disease and Injury Prevention in the Los Angeles County Department of Public Health.

When the food service environment is assessed, it is important to engage procurement officers, food service staff, senior leadership, and work site wellness staff with knowledge and understanding of the agency's food procurement and food preparation practices, work site wellness programs, and nutrition policies.

To complete this assessment, please gather the following materials:

- Documentation of the types and number of food service venues in your agency.
- Documentation of the number of meals, snacks, and/or vending machines for food items sold/served in the food service venues.
- Food service policies, permits, contracts, and/or agreements for the food service venues.
- Documentation of any food service guidelines/nutrition standards used in the food service venues.

Please use the following definitions when answering the questions in this assessment:

Work site cafeterias: food-dispensing facilities capable of providing a broad variety of prepared foods and beverages (including hot meals), primarily through the use of a line where the customers serve themselves from displayed selections. May also include a grab-and-go section for patrons to select salads and prepackaged items. Meals in workplace cafeterias have a variety of options that may be selected by customers.

Vending machines: automated currency-operated facility dispensing a variety of food and refreshment items. There is not an on-site manager, and the vendor does not provide customers with eating accommodations.

Concession stands, snack bars, and/or carts: facilities engaged in selling limited lines of refreshment and prepared food items necessary for a light meal service, such as soups, salads, and sandwiches. Food and refreshment items may be prepared on or off the premises and usually are wrapped or placed in containers at point of sale. There is an on-site manager, and customers may or may not be provided with eating accommodations.

Meals served to institutionalized populations: meals served to people residing in jails, prisons, probation camps/juvenile halls, nursing homes, or other facilities such as psychiatric hospitals. Patrons are limited to what's provided to them.

Distributive meal programs: meals distributed to seniors or children such as after-school snack programs and senior congregate and home-delivered meals.

Patient meals: served to patients in the hospital or long-term care setting.

Agency Background Information

This section of the tool may be used to capture background information about your agency. Please complete the contact information section if you are completing this tool for your agency or are working with other partners.

1. Contact information

Survey completed by (name)
.....

Job title
.....

Telephone number
.....

E-mail address
.....

2. Agency information

Agency name
.....

Agency type
.....

Number of employees
.....

Mailing address
.....

Agency contact person
(for future communication)
.....

Job title
.....

Telephone number
.....

E-mail address
.....

3. Does your agency serve or sell food in cafeterias, vending machines, concession stands/snack bars, distributive meal programs, meals served to institutionalized populations, or hospital patient meals?

- Yes No Don't know

Please STOP if your answer to Question 3 is "No." Thank you for your willingness to participate! You do not need to complete the rest of this survey.

4. Which types of health promotion strategies does your agency engage in? (check all that apply)

- Nutrition policies to increase the availability of healthier foods
- Health education (e.g., skills development and behavior change classes, awareness-building brochures, posters)
- Links to related employee services (e.g., referral to employee assistance programs)
- Integration of health promotion into your agency's culture (e.g., health promotion being part of mission statement)
- Employee screenings with adequate treatment and follow-up (e.g., health risk assessments, biometric screenings)
- Other (please specify): _____
- None

Setting and Food Service Venues

This section of the tool may be used to capture information about the food service venues in your agency.

1. Your agency's setting (check all that apply)

- Work site
- Prison, probation camps, or juvenile halls
- Assisted living/nursing home communities
- Parks and recreational facilities (e.g., baseball fields, golf courses, beaches)
- Distributive meal program (e.g., senior meals or after-school snack programs)
- Hospital patient meal service
- Community agency
- Other (please specify): _____

2. Which food service venue(s) does your agency use to sell or serve food? (check all that apply)

Sold: Cafeterias/cafés

Vending machines

Concession stands, snack bars, and/or carts

Other (please specify): _____

Served: Distributive meal program (e.g., senior meals, after-school snacks)

Meals served to institutionalized populations (e.g., prisons, probation camps/juvenile halls)

Hospital patient meals

Other (please specify): _____

3. For each food service venue, please provide the following information:

Food Service Venues	Number of Facilities	Total Number of Meals, Snacks, and Vending Machines (Please Circle Day [D], Week [W], or Month [M] and Provide Quantity)
Cafeterias/cafés	_____	D/W/M: _____
Vending machines	_____	Number Machines: _____
Concession stands, snack bars, and/or carts	_____	D/W/M: _____
Distributive meal program	_____	D/W/M: _____
Meals served to institutionalized populations	_____	D/W/M: _____
Hospital patient meals	_____	D/W/M: _____
Other (please specify)	_____	D/W/M: _____

4. Which of the following meals or food does your agency serve or sell on a daily basis? (check all that apply)

Food Service Venues	Breakfast	Lunch	Dinner	Snacks	Beverages	Catering	Other (Please Specify)
Cafeterias/cafés	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Concession stands, snack bars, and/or carts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Distributive meal program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Meals served to institutionalized populations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Hospital patient meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

Nutrition Policies, Standards, and Practices in Place

This section of the tool may be used to capture information about the nutrition policies, standards, and practices in place within your agency.

