A new dinner guest: The emerging role of institutions in food system reform

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Abstract
In North America and Europe, there is a growing movement to use hospital and university food procurement to help support the development of more sustainable, localised food systems. Closely tied to the green procurement and corporate responsibility movements, such practices can offer a way to optimize public institutional spending to support a shift towards more ecologically and socially responsible food systems. Potential benefits include improved access to fresh foods, urban and rural local economic development and reduced environmental impact. While the benefits of institutional food reform may be desirable, using the buying power of large institutions to scale up community-centred food initiatives can present major challenges. In this paper I explore the opportunities and challenges North American institutions are encountering in engaging in food system change. Through four cases studies, I identify key characteristics that are common to this practice in order to better understand this emerging model for food system change.

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Introduction

North American and European governments are increasingly recognizing food as a multi-faceted topic; the state of our industrialized, global food system is connected to a range of issues including the obesity crisis, threats to food safety, declining health of farmers and rural communities, environmental degradation and questions of public security. Recognition of such connections throws into question the common practice amongst public institutions to source the cheapest food possible; participation in the industrial food economy undermines public health and sustainability goals, placing such practices at odds with the mission of our institutions.

In response, a broad-based movement has emerged that seeks to support a shift towards alternative, more sustainable, community-oriented food systems. As part of this movement, there is increased interest in using institutional food procurement as a way to support a more widely spread shift away from the global, industrial food system model. General adoption of Farm-to-school programs have been established throughout North America and Europe that facilitate direct farm purchasing and short supply chains, environmental and nutritional education amongst youth and waste reduction, recycling and reuse. These experiences have inspired similar programs amongst other large institutions, primarily universities and health care facilities. In London, England hospitals are experimenting with reforming cafeteria menus and incorporating seasonal food from small to mid-size local farmers as a means to increase environmental sustainability, support local economic development and better public health. In North America, universities and hospitals alike are changing their food purchasing criteria, in some cases adding explicit language into food service contracts which requires suppliers to source local foods. Review of current large-scale food procurement initiatives, however, reveals a number of barriers to the uptake of sustainable institutional food policies and practices. As will be discussed, these institutional and supply-related challenges make administrative buy-in and partnerships with the non-profit sector essential.

This article begins with a review of the policies and practices of this growing sustainable food procurement movement, as well as some of the common barriers institutions encounter in sustainable food procurement implementation. Case studies highlight institutional approaches to overcoming such challenges, through the identification of common characteristics of the emerging practice of sustainable food procurement in North America.

Components of Sustainable Food Procurement

Typically sustainable food procurement involves the creation of institutional food purchasing preferences, and the adoption of supporting reforms to the food services environment that help facilitate sustainable food procurement.
Purchasing Preferences
The creation of a set of purchasing preferences is a tool used to help guide institutions and their food service contractors in food procurement decisions. These guidelines can take a number of forms, and typically include a ranking of priorities. Yale University’s purchasing guidelines, for example, (see Box 1) offer a level of detail that is capable of guiding purchasers in their decision-making:

**Box 1: Yale University’s purchasing guidelines for vegetables**

<table>
<thead>
<tr>
<th>First Tier (ranked in order of preference)</th>
</tr>
</thead>
<tbody>
<tr>
<td>* Connecticut organic</td>
</tr>
<tr>
<td>* Connecticut ecologically-grown</td>
</tr>
<tr>
<td>* Regional organic</td>
</tr>
<tr>
<td>* Regional ecologically-grown</td>
</tr>
<tr>
<td>* Connecticut conventional (small-scale operation)</td>
</tr>
<tr>
<td>* Regional conventional (small-scale operation)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Second Tier (ranked in order of preference)</th>
</tr>
</thead>
<tbody>
<tr>
<td>* Connecticut conventional (medium-scale operation)</td>
</tr>
<tr>
<td>* Regional conventional (medium-scale operation)</td>
</tr>
<tr>
<td>* U.S. organic (small-scale operation)</td>
</tr>
<tr>
<td>* Connecticut conventional (large-scale operation)</td>
</tr>
<tr>
<td>* Regional conventional (large-scale operation)</td>
</tr>
<tr>
<td>* U.S. ecologically-grown (small-scale operation)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Third Tier (ranked in order of preference)</th>
</tr>
</thead>
<tbody>
<tr>
<td>* U.S. organic (medium/large-scale operation)</td>
</tr>
<tr>
<td>* North America organic</td>
</tr>
<tr>
<td>* U.S. ecologically-grown (medium/large-scale operation)</td>
</tr>
<tr>
<td>* International organic</td>
</tr>
<tr>
<td>* U.S. conventional (small-scale operation)</td>
</tr>
</tbody>
</table>

Source: [http://www.yale.edu/sustainablefood/food_purchasing.html](http://www.yale.edu/sustainablefood/food_purchasing.html)
In this example, first tier products are preferred over second tier, and second tier, over third tier. The ‘forger’, a full-time staff person who advises food services on what food to purchase, then uses this clear ranking to guide their recommendations.

Portland State University provides another example of purchasing guidelines, which specify the percentage goal of local food by product type (see Box 2).

