#### HTTPS://BALLEQUITY.AMAMEDIA.ORG/PROJECT-SUPPORT/



# NUTRITION BALANCED



To increase healthy cultural food access by implementing Food Service Guidelines (FSG) at area Asian Temples and/or African American/Black Churches, as well as expanding Produce Rx programs at area clinics/hospitals, to better support pan-Asian and pan-African communities.

# Preface

Project SUPPORT (**S**upporting **U**nder-served through **P**roduce **P**rescription, and **Q**pportunities to **R**ecreation-activity & **T**obacco-control), is led by Asian Media Access (AMA), collaborated with Multi Cultural Community Alliance (MCCA), Project SUPPORT is a cross-cultural, cross-generational, and crosssectoral initiative, aims to improve health, prevent chronic disease, and reduce health disparities among Black, Indigenous, and People of Color (BIPOCs) who face the highest risk, and bear the highest burden of chronic disease, named: African American/Black, Asian American and has put a special focus on young people from the two poorest but most diverse neighborhoods in MN – North Minneapolis, and Midway St. Paul.

Supported by CDC's REACH funding, AMA has leveraged our extensive network of trusted community partners who provide subject matter expertise and have a history of successful engagement with the respective cultural and geographic communities. All partners have been involved in co-designing this Initiative – Project SUPPORT, through below 4 culturally tailored strategies to promote Bicultural Healthy Living, especially for immigrant and refugee communities:



**1) Nutrition:** Increase healthy cultural food access by implementing Food Service Guidelines (FSG) at area Asian Temples and Black Churches, and establishing Produce Rx at area clinics/hospitals.

2) Physical Activity: Increase policies, plans and community designs through North Minneapolis Blue Line and St. Paul Sears Redevelopment to better connect residents with activity friendly routes to everyday destination to live/learn/work/play, and provide safe, culturally based places for increasing physical activities.

**3)** Tobacco Control: Support a Media Campaign to educate BIPOC communities about the potential statewide tobacco flavor ban, and work with area sports teams to find out what people/youth know and feel about flavored tobacco products. Focus groups and media message testing will be done to determine what the community needs to know and what messages related to flavored tobacco would appeal to which cultural groups. We will focus on young athletes from pan-Asian and pan-African communities, and a media campaign featured the young athletes based on what the message testing reveals.

**4) Vaccination for Adults:** Increase education, demand for, and access to flu, COVID- 19, and other adult vaccinations via pop-up community clinics at the places that cultural groups feel comfortable and connected, and increase regularity of vaccine promotion in priority communities; and increase the percentage of pan- Asian and pan-African seniors who are up-to-date with recommended adult vaccinations.





# **Project SUPPORT**

(Supporting Under-served through Produce/Park Prescription, and Opportunities to Recreation-activity & Tobacco-control)

### Nutrition



The strategy aims to analyze dietary patterns and increase access to healthy cultural food by implementing Food Service Guidelines (FSG) at Asian Temples and Black Churches. Additional strategy to establish Produce Rx area at clinics and hospitals.

Location: Serving the Rochester Cambodian Temple

**149** Cultural dishes examined during 4 observation sessions

### Conclusion

The Food Service Guideline assessment tools were successfully applied to evaluate the congregated dining experience at the Rochester Cambodian Temple. Based on the assessment, policy recommendations were made to better support balanced nutrition for the monks, incorporating considerations for cultural dietary preferences. Additionally, cultural diet assessment factors were suggested for inclusion in the Food Service Guideline.

Project SUPPORT is led by Asian Media Access, collaborated with Multi Cultural Community Alliance, for more information at 612-376-7715 \* <u>amamedia@amamedia.org</u>

# Nutrition Policy Recommendations

01

The Temple can improve its offerings by introducing the Harvard's Healthy Eating Plate, tailored for Asians by replacing milk with water. Monks and the community will learn to balance food offerings with more vegetables, whole grains, and proteins. Cooking demonstrations will show how to prepare traditional dishes with less salt, refined carbohydrates, MSG, and oil. These efforts maintain cultural significance while promoting a healthier, balanced diet, ensuring nutritious meals for all members.

