

Nutritional Standards for State Agencies: Combating Childhood Obesity and Creating Healthier Food Choices

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Who Am I

- John Bailey – State Director of Government Relations for American Heart Association
- American Heart Association “Building healthier lives, free of cardiovascular diseases and stroke”
 - 2020 Impact Goal
 - *By 2020, to improve the cardiovascular health of all Americans by 20 percent, while reducing deaths from cardiovascular diseases and stroke by 20 percent*

Good Afternoon Senator Bartolomeo, Representative Urban, and distinguished members of the Childhood Obesity Task Force, My name is John Bailey, State Director of Government Relation for the American Heart Association.

Our Mission is “Building Healthier lives, free of cardiovascular disease and stroke.” And that mission drives everything we do.

We are working toward improving the cardiovascular health of all Americans by 20 percent, and reducing deaths from cardiovascular diseases and stroke by 20 percent, all by the year 2020.

The American Heart Association’s programs, education resources and advocacy initiatives are all targeted at helping people identify and adopt healthier lifestyles. As many of you know, Heart Disease is the No. 1 killer of Americans.

Introduction

- Childhood Obesity Crisis
- One in three American kids and teens overweight or obese
 - Slow rise in obesity rate
 - Reduce Coronary Heart Disease and stroke
 - Transforming the Food Environment
 - *State can play critical roll in supporting food environment change*
 - *To protect and improve the health of residents*
 - *Nutrition Standards for foods served and sold by state agencies*

The childhood obesity rate has doubled in children and quadrupled in adolescents over the past 30 years. The evidence is clear, our nation, along with our state, is in the grasps of a Childhood Obesity Crisis. (CDC).

Put simply Obesity increases the risk for heart disease and stroke.

It is critical for the well being of children that public health policies be adopted that further reduce the rise in childhood obesity. Even though recently released data suggested a plateauing in the “Obesity epidemic” amongst young children, there continues to be an unacceptable prevalence of obesity in our country. The same CDC data showed no significant changes in obesity prevalence among 2-19 year olds or adults in the United States.

Our society has become characterized by environments that promote increased consumption of less healthy food. It can be difficult for children to make healthy food choices when they are exposed to environments in their home, child care center, school, or community when there is limited access to healthy affordable foods and there is greater availability of high-energy-dense foods (those with a lot of calories in each bite) and surgery drinks¹

State agencies, through their purchasing power, can play a critical roll in supporting healthy changes to Connecticut’s food environment. By doing so, the state will be improving the health of children and all residents. Adopting nutritional standards for foods served and sold by state agencies will create an environment where healthy food choices become more abundant and the state is seen as leading through example.

¹<http://www.cdc.gov/obesity/childhood/problem.html>.

Food Procurement Policy – Nutrition Standards

- Centers for Disease Control and Prevention Definition
 - “Regulations adopted by government requiring that food purchased, provided or made available contains key nutrients at levels do not exceed standards established by Public Health Authorities
- Dietary Guidelines for Americans 2010 – U.S. Department of Agriculture & U.S. Department of Health and Human Services
 - The recommendations are intended to help people choose an overall healthy diet.

Food procurement encompasses the process of procuring, distributing, selling, and/or serving food.

Food procurement policy refers to a policy officially adopted by a state or local government requiring that the food it purchases, provides, or makes available contains key nutrients at levels that do not exceed standards established by public health authorities.

The US Department of Health and Human Services (HHS) and U.S. Department of Agriculture release a joint report every five years that provides evidence-based nutritional standards.

The Dietary Guidelines for Americans encourage Americans to focus on eating a healthful diet — one that focuses on foods and beverages that help achieve and maintain a healthy weight, promote health, and prevent disease. A healthy diet can reduce the risk of major chronic diseases such as heart disease, diabetes, osteoporosis, and some cancers

The Problem

- Childhood Obesity Rate
 - DPH study found that about one-third of Connecticut kindergarten and third-grade students are overweight or obese.
 - Connecticut Teens are impacted by the obesity crisis
 - Combining obese and overweight high school students (12.5% + 14.1% = 26.6% approximately one-third of teens)

As been addressed by previous speakers and well known by the members of this taskforce, childhood obesity has emerged as a public health crisis nationally and in Connecticut. A recent study by the state Department of Public Health (DPH) found that nearly 1 in 6 Connecticut children in kindergarten and in third grade are overweight. It also found that nearly 1 in 7 kindergarteners and more than 1 in 6 third graders are obese. The study also found a significant population of our teens being obese or overweight.

These alarming numbers are threatening the health of our kids.