1. Does your agency currently follow any food service guidelines/nutrition standards?

Yes No Don't know

If no, skip to question 8.

Are the guidelines/standards mandatory or voluntary?

Mandatory Voluntary Don't know

2. What is your agency's rationale for using food service guidelines/nutrition standards? (check all that apply)

Prevention of obesity and chronic diseases (diabetes, etc.)

Economic benefits for local farms and companies

Improve employee health and wellness

Model healthy and sustainable practices for other agencies

Align with agency mission

Other (please specify): _____

3. Which topics do your food service guidelines/nutrition standards address? (check all that apply)

Water Calories Saturated fat

Trans fat Sodium Sugar Reduced-size portions/choices

Fried foods Dairy Beverages Promote/offer fruits and vegetables

Calorie information through labeling Healthier food and beverage choices with signs and symbols

Product placement to encourage healthier options Pricing incentives that promote healthier food and beverages

Percentage or number of healthy food and beverage choices available

Other (please specify): _____

4. What sustainability standards are addressed?

- Participate in waste reduction, recycling, and composting programs
- Promote and incentivize reusable beverages containers
- Use green cleaning and pest-control practices
- Use compostable and bio-based trays, flatware, plates, and bowls
- Offer food that is organically, locally, or sustainably grown and labeled accordingly
- Offer certified sustainable, shade-grown, or bird-friendly coffee and tea
- Offer free drinking water
- Other (please specify): _____
- None

5. Does your agency include these food service guidelines/nutrition standards in a policy,^a permit, contract, or similar agreement increasing access to healthier food and beverage choices?

- Yes No Don't know

6. If yes, what type of food service venues does the policy, permit, contract, or agreement target? (check all that apply)

Food Service Venues	Policy	Permit	Contract	Other (Please Specify)
Cafeterias	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Vending machines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Concession stands, snack bars, and/or carts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Distributive meal program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Meals served to institutionalized populations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Hospital patient meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Other (please specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

7. Does your agency have food services operated by the Randolph-Sheppard Vending Facility Program authorized by the Randolph-Sheppard Act?^b

- Yes No Don't know

^a Policy is defined as a law, regulation, procedure, administrative action, incentive or voluntary practice of governments and other institutions. See <http://intranet.cdc.gov/od/adp/process/>.

^b Randolph-Sheppard Act [34 CFR Part 395-Vending Facility Program for the Blind on Federal and Other Property]

8. Does your agency have food service guidelines/nutrition standards that make healthier food and beverage choices available during meetings and conferences where food is offered?

Yes No Don't know

Authority

This section of the tool may be used to capture information about who in your agency has authority to make changes related to foods sold or served in the agency.

1. What authority currently or potentially could set or determine the food service guidelines/nutrition standards for this agency?

- Federal, state, or local government
 - Contracting process
 - Organizational policy
 - Other (please specify): _____
-
-
-

2. What is the process for adopting food service guidelines/nutrition standards and/or changing current purchasing practices within your agency?

3. Whose approval is needed to set or change food service guidelines/nutrition standards?

4. If your agency has adopted food service guidelines/nutrition standards does your agency monitor compliance of these guidelines?

Yes No Don't know

**5. If yes, how do you monitor compliance with the food service guidelines/nutrition standards?
Is there a designated person or agency that is responsible for monitoring?**

.....

.....

.....

Contracting Process

This section of the tool may be used to capture information about the contracting process related to food service within your agency. Complete this section if you currently have food service related contracts/permits.

1. How does your agency make food service agreements?

Contract Permit **Other** (please specify) _____

2. Please indicate the renewal time for each food service agreement your agency has:

Food Service Venues	Date the RFP/Contract is being developed or renewed? Please include length of contracts (i.e., 1 year, 10 years, etc.).
Cafeterias/cafés
Vending machines
Concession stands, snack bars, and/or carts
Distributive meal program
Meals served to institutionalized populations
Hospital patient meals
Other (please specify): _____

3. Are any of the following options available in your agency for current contracts before their expiration?

- Current contract(s) can be amended to include food service guidelines
- Contractor(s) can/will voluntarily use food service guidelines
- No change possible
- Other (please specify): _____

4. Do your agency's contracts contain specific language on food service guidelines/nutrition standards?

Yes No Don't know

5. Does your agency include sales reporting of food items in your contracts?

Yes No Don't know

Environment and Capacity

This section of the tool may be used to capture information about the environment and capacity surrounding food service venues in your agency.

