green town

Food is Medicine

Jen Nelson, Seven Generations Ahead

Jennifer Herd, City of Chicago Department of Public Health

Jennifer M. Grenier, Loyola MacNeal
Hospital





Addressing SDOH During a Pandemic – Just say YES! SURPLUS PROJECT

Jennifer Grenier DNP, RN, CENP, Associate Chief Nursing Officer, Loyola MacNeal Hospital Regional Executive Director,



Definition



sur·plus

(sûr'pləs, -plŭs') adj Being more than or in excess of what is needed or required: surplus grain

n. 1. An amount or quantity in excess of what is needed





Reflection



"For I was hungry and you gave me food,
I was thirsty and you gave me drink, I was
a stranger and you welcomed me."

• *Matthew 25:35*

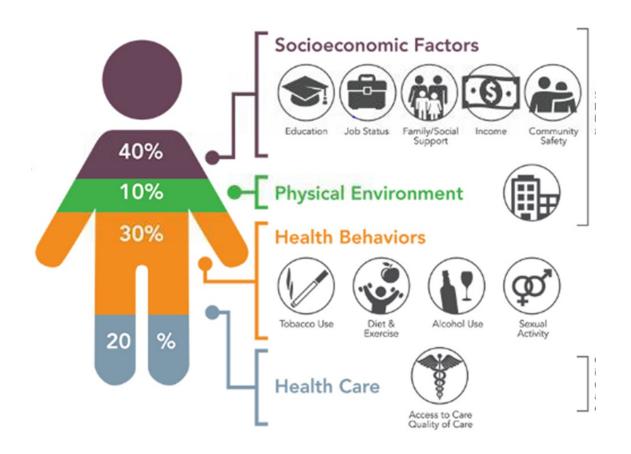




Social Determinants of Health



"Community: It's where all this happens".





Current State in the U.S.



FOOD WASTE IN THE U.S. IS...

EXCESSIVE

40%

OF ALL FOOD PRODUCED IN THE U.S. IS WASTED



133 BILLION POUNDS

Food wasted per year.
That represents 1,249
calories per person, per day.

EXPENSIVE



\$161 BILLION

Uneaten food at retailers, restaurants, and homes costs \$161 billion annually



\$1,500

Per capita, this amounts to over \$1,500 for a family of four

ENVIRONMENTALLY HARMFUL



Food makes up 20% of landfill weight—the single largest municipal waste source



The methane released by food is a greenhouse gas 21 times more powerful than carbon dioxide

<u>AN OPPORTUNITY</u>



Diverting 15% of the food that currently goes to waste would be enough to cut the number of food insecure Americans in half



Food waste can be composted into sustainable soil additives or be used to generate electricity



Encouraging institutions to purchase so-called "ugly" produce would help farmers find new markets for healthy products that currently go to waste

All statistics from U.S. Department of Agriculture and Environmental Protection Agency www.pingree.house.gov/foodwaste



The Why?



- Since the start of the Covid-19 pandemic, there has been a 51% increase in food insecure households in Cook County, and specifically the West Side. This is equivalent to 270,000 people facing food insecurity in 2020 (Feeding America, 2020)
- West and South Chicago are at a much higher risk level of their households experiencing food insecurity due to socioeconomic, racial and community demographics (Hunt et al, 2019)
- Households that are food insecure have a 25% higher healthcare expenditures than households who are food secure and have greater healthcare utilization.
- Food insecure individuals are also 46% more likely to become a high-cost healthcare user in the future (Dean, French and Mortensen, 2020)

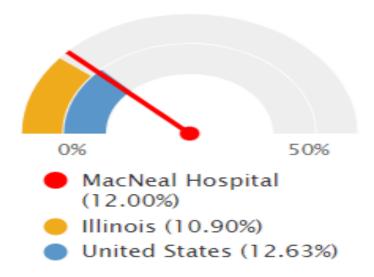


The Why?



- Many hospitals, ambulatory centers and catering departments generate a large amount of food waste
- Instead of generating food waste, the opportunity to repurpose the food to help those in needs helps to decrease costs for organizations. Landfills will get smaller and those who are hungry feel better.