- Overweight is defined as a Body Mass Index at or above the 85th percentile and lower than the 95th percentile for children of the same age and sex.¹
- Obesity is defined as a Body Mass Index at or above the 95th percentile for children of the same age and sex

Health Risks

- Health Problems previously not seen until adulthood
 - Increased risk for asthma, cardiovascular disease, high blood pressure, type 2 diabetes, arthritis-related disability, several cancers, gall bladder disease, sleep and skin disorders
- Psychological Effects
 - Low Self-esteem, negative body image and depression
- Childhood Obesity No.1 health concern among parents in Connecticut – 2012 statewide poll
 - Over 80% of respondents cited Obesity as a serious problem among Children and teens.

Again, we have heard the following health risks that confronts Connecticut's youth who are overweight and obese.

A 2012 statewide poll commissioned by Connecticut Coalition Against Childhood Obesity found that over 80% of respondents cited obesity as a serious problem among children and teens.

Solution

- Why the State
 - State Provides millions of meals to vulnerable populations
 - *Offering healthier food choices in state run facilities and programs, is a proactive measure addressing the obesity rate and availability of nutritional foods.*
 - State largest purchaser of food
 - *Procurement standards change state from passive consumer to active driver of market – providing greater demand for and access to healthy foods*
 - Applying standards to improve foods served & sold on government property ensures agencies ‘Walk-the-walk’
 - *Lack of healthy options undermines / contradicts state obesity disease prevention programs and policies.*

The state of Connecticut is in a position to be a significant player in changing the food environment and leading though example.

The State is the largest purchaser of food. Directing food dollars towards healthy options drives demand for healthier products and spurs companies to reformulate their products.

It’s good public health policy to offer healthy options, which demonstrates our state’s commitment to addressing obesity. Serving and selling unhealthy food contributes to obesity and chronic diseases. This runs counter to the stated goals of our Department of Public Health and the state dollars spent on addressing chronic disease. Instead, State Agencies can become an active driver of demand for and access to healthy foods.

Nutritional Standards – How can it be Done

- Agencies should be a model for healthy eating
 - 2010 Dietary Guidelines for Americans
 - *“Dietary Guidelines is to summarize and synthesize knowledge about individual nutrients and food components into an interrelated set of recommendations for healthy eating that can be adopted by the public”*
 - Health and Sustainability Guidelines for Federal Concessions & Vending Operations.
 - *Translates 2010 Dietary Guidelines for Americans into Clear / definitive standards that service operators can follow*
 - *Designed to make healthy choices more accessible, more appealing, and more affordable.*
 - Not designed to restrict Choices

The informational resources are available for state administrators and agency procurement officers to implement food procurement reform.

As I briefly mention in my introduction the 2010 Dietary Guidelines for Americans is produced by the US Dept of Health and Human Services (HHS) and U.S. Dept of Agriculture and is intended to provide science-based nutrition recommendations to help promote habits that maximize good health and reduce the risk of chronic disease.

Putting the recommended dietary guidelines into practical policy terms is outlined in a report produced by Dept. of Health and Human Services and the General Services Administration. The goal of the document is to assist agencies and contractors in increasing healthy food and beverage choices.

Increasing choice, not restricting choice is the basis of the Guidelines.

They were designed to make healthy choices more accessible, more appealing, and more affordable. They were not designed to restrict choices.

Where to Start

- Offering healthy options demonstrates state's commitment to addressing obesity.
 - Serving and selling unhealthy food contributes to obesity and chronic diseases.
- Improve buying power of small and large state agencies through greater consolidation of food purchasing
- Areas where nutritional standards come into play
 - Specific standards by food category
 - Purchased food items by Agencies meet 2010 Dietary Guidelines for Americans
 - Meals and Snacks Prepared by Agencies meet the nutrient requirements outlined in the Government Service Administration report.

Getting the state to be a leader in addressing childhood obesity and the obesity crisis that confronts Connecticut residents (24.5%) starts with making a commitment to do the right thing. Offering healthy options demonstrates that the state is willing to do more in combating Connecticut's obesity rate, both in children and in adults.

Incorporating nutritional standards into the state's food procurement contracts can assist in improving the buying power of small and large state agencies through greater consolidation of food purchasing.

Similar to nutrition standards for foods sold in our schools, nutritional standards would be broken out by food category. These standards would mirror what is found in the Dietary Guidelines for Americans.

The percentage of obesity Connecticut residents is projected to spike dramatically by 2030, from the 24.5 percent who were obese in 2011 to 46.5 percent.

That's according to the annual "F as in Fat" report released this morning by the Robert Wood Johnson Foundation and the Trust for America's Health

CT State Food Advisory Committee

- Headed by DAS contract specialist & comprised of all the food buying agencies
- meets monthly to discuss food standards and issues related to the current contract
- DPH & AHA attends meetings and presents nutritional / educational materials to members when requested.