**Box 2: Portland State University purchasing guidelines.**

Maintain minimum annual levels of local foods procurement (local to be defined as products grown and processed in the Northwest [Oregon, Washington, Idaho, and Northern California] with an emphasis on Oregon and Washington grown and processed products with a 150 mile radius of the campus). We strive to exceed these minimums to the fullest extent economically possible:

I. 30% annual average of total cost of sales, increasing at 2% per year
II. 30% annual average of fruits and vegetables purchased, increasing at 2% per year
III. 100% milk and dairy products
IV. 100% eggs
V. 50% flour purchased, increasing when economically viable
VI. 50% beef purchased, increasing when economically viable
VII. 15% poultry purchased, increasing when economically viable
VIII. 30% pork purchased, increasing when economically viable
IX. 100% salmon and tuna procured in accordance with the Monterey Bay Aquarium "Seafood Watch" sustainable fisheries guide.


Generally, sustainable food policy advocates recommend quantifying goals as much as possible, in order to assess progress from year to year. It is also recommended that these goals be expressed in percentages of dollars spent, rather than by weight, as this is more easily tracked.

Institutions can use purchasing guidelines to sustainable food procurement in three distinct ways. They can source local food: i) outside of existing food service contracts, ii) through existing ones or, iii) through the creation of new contracts that include explicit sustainable food sourcing criteria. Typically large institutions sign two to three year contracts with major food service providers, such as Sodexo or Chartwells. These agreements often commit institutions to spending upwards of 80-90% of their food budget on purchases from these corporations. Nevertheless, institutions can sometimes make purchases outside of their contract without contributing to the contractually allowed percentage of externally purchased food if a similar product is not available. Depending on the flexibility of the definition of similar in contract wording, this may present an opportunity for purchasing local food outside of such contracts. However, if an institution wishes to work directly with local farmers and smaller distributors, these contracts can present serious limitations to scaling up local food procurement.
An alternative route to sustainable food procurement is to work with major food distributors within existing contracts to increase the amount of food procured locally. A number of hospitals and universities have experimented with this approach, and have achieved varying levels of success. Major distributors often lack source information and have, in some cases, been reluctant to increase their capacity to identify local foods.

While certain institutions have attempted to increase the amount of local food they procure without altering existing food services contracts, many institutions find it necessary to integrate these types of purchasing preferences and goals directly into new contracts. For example, after attempting to work within their existing food contract, The New Milford Hospital in Connecticut decided to issue an RFP in 2008 that reflected their commitment to local, sustainable food. The RFP required the new contractor to sign Health Care Without Harm’s (HCWH) Healthy Food Pledge, and committed the new food service provider to a range of specific deliverables. In Canada, similar sustainability criteria have been incorporated into the University of Toronto and McGill University’s most recent contract specifications with food services (for details, see case studies). In both of these cases, local food purchasing commitments were incorporated into food service RFP’s.

Farmers’ Markets & Community Supported Agriculture

Running onsite farmers’ markets and Community Supported Agriculture (CSA) programs for staff and community members are other popular ways institutions can increase access to healthy local food while increasing distribution channels for farmers. Of HCWH pledge signers, 25% reported that they run farmers’ markets. 25% host CSAs. One such institution, Kaiser Permanente, conducted a survey of market users. Of the 1238 respondents, 71% indicated they eat more fruits and vegetables as a result of shopping at the market, offering evidence that increased access to local foods can also promote healthy eating habits amongst patients, staff and local community users.

Onsite Kitchen Gardens

A number of hospitals have developed both on and off-site gardens as part of their food system initiative. The potential benefits of food gardens are multiple; they can enhance the patient environment, help increase the visibility of an institution’s food-related work, raise awareness about local foods, increase neighbourhood green spaces and lend support to local urban agriculture initiatives (see CHW case study, for example). In the case of New Milford, food and herbs grown in hospital gardens have also been used to offset the prices of sourcing other foods locally. Other examples of hospital-sponsored gardens include the following:

- St Mary’s Regional Medical Centres – These centres sponsor 15 gardens in 4 diverse neighbourhoods in Lewiston, Maine.
- Dominican Hospital – An on-site garden supplies flowers and produce to the hospital cafeteria.
- Fairview Hospital – This hospital has a programme with a local school that grows herbs as part of their curriculum and supplies them to hospital.
Supporting Food Environment Reform

Institutions that have sought to increase the amount of local, seasonal produce they procure have introduced other supporting reforms into the institutional food environment. These reforms range from instituting more seasonal and vegetarian menus to ‘healthy eating’ public education campaigns. The goals of these complementary initiatives are often multiple. They typically offer ways to facilitate institutional sustainable procurement, while also increasing the scope of benefits associated with sustainable food procurement. Common initiatives include menu reform, cafeteria reform, healthy vending, public education campaigns and waste reduction, as described below:

Menu reform

The development of seasonal menus is an important strategy for increasing the amount of local food in particular. Two-thirds of institutions in the HCWH network reported having added seasonal menu items as a way to increase their sustainable food procurement efforts. Many institutions that have experimented with offering seasonal cafeteria menus have found that sales have increased as a result. Thus cafeteria menu reform may also be used to help generate revenue and support additional improvements to patient services.