1. Which challenges does your agency face regarding the development of or compliance with food service guidelines/nutrition standards? (check all that apply)

- Lack of dedicated food service staff involved in operational process
- Lack of trained staff
- Financial difficulties/lack of funding support/concerns about cost implications
- Lack of food and nutrition expertise
- Lack of kitchen equipment conducive to healthier food preparation
- Contract/permits obligations that are hard to change
- Customer dissatisfaction with changes
- Lack of consumer demand for healthier food products
- Lack of dedicated leadership staff involved in operational process
- Lack of work site wellness programs
- Negative effect on profits earned
- Other (please specify): _____

2. What information would be helpful to your agency in using food service guidelines/nutrition standards? (check all that apply)

- How to market and promote healthier items
- Contract/permit assistance
- Case examples
- Website dedicated to food service guidelines and resources
- Training for food service staff on food service guidelines
- Other (please specify): _____

Appendix C

HHS/GSA Guidelines Food and Nutrition Concessions Checklist



This checklist was developed to help you determine what food and beverages offered in your agency meet the Department of Health and Human Services (HHS) and the General Services Administration (GSA) *Health and Sustainability Guidelines for Federal Concessions and Vending Operations*. This checklist only pertains to the food and beverage standard criteria for concessions. Concessions include onsite snack bar, grill, café, and cafeteria food service.

1. Contact information

Checklist completed by (name)

Job title

Telephone number

E-mail address

2. Agency information

Agency name

Number of employees

Mailing address

Agency contact person
(for future communication)

Job title

Telephone number

E-mail address

3. Your agency's setting

Work site: Describe setting: _____

Community setting: Specify: _____

4. Location of cafeteria observed

Name of facility, building, floor, etc.: _____

5. Date of observation

Date: _____/_____/_____

6. Checklist of food and beverage options in the concessions

HHS/GSA Standard Criteria	Standard Met Yes	Standard Met No	Not Applicable
Nutrition Menu Labeling —Section 4205 of the Patient Protection and Affordable Care Act of 2010 proposed Menu and Vending Machines Labeling Requirements at http://www.fda.gov/Food/IngredientsPackagingLabeling/LabelingNutrition/ucm217762.htm			
Items must be listed with total calories as prepared and offered for sale, at point of choice for foods on display, or on the menu or menu board.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional nutrition information available in written form upon request.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A prominent statement of nutrition information availability.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A prominent statement about daily calorie consumption advice also required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fruit			
At least 3 whole or sliced fruit options daily.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Canned or frozen fruit packaged in 100% water or unsweetened juice, with no added sweeteners.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A variety of seasonal fruits are available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vegetables			
At least one raw, salad-type vegetable option daily.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At least one steamed, baked, or grilled vegetable that is seasoned, without fat or oil.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vegetable offerings contain ≤230 mg sodium, as served.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mixed dishes containing vegetables contain ≤480 mg sodium, as served.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Checklist of food and beverage options in the concessions

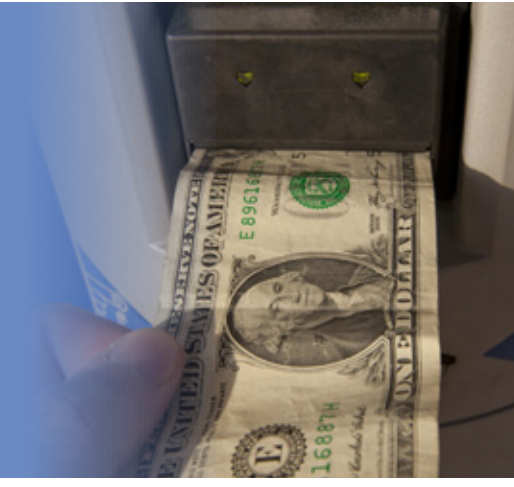
HHS/GSA Standard Criteria	Standard Met Yes	Standard Met No	Not Applicable
A variety of seasonal vegetables are available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cereals and Grains			
When cereal grains (e.g. rice, bread, pasta) are offered then a whole grain option is offered for that item as the standard choice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All cereal, bread, and pasta offerings contain ≤ 230 mg sodium per serving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At least 50% of breakfast cereals contain at least 3 g of fiber and less than 10 g total sugars per serving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dairy/Yogurt/Cheese			
Only low fat (2% or less) or fat-free options when cottage cheese is offered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Only low fat (2% or less) or fat-free options when yogurt is offered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Only yogurt with no added sugar or labeled as reduced or less sugar according to FDA labeling standards when yogurt is offered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Processed cheeses contain ≤ 230 mg sodium per serving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protein Foods			
Lean meat, poultry, fish, or low-fat vegetarian options when protein entrees are offered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entrée with vegetarian protein source offered at least twice per week.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Canned or frozen tuna, seafood, and salmon contain < 290 mg sodium per serving, and canned meat < 480 mg sodium per serving .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beverages			
At least 50% of beverage offerings (excluding 100% juice and unsweetened milk offerings) contain ≤ 40 calories per serving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Only 2%, 1%, and fat-free options when milk are offered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
100% juice with no added caloric sweeteners when juice is offered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vegetable juice contains ≤ 230 mg sodium per serving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drinking water, preferably chilled tap, offered at no charge at all meal service events.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sodium			
Snack items contain ≤ 230 mg sodium, as served.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual food items contain ≤ 480 mg sodium, as served.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All meals contain ≤ 900 mg sodium, as served.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Checklist of food and beverage options in the concessions