Connecticut is in a good place in terms of implementing a purchasing policy that takes in account food nutritional standards.

There exists a well-established committee of food procurement officers, that is lead by a Department of Administrative Service contract specialist. The Food Advisory Committee meets monthly to discuss food standards and issues related to food contracts.

Staff from the Department of Public Health and representatives from the American Heart Association attend the meetings and are available to serve as a resource to the purchasing officers.

Areas Covered

- Suggested State Agencies for Procurement Reform
 - Department of Children & Family Services
 - Department of Development Services
 - Department of Mental Health & Addiction Services
 - Department of Social Services
 - Department of Energy & Environment Protection
- Standards to promote:
 - More fruits and vegetables
 - More Whole Grains
 - Low-fat and fat-free dairy products
 - Low calorie beverages and no calorie
 - Lower Salt in foods
 - No synthetic trans fat
 - More low sugar items

Procurement Reform in Action

- New York
- Massachusetts
- Washington State
- Los Angeles County

New York City has a comprehensive food procurement policy that outlines standards for any food purchased or served on government property. The standards are separated into Standards for Purchased Food, Standards for Meals and Snacks Served, and Agency and Population-Specific Standards and Exceptions. The population-specific guidelines outline nutrition standards for children, seniors, correctional facilities, and patients under therapeutic care.

In Massachusetts Executive Order 509 established nutrition standards for food purchased and served by state agencies. The Executive Order requires certain state agencies within the Executive to follow nutrition standards developed by the Department of Public Health when purchasing and providing food and beverages, whether directly or through contract, to agency clients/patients. The Massachusetts nutrition standards were adapted from New York City and reflect the Dietary Guidelines for Healthy Americans. The goal of Executive Order 509 is to improve the health of individuals served by state agencies.

In Washington State, Executive Order 13-06 was signed in 2013 requiring state executive agencies to adopt and implement food service guidelines following the guidance of the 2010 Dietary Guidelines for Americans (DGA 2010).

Finally, the Los Angeles County Department of Public Health (DPH) in 2012 developed a process for creating model healthy food environments in county venues and programs. DPH developed nutrition standards and purchasing practices that were incorporated into the food service contracts. DPH was also appointed as the coordinating agency to help other county departments implement the healthy food procurement initiative, providing reviewer oversight & technical assistance.

There are implementation resource available from the example cited along with federal guidelines

Conclusion

- Improving the nutritional quality of foods and beverages in public places is a low-cost public health strategy that can help to change norms and create healthier food and beverages choices.
 - Change the food environment
 - Guidelines can be phased in
 - School Food Purchasing policy

The state can be a proactive force in addressing the childhood obesity rate and also improving food environments by exercising its market participant power – the power to buy and sell goods and services.

By adopting healthy procurement policies the state can provide healthier food choices to community members and make a positive impact on community health. The purchasing volume of the state can influence the types of foods available more broadly to the community by creating greater demand for healthier products.

Food procurement policy guidelines can be phased in over time.

Finally, examining food procurement policies in other states and at our own school district level, best practices can be adopted to assist in state agencies in carrying out good public policy.

Procurement Triumphs and Challenges in Connecticut School Nutrition Programs

Background

- Who I am/What I do?
 - *Registered and Licensed Dietitian with a Master's Degree in Healthcare Management*
 - *Hold a certification as a School Nutrition Specialist and a Certificate in Training in Childhood and Adolescent Weight Management*
 - *20+ years of Experience in Food Service Management in Universities, Healthcare, Child and Adult Care Food Program, Elderly Feeding (Congregate Meals and Meals on Wheels) and School Nutrition*
 - *Food Service Director for Meriden Public Schools since 2004*
 - *Past President of the School Nutrition Association of Connecticut*

Good afternoon! My name is Susan Maffe and I am grateful to have the opportunity to speak to you today and share some of my perspectives as a dietitian and food service operator in relation to nutrition standards and procurement.

To tell you a little bit about myself:

I am a Registered and Licensed Dietitian with a Master's Degree in Healthcare Management

I hold a certification as a School Nutrition Specialist and a Certificate of Training in Childhood and Adolescent Weight Management

I have over 20 years of Experience in Food Service Management in Universities, Healthcare, The Child and Adult Care Food Program, Elderly Nutrition ,which is Congregate Meals and Meals on Wheels, and School Nutrition

I have been the Food Service Director for the Meriden Public Schools since 2004

And I am a Past President of the School Nutrition Association of Connecticut

Meriden Public Schools

- *Suburban district with 12 public schools and 1 magnet school*
- *On average, 67.4% of students are eligible for free or reduced meals. As many as 84.8% are eligible in one school.*
- *Serve approximately 1.1 million lunches and 400,000 breakfasts annually, in addition to After School Snacks, At-Risk Suppers and Summer Feeding*

As I mentioned, I am currently the food service director for Meriden Public Schools.