Vegetarian menus provide an additional way to improve the sustainability of institutional food. The recently revived international campaign, Meatless Mondays, has been adopted by a number of institutions attempting to improve the sustainability of their food services. McGill University and Aramark recently joined this campaign.

Cafeteria reform

Investments in food service capacity and/or kitchen upgrades are often required for hospitals to begin preparing seasonal menus. As Sachs and Feenstra note, reinvesting in staff skills is often necessary. In the case of the John Muir hospital in California, for instance, hiring a new executive chef who was a leader in promoting local foods in restaurants was vital to successful menu reform, which placed a new emphasis on meals prepared from scratch. Other necessary investments often include food processing, storage equipment and general kitchen upgrades. Experiences from the more established school to farm movement have provided an invaluable resource in this regard. To facilitate exchanges with school food pioneers, the London Hospital Project has hosted events for hospital caterers about the changes that schools made to their cafeteria systems.

Healthy vending

Improving the quality of vending machine food can help further improve the hospital food environment and add to the coherence of hospital food initiatives. Of HCWH pledge signers, 47% report that they increased the amount of healthy products in vending machines by 50%. In British Columbia, some institutions participating in the Healthy Food and Beverage Sales in Recreation Facilities and Local Government
Buildings found that increasing the offer of healthy food in vending machines increased profits, dispelling the common misconception that users will simply not buy healthier options. Simultaneously improving the quality of cafeteria food is a way to complement healthy vending machine initiatives by creating an overall healthy food environment.

Public education

Institutional food reform is also a powerful way to promote healthy, environmentally and socially responsible eating amongst users and staff. The potential to promote better eating practices by setting an example at the institutional level can be enhanced by public awareness campaigns. At the John Muir Hospital, for instance, diétitians working on the institution’s local food initiative share information on their efforts through the hospital’s newsletter and intranet, primarily targeting hospital staff. Similarly, Fairview Hospital in Massachusetts encourages their staff to adopt healthy eating habits as part of their Wellness at Work initiative. This initiative includes frequent fruit buyer cards that function similar to coffee cards, and discounts to local gyms.

Hospitals have also developed innovative awareness-building incentive programs for patients. New Milford Hospital has created an alternative currency for the hospital farmer’s market which doctors give patients as a way to encourage healthier eating habits. A number of hospitals, including Saint Luke’s, have developed cafeteria displays that outline the connections between local food systems and individual and environmental health.

Some institutions have also extended their education campaigns outside hospital walls. New Milford Hospital, for example, offers local food growing and cooking classes to neighbouring schools. Other institutions have used broader public education as a way to generate political and industry buy-in. The London Hospital Food Project, for instance, collaborated with a photographer to produce the Harvest for Health photo exhibit to raise the visibility of the initiative. This exhibit was displayed at City Hall and tours of participating hospitals were organised. Several of the participating hospitals also organised high profile events, such as Brompton Breakfasts and British Food Fortnights, to draw attention to their efforts to incorporate local foods.

Waste reduction

Reducing food-related waste is key to improving the sustainability of institutional foods systems and can complement the goals of sustainable food procurement. While not strictly part of the procurement system, a brief overview of some of these reduction strategies has been conducted, as many of these strategies have accompanied institutional sustainable procurement initiatives.

Catholic Healthcare West System, for instance, is an American HMO that has worked with local food suppliers to reduce packaging; food vendors now deliver produce in reusable bins. Waste diversion and reuse can offer additional benefits to the local community. Saint Luke’s Hospital donates excess...
cafeteria food to America’s Second Harvest and the Northern Lakes Food Bank. Excess food is packaged, labelled and frozen to increase the effectiveness of this strategy, resulting in approximately 10,000 meals that are diverted annually. In Montreal, the Jewish General Hospital gives excess food to The Cummings Centre for their meals on wheels and lunch programs for seniors.

On and off-site institutional composting in lieu of city pick up is another common waste reduction strategy also pursued by Saint Luke’s and other HCWH pledge signatories. Other hospitals, including Dartmouth Hitchcock, Aurora Health Care and Sinai Hospital of Baltimore have agreements with local groups that collect fryer oil for the creation of biodiesel, creating a mutually beneficial partnership that decreases the environmental footprint of the institution while supporting the social economy.

Challenges

While institutional sustainable food procurement can offer many benefits, the experiences of institutional sustainable food procurement pioneers reveal challenges common to the institutional context. Many of these challenges are not surprising insofar as many of them relate to the very goals of sustainable food procurement; they stem from attempting to use institutions to help establish the development of more responsible, sustainable food production and distribution channels. Institutions wanting to source more sustainable food, for instance, face a lack of sustainability information in the food chain, as well as a lack of local supply and distribution infrastructure. Furthermore, sustainable food procurement efforts are often further frustrated by a lack of institutional buy-in. Each of these challenges is described further in the following section.

Such challenges do not mean that sustainable food procurement is unfeasible. However, they underscore the need for innovative approaches to sustainable food procurement. As the case studies that follow reveal, successful sustainable food procurement initiatives recognise and address these challenges.