Reducing oil, MSG, and sugar is crucial for healthier meals. Switching from deep-frying to steaming or grilling lowers calorie intake, while mushroom powder can replace MSG without

sacrificing flavor. Encouraging water/tea instead of sugary drinks also reduces sugar consumption. These modifications promote

healthier cooking and eating habits while preserving traditional flavors, helping the community make positive dietary changes



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To boost vegetable intake and improve carbohydrate choices, the Temple should incorporate a variety of colorful, minimally processed vegetables into meals. Whole grains like quinoa and barley can replace refined carbohydrates like white rice. Educating the community on reheating rice to lower its glycemic index can offer healthier alternatives. These changes ensure more nutritious meals that promote better blood sugar control and overall health, addressing common dietary concerns.



The Temple can adopt sustainable practices by reducing disposable utensils and encouraging reusable dishware and food carriers. Implementing trash separation and recycling systems supports environmental goals. Educating the community on food safety, like proper food prep, keeping right temperatures and utensil use, to ensures meals are safe and nutritious while minimizing waste. These changes promote health and sustainability, enhancing the Temple's communal and environmental impact.

Learn more at -<u>https://ballequity.amamedia.org/</u> <u>project-support/</u>

# **Chapter 1**

# **Cambodian Temple Landscape Report**

**Observation Dates**: June 16, June 27, June 30, and July 13, 2024 **Location**: Watt Dhamma Visudhikaram (Buddhist Support Society) **Address**: 4462 29th St SE, Rochester, MN 55904 **Serving**: 5-9 monks, and more than 200+ community members

The objective of the project is to assess the nutritional status of Cambodian community members by observing the dishes offered to monks at Watt Dhamma Visudhikaram (Buddhist Support Society), a Cambodian Buddhist temple. In Cambodian culture, offering food to monks at the temple is a significant religious and communal practice, deeply rooted in Theravada Buddhism. This tradition, known as "Dana," symbolizes generosity and the merit-making that is central to Buddhist beliefs.

# A. Preparation:

- Food Preparation: The community, often led by families, prepares a variety of dishes, including rice, main entries, fruits, and desserts. These foods are usually home-cooked, reflecting the family's best efforts and care. Some families might also bring flowers, incense, or other offerings. Community members brought food items to the temple and divided each dish into individual servings, placing them on plates, in bowls, or in cups for each monk. Community members place all small dishes evenly wrapped with saran wrap to each monk's table along with beverage, such as bottled water, protein drink,a, and soda.
- **Dress Code:** Participants usually wear traditional Cambodian attire, especially during special ceremonies. White clothing is common, symbolizing purity and respect.

# B. Arrival at the Temple:

- **Gathering:** Families and community members gather at the temple early in the morning. The temple courtyard is often filled with people carrying trays or baskets of food.
- **Arrangement**: The offerings are neatly arranged on tables. It's important that the food is presented respectfully, as it will be offered to the monks who are considered living representatives of the Buddha's teachings.

# C. The Offering:

- **Procession:** The monks, in their saffron robes, sit at their tables with dining wares and a few types of beverages. After ritual and blessing, the community members lift some dishes slightly to offer foods to monks.
- Offering Ritual: The act of offering is usually done with both hands, a gesture of deep respect. In some cases, a member of the temple might announce the offering on behalf of the community, reciting prayers or Pali chants.

# D. Blessing:

• **Chanting:** After receiving the offerings, the monks usually chant blessings in Pali, the sacred language of Theravada Buddhism. This chant is meant to confer merit and blessings upon those who made the offerings, as well as their loved ones.

# E. Sharing the Merit:

- **Dedication:** The merit gained from offering food is often dedicated to deceased loved ones or all sentient beings. This is an important aspect of Cambodian Buddhist practice, reflecting the belief in the interconnectedness of all life.
- **Communal Meal:** After the monks have eaten, the remaining food is often shared among the community members, fostering a sense of togetherness and reinforcing communal bonds.

This practice is not only a religious duty but also a vital part of maintaining the Cambodian community's cultural identity, especially for those living abroad.

Meals were observed on five occasions over four days, including one breakfast and four lunches. The dishes were categorized into five groups: fresh fruits, jelly with added sugar, refined starchy foods, animal-based dishes (meat, fish, and eggs), and plant-based dishes (vegetables). The first three categories were classified as desserts, while the last two were considered main dishes.

The analysis revealed that approximately 24% of the food offerings were desserts, and 76% were main dishes. Within the dessert category, 33% were fresh fruits, 25% were jelly with added sugar, and 42% consisted of refined starchy foods. Among the main dishes, 78% were animal-based, and only 22% were plant-based.

It's important to note that the food was provided in a "potluck" style, which may not reflect a typical or balanced meal. As a result, it would be inaccurate to assess the overall nutritional balance based solely on these observations. Instead, the following recommendations are made based on the ingredients used and the methods of preparation observed.