Meriden is a suburban district with 12 public schools and 1 magnet school.

District wide, 67.4% of our students are eligible for free and reduced meals. As many as 84.8% are eligible in one school.

Annually, we serve approximately

1.1 million lunches and
400,000 breakfasts

We also service other programs such as After School Snacks, At-Risk Suppers and Summer Feeding.

Procurement

- *Do not consider myself an expert in this area*
- *I am fortunate to have the knowledge of nutrition that others in similar roles may not have which influences my purchasing decisions*
- *Food products and their nutritional analysis are constantly changing to meet customer demands*
- *Product lines are extensive both at distributors and manufacturers*

Although I have been asked to speak about procurement today, I do not consider myself an expert in this area.

As a Registered Dietitian, I am fortunate that I have a knowledge of nutrition that others in similar roles may not have which influences my purchasing decisions

Through my years of experience I have learned and it is important to know that food products and their nutritional analysis are constantly changing to meet customer demands – and as a customer, you may or may not be aware of product reformulations.

Also, product lines are extensive at both distributors and manufacturers. You can't just order "pizza" or a "bagel" and expect to serve a consistent product. A manufacturer may make 20 different pizzas or 20 different bagels. A distributor, who carries products from many different manufacturers, may carry 50 different pizzas or 50 different bagels.

Why am I talking about School Nutrition?

- *Already highly regulated by USDA and the CSDE*
- *Widely publicized national negativity towards federal changes in offerings required of school meals*
- *Changes are science based and nutritionally sound and do implement the Dietary Guidelines for Americans*
- *Success desired for the outcomes of this committee*

You may ask why am I talking about school nutrition? It is because schools have strict nutrition guidelines for meals served AND have learned many lessons along the way.

School nutrition programs are already highly regulated by the United States Department of Agriculture and the Connecticut State Department of Education.

Sadly, there has been recent, widely publicized national negativity towards federal changes in the offerings required of school meals.

The changes to school meals are science based and nutritionally sound and do implement the Dietary Guidelines for Americans.

I have provided you with a handout that summarizes the key nutrition recommendations of the 2010 Dietary Guidelines for Americans, the compliance of the general population with the Dietary Guidelines for Americans, and the requirements of school meals.

But the real reason why I am talking about the lessons learned in School Nutrition Programs is my desire for this Task Force to recommend outcomes that will be met with success.

Healthy Food Certification - Triumph

- *Section 10-215e of the Connecticut General Statutes requires the Connecticut State Department of Education to publish a set of nutrition standards for foods offered for sale separately from a reimbursable school lunch or breakfast in public schools.*
- *The Connecticut Nutrition Standards (CNS) exceed any standards put in place at the federal level and are **voluntary***
- *The CNS apply to all foods served separately from a reimbursable meal on the school campus during the school day – school stores, vending machines, fundraisers*
- *School districts must certify their participation on an annual basis by a formal vote by their Board of Education*

Connecticut's Healthy Food Certification is a triumph for the health of the students of Connecticut.

In effect since July 1, 2006, Section 10-215e of the Connecticut General Statutes requires the Connecticut State Department of Education to publish a set of nutrition standards annually for foods offered for sale separately from a reimbursable school lunch or breakfast in public schools.

The Connecticut Nutrition Standards have and continue to exceed standards that are in place at the federal level. The nutrition standards apply to all foods served separately from a reimbursable meal on the school campus during the school day – such as school stores, vending machines and fundraisers.

Although Healthy Food Certification is voluntary and school districts must certify their participation on an annual basis with a formal vote by their Board of Education, participation and support continue to grow.

Healthy Food Certification - Triumph

- *The Connecticut Nutrition Standards focus on:*
 - *Limiting total fat*
 - *Limiting saturated fat*
 - *Limiting trans fat*
 - *Limiting sodium*
 - *Limiting sugars*
 - *Moderating portion sizes*
 - *Promoting increased intake of nutrient-dense foods such as whole grains, fruits, vegetables, low-fat/nonfat dairy products, lean meats, legumes, nuts and seeds.*

The Connecticut Nutrition Standards focus on:

- Limiting total fat, saturated fat, trans fat, sodium and sugars while also moderating portion sizes and promoting increased intake of nutrient-dense foods such as whole grains, fruits, vegetables, low-fat and nonfat dairy products, lean meats, legumes, nuts and seeds.