Percentage of Total Population with Food Insecurity





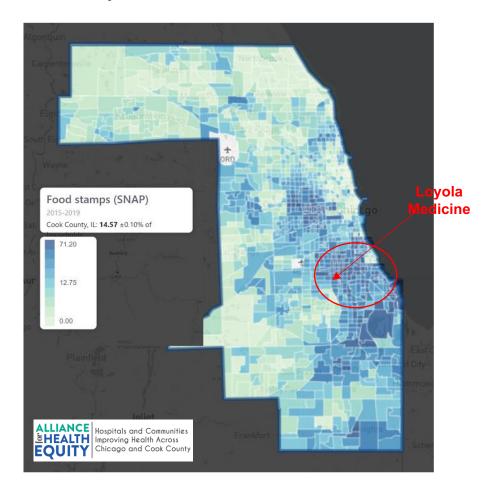
SNAP Benefits



2019-2020 Priority Health Needs

- Social Determinants of Health
- Access to care and community resources
- Mental health and substance use disorder programs
- Chronic Disease prevention and management

Geographic Distribution of Households receiving SNAP benefits, Cook County, IL



Implementing a Food is Medicine Program to Address Food Insecurity in an Academic Medical Center



Nicole Wynn, DNP, RN-BC; Beth A. Staffileno, PhD, FAHA; Jennifer M. Grenier, DNP, CENP, CNML, RN-BC; Janice Phillips, PhD, RN, CENP, FAAN

ABSTRACT

Background: Food insecurity is a public, social, and health concern.

Local Problem: A Food is Medicine Program was developed to address food insecurity.

Methods: A quality improvement initiative was piloted on 3 acute care units.

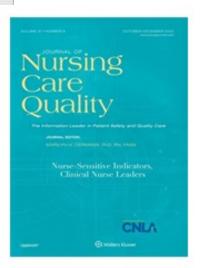
Interventions: Patients were screened for Social Determinant of Health (SDoH) needs and if identified as food insecure, linked to community resources and provided with a bag of food on discharge. Education was offered to nursing staff and a pre- and postsurvey was administered to assess SDoH knowledge and confidence.

Results: Over a 3-month period, 2354 patients were admitted; 2063 (88%) were screened for SDoH and 220 (10%) were positive for food insecurity. Patients (n = 1525, 74%) were linked to community resources. Nearly all (97%) nurses participated in education and demonstrated increased knowledge and confidence (P < .001).

Conclusions: These data provide preliminary outcomes from the Food is Medicine Program.

Keywords: food insecurity, Food is Medicine, hospital, Social Determinants of Health





The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity



The National Academies of MEDICINE

THE NATIONAL ACADEMIES PRESS

This PDF is available at http://nap.edu/25982

SHAR











The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity (2021)

DETAILS

502 pages | 6 x 9 | PAPERBACK ISBN 978-0-309-68506-1 | DOI 10.17226/25982

GET THIS BOOK

FIND RELATED TITLES

CONTRIBUTORS

Mary Wakefield, David R. Williams, Suzanne Le Menestrel, and Jennifer L. Flaubert, Editors; Committee on the Future of Nursing 2020 2030; National Academy of Medicine; National Academies of Sciences, Engineering, and Medicine

SUGGESTED CITATION

National Academies of Sciences, Engineering, and Medicine 2021. *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity.* Washington, DC: The National Academies Press. https://doi.org/10.17226/25982.

434

PRIORITIZING THE SOCIAL DETERMINANTS OF HEALTH

Rush Surplus Project: A Three-Pronged Approach to Addressing Food Insecurity While Reducing Waste

Hospital kitchens may not commonly serve as incubators of great initiatives, but for Jennifer Grenier, DNP, RN-BC, CNML, CENP, director of clinical operations for the cardiac service line at Rush University Medical Center (RUMC) in Chicago, Illinois, they have been just that. In 2015, while employed at Rush Oak Park Hospital (ROPH) in Oak Park, Illinois, Grenier became aware of the vast quantities of food being thrown out by the hospital cafeteria each day. To reduce this waste while simultaneously addressing the needs of patients and local communities living with food insecurity, she, along with Nicole Wynn, DNP, RN-BC, and a team of community leaders founded the Rush Surplus Project. The program began as a partnership between ROPH and the Oak Park River Forest Food Pantry (recently renamed Beyond Hunger), an organization that provides food and other services to 13 zip codes throughout the Chicago metropolitan area.