# **Chapter 2**

# Landscape Report Findings

### A. The Needs to Increase Vegetable Consumption:

The offerings at the temple showed a significant lack of fresh vegetables, both in quantity and variety, except for the hot pot. To address this gap:

- Enhance Variety and Quantity: Incorporate a wide variety of colorful vegetables in each meal to ensure a broader spectrum of nutrients.
- Incorporate Whole, Minimally Processed Vegetables: Emphasize the use of whole vegetables with minimal processing. This helps retain their nutritional value, including fiber, vitamins, and minerals. For example, lightly cook leafy green vegetables instead of cooking in stew.

### **B. The Needs to Improve Carbohydrate Choices:**

Many dishes were made with refined ingredients such as white flour, white rice, and white sweet rice, which can cause rapid spikes in blood glucose levels. The following strategies are recommended:

- **Reduce Refined Carbohydrates:** Limit the use of refined flour and sugar in recipes to decrease the glycemic impact of meals.
- **Opt for Reheated Rice:** Instead of freshly cooked rice, consider using rice that has been cooled and reheated. This process lowers the glycemic index of both white and brown rice by approximately 20 points, making it a healthier option.
- Increase Whole Grain Consumption: Encourage the inclusion of whole grains such as quinoa, barley, and brown rice. Whole grains are associated with better weight management and improved blood glucose control.

### C. The Needs to Reduce Oil Usage:

Many dishes contain excessive amounts of oil, contributing to higher calorie intake and potential health risks. To promote healthier cooking practices:

- **Minimize Deep-Frying:** Reduce the use of deep-frying methods to lower the overall oil content in meals. Alternative cooking methods like steaming, baking, or grilling can be used instead.
- Limit Saturated Fats: Decrease the use of oils high in saturated fats, such as coconut oil, palm oil, and lard. These fats are linked to an increased risk of cardiovascular diseases and metabolic syndrome. Instead, consider using oils rich in unsaturated fats, such as olive oil or avocado oil.

# D. The Needs to Limit Monosodium Glutamate (MSG) Usage:

The use of MSG in cooking has been associated with various health concerns, including obesity, hypertension, diabetes, and an increased risk of cancer. To reduce these risks:

- Use MSG Alternatives: Replace MSG with healthier seasoning options such as mushroom powder to enhance umami flavor and root vegetables to enrich soup stocks and broths without the adverse effects associated with MSG.
- **Minimize sugar consumption:** Encourage water intake than sugary drinks, such as soda and pressed sugar can drink.

# E. Reduce the Use of Disposable Utensils and bottled water:

All dishes were served in disposable bowls, cups, or plates, and covered with plastic wrap before being offered. Following the meal, community members also used disposable utensils. To reduce the environmental impact and potential health risks associated with disposable products:

- Use Reusable Utensils: Whenever possible, opt for reusable utensils and dish ware to minimize exposure to toxic materials, such as plastic and Styrofoam, and to reduce environmental waste. Families may consider bringing their own tableware.
- Separate Trash and Recyclables: Implement a system to separate trash from recyclables, further reducing environmental impact and promoting sustainability.
- Use Stainless Steel Food Carriers: Replace plastic or aluminum containers with stainless steel food carriers to reduce the potential impact of metals and chemicals leaching into food.
- Use mugs or refillable water bottles: Encourage temple to consider installing drinking fountains or water filters to offer good quality drinking water. This will reduce the need for bottled water, especially the small water bottles.

# **Chapter 3**

### Lessons Learned from the FSG Assessment Tools

The Cambodian Temple is committed to improving the health of its residents and visiting monks by supporting good nutrition and providing healthier food choices. The purpose of this project is to incorporate Food Service Guideline's guidelines, informed by our observations, to provide recommendations and co-create a healthy food service implementation plan. This plan uses the FSG Assessment results and aims to optimize the health of the community, ensuring that nutritious food options are available and aligned with best practices for promoting overall well-being.

### A. Beverages:

- Tea, water and freshly made juice were present at every observation. Those were healthy and traditional choices.
- Avoid sugary drinks.

# **B. Main Dishes:**

- The gathering at the temple functioned similar to a potluck with duplicates of the same or similar dishes that decreases choices.
- Aim to increase green vegetables by providing vegetable dishes or incorporating vegetables with animal products.
- Replace white rice with brown rice to increase fiber intakes.
- Prepare rice ahead of the gathering, let it cool and reheat at home before presenting it at the gathering. This cooling process will decrease the glycemic index by 20 points.
- Reduce deep fried foods.
- Reduce the use of oil and lard. Replace corn oil with olive oil.
- Reduce the use of monosodium glutamate (MSG) and replace it with mushroom powder and spices.