Lack of Sustainability Information in the Food Chain

Regardless of whether an institution chooses to renegotiate food service contracts, or work within existing ones, it is often difficult know where and how different food items have been produced. A single, holistic sustainable food certification does not exist in many locales (with the notable exception of the recently developed Local Food Plus (LFP) label in Ontario, which takes into consideration a number of sustainability criteria). Unless purchasing directly from farmers, institutions and their food service providers must therefore sort through the multitude of food labels claiming to support sustainable food systems. Generally each of these labels indentify distinct aspects of sustainability, be it eco-system health or fair labour conditions.

In Quebec, for instance, the following labels are available for food grown within the province:
**Aliment du Québec**

A product bearing the Aliments du Québec label must meet two conditions: i) The product must contain at least 50% of Quebec grown ingredients and ii) 80% of fabrication and transformation costs are realised in Quebec. In cases where the primary material is not available in adequate quantity or quality within the province, a product may still be certified if all transformation and packaging occurs in Quebec34.

**Québec Vrai**

Québec Vrai is the provincial organic certification body, which ensures that participating producers comply with provincial organic guidelines. A product marked with the Québec Vrai logo is recognized as having received certification that is equivalent to federal organic regulations35.

While these labels offer two different indications of food sustainability, neither should be considered to reflect a holistic product assessment. The Aliments du Québec label, for instance, does not consider the environmental impacts of different farming practices. Neither label includes measures of how food production and distribution practice support community food security or the social economy.

The difference between first-party labels and third-party labels adds to the confusion and complexity. For instance, compliance with first-party labels, often used by producers, is not verified. As Health Care Without Harm argues, these labels are often used to mislead buyers, and are of little to no use when attempting to support a sustainable food system36. When purchasing organic and fair-trade items, third-party certification, especially when working through an intermediary distributor, is preferable, as this means that producers’ claims have been independently verified37.

**Lack of Local Supply and Distribution Infrastructure**

In interviews Sachs and Feenstra conducted with foodservice staff in hospitals that have experimented with buying local produce, high volume needs were identified as one of the primary challenges institutions encountered38. Large institutions are accustomed to consistent supply of large quantities of food year-round. However, in many cases, supply of local food is limited, due in large part to rural decline and the consolidated, globalised nature of food production and distribution. Initiatives that help increase the vitality and productivity of local food production and distribution networks are required. This includes investments in new farmer training, food processing infrastructure, and local food distribution warehouses. As the case studies demonstrate, institutional food procurement policies and agreements can help create a secure market that can, in turn, encourage the growth of local agriculture and food systems.

Of course, the nature of local food means that that supply varies seasonally, and is often subject to last-minute changes depending on weather, pests and other variations in growing conditions. Thus increased menu changes and increased administrative flexibility are also often required.
Lack of Institutional Buy-in

Formal support from administration is often key to instituting sustainable food procurement; sustainable food procurement often requires significant changes to food services, including investment in human resources, budgetary reallocations and strategic planning. Changes to the administrative structure of food services are also often required. For instance, the systems used in hospitals today have been stand-ardized and streamlined by major suppliers, who often offer electronic billing, and tracking and financial analysis tools for the convenience of their customers. This structure makes it difficult to incorporate smaller contractors, and efficiency is often lost when working with smaller suppliers or when working directly with producers who have little experience selling to large institutions.

Investments in foodservices staff training also hinges on institutional buy-in. Sustainable food procurement typically involves the preparation of more seasonal, fresh meals using produce that staff are often unaccustomed to preparing. Because foodservice positions are often treated as low-skill positions, chefs are rarely employed and staff members who are responsible for ordering food often do not the mandate or skills to begin substituting local foods. Incorporating seasonal patient menus demands further skill, as menus must also be suitable for a diverse group of patients, often with restricted diets.

Adaptations to food services budget allocations are key to making sustainable food procurement financially feasible. Public health institutions in Canada have a particularly limited budget to spend on patient food. In Quebec, the cost of patient meals is fixed at $4.00 per meal. Given these restrictions, it is not surprising that cost of sustainable food procurement is typically perceived as the greatest barrier to improving the sustainability of institutional food services. However, remedying cost inefficiencies can make sustainable food procurement affordable. Turenne, an institutional food systems consultant in the United States, finds he is often able to make buying recommendations that do not increase overall operating costs. In one case, for example, he counselled a hospital to switch to buying bulk organic fair-trade coffee from a neighbouring coffee roaster. This allowed the institution to save approximately 30%, while also reducing packaging and waste.

By introducing sustainable foods strategically, institutions can balance increased costs in certain areas with savings in others. For instance, the New Milford hospital in Connecticut instituted a local foods program without increasing the costs of patient meals by employing a combination of cost-saving strategies. These strategies included menu simplification and reform, where higher costs meats were reduced and replaced with less expensive, healthy and sustainable vegetarian options. Further costs savings were realised through a volunteer-run herb garden, as herbs are one of the most expensive products used.

The London Hospital Food Project, which attempted to increase the amount of local foods in four hospitals by 10% over the course of two years, revealed the effectiveness of similar cost-offsetting strategies. While the costs of some local produce increased, savings came from lower prices during seasonal gluts and from the use of higher quality products, which were found to produce less waste and greater patient satisfaction from smaller quantities. In addition, hospitals participating in the project found that local produce and seasonal menus were associated with increased cafeteria sales. This increase was then used
to off-set patient meal costs. Use of cafeteria sales to off-set patient meals is already a common practice in North America, making this a particularly suitable option for hospitals.