In Cook County, where Oak Park is located, food insecurity is pervasive. Shortly after the partnership with Oak Park River Forest Food Pantry was formed, the local YMCA also became a recipient site. And in 2017, after moving to RUMC Grenier and Wynn expanded the program there, this time partnering with Franciscan House, a homeless shelter on Chicago's West Side. The model works as follows. After becoming certified food handlers, volunteers from the hospital staff, including nurses, social workers, kitchen employees, and administrators, repackage the cafeteria's unused prepared foods, labeling the containers with the date and any potential allergens. Finally, volunteers from the pantry transport the food, which must be consumed within 24 hours of delivery. Since its inception, the Rush Surplus Project has provided more than 700 meals per month, or approximately 8,400 meals per year. Furthermore, each meal has reduced landfill waste by approximately 1 pound (or 8,400 pounds annually). The project has also strengthened volunteerism, thus reinforcing community bonds.

With the help of Robyn Golden, MA, LCSW, assistant vice president for population health and aging at RUMC, the Rush Surplus Project has spawned two other initiatives. The first, launched in 2017, is a partnership with Top Box Foods—an organization that provides the employees of RUMC and ROPH, many of whom struggle with food insecurity, the opportunity to purchase, at a discounted rate, a 15-pound box of produce, picked up at the hospital. The second initiative, Food Is Medicine, is a collaboration among the Rush Department of Food and Nutrition Services, the Greater Chicago Food Depository, and the Surplus Project. Upon admission to participating ROPH units, patients are screened for several social needs, and those who screen positive for food insecurity receive within 48 hours a bag of such nonperishable foods as oatmeal, canned proteins, and peanut butter, along with recipes and diet instructions for





Mission & Vision



The Surplus Project aims to improve the nutritional health of the community through the distribution of surplus food from hospital cafeterias to food insecure families.

The overarching goal of The Surplus Project is to eliminate food insecurity and food waste by creating collaborative relationships with hospital cafeterias and food banks. This collaborative effort to redistribute food from hospital cafeterias to families is a business-friendly, environmentally-sensitive, socially-responsible alternative to wasting food.