# C. Desserts:

- Fresh fruits were present at every observation.
- Aim to reduce the refined carbohydrates, such as sweet rice flour, refine white flour, and sugar.

# **D. Preparation:**

- Bring own bowls, plates, cups and utensils to reduce the use of plastic products.
- Reduce the use of plastic wraps. For example, combine same or similar dishes on one plate.
- Avoid carrying food, especially warm or hot foods, in aluminum carriers. Instead, choose stainless steel or glass.
- Set up recycle bins to reduce garbage loads.

# **Chapter 4**

# **Key Activities Planned for Year 2**

The goal of this initiative is to create and implement food service guidelines that promote healthier nutrition within the Cambodian Temple, aligning with both Cambodian cultural traditions and best practices for community health. The project will begin by presenting assessment outcomes and recommendations to the temple's governing body/Board of Directors.

# A. Policy Recommendation #1:

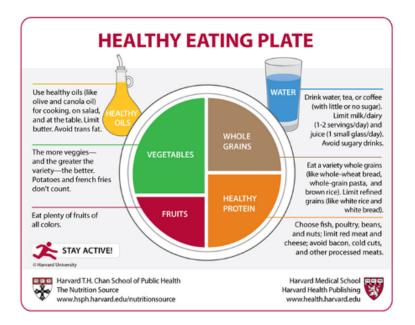
Food Safety Guidelines: To ensure the health and safety of food prepared and served at the Cambodian Temple, the following food safety guidelines are recommended:

- Food Handling and Hygiene: All food handlers must wash hands for at least 20 seconds with soap and water before and after food preparation, and wear gloves when handling ready-to-eat foods. Maintain separate cutting boards for raw meats, vegetables, and cooked foods to prevent cross-contamination.
- **Temperature Control and Storage:** Perishable foods should be refrigerated immediately upon receipt or preparation at temperatures below 40°F. Discard any perishable items left out for more than two hours. Hot foods should be held above 140°F until served.
- **Cleaning and Utensil Use:** Establish a cleaning routine for all kitchen surfaces, utensils, and storage areas, with sanitization protocols for all equipment used in food preparation and serving. Separate serving utensils should be used for each dish, and utensils should not be reused between dishes to prevent contamination.
- **Waste Management**: Designate specific bins for recyclables, compost, and general waste, and ensure garbage is disposed of regularly to prevent contamination and pests.
- Food Safety Posters in Khmer: Provide food safety posters in Khmer to be displayed in the temple's kitchen and food preparation areas. These posters will also be available for community members to take home, promoting safe food handling practices when preparing meals for monks and temple gatherings.

# **B.** Policy Recommendation #2:

Promoting Balanced Meals Using the Harvard Healthy Eating Plate: To enhance nutrition and encourage balanced meals, the Healthy Eating Plate from Harvard University should be adopted as a guiding model for food offerings:

- Guidelines for Healthy Offerings: Emphasize a balanced plate that includes a variety of vegetables, fruits, whole grains, and plant-based proteins. Replace refined grains and processed foods with whole grains and minimally processed options.
- Education and Demonstration: Provide education on portioning meals according to the Healthy Eating Plate. Include demonstrations to show how traditional Cambodian dishes can be adjusted to fit these guidelines, such as incorporating more vegetables, using plant-based ingredients, and moderating salt, sugar, and oil content.
- Adapted Recommendations: Recognizing lactose intolerance in the community, substitute milk with water or plant-based alternatives as the primary beverage, per the Harvard Healthy Eating Plate model.



# C. Policy Recommendation #3:

Reducing Use of Single-Use Plastic and Styrofoam: To support environmental sustainability and reduce waste, the Cambodian Temple should minimize the use of single-use plastics and Styrofoam in all food services:

- **Plastic Reduction Strategies:** Phase out plastic wraps, plastic bags, and Styrofoam bowls/plates by encouraging the use of reusable, biodegradable, or compostable alternatives whenever possible.
- **Community Awareness:** Educate community members and food service volunteers on the environmental impact of single-use plastics, encouraging them to bring reusable containers and utensils.
- **Monitoring and Adjustment:** Regularly assess the use of disposable items in the temple's food service and work towards sustainable practices, providing guidance on safe alternatives that meet food safety standards.