HHS/GSA Standard Criteria	Standard Met Yes	Standard Met No	Not Applicable
Trans fats			
All food items that contain 0 g trans fats per serving as defined by FDA.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eliminate use of partially hydrogenated oil, shortenings or margarines for frying, pan-frying, grilling, baking, or as a spread unless label reads 0 g trans fat per serving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deep-fried options			
Deep-fried options must not be marketed or promoted as the special or feature of the day.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No more than one deep-fried entrée option per day.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Portion-size			
Half- or reduced-sized choices available for some meals and concession items.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Side items			
When value meal combinations are offered, fruit or a non-fried vegetable is the optional side dish.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Appendix D

HHS/GSA Guidelines Food and Nutrition Vending Operations Checklist



This checklist was developed to help you determine what food and beverages offered in your agency meet the Department of Health and Human Services (HHS) and the General Services Administration (GSA) *Health and Sustainability Guidelines for Federal Concessions and Vending Operations*. This checklist only pertains to the food and beverage standard criteria for vending machines. Vending operations include vending machines, sundry, and prepackaged foods.

1. Contact information

Checklist completed by (name)

.....

Job title

.....

Telephone number

.....

E-mail address

.....

2. Agency information

Agency name

.....

Number of employees

.....

Mailing address

.....

Agency Contact person
(for future communication)

.....

Job title

.....

Telephone number

.....

E-mail address

.....

3. Your agency's setting

Work site: Describe setting: _____

Community setting: Specify: _____

4. Location of vending machine observed

Name of facility, building, floor, etc. _____

5. Date of observation

Date: _____/_____/_____

6. Checklist of food and beverage options in vending operations

HHS/GSA Standard Criteria	Standard Met Yes	Standard Met No	Not Applicable
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Calorie Labeling—Section 4205 of the Patient Protection and Affordable Care Act of 2010 proposed Food and Drug Administration (FDA) Menu and Vending Machines Labeling Requirements at <http://www.fda.gov/Food/IngredientsPackagingLabeling/LabelingNutrition/ucm217762.htm>

All labeling must follow the proposed FDA vending machine regulations.

In the case of an article of food sold from a vending machine that does not permit a prospective purchaser to examine the Nutrition Facts Panel before purchasing the article or does not otherwise provide visible nutrition information at the point of purchase, the vending machine operator shall place an individual sign or poster (containing calorie information for the items in the machine) in close proximity to each article of food or on/near the selection button that includes a clear and conspicuous statement disclosing the number of calories contained in the article.

All (100%) packaged food choices

Trans fats

All food items contain 0 grams trans fats per serving as defined by FDA

Sodium

Snack items contain ≤230mg sodium per serving (excludes refrigerated meals).

Individual meal items contain ≤480 mg sodium per serving.

In addition to meeting the requirements listed above, at least 25% of all packaged food choices meet the following criteria:

Limit snack (not refrigerated meals) items to ≤200 calories per item (excluding nuts and seeds without added fats, oils, or caloric sweeteners).

Limit total calories from saturated fat to ≤10% (excluding nuts and seeds without added fats or oils).

Limit calories from sugars to ≤35% of total weight (excluding fruits or vegetables without added caloric sweeteners).

6. Checklist of food and beverage options in vending operations

HHS/GSA Standard Criteria	Standard Met Yes	Standard Met No	Not Applicable
Beverages			
At least 50% of all beverage offerings (excluding 100% juice and unsweetened milk offerings) contain ≤40 calories per serving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Only 2%, 1%, and fat-free options when milk are offered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
100% juice with no added caloric sweeteners when juice is offered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vegetable juice contains ≤230 mg sodium per serving.			