Healthy Food Certification – Triumph

- Science based
 - *The nutrients addressed in the Connecticut Nutrition Standards are based on current nutrition science and national health recommendations from:*
 - *The Dietary Guidelines for Americans*
 - *National organizations, such as the National Academy of Sciences, Institute of Medicine, American Cancer Society, American Heart Association, Academy of Nutrition and Dietetics, American Academy of Pediatrics.*
 - *The Connecticut Nutrition Standards are supported by [28 health and education organizations](#) in Connecticut.*

Another reason why Healthy Food Certification is a triumph for Connecticut is it is science based.

The nutrients addressed in the Connecticut Nutrition Standards are based on current nutrition science and national health recommendations from:

- The Dietary Guidelines for Americans and
National organizations, such as:
 - The National Academy of Sciences,
 - The Institute of Medicine
 - The American Cancer Society
 - The American Heart Association
 - The Academy of Nutrition and Dieteticsand The American Academy of Pediatrics.

The Connecticut Nutrition Standards are supported by [28 health and education organizations](#) in Connecticut

Healthy Food Certification – Triumph

- Program Piloted

- *Meriden Public Schools was a part of the pilot program in 2003 – 2005 evaluating the effect of nutrition standards on student purchases for foods offered outside of the reimbursable meal.*
- *03 – 04 – Baseline year. No change in product offerings – Reimbursable meal participation and a la carte purchases were monitored.*
- *04 – 05 – Change in product offerings to meet "draft" nutrition standards for a la carte purchases. Monitor reimbursable meal participation and a la carte purchases*
- *Witnessed an increase in reimbursable meal purchases and a decrease in a la carte sales with the introduction of nutrition standards*

Another reason why I believe Healthy Food Certification in CT has been so successful is that it was piloted prior to implementation

Proudly, Meriden Public Schools was a part of the pilot program in 2003 – 2005 which evaluated the effect of nutrition standards on student purchases for foods offered outside of the reimbursable meal

School Year 2003 – 04 was a baseline year. There were no change in product offerings and reimbursable meal participation and a la carte purchases were monitored.

In School Year 2004 – 05 there were changes in product offerings to meet "draft" nutrition standards for a la carte purchases. In that year, reimbursable meal participation and a la carte purchases were both monitored.

Meriden witnessed an increase in reimbursable meal purchases and a decrease in a la carte sales with the introduction of nutrition standards

Guidelines for Annual Review

- *The Connecticut Nutrition Standards are reviewed annually by the CSDE state nutrition standards committee and are updated as needed to reflect changes in nutrition science and national health recommendations. They are published in January of each year to be effective for the following school year (July 1 through June 30).*
- *CT Standards are more restrictive than Federal Standards scheduled to be implemented for school year 2014-2015.*

The Connecticut Nutrition Standards are reviewed annually by the CSDE state nutrition standards committee, which I have the honor of serving on for the School Nutrition Association of Connecticut. This committee allows the opportunity for representation from each of the 28 health and education agencies in Connecticut that pledge support.

On an annual basis, the standards are updated as needed to reflect changes in nutrition science and national health recommendations

They are published in January of each year to be effective for the following school year, which is July 1st through June 30th

Although UDSA will be implementing National Nutrition Standards for foods sold outside of the reimbursable meal in school year 2014-2015, the CT Standards are more restrictive than Federal Standards

Meriden's Rationale for Participation

- *Nutritionally a prudent decision in the best interest of our students*
- *The food services program sold minimal foods (a la carte items) outside of reimbursable meal*
- *Revenues potentially lost by a decrease in a la carte sales would be offset by an increase in meal reimbursements*

Since its inception in 2006, Meriden has voluntarily participated in HFC

Nutritionally, HFC certification was in the best interest of our students and their education. It certainly is preferable for students to consume a balanced breakfast or lunch already meeting stringent nutrition standards than less nutritious a la carte items.

As a Registered Dietitian, the food services program already sold minimal foods outside of the reimbursable meal. There were larger impacts on school stores, vending machines and fundraisers.

Financially, Meriden's food service program was not concerned. The pilots data had shown that revenues potentially lost due to a decrease in a la carte sales would be offset by an increase in meal reimbursements.

Categories of foods with nutrition standards

- *Snacks*
- *Entrees sold only a la carte*
- *Non-entrée combination foods*
- *Fruits and vegetables*
- *Cooked grains*
- *Soups*

Currently there are six groups of foods that have nutrition standards

Snacks

Entrees sold only a la carte

Non-entrée combination foods

Fruits and vegetables

Cooked grains

Soups

Challenges in the Education of the layperson

- *Current standards for snack foods:*
 - *No more than 200 calories including any accompaniments*
 - *No more than 35% of calories from fat as served including any accompaniments. No chemically altered fat substitutes.*
 - *Less than 10% of calories from saturated fat as served including any added accompaniments*
 - *Zero trans fat (less than .5 gram) as served including any added accompaniments*
 - *No more than 35% of total sugars by weight and 15 grams of total sugar as served without any added accompaniments. No artificial sweeteners, non- nutritive sweeteners or sugar alcohols.*
 - *No more than 230 mg of sodium as served including any accompaniments*
 - *No caffeine, with the exception of trace amounts of naturally occurring substances.*

One challenge that I have had as an operator and dietitian is educating my students and parents on how to utilize the Connecticut Nutrition Standards to make good food choices on their own outside of school.