Key actions include developing food service guidelines rooted in Cambodian culture, prioritizing an action plan to build a healthy, happy community, and using the temple as a model for other cultural communities in the future. A presentation to the community will emphasize the importance of maintaining cultural bonds through traditional foods while enhancing their nutritional value. This will include tips on improving food offerings, maintaining high food safety standards, and cooking demonstrations with tastings.

The project will also introduce the Healthy Eating Plate, Harvard University's version of the CDC's My Plate, which is more suitable for the community as it replaces milk with water, considering the high rates of lactose intolerance among Asians. Monks will be guided on how to categorize food offerings according to the Healthy Eating Plate model.

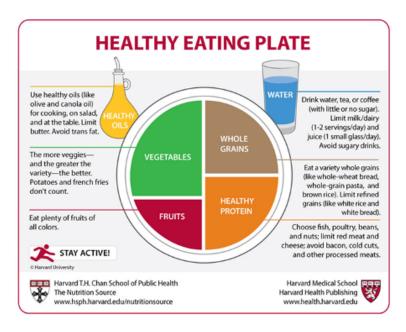
Cooking demonstrations (not using REACH fundings) will be provided to show how traditional Cambodian dishes can be modified with plant-based ingredients while reducing refined carbohydrates, salt, sugar, monosodium glutamate, and oil. Additionally, policies on food preparation, utensil use, and garbage sorting will be discussed to further optimize the community's health and food safety practices.

One month after implementation, biometric measurements for monks and select community champions will be collected, and an on-site assessment will be conducted to evaluate outcomes. The feedback and results of the implementation will be reviewed in a follow-up meeting with the temple's governing body to refine the guidelines and ensure sustainability.

# **Chapter 5**

### Attachments

- Food Service Guidelines' Organizational Assessment Tool Report
- Food Service Guidelines' Checklist for Prepared Foods Report
- Food Service Guidelines' Smart-Food-Choices Report
- AMA's Landscape Report: Statewide Clinics Offering the Produce Prescription List



# Food Service Guidelines Organizational Assessment Tool



This Food Service Guidelines Organizational 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 food service venues, including procurement contracts.

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.



U.S. Department of Health and Human Services Centers for Disease Control and Prevention **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 settings such as nursing homes.

### **Agency Background Information**

This section of the tool may be used to capture background information about your agency. Please fill out the contact and agency information sections in the space provided below if you are completing this tool for your agency or are working with other partners.

#### 1. Contact information (Complete in the space provided.)

- Job title:
- Telephone number:
- E-mail address:

2. Agency information (Complete in the space provided.)

Agency name:
Agency facility:
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? (Select one answer)

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):

### **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 camp, or juvenile hall
Assisted living/nursing home community
Park and recreational facility (e.g., baseball field, golf course, beach)
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 at:

Cafeterias/cafés
Vending machines
Concession stands, snack bars, and/or carts
Other (please specify):

#### Served at:

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:** (Complete all that apply)

Food Service Venues	Number of Venues	<b>Total Nui</b> (Please provi a		antity sold	or served i	in
Cafeterias/cafés		Total Number:	per	Day	Week	Month
Vending machines		Total Number:	per	Day	Week	Month
Concession stands, snack bars, and/or carts		Total Number:	per	Day	Week	Month
Distributive meal program		Total Number:	per	Day	Week	Month
Meals served to institutionalized populations		Total Number:	per	Day	Week	Month
Hospital patient meals		Total Number:	per	Day	Week	Month
Other (please specify):		Total Number:	per	Day	Week	Month

# **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							
Concession stands, snack bars, and/or carts							
Distributive meal program							
Meals served to institutionalized populations							
Hospital patient meals							
Other (please specify):							

### **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?

(Select one answer)

Yes No If no, skip to question 9.

Don't know

### 2. Are the guidelines/standards mandatory or voluntary?

Mandatory Voluntary Don't know

### 3. 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):

### 4. Which topics do your food service guidelines/nutrition standards address?

(Check all that apply)

Water	Promote/offer fruits and vegetables
Calories	Calorie information through labeling
Sugar	Healthier food and beverage choices with signs and symbols
Saturated fat	Product placement to encourage healthier options
<i>Trans</i> fat	Pricing incentives that promote healthier food and beverages
Sodium	Percentage or number of healthy food and beverage choices available
Reduced-size portions/choices	Other (please specify):
Fried foods	
Dairy	
Beverages	

# 5. What sustainability standards are addressed in your food service guidelines

### or nutrition standards? (Check all that apply)

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

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

choices? (Select one answer)

