

# Emerging Local Food Purchasing Initiatives in Northern California Hospitals

## Executive Summary



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Hospitals in California's San Francisco Bay Area are at the forefront of a small but growing national movement to incorporate fresh, local food into healthcare foodservice. By purchasing and serving local food, hospitals can improve the quality of their foodservice and encourage their patients, staff, and visitors to eat more healthfully. Serving better food advances hospitals' mission to promote and protect health, especially in light of widespread, chronic, nutrition-related illness such as obesity, diabetes, and cardiovascular disease.

Not only can serving local food in patient meals and cafeterias directly improve eating habits, but it can help hospitals take a leadership role in creating food and agricultural systems that foster public and environmental health and social and economic equity. By modeling local food consumption, hospitals can use their considerable influence to actively promote sustainable agriculture and support California's small and mid-scale farmers. If "farm-to-hospital" initiatives continue to expand, they may soon comprise significant demand for local farm products. In California, where agriculture is still a primary industry, these markets are needed to help farmers and rural communities withstand diminishing farm prices and the concentration of the agriculture and food sectors.

Buying local food is a complicated and challenging task for hospitals, due to a range of contractual obligations and financial constraints, as well as dependence on established and carefully regulated procedures for menu planning and meal production. Local food purchasing is difficult to incorporate into hospital food supply chains, which are tied to many other food processing, distribution, and procurement systems and institutions, including foodservice

distributors and Group Purchasing Organizations (GPOs). For these reasons, hospital efforts to purchase local food represent significant efforts to change institutional policies and practices as well as the wider healthcare foodservice industry.

How have Bay Area hospitals pioneered local food purchasing in healthcare institutions? This paper presents a cross-section of current farm-to-hospital initiatives in the region, in order to demonstrate what has been accomplished and how. It is intended to help hospital foodservice leaders plan and develop their own local food sourcing practices, and help those outside the hospital setting, e.g. farmers, public officials, nonprofit support agencies, better understand the hospital purchasing environment. It is hoped that these findings and analysis can inform the process of addressing current institutional and industry barriers facing farm-to-hospital initiatives, and suggest some direction for facilitating them through further research, policy, education, and technical assistance efforts.

Over the spring and summer of 2007, SAREP conducted exploratory research with chefs and foodservice directors at hospitals in and around the Bay Area. Information was also gathered through a partnership with San Francisco Bay Area chapter of Physicians for Social Responsibility (SF PSR), which leads local work on the "Healthy Food in Healthcare Campaign" coordinated by the international organization Healthcare Without Harm (HCWH). Extensive observations and insights on this work were provided by members of SF PSR's staff, the HCWH network, and the Hospital Leadership Team, a group of Bay Area hospital foodservice directors organized for the goal of increasing sustainable food procurement in their institutions.

## **Findings**

### ***Characterizing the Local Food Movement in Hospitals***

- It is useful to characterize "localness" as a continuum rather than a strict set of geographic boundaries for farm-to-hospital initiatives, but typically local food is understood by foodservice directors as produced in Northern California or California.
- Buying and serving local food may increase consumption of fruits and vegetables by those who eat in hospitals, and thus provide them with important nutritional and health benefits.
- Hospitals can use local food purchasing to exert public influence that supports preventive health, environmental health, and social justice in their communities.
- Local food purchasing in hospitals responds to growing consumer demand for local food and may bring cost-savings to hospitals.

### ***Structure of Hospital Foodservice***

- Key internal structural variables affect the environment for local food purchasing in hospitals, including service division (patient meals/cafeteria/catering,) patient dietary regulation and modified diet needs, menu rotation procedures, production systems, relationship to a multi-hospital system, and organization of labor.
- The context for local food purchasing in hospitals must also take external variables into account, such as the roles of Group Purchasing Organizations (GPOs), contracted and non-contracted vendors, and produce growers, shippers, and distributors.
- Major challenges to local purchasing in hospitals include budget constraints; large product volume needs; reliance on ordering, delivery, and billing efficiency; contract stipulations; lack

of staff skill and support; lack of administrative buy-in; and lack of local food supplies that meet needs.

### ***Paths to Local Purchasing***

- By generating positive attention, placing formal requests for financial and administrative assistance, engaging clinical staff, and forming food committees, hospitals can cultivate the support of key leaders within their institutions.
- A variety of institutional food policies can help establish standards and procedures, clarify priorities, generate resources, tie local food to other institutional priorities, and otherwise institutionalize local purchasing practices. Emerging policies at the local government level may also encourage public hospitals to purchase local food.
- Understanding and navigating purchasing contracts and working with producers and distributors to request, evaluate, and select products are critical steps. Requests for information, questionnaires, and "spec sheets" are some of the tools used to state preferences and solicit information in order to select local products.
- Networking among hospital foodservice directors to exchange information and pool purchasing power build capacity for local food purchasing.
- Bay Area farm-to-hospital initiatives benefit from technical assistance and other forms of support from and collaboration with various nonprofit organizations working on issues of agriculture, environment, food, and health in the community.

### ***Analysis: Moving Forward***

- Hospitals and their community partners should use a dual approach to increase local food purchasing: 1) work within the constraints of the existing institutional framework on small, informal projects, and 2) identify and adopt ways to influence their institutions and suppliers and thus effect systemic institutional change.
- Food procurement systems should be strategically adapted to accommodate ordering, inventory, production, and accounting procedures that support local food purchasing. This will require the development of coordinated information systems and economic analyses that can demonstrate potential financial impacts and guide decision-making to effectively increase local food purchasing.
- Clinical nutrition staff should be integrated into local food purchasing efforts. By communicating nutritional implications, sharing information about seasonal availability, providing resources for recipe analysis and modification, and including patient meals in local food efforts, hospitals can enlist nutritionists to support local food purchasing goals and translate them into concrete actions.
- Training and support resources for foodservice staff are essential. Peer-to-peer training, a local sourcing clearinghouse, menu planning and nutritional analysis tools, a recipe database, individual consultation and technical assistance, and educational curricula in culinary, technical, and academic institutions have all been discussed as means of meeting these needs, but are not yet widely available.
- Relationships with hospital marketing and public relations departments should be cultivated to help advance local food purchasing goals. Both internal and external marketing support is needed to increase awareness of farm-to-hospital projects and build support for their expansion.

- Further work is needed to determine how best hospital food policies can be translated into practice. Strategic planning, benchmarking, and evaluation efforts have not yet "caught up" with policy development, but will contribute to making food policies more meaningful and credible.
- Building a demand for local food in hospitals, especially that produced by California's small and mid-scale farmers, will require broader reorientation in the food supply chain. Hospitals have the potential to help develop "mid-tier food value chains" by creating new purchasing structures and mechanisms and influencing their network of production, processing, and distribution institutions.