Although the state nutrition standards are not extremely complex, they do require a good comprehension of food label reading and some basic to intermediate nutrition knowledge.

The current standards for snack foods are

- No more than 200 calories
- No more than 35% of calories from fat
- No chemically altered fat substitutes.
- Less than 10% of calories from saturated fat
- Zero grams trans fat on the food label (which is defined as less than half a gram by FDA)
- No more than 35% of total sugars by weight and 15 grams of total sugar
- No artificial sweeteners, non- nutritive sweeteners or sugar alcohols
- No more than 230 mg of sodium
- And no caffeine, with the exception of trace amounts of naturally occurring substances.

Support and Assistance from CSDE

List of acceptable food and beverage with manufacturer and distributor information

- <http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=322432>

Guidance for evaluating foods for compliance by category

- <http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=322430>

Without the support and assistance from CSDE, few school food service directors would consistently be in compliance with the Connecticut Nutrition Standards.

This is not for a lack of trying – it is the result of the magnitude of determining whether or not items are and remain in compliance.

CSDE currently maintains, updates and revises 18 lists with over 1,800 products that meet the Connecticut Nutrition Standards. The lists include nutrition information, UPC codes for the products as well as manufacturer and distributor information.

CSDE also has guidance and worksheets that assist operators in evaluating foods for compliance by category.

Initial Operator, Industry and Distribution Challenges

- *CT nutrition standards were unique – Massachusetts and Rhode Island developed and implemented different standards*
- *Products not necessarily available (0 frozen desserts available during pilot and 119 currently meet standards)*
- *Development of acceptable products meeting standards*
- *General confusion, despite tools, of required nutrition standards*
- *Overall concern regarding revenue loss*

With any change, there will be challenges. There were initially challenges for operators, industry and distributors with Healthy Food Certification.

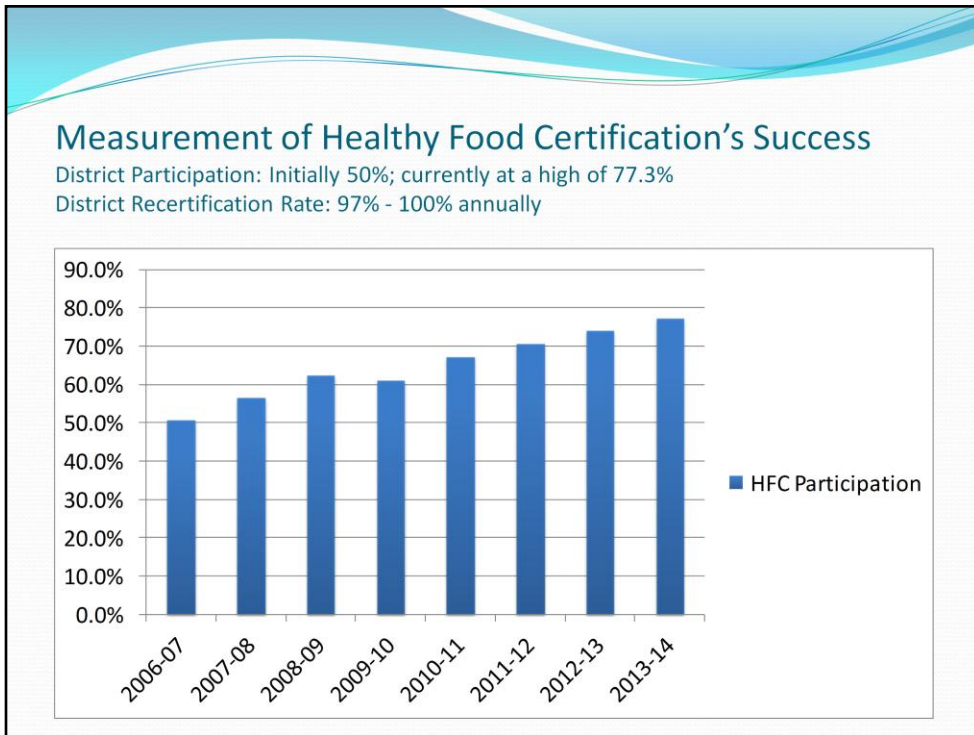
As USDA had minimal nutrition standards for foods purchased outside of a reimbursable meal, other states besides Connecticut implemented their own standards. The results for our distributors who service CT, MA and RI was dealing with three different sets of nutrition standards.