Yes	No	Don't know

# 7. 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				
Vending machines				
Concession stands, snack bars, and/or carts				
Distributive meal program				
Meals served to institutionalized populations				
Hospital patient meals				
Other				

	gramaatio	ized by the Randolph-Sheppard Act? (Select one answer)
Yes	No	Don't know
healthier fo	ood and beve	food service guidelines/nutrition standards that make erage choices available during meetings and conferences Select one answer)
Yes	No	Don't know
Authority		
This section of the related to foods sol		to capture information about who in your agency has authority to make changes e agency.
	· · · · · · · · · · · · · · · · · · ·	y or potentially could set or determine the food service
•	nutrition sta	andards for this agency? (Check all that apply)
	or procurement off	
Organization	•	
Other (please	e specify):	
	-	adopting food service guidelines/nutrition standards and/or asing practices within your agency? (Answer in the space provided below
	roval is need	ed to set or change food service guidelines/nutrition standard

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?

(Answer in the space provided below)

### **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? (Check all that apply)

Contract	Other (specify):
Permit	

# 2. Please indicate the date when each food service agreement at your agency will be 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? (Check all that apply)

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? (Select one answer)

Yes No Don't know

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

(Select one answer)

Yes No	Don't know
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### **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 processes, such as food preparation Lack of trained staff Lack of funding support or 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 processes, such as supervising food preparation 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):

# Food Service Guidelines Checklist for Prepared Foods

This checklist was developed to help you determine what food and beverages offered in your agency meet the *Food Service Guidelines for Federal Facilities*. This checklist only pertains to the food and beverage standard criteria for prepared foods. Prepared foods are fresh, cleaned, cooked, assembled (e.g., salad or sandwich), or otherwise processed and served "ready-to-eat." Prepared foods include those that are made and served on site, or those prepared at a central kitchen and then packaged and distributed to other locations. These foods have a relatively limited shelf-life (compared to packaged snacks) and can be sold in many food service venues. Examples of prepared foods include hot entrées, side dishes, soups, salads, deli sandwiches, and fresh whole fruits and vegetables.

### **Agency Background Information**

1. Contact information (Complete in the space provided.)

- Checklist completed by (name):
- Job title:
- Telephone number:
- E-mail address:

2. Agency information (Complete in the space provided.)

Agency name:
Number of employees:
Mailing address:
Agency contact person (for future communication):
Job title:
Telephone number:
E-mail address:



U.S. Department of Health and Human Services Centers for Disease Control and Prevention

### 3. Your agency's setting (Complete in the space provided.)

- Community setting (Specify):

#### 4. Location of prepared foods observed (Complete in the space provided.)

Name of facility, building, floor, etc.:

#### 5. Date of observation (Complete in the space provided.)

Date (mm/dd/yyyy):

### **Prepared Foods Checklist**

(Check one answer for each standard)

Category	Food Service Guidelines Standard Criteria	Yes, Standard Met	No, Standard Not Met	Not Applicable
	Offer a variety of at least 3 fruit options daily, with no added sugars. Fruit can be fresh, canned, frozen, or dried.			
Fruits and Vegetables	Offer a variety of at least 3 non-fried vegetable options daily. Vegetable can be fresh, frozen, or canned, and served cooked or raw.			
	Offer seasonal fruits and vegetables.			
Grains	Offer half of total grains as "whole grain-rich" products, daily.			
Dairy	Offer a variety of low-fat dairy products (or dairy alternatives) daily, such as milk, yogurt, cheese, and fortified soy beverages.			
	Offer a variety of non-fried protein foods, such as seafood, lean meats and poultry, eggs, legumes (beans and peas), nuts, seeds, and soy products, daily.			
Protein Foods	Offer protein foods from plants, such as legumes (beans and peas), nuts, seeds, and soy products, at least three times per week.			
	Offer seafood at least two times a week.			
Desserts	When desserts are available, offer 25% of desserts containing $\leq$ 200 calories as served.			
	All meals* offered contain ≤800 mg sodium.			
Sodium	All entrees* offered contain ≤600 mg sodium.			
	All side* items contain ≤230 mg sodium.			
Trans Fats	All foods do not include partially hydrogenated oils.			
Calorie and Nutrition Labeling	Provide calorie and nutrition information of standard menu items as required by the Food and Drug Administration (FDA) in <i>Menu Labeling</i> <i>Final Rule: Food Labeling; Nutrition Labeling of Standard Menu Items in</i> <i>Restaurants and Similar Retail Food Establishments</i> .			
Other Consideration	Limit deep-fried entrée options to no more than one choice per day.			