In addition to supporting the administrative and financing changes required for sustainable food procurement, institutional buy-in is necessary to implement supporting changes to the institutional food environment through vending machine reform, or public education campaigns. It is key to moving from isolated community food system initiatives, such as a staff CSA programmes or cafeteria initiatives, to more comprehensive, coherent institutional food reform.

Although there are a growing number of institutions that are attempting to improve the sustainability of their food procurement, there are many reasons why gaining administrative support can difficult. For instance the perception that food services lie outside of the institution’s main mandate can act as a barrier. Food services are associated with operations, not education or preventative healthcare. In addition, the complexity of local food objectives can make the rationale difficult to communicate to relevant staff.

Case Studies

Despite the important challenges to implementing sustainable food procurement, institutions across Europe and North America are developing innovative ways to support the growth of community food systems through sustainable food procurement. The following case studies have been selected because they demonstrate the possibilities for sustainable food procurement in institutional settings and illustrate exemplary strategies to overcome key challenges associated with sustainable food procurement, from innovative supplier-development strategies to the development of institutional food policy. Preference has been given to the examples from North American. Institutions within this context face similarly limited government support, despite major differences in public financing. While the Canadian examples involve universities not hospitals, these institutions use similar food service providers as hospitals. Furthermore, their experiences demonstrate the feasibility of sustainable food procurement in northern growing climates.

Kaiser Permanente

Overview

Kaiser Permanente is the oldest and largest private non-profit integrated health care provider in the US, with 8.6 million patients, 37 medical centres and 431 clinics. All food-related initiatives are guided by the institution’s comprehensive food policy, which states:

“Kaiser Permanente aspires to improve the health of our members, employees, our communities and the environment by increasing access to fresh, healthy food in and around KP facilities. [They] promote agricultural practices that are ecologically sound, economically viable and socially responsible by the way [they] purchase food”
The organisation’s food initiatives form part of larger mandate to provide community benefits to staff, patrons and surrounding neighbourhoods, particularly as they relate to long-term health promotion. Food-related projects are overseen by the health care providers’ Community Benefit Department.

**Key Components**

- comprehensive food policy
- on-site farmers markets
- CSA delivery for staff
- local food procurement
- partnerships to help source local food
- vending machine reform
- low-sodium, heart-healthy home delivery service
- Food Farm’acy
- advocacy

**Background**

Kaiser Permanents’ concern for sustainable food grew from the initiative of Dr. Preston Maring, a physician at KP’s Oakland Medical Centre, who believed his hospital should provide a healthier, more sustainable alternative to typical hospital food. In 2003, Dr. Maring formed a committee that launched KP’s first on-site farmers’ market. The initiative has since expanded, in partnership with non-profit local market management organisations, to a total of 32 farmers’ markets across five states. KP has also developed a comprehensive food policy (2006), local procurement initiatives and cafeteria and vending machine reform measures. They recently hired a Sustainable Food Systems manager to oversee the initiatives.

**Description**

Kaiser Permanente’s comprehensive food policy outlines seven guiding principles for food reform (see annexe 1), as well as explicitly ranked institution priorities. These priorities are as follows:

1. to increase the availability and consumption of fresh fruits and vegetables,
2. to purchase food that is free from pesticides, hormones and non-therapeutic antibiotics, and
3. to increase the proportion of KP food that is locally sourced.

KP hospitals host number of initiatives that meet this mandate, including on-site farmers’ markets in hospitals located in food deserts and CSA deliveries for staff. In the fall of 2005, Kaiser Permanente conducted a survey of market users. Of the 1238 respondents, 71% indicated they eat more fruits and vegetables as a result of shopping at the market. 63% reported eating a wider variety of fruits and vegetables.

At KP’s Oakland Medical Centre, the HMO hosts a ‘Food Farm’acy’. Run by a local grocery chain, the Food Farm’acy emphasises healthy foods and has nutritionists on staff to advise patients. As Dr. Mar-
ing states, this initiative, alongside farmers’ markets “[is] a very visible way of saying that we believe that health maintenance starts with what you do for yourself personally, and there’s nothing more important than what you eat”51. Cafeteria and vending machine reform has been pursued to get junk foods out of hospitals, helping to further create a coherent message and food environment that encourages healthy eating.

Twenty two of Kaiser Permanente hospitals in Northern California have begun purchasing local food, with approximately 75 tons of local food sourced annually, representing roughly 10% of the institutions’ food served. These purchasing initiatives have been facilitated by working directly with food supplier distributor Fresh Point, in partnership with the Community Alliance for Family Farms (CAFF)52. These networks, partnerships and alliances have allowed KP to source local food for patient meals through their regular food service contracts, without having to add sustainability criteria to food service contracts. It has also assisted small growers in entering major distribution chains. A community benefit grant from KP has helped the Alliance to expand its institutional procurement initiative to UC Berkley, Stanford University and seven local school districts. Some KP hospitals have also begun to work sustainability criteria into food service contracts to increase the proportion of local and sustainable food that is sourced.