Values





- Compassion



- Sustainability



- Food Security



Collaboration



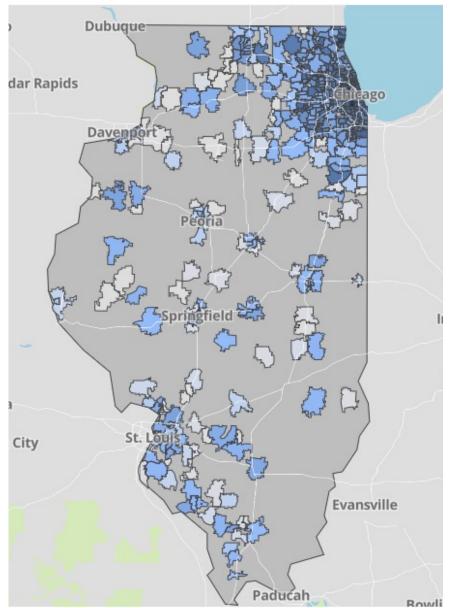
- Holistic Wellness

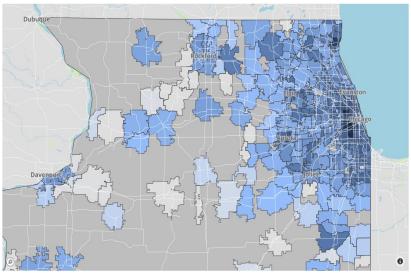
BOOM a Pandemic

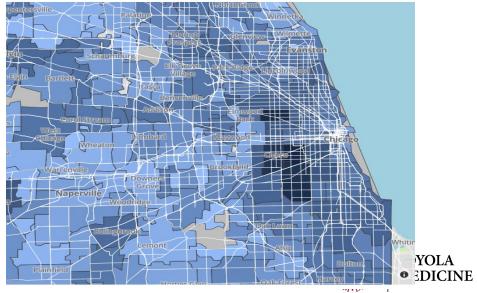




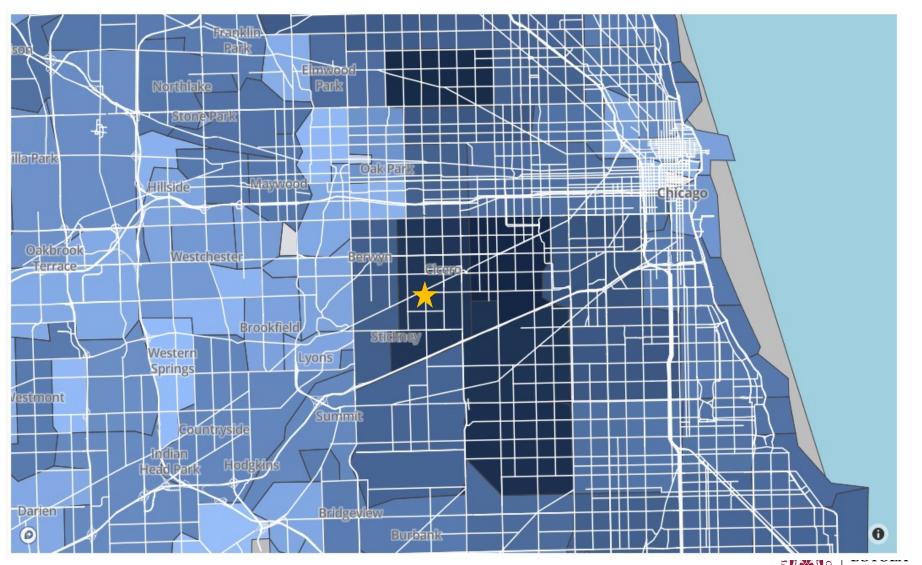








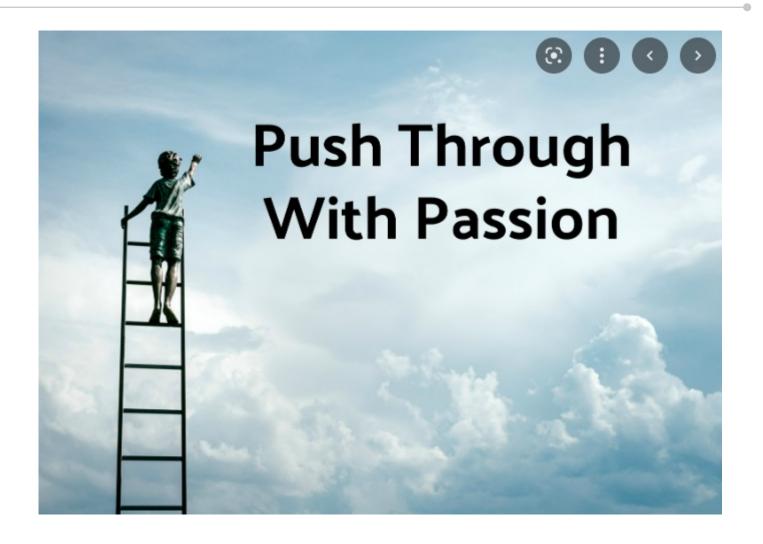




DID WE STOP?



NO WE PUSHED THROUGH NOW MORE THAN EVER!





Donor Sites







Deliveries on Mondays & Wednesdays





Deliveries on Tuesdays & Thursdays

MacNeal Respite Program at Sojourner House





Ending Homelessness Impact Award





MacNeal Respite Program:

- Doors Opened August 2019
- 3 Respite beds / 3 transition beds
- MacNeal, LUMC, West Sub,
- Staff from Housing Forward

SURPLUS

- Began in July 2021
- Since inception:
 - -2,000 meals have been donated
 - -500 staff hours (all disciplines

Patient Outcomes:

- 42 patients served 8/19-7/22
- 27 housed
- 6 currently at Sojourner





https://www.youtube.com/watch?v=8Gwvyd68r0I















A Member of Trinity Health

Edward Hines Jr. VA Hospital

- -Began in October 2021
- -Since inception:
 - -4,500 meals have been donated
 - -280 staff hours (all disciplines)







First Delivery 50 meals Second Delivery 95 meals!



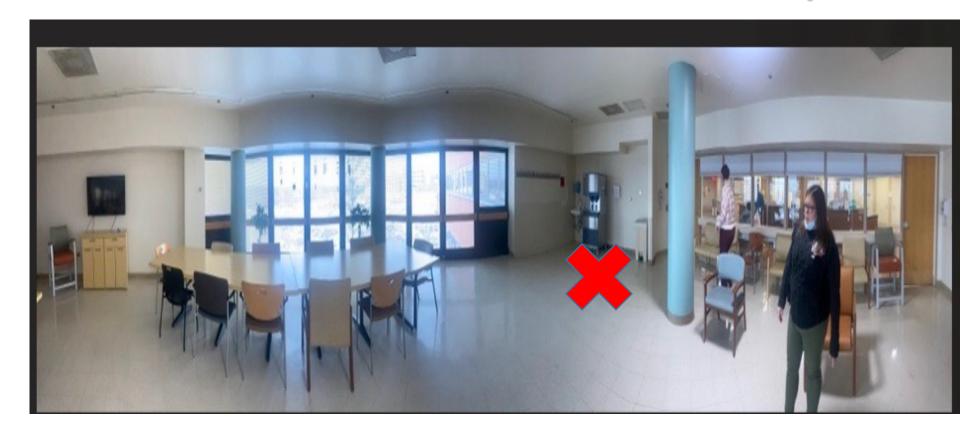












Expansion to Mercy Fitz, PA

Jen and Nikki,

I just wanted to let you know that we officially launched **The Surplus Project** at Mercy Fitzgerald today! We could not be more excited and I want to thank you for the idea and the support you afforded us along the way. This is a phenomenal effort and really speaks to who we are as a ministry allowing us to be good stewards of our resources while also helping others.