Products that schools wanted to sell were initially not available. When the HFC pilot was started, 0 frozen desserts were available that met the CT Nutrition Standards. Today there are 119 products available and the CT Nutrition Standards have gotten more stringent over the past 7 years.

Industry had their fair share of challenges and costs in developing acceptable products. Some products were great. The products that were great were in demand and not consistently available. Some products were horrible. They certainly were not in demand. Many of the new products have just disappeared.

Despite the resources CSDE offers and different standards for different states, there was general confusion, primarily for industry and distribution.

Schools in CT were not all as optimistic as Meriden in the success of HFC. Only 50% voluntarily participated in the first year of HFC, with a major concern being cited as a loss of revenue.

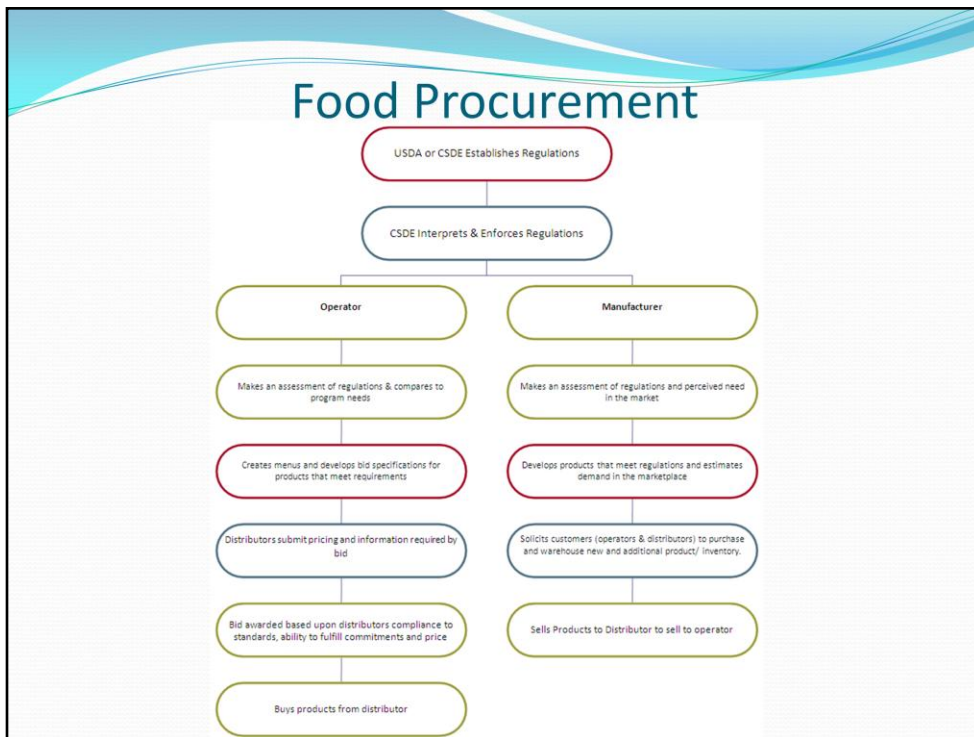


HFC's success has been measured in two ways

By the annual district participation rate, which was 50% in 2006-2007 and is now has grown to a high of 77.3% in 2013-2014

And

By annual district recertification rate, which has ranged between 97 - 100% since inception.



The procurement process for schools in CT has many steps between the establishment of regulations and an operator purchasing food.

Initially, for both the manufacturer and the operator the first steps are the same. After a regulation is established by USDA or the CSDE, both the manufacturer and the operator await guidance and interpretation from the CSDE who is responsible for enforcing the regulations. It is key that guidance is clear, concise and timely and can easily be interpreted by various stakeholders to achieve successful outcomes.

Once the guidance and interpretation is received, the operator makes an assessment of the regulations and compares the regulations to its program and its needs. The manufacturer also makes an assessment of the regulations, its current product line and makes a determination of what they believe the needs of operators are. The manufacturer then begins to reformulate and develop new products that meet their interpretation of the regulations.

After the needs assessment is made, the operator creates menus and develops bid specifications that meet its specific requirements.

The manufacturers then solicit customers for their products, usually through a food broker who represents the manufacturer. These customers are both the operators who desire to serve the products and the distributors who would need to maintain an inventory of the new products to sell to the operators.

Distributors submit pricing and their interpretation of the bid specifications. Their interpretation may or may not meet the bid specifications. Bids are awarded based upon compliance to the established specifications, ability to fulfill the operators volume desired and price.

Once the bid is awarded, the operator can purchase products from the distributor.