According to Dr. Maring, it is not yet feasible to begin offering freshly prepared restaurant-quality meals due to the size of many of Kaiser’s hospitals. While smaller health care facilities may find it feasible to overhaul menus and offer seasonal dishes, KP has had the most success incorporating local items by serving fresh fruits and vegetables, as well as eggs and hormone-free dairy, as these products require little additional preparation.

A leader in food sustainability in the health care, KP has taken up an advocacy role, producing reports and policy briefs, undertaken as awareness raising and advocacy campaigns surrounding food issues. These include efforts to educate leaders about the adverse effects of the industrial food system on human and ecological health, promotion of food procurement policies that help support the development of a more sustainable food system, and advocacy of government policies that can promote such a shift53.

Dominican Hospital, Catholic Healthcare West (CHW)

Overview

Like KP, CHW is another of the largest non-profit hospital systems in the United States. According their Food and Nutrition Vision Statement, CHW recognizes

that food production and distribution systems have wide ranging impacts on the quality of ecosystems and their communities [and] that healthy food is defined not only by nutritional quality, but equally by a food system which is economically viable, environmentally sustainable and which supports human dignity and justice54.
The statement calls for sustainable food procurement that takes environmental, social and economic aspects of the food system into consideration, in addition to source labelling, environmentally-friendly packaging and public education. A key aspect of this undertaking is CHW's partnership with local non-profit Agriculture and Land-Based Training Association (ALBA) that is involved in supplier development.

**Key Components**

- food vision statement
- local food procurement
- partnerships to help develop supply and distribution networks
- CSA delivery for staff
- on-site gardens

**Background**

Their development of local food sourcing grew out of CHW's involvement in the corporate environmental responsibility movement, which led them to be one of the first healthcare systems to commit to recycling and water and energy conservation goals. Their commitment to revise food procurement policies is an extension of their reassessment of the sustainability of their purchasing practices.

**Description**

Following the adoption of their food vision statement, Dominican Hospital, a CHW hospital in Santa Cruz, California, began buying a portion of the food used for patient meals from ALBA. ALBA provides training and business opportunities to local farmers, acting as an incubator for new farms by leasing land to limited-resource farmers. This strategy has made farming careers more accessible to new immigrants and has helped increase the number of local farms. Additionally, ALBA began an organic produce distribution company, ALBA organics, which provides packaging, storage, delivery and marketing services to farmers. This has increased farmer access to local restaurants, grocery stores and institutions, including Dominican Hospital.

Dominican Hospital, through ALBA, has requested certain crops from farmers in exchange for buying commitments. These advanced sales have resulted in a secure market for farmers and lower prices for the institution. The hospital's purchasing through ALBA, however, falls outside of its contract with their Group Purchasing Organisation (GPO). According to this contract, the majority (80%) of Dominican Hospital's food must be purchased via the GPO, which buys produce on contract from ProPaci Fresh. ProPaci Fresh, the regional distributor, reports that 70-80% of its produce is sourced from Northern California, but Dominican Hospital has found no way to verify this – ProPaci Fresh does not provide information on where individual items. In response to this lack of information, the hospital plans to require future bidders to improve sourcing and reporting practices in upcoming contract negotiations.

In addition to attempts to source patient food locally, the Dominican Hospital runs a CSA for staff, as well as an on-site garden. Begun as an initiative of several staff members, this garden provides the hospital...
with produce and flowers. While the garden has not been a cost-savings device, it has been a way to attract public attention to the hospital’s food initiatives. Staff and neighbourhood residents report that it has been a significant community-building project. Neighbourhood high schools have become involved; hospitals staff and community members have donated skills, money and equipment.

**University of Toronto**

**Overview**

The University of Toronto (U of T) has decided to increase the proportion of local and sustainable foods served on campus through the addition of sustainability criteria into food service contracts. Their partnership with Local Food Plus (LFP), a new sustainable food label, has been key in tracking, measuring and evaluating progress toward sustainable food procurement.

**Key Components**

- local food procurement
- partnership with local food certifying organisation
- local food promotion through local food days and featured ingredients

**Background**

Working with local food sustainability activists and experts, U of T decided to write sustainability criteria into their request for proposals for a new food services contract. Local Flavour Plus (now Local Food Plus), assists the university and its food service provider in working with local farmers, and increasing the supply and diversity of local foods. The food services contract was awarded to Chartwells and Aramark, two major food distributors, who have since been working with the university and LFP to source food locally.

**Description**

The incorporation of local foods onto the menus of U of T menus has been modest and gradual. The 2006 contract with Aramark and Chartwells required 10% of food to be LFP certified. According to university chef Jaco Lokker, during the first year, this goal was difficult to meet as institutional demand was much greater than the supply. However, the network of local farmers certified through LFP has since grown, increasing both the quantity and diversity of foods available locally. As of 2009, 20% of the food served at Chester residence was LFP certified.