Thanks again!

Chris

Christopher A. Cullom

President, Mercy Fitzgerald Hospital

Trinity Health Mid-Atlantic

Cell: (423) 544-2678

Christopher.Cullom@trinity-health.org



Mercy Fitzgerald Hospital

April 21 · 3

Mercy Fitzgerald leaders and colleagues have joined The Surplus Project – an initiative established in Illinois to address food insecurity by donating surplus food from hospital cafeterias to designated donation sites. The food is packaged and labeled individually by our staff volunteers. Our first distribution was on April 4, and we've provided over 100 meals to date.





3 Shares











Surplus Project Team



Nursing Leadership and Staff

Food and Nutrition Leadership

Food and Nutrition staff members

Public Safety

Care Management

Volunteers





Detailed Process



- Interdisciplinary Leadership Team Meetings
 - Meet with the team to develop timeline
 - Since this is not the first implementation, the process is pretty simple and well developed
 - Walk-through the kitchen and determine locations for packaging and the best work-flow for this site
- Meet with Hospital Senior Leadership Teams
 - Present to group to work out finalized details
 - Achieve buy in
- Present to Food and Nutrition Staff
 - Teach them the process
- Work collaboratively with Community Health and Well-Being to determine the best recipient sites
 - Determine the recipient that would benefit
- Recruit Volunteers





Detailed Process



- Work collaboratively with Community Health and Well-Being to determine the best recipient sites
 - Determine the recipient that would benefit the most, and how they would like to receive the food, schedule, etc.
 - Would like to select a site that is within the community to benefit the community we serve and care for, in alignment with mission, vision and values.
- Recruit Volunteers
 - How would we like to obtain volunteers?
 - What departments are interested?
 - All volunteers need to obtain their Serv-Safe Certification prior to working with the food.

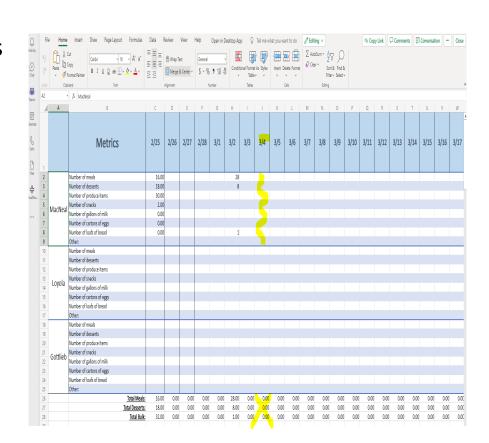




Data Collection and Sign-Up



- How are we collecting our data?
 - Tracking tool in Microsoft Teams
 - Specifically tracking the total amount of meals, desserts, and bulk items; additionally estimated cost per meal
 - Allows for compliance with submitting data for our Community Benefits Report
- How does the sign-up process work for volunteers?
 - Scheduling delivery volunteers through Microsoft Teams





Future State



Sojourner House

 Purchased and donated large refrigerators and freezers for meals to be stored

Edward Hines Jr. VA Hospital

- Purchased and donated two refrigerators, two microwaves and two freezers for food to be stored, saved and warmed up in the Emergency Department, food pantry and on the Homeless Veterans Program unit.
- Meals available at the pantry and at the Healthcare for Homeless Veterans Program

Expansion to all TRINITY HOSPITALS -129 to GO!



Resources



Beyond Hunger and The Surplus Project

Surplus Project

The Surplus Project and Rush University Medical Center





Contact Us



For any questions or to get started, please contact us for assistance and the toolkit.