The Current Role of the State of Connecticut in Food Procurement - Challenge

- Current State Procurement Practices
 - *State agency requests the Department Of Administrative Services (DAS) to solicit a bid or request for proposals for a product or a service*
 - *The DAS contracting specialist creates a committee of people to create the bid or RFP*
 - *The requesting state agency provides DAS with any regulatory language needed in the bid/rfp for their product or service*
 - *DAS adds all state procurement regulation language and posts on the state's website*

Currently, the state's food procurement practices are as follows

- A state agency requests the Department Of Administrative Services (DAS) to solicit a bid or request for proposals for a product or a service
- The DAS contracting specialist creates a committee of people to develop the bid or RFP
- The requesting state agency provides DAS with any regulatory language needed in the bid or rfp for their product or service
- DAS adds all state procurement regulation language and posts on the state's website

We **CAN** move Industry in a Healthier Direction

- *CT has already successfully done this with the Connecticut Nutrition Standards and Healthy Food Certification*
- *Initial challenges for manufacturers include:*
 - *Comprehending and interpreting guidance*
 - *Complexity of guidance*
 - *Developing products needed*
 - *Timeline between guidance interpretation and need in the marketplace*
 - *Customer acceptance*
 - *Accurately projecting demand of product and meeting demand where it exists*
 - *Costs of potentially undesirable inventory*

The success of HFC proves that we **CAN** move industry in a healthier direction

Some of the initial challenges for manufacturers may include:

Comprehending and interpreting guidance

The complexity of guidance

Developing products needed

The timeline between guidance interpretation and need in the marketplace

Customer acceptance

Accurately projecting and meeting product demand

and consideration of the costs of potentially undesirable inventory

Initial Distributor Challenges

- *Physically warehousing products needed and the expansion of product lines*
- *Costs of warehousing products and expanding product lines*
- *Projecting accurately the customers demand of a product*
- *Being able to procure product from manufacturers*
- *Meeting demand where demand exists*
- *Lack of comprehension of guidance*
- *Costs associated with undesirable inventory*

Distributors may also face initial challenges, such as

Physically warehousing products needed and the expansion of product lines

The costs of warehousing products and expanding product lines

Projecting accurately the customers demand of a product

Being able to procure product from manufacturers

Meeting demand where demand exists

A lack of comprehension of guidance

And costs associated with undesirable inventory

Operator Initial Challenges

- *Comprehending and interpreting guidance*
- *Providing adequate choices and variety that meet customer needs*
- *Ability to find and purchase items that meet requirements*
- *Customer acceptance*
- *Cost*

Operators may also face initial challenges which include

Comprehending and interpreting guidance

Providing adequate choices and variety that meet customer needs

The ability to find and purchase items that meet requirements

Customer acceptance

and Costs

State Procurement Standards

What are the possible tangible and intangible costs of implementation?

- *Product availability*
- *Consumer acceptance and demand*
- *Market acceptance and demand*
- *Increased expenses to operators*
- *Shelf Life*
- *Revenue loss*

Some of the possible tangible and intangible costs of implementing state procurement standards are

Product availability

Consumer acceptance and demand

Market acceptance and demand

Increased expenses to operators

Shelf Life

Revenue loss

Future

- How do we make State Procurement Standards successful?
 - *Nutrition is a rapidly changing and complex science*
 - *Adopt clear, concise recommendations that can be easily understood, implemented and revised based on current science to ensure compliance*
 - *Ability to modify standards easily on a routine basis*
 - *Appoint a committee of experts with governmental authority to act as needed and quickly to respond to changes in nutrition science*

Despite initial challenges, we **CAN** make State Procurement Standards for Connecticut successful by looking at the lessons learned through HFC and USDA's implementation of new meal patterns.

Based on my experience as an operator, to be successful, we need to recognize

That nutrition is a rapidly changing and complex science

We should adopt clear, concise recommendations that can be easily understood, implemented and revised based on current science to ensure compliance

We need the ability to modify standards easily on a routine basis

And as per HFC, we should appoint a committee of experts with governmental authority to act as needed and quickly to respond to changes in nutrition science

Committee recommendations -

- *Consider the success of Healthy Food Certification and the Connecticut Nutrition Standards*
- *Consider the valuable tools developed and maintained by CSDE since implementation of the Connecticut Nutrition Standards*
- *Adopt Healthy Food Certification Standards and model state procurement guidelines upon the Connecticut Nutrition Standards*

In summary and on behalf of the nutrition subcommittee, I would like to recommend that the Task Force

Consider the success of Healthy Food Certification and the Connecticut Nutrition Standards

Consider the valuable tools developed and maintained by CSDE since implementation of the Connecticut Nutrition Standards

And adopt Healthy Food Certification Standards and model state procurement guidelines upon the Connecticut Nutrition Standards

Thank you!