\* See the Food Service Guidelines for Federal Facilities for definitions of meals, entrees, and side items.

**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 fill out the contact and agency information sections in the space provided below 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: Survey completed by (name):
Agency type: Survey completed by (name):
Number of employees: Survey completed by (name):
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? (check one answer)

🖵 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 at:

- Cafeterias/cafés
- Vending machines
- Concession stands, snack bars, and/or carts
- Other (please specify):

#### Served at:

- Distributive meal program (e.g., senior meals, after-school snacks)
- Deals 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:** (complete all that apply)

Food Service Venues	Number of Facilities	<b>Total Number of</b> <b>Meals, Snacks, and Vending Machines</b> (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							
Concession stands, snack bars, and/or carts							
Distributive meal program							
Meals served to institutionalized populations							
Hospital patient meals							
Other (please specify)							

### **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?

(check one answer)

Yes

- □ No If no, skip to question 8.
- Don't know

#### Are the guidelines/standards mandatory or voluntary?

- Mandatory
- U 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?

Fried foods

(check all that apply)

**Sugar** 

Dairy

- Reduced-size portions/choices
- Saturated fat
- Trans fat

U Water

**C**alories

- **G**Sodium
- Beverages 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):

- Promote/offer fruits and vegetables
- Calorie information through labeling

#### 4. What sustainability standards are addressed? (check all that apply)

- 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
- $\square$  Offer certified sustainable, shade-grown, or bird-friendly coffee and tea
- $\Box$  Offer free drinking water
- Other (please specify):
- None
- 5. Does your agency include these food service guidelines/nutrition standards in a policy,<sup>a</sup> permit, contract, or similar agreement increasing access to healthier food and beverage choices? (check one answer)
  - 🛛 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				•_	
Vending machines					
Concession stands, snack bars, and/or carts					
Distributive meal program					
Meals served to institutionalized populations				•_	
Hospital patient meals					
Other (please specify)				•_	

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

### 7. Does your agency have food services operated by the Randolph-Sheppard Vending Facility Program authorized by the Randolph-Sheppard Act?<sup>b</sup> (check one answer)

Yes     No     Don't know	8. Does your agency	have food service guidelines	/nutrition standards that make healthier
	Yes	No	Don't know

food and beverage choices available during meetings and conferences where food is

offered? (check one answer)

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? (check all that apply)

Federal, state, or local government

 $\square$  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? (Answer in the space provided below)

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

(Answer in the space provided below)

# 4. If your agency has adopted food service guidelines/nutrition standards does your agency monitor compliance of these guidelines? (check one answer)

Yes	🔲 No	Don't know

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

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? (Answer in the space provided below)					
Contracting Proc	:ess				
This section of the tool may be	e used to capture information abo	ut the contracting process related to food service within			
your agency. Complete this se	ection if you currently have food se	rvice related contracts/permits.			
1. How does your age	ncy make food service ag	reements? (check all that apply)			
<ul><li>Contract</li><li>Permit</li></ul>		Other (specify):			
<b>be renewed:</b> Please include length of a Cafeterias/cafés Vending machines	contracts (i.e., 1 year, 10 years, e	vice agreement at your agency will etc.).			
Distributive meal program					
Meals served to institutional	zed populations				
Hospital patient meals					
Other (please specify)					
3. Are any of the follow their expiration? (cha		your agency for current contracts before			
<ul><li>Contractor(s) can/will vol</li><li>No change possible</li></ul>	e amended to include food service o luntarily use food service guidelines	-			
4. Do your agency's co nutrition standards		anguage on food service guidelines/			
Tes Yes	No	Don't know			
5. Does your agency in (check one answer)	nclude sales reporting of	food items in your contracts?			