Jennifer Grenier
Jennifer.Grenier@luhs.org

Nicole Wynn
Nicole.wynn@luhs.org









Healthy = Equitable Access to Nutritional Food

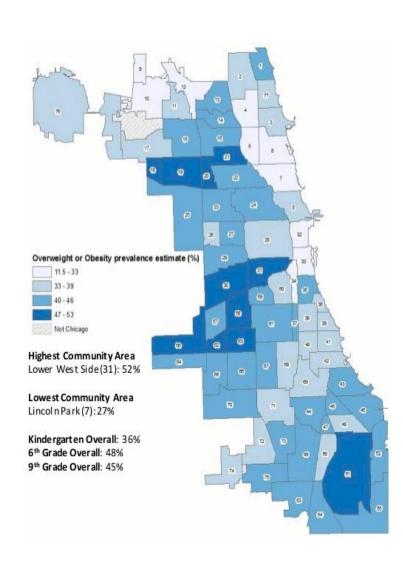
June 22, 2023

Jennifer Herd, Senior Health Policy Associate

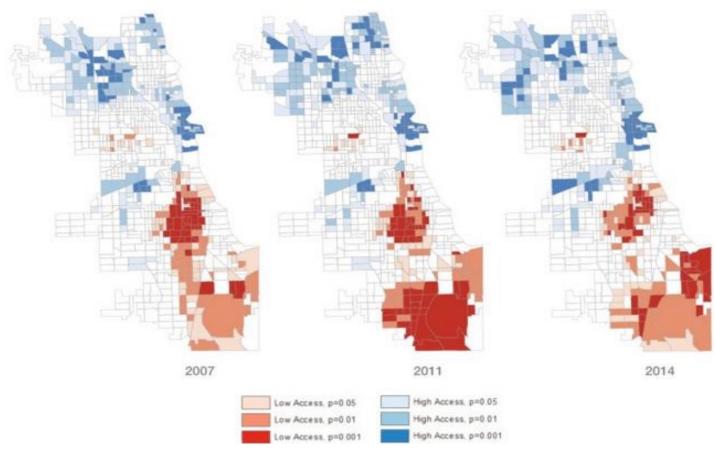


Nutrition and Obesity

- Approximately 28% of Chicago adults (552,000) have a BMI that classifies them as obese
- Obesity is most prevalent among women, non-Hispanic Blacks, and among Hispanics
- Obesity disproportionally impacts socioeconomically-disadvantaged communities (37%)
- Chicago children have higher overweight and obesity prevalence rates than US children in the same age group
- Child obesity rates in Chicago children of all ages were highest among Black and Hispanic communities for both boys and girls

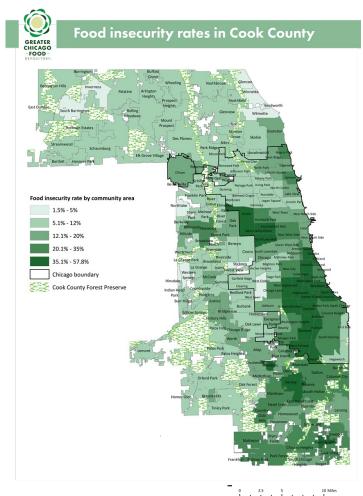


Food Access





- Approximately 500,000 Chicagoans (18%) experienced food insecurity in 2012
- Highest concentrations on the west and south side communities
- Massive divide in residents experiencing food security between the highest (Fuller Park – 56%) and the lowest (Loop - 6.5%) areas
- Over 800,000 Illinois households, or about 1.8M people, rely on Supplemental Nutritional Assistance Program (SNAP/LINK) for food security



Prepared on 9/16/2016 by the Greater Chicago Food Depository, TM Source: Gundersen, C. A. Dewey, A. Crumbaugh, M. Kato & E. Engelhard. Map the Meal Gap 2016: Food Insecurity Estimates at the County Level. Feeding America, 2016.



Food Rescue Assessment: Learnings

We have:

- An ABUNDANCE Of Nutritious Wasted Food
- Huge And Avoidable CLIMATE IMPACT + ECONOMIC COST
- "INVISIBLE ISSUE" Within A FLAWED SYSTEM
- DISCONNECT Between Food Retail/Service x Rescue Orgs



Food Rescue Assessment: Learnings

We need:

- INTERNAL + EXTERNAL COORDINATION
- POLICY, INFRASTRUCTURE
- MOTIVATION (\$\$)





Chicago.gov/Health



HealthyChicago@cityofchicago.org



@ChicagoPublicHealth



@ChiPublicHealth

green town

Food is Medicine

Jen Nelson, Seven Generations Ahead

Jennifer Herd, City of Chicago Department of Public Health

Jennifer M. Grenier, Loyola MacNeal Hospital