

Hospitals and Summer Food

Hospitals across the United States are helping fill the nutrition gap during the summer by offering meals to children through the Summer Food Service Program (SFSP), which provides federal funding for meals and snacks served to low-income children 18 years old and younger when school is not in session. By participating in SFSP, hospitals have an opportunity to help improve child health and combat child hunger. This approach can greatly benefit communities, (including in rural areas) where hospitals might be better located to children than schools when school is out, and where transportation is a major barrier to participation.

Summer Food Service Program Basics

Hospitals that are a public or private nonprofit organization can participate in SFSP by providing free meals and activities to children age 18 and younger right in the hospital, promoting the program through outreach, and engaging and creating new community partnerships. Hospitals located in areas where at least 50 percent of children are eligible for free and reduced-priced meals to function as an open site, meaning that any child within the community can come to the hospital for a healthy, nutritious meal. This gives hospitals the unique opportunity to serve the local community. In addition, children who visit the hospital for appointments, or accompany family members being cared for as patients, also can receive a meal.

The meals served at summer meal sites must meet the U.S. Department of Agriculture's (USDA) nutrition standards which for a lunch requires milk, two servings of fruits and vegetables, a

Ways Hospitals Can Support SFSP

- **Sponsor:** operate and take administrative responsibility for the Summer Food Service Program, including arranging for meals to be prepared and delivered, monitoring sites, and training and supervise staff.
- **Site:** provide a space for children to eat the meals, supervise meal service, and keep daily records of meals served.
- **Vendor:** prepare and deliver meals to another sponsor.
- **Funder:** provide funds to sponsors and sites for activities, outreach materials, and other costs the federal funding may not

grain, and a protein to be reimbursable. An example for lunch could be a turkey sandwich on whole wheat with a banana, carrot sticks and low-fat milk. Hospitals can prepare the meals onsite in their own kitchen. It may be easier for hospitals to offer the same meal that is prepared for patients in the hospital, as long as that meal meets the nutrition standards and is appealing to children and teens. Hospitals can make excellent sponsors as many have the administrative capacity to operate and administer a federal program. Being a sponsor also allows hospitals to keep their food service staff working during the summer when fewer people go to the hospital. If the hospital does not have the capacity to sponsor the program, they can operate as a site under another sponsor. As a site, an outside vendor would provide prepackaged or prepared food on the days of service that can be stored in hospital kitchen refrigerators.

Hospitals can serve meals in a conference room, the cafeteria, or anywhere there is space for kids to congregate and eat a meal. Placing the site near the entrance to the hospital or clinic is a great way to attract families as they enter and make the site easily accessible.

Community Benefits

The Affordable Care Act (ACA) strengthened the original 1969 requirement that tax-exempt hospitals participate in activities and initiatives to improve the health of the communities where they are located and that they serve. These hospitals were required to undergo a three-year process to conduct a community health needs assessment in collaboration with public health experts and community representatives, identify significant health needs and develop and implement plans to address those needs. The process must have included an evaluation component. Community benefit activities now clearly extend beyond charity clinical care and that significant needs- such as “access to adequate nutrition”- should have been addressed under the new policy framework. This has given hospitals an exciting opportunity to implement SFSP. For more information on the requirements, visit the [IRS's website](#).

If food insecurity is identified as a need in the community, participating as a sponsor and site in the community is a way to address that need. On the other hand, food insecurity issues may not arise exclusively, but it may be an underlying determinant for diet related diseases. It is important for the assessment to include secondary data that relates to the disease states and food insecurity can be evaluated in the next assessment.

Incorporating Activities

To maximize participation, hospitals can provide enrichment activities at their sites to engage children, attract them to the site, and help prevent the “summer learning slide.” Hospitals can provide free or low-cost activities to the children who attend, such as inviting local librarians to read to children, providing games or health related activities. Additionally, by partnering with the nutrition department at the hospital, or local college extension programs they can provide nutrition education to the children and parents at these sites.

Conducting Outreach

Outreach and promotion are important for hospitals to get the word out about their summer meal site. Flyers can be posted throughout the hospital, including in elevators, clinics, and on bulletin boards in the waiting rooms and doctor’s offices. Information can be posted on the hospital’s website and through social media. Additionally, hospital staff should be notified and educated about the program and what food insecurity is like in their community so they can refer patients and community members to meal program sites.

Partnerships and Volunteers

Creating and strengthening community partnerships is key to operating a successful meal program at hospitals. Reach out to local organizations that already are engaged in childhood health and anti-hunger efforts and ask them to help advertise the program. Community groups also can help provide enrichment activities for the children and teens. Develop new partnerships to find and recruit new volunteers to serve meals and provide and participate in site activities. Many hospitals already have a volunteer program in place, which can be an easy way to find volunteers to participate in this program. Partnerships also can lead to grant opportunities, which can be used to

provide programming, purchase equipment, and improve meal quality. For example, Kansas Appleseed, an anti-hunger organization, gave grant money to a hospital to buy coolers and a refrigerator to start its site.

Hennepin County Medical Center:

SFSP Sponsor and Site

Hennepin County Medical Center has been participating in SFSP for many years, generally serving approximately 2,000-2,500 meals a summer. The meals are made in the hospital kitchen and then provided to children in a designated area of the hospital’s cafeteria. Lunch is served to children Monday through Friday and the site is supervised by a bilingual attendant. Volunteers provide activities at the site, such as cooking demos and literacy activities. In addition, the hospital is able to provide adult meals and bags of food for families to take home from their Food Shelf program.

Getting Started

Contact your state agency if you are interested in becoming a sponsor and/or site. A list of state agency contacts can be found [here](#). Your state agency can help with a sponsor application, provide technical assistance and answer questions you might have operating the program. The state agency can also connect you to an existing sponsor if you choose to just participate as a site. USDA Rural Development can also be a great partner for rural sites. Start small when implementing SFSP for the first time; begin with offering meals a few days a week and then build from there.

The anti-hunger work does not have to end here. Hospitals across the country are stepping up to alleviate food insecurity in their communities. Besides being a summer meal site and/or sponsor, hospitals can grow community gardens to provide locally grown food to patients and the community. They also can screen patients for food insecurity and connect them to resources such as SNAP, the local food pantry, and SFSP sites. Some hospitals additionally provide SNAP education and help people fill out the SNAP paperwork. There are many ways hospitals can get involved in anti-hunger work and help improve the health and wellbeing of their communities. For more information, contact the Food Research and Action Center.

Afterschool Meals

The Afterschool Meal Program — part of the Child and Adult Food Care Program — is a USDA federally funded program that provides funding to serve a meal and snack to children 18 years and younger after school, on holidays, and weekends. It follows similar rules and requirements as SFSP. Hospitals can continue improve childhood health and alleviate childhood hunger year-round by participating in the Afterschool Meal Program during the school year. Most SFSP sites are eligible to provide afterschool meals, but, unlike SFSP, sites must include an enrichment or educational activity. Serving meals all year long keeps children engaged, active, and nourished leading to healthy, productive lives.