LFP certification facilitates mutually beneficial relationships between local farmers and institutions, encouraging more sustainable local growing and buying practices. Through the creation of a flexible point system, LFP encourages the transition to a more sustainable food system. For instance, LFP certified farmers must grow and sell within the province, but farmers receive an additional 50 points for selling within a 200 km radius. The point system also takes a wide range of sustainability criteria into considera-
tion, including biodiversity, energy use and labour conditions. As Friedman points out, LFP certification offers two key advantages over organic certification\textsuperscript{56}: 1) It is not an all or nothing proposition. While transitioning to organic can involve several years of decreased profits and productivity before certification is granted, LFP certification supports farmers throughout their transition to more sustainable farming practices. 2) LPF certification unites a number of sustainability indicators. Unlike other sustainability labels (certified organic, fair trade, etc.), LFP certification is granted on a broad assessment of sustainability, which includes environmental and social considerations.

**McGill University**

**Overview**

Like U of T, McGill does not have an institutional sustainable food policy \textit{per se}. Nevertheless, working with a student organisation, the McGill Food System Project, the University has recently integrated sustainability criteria into their food services contract with Aramark to improve the sustainability of campus food. This includes local food commitments, mandatory composting, and an increase in vegetarian meals.

**Key Components**

- development of sustainability criteria and local food procurement commitments
- sustainable food procurement that vary according to season
- stakeholder involvement
- on-site composting
- awareness building campaigns

**Background**

The McGill Food Systems Project formed in 2008, with the aim of improving the sustainability of campus food\textsuperscript{57}. In the spring of 2009, the group received funding from several organisations that allowed them to hire student researchers. These researchers investigated institutional procurement, producing reports on the structure of food services at McGill and the availability of sustainability information in the food chain. In addition to this research, the group began working with food services and University administration to better understand the institutional context. They have also organised local food days in each of the residences, and collaborated with students and instructors in two courses.

In the fall of 2009, members of the McGill Food Systems Project were approached by the University administration to help write an RFP for food services. Students were also involved in negotiations with potential suppliers, which began in the March of 2010. A contract with new sustainability criteria was signed in April, committing the new food service provider, Aramark, to mandatory minimum local purchasing and mandatory composting of pre-consumer waste.
Description

Aramark has committed to purchasing 75% local food in late summer and fall, 50% throughout the winter, and 25% during the spring. Following recommendations produced by the McGill Food System Project, local food has been defined as food that is grown within 500 km, with an emphasis on food grown within 200 km. By defining local by geographical distance, rather than political boundaries, Aramark is able to purchase food from key agricultural regions that lie just outside of the province in Ontario’s greenbelt and in Vermont. The decision to define local by kilometres was also in response to perceptions that political definitions violate free trade policy, (although there is ambiguity about whether a definition based on political boundaries actually creates legal issues).

Of course Aramark’s suppliers presently do not specify where many of their products were grown, or how many kilometres individual items have travelled. To deal with this lack of information available through present distribution chains, the McGill Food System Project recommended a two-pronged approach. Following the examples of U of T’s work with LFP, and UC Berkley’s work with CAFF, they recommended McGill work with a non-profit that can act as an intermediary between local farmers and food services. The group approached Équiterre as a potential partner. However, due to funding difficulties, the NGO has thus far not been able to expand the capacity of their institution to farm direct buying initiative. Discussions with LFP about expansion into Quebec are presently underway. Following Yale’s example, the McGill Food Systems Project also recommended hiring a new full-time staff member who could coordinate food sustainability efforts. The hiring process for this position is currently underway.

Regarding composting, McGill purchased an institutional composter for the campus, which Aramark has committed to using for all preconsumer waste. Other food initiatives include hosting Meatless Mondays and more local food days. Aramark has also been working with a high-profile chef from Arizona who has expertise in seasonal menu development.

Aramark is responsible for 40% of food services on campus, with the school managing the other 60%. The McGill Food Systems Project is currently developing a new RFP for the suppliers and distributors with whom the University works directly.

Summary

The emerging policies and practices of the sustainable food procurement movement offer ways public institutions can contribute to the development of more sustainable, just food systems. Procurement of more sustainably produced food, either through the inclusion of sustainability criteria into food service contracts, or through work with farmers directly, can help promote new production and distribution networks. These networks, in turn, create local economic development opportunities, as well as opportunities to increase access to healthy food while reducing the negative environment effects of food production and distribution. Supporting reforms to the institutional food environment – from seasonal menus to vending machine reform – can help increase the positive impacts of such procurement measures; they
can facilitate the inclusion of seasonal foods and create a more coherent public health message. However, attempting to use institutional buying-power to support the development of community food systems is complex; the growth of more sustainable food production and distribution networks demands flexibility and cooperation on the part of all stakeholders. The sustainable food procurement initiatives of Kaiser Permanente, Catholic Healthcare West, U of T, and McGill University have been shaped by the challenges they have encountered in implementing sustainable food procurement. In all of these cases, partnerships with NGOs, farmers and food system activists have been integral in helping develop the supply of more sustainably produced local foods (see figure 1).