### **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
- U Website dedicated to food service guidelines and resources
- Training for food service staff on food service guidelines
- Other (please specify):

Statewide Produce Prescription Program

#### CONTACT MDH OSHII STAFF PRIOR TO CONTACTING SHIP CONTACTS SO WE CAN MAKE THEM AWARE OF THIS PROJECT

Project Name	SHIP Grantee	Project Start Date	Project End Date	Project Contact	Project Contact Email	Project Contact Phone
Le Sueur County Farmers Markets	BROWN- NICOLLET - LE SUEUR - WASECA	1/1/24	10/31/24	Killday, Ashley	ashley.killday@ wasecacounty.g ov; akillday@co.le- sueur.mn.us	507-461- 6167
Food RX	CROW WING	12/18/23	10/31/25	Kelli Johnson	kelli.johnson@c rowwing.us	218-851- 2997
Community Supported Farmers Markets	WABASHA	3/26/24	10/31/25	Tina Moen	tmoen@co.wab asha.mn.us	651-565- 5200
Food Rx	BLUE EARTH	11/1/22	10/31/25	Cierra Thibert	cierra.thibert@ blueearthcount ymn.gov	507-304- 4411
Waseca & Le Sueur Counties Healthy Food Access Network	BROWN- NICOLLET - LE SUEUR - WASECA	2/1/23	10/31/25	Killday, Ashley	ashley.killday@ wasecacounty.g ov; akillday@co.le- sueur.mn.us	507-461- 6167

Sanford Worthington Medical Center- Veggie/Fruit Rx Program	DES MOINES VALLEY (COTTONWOOD- JACKSON- NOBLES)	11/1/22	10/31/25	Hanh Nguyen	hnguyen@co.no bles.mn.us	507-295- 5389
Food RX (RHCC & AFM)	HEALTHY NORTHLAND (CARLTON-COOK- LAKE-ST.LOUIS - AITKIN-ITASCA- KOOCHICHING)	11/1/22	10/31/25	Hannah Colby	hannah.colby@ co.aitkin.mn.us	218-927- 7271 and 218-839- 1549 (work cell)
Farmacy	POLK-NORMAN- MAHNOMEN	11/1/22	10/31/23	Kirsten Fagerlund	kirsten.fagerlun d@co.polk.mn. us	218-281- 3385
Food RX	RAMSEY/ST. PAUL	11/1/22	10/31/25	Frances (Franny) Clary Leiferman	frances.clary@c - o.ramsey.mn.us	
Veggie RX- Produce RX	SCOTT	11/1/22	10/31/25	Casey Steciw	csteciw@co.sco tt.mn.us	952-496- 8276
Veggie Rx	CARVER	11/1/22	10/31/25	Caitlin Huiras	chuiras@co.car ver.mn.us	952-361- 1371
Fresh Food Farmacy	GOODHUE	8/1/22	10/31/24	Gina Johnson	Gina.Johnson@ goodhuecounty mn.gov	651385614 8

Food security work with local clinic (RedCap # 6257-10)	HEALTHY NORTHLAND (CARLTON-COOK LAKE-ST.LOUIS - AITKIN-ITASCA-	11/1/22 -	11/1/24	LaReesa Sandretsky	lareesa.sandrets ky@co.lake.mn. us	
Food Rx	KOOCHICHING) HORIZON (DOUGLAS- GRANT-POPE- STEVENS- TRAVERSE)	11/1/22	6/30/25	Angie Hasbrouck	angieh@horizon ph.org	320-335- 5175
Food Rx	MINNEAPOLIS	11/1/22	10/31/24	Evalyn Carbrey	evalyn.carbrey @minneapolism n.gov	612-673- 2393
Mower County Food Rx	MOWER	11/1/22	10/31/25	Chris Weis	chrisw@co.mo wer.mn.us	507-440- 9240
Fairview Northland Clinical Food Programs	SHERBURNE	10/2/23	10/31/25	Cody Engelhaupt	cody.engelhaup t@co.sherburne .mn.us	
Food RX	CASS	11/1/22	10/31/23	Simon Whitehead	swhitehe@umn. edu	952-220- 1060
Clinic- Community Linkage to Healthy Food	ANOKA	11/1/22	10/31/25	Amanda Zenk	amanda.zenk@a nokacountymn. gov	

Food Rx	DAKOTA	11/1/22	10/31/25	Erin Ostrowski	Erin.Ostrowski @CO.DAKOTA.M N.US	651-554- 6154
Community Gardens at Healthcare Locations- 4200084	FARIBAULT- MARTIN- WATONWAN	1/1/22	9/30/25	Jordan Niles	Jordan.Niles@f mchs.com	507848847 4
Food Rx - REDCap N/A	WINONA	11/1/22	10/31/25	Amber Braun	abraun@co.win ona.mn.us	507-457- 6555
Farmers Market Access Support / Veggie RX - AEOA	HEALTHY NORTHLAND (CARLTON-COOK LAKE-ST.LOUIS - AITKIN-ITASCA- KOOCHICHING)	11/1/22	10/31/23	Josh Gorham	GorhamJ@stlou iscountymn.gov	