**Figure 1**: Comparison of elements of sustainable food initiative at four North American Insitutions

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Kaiser Permanente</th>
<th>Dominican (CHCW)</th>
<th>University of Toronto</th>
<th>McGill University</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Institutional Sustainable Food Policy</strong></td>
<td>yes</td>
<td>yes</td>
<td>no</td>
<td>no</td>
</tr>
<tr>
<td><strong>Partnerships</strong></td>
<td></td>
<td>x</td>
<td>x</td>
<td>x tbd</td>
</tr>
<tr>
<td>with NGOs</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>tbd</td>
</tr>
<tr>
<td>with farmers</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>tbd</td>
</tr>
<tr>
<td>with suppliers</td>
<td>x</td>
<td>x</td>
<td></td>
<td>tbd</td>
</tr>
<tr>
<td><strong>Sustainable Food Procurement</strong></td>
<td></td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>outside existing contracts</td>
<td></td>
<td>x</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>within existing contracts</td>
<td>x</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>through the creation of new food service contracts</td>
<td></td>
<td>x</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>engagement in supplier development</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
<td>tbd</td>
</tr>
<tr>
<td><strong>Complimentary Food Initiatives</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>onsite farmers market</td>
<td>x</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>onsite CSA programme</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>onsite gardens</td>
<td></td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>menu modifications</td>
<td>x</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>cafeteria reform</td>
<td></td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>vending machine reform</td>
<td>x</td>
<td></td>
<td>x</td>
<td></td>
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<tr>
<td>public education</td>
<td>x</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>Advocacy</td>
<td></td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>waste reduction</td>
<td></td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
</tbody>
</table>

*Note: many of the characteristics of the McGill University case study are to be determined (tbd), as the project was in its initial stage at the time of research.*

In addition to partnerships, goal setting also emerges as an important characteristic of sustainable food procurement initiatives. KP and CHW have used food policy to institutionalise sustainable food system goals. Through food policy, the aims of sustainable food procurement are integrated into the wider mandate of these two hospitals. In Canadian universities, institutional food policy has not been as important, suggesting that food policy is prioritized within healthcare institutions due to their public health mandate. Regardless, these universities have been able to integrate sustainability criteria into their food service contracts (see figure 1). These contractual changes are key, in that they define measurable targets that contractors are obliged to meet. Both KP and CHW are currently in the process of incorporating similar criteria into the new RFPs.
However, as all cases demonstrate, in order for this approach to be feasible, the supply and distribution chain must be further developed, both to increase the offer of more sustainable food, and to improve the availability of sustainability information in the food chain. All of the institutions discussed are involved in various forms of supplier-development (see figure 1). The results of such efforts are significant but incremental.

While some may find the incremental nature of food system change frustrating, the institutions profiled are doing more than making minor changes to food services. The partnerships formed and supported through such initiatives have allowed for the expansion of community food systems (with the exception of McGill University’s initiative, which has yet to begin in earnest). The benefits of sustainable food procurement initiatives – local economic development, greater environmental sustainability and, in some cases, increased food security – are multiplied through such collaboration.
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Harm, W. H. O. a. H. C. W. Healthy Hospitals, Healthy Planet, Healthy People: 32.


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Endnotes


8 Buck, M. A Guide to Developing a Sustainable Food Purchasing Policy, Food Alliance: 16.

9 Sachs, E. G. F. (**). Emerging Local Food Purchasing Initiatives in Northern California Hospitals. Davis, Agricultural Sustainability Institute.

10 Buck, M. A Guide to Developing a Sustainable Food Purchasing Policy, Food Alliance: 16.

11 Sachs, E. G. F. (**). Emerging Local Food Purchasing Initiatives in Northern California Hospitals. Davis, Agricultural Sustainability Institute.


13 Health Care Without Harm is a coalition of healthcare facilities, professionals, community organisations and non-profits, boasts over 300 signatories of their Healthy Food in Healthcare pledge, which dedicates institutions to voluntarily improving the quality and sustainability of hospital food services


15 Harm, W. H. O. a. H. C. W. Healthy Hospitals, Healthy Planet, Healthy People: 32.

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http://www.stayactiveeathealthy.ca/managers/success_stories.html


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Ibid.

http://www.alimentsduquebec.com/?action=presentation

http://www.quebecvrai.org/news/a-good-news-for-the-organic-industry-_18


Health Care Without Harm’s Eco-Label guide is a helpful resource written specifically for hospitals wishing to increase the sustainability of the food they purchase. It is available at: http://www.noharm.org/us_canada/issues/food/guide.php#purchasing

Sachs, E. G. F. (**). Emerging Local Food Purchasing Initiatives in Northern California Hospitals. Davis, Agricultural Sustainability Institute.

Ibid.
40 Ibid.


48 This department performs a variety of functions, from best practices research to the allocation of grants to local community initiatives across the United States.


50 http://www.sustain.org/hcwh/details.cfm?type=news&ID=134

51 ibid

52 CAFF is a coalition of farmers and urban activists who’s mission is to “build a movement of rural and urban people to foster family-scale agriculture that cares for the land, sustains local economies and promotes social justice”. More information can be found at: http://www.caff.org/join/history.shtml.


54 Sachs, E. G. F. (**). Emerging Local Food Purchasing Initiatives in Northern California Hospitals. Davis, Agricultural Sustainability Institute.

55 A similar farm incubator model has been used successfully in Ontario by Farm Start. see http://www.farmstart.ca/ for details.

56 Friedmann, H. (2007). “Scaling up: Bringing public institutions and food service corporations into the project for a local, sustainable food system in Ontario.” Agriculture and Human Values(24).


58 Percentages are of dollars spent.