

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 904
(I-19)

Introduced by: Medical Student Section

Subject: Amendment to AMA Policy H-150.949, "Healthy Food Options in Hospitals"

Referred to: Reference Committee K
(_____, Chair)

Whereas, Medical care facilities include hospitals, skilled nursing facilities, intermediate care facilities, and correctional treatment facilities such as prisons^{1,2}; and

Whereas, Current AMA policy H-150.949 encourages healthy, plant-based options to be provided within hospitals, but does not explicitly encourage the same of other medical care facilities; and

Whereas, There is a lack of consistency in food safety and option regulations among prisons at the local and state level³⁻⁶; and

Whereas, Centers for Medicare & Medicaid Services regulations require nursing facilities to provide a "nourishing, palatable, well-balanced diet that meets ... daily nutritional and special dietary needs", but does not explicitly address plant-based diets⁷; and

Whereas, A study found 65% of nursing home residents expressed complaints about their food service and the presence of complaints was related to poor food intake⁸; and

Whereas, Plant-based diets have been shown to improve health in all people, not just hospitalized patients⁹⁻¹⁴; and

Whereas, Plant-based options also have the potential to be cheaper than alternatives depending on the decisions made by individual facilities regarding costs for purchase, storage and preparation¹⁷⁻¹⁹; therefore be it

RESOLVED, That our AMA encourage the availability of healthy, plant-based options at medical care facilities by amending AMA Policy H-150.949, "Healthy Food Options in Hospitals," by addition and deletion to read as follows:

Healthy Food Options in Hospitals Medical Care Facilities, H-150.949

1. Our AMA encourages healthy food options be available, at reasonable prices and easily accessible, on hospital the premises of Medical Care Facilities.

2. Our AMA hereby calls on US hospitals all Medical Care Facilities and Correctional Facilities to improve the health of patients, staff, and visitors by: (a) providing a variety of healthy food, including plant-based meals, and meals that are low in fat, sodium, and added sugars; (b) eliminating processed meats from menus; and (c) providing and promoting healthy beverages.

3. Our AMA hereby calls for hospital Medical Care Facility cafeterias and inpatient meal menus to publish nutrition information. (Modify Current HOD Policy)

Fiscal Note:

Received: 08/28/19

References:

1. Medical Care Facility Law and Legal Definition. <https://definitions.uslegal.com/m/medical-care-facility/>. Accessed March 22, 2019.
2. California Health and Safety Code. *DIVISION 2. LICENSING PROVISIONS CHAPTER 2. Health Facilities ARTICLE 1. General [1250 - 1264]*. https://leginfo.ca.gov/faces/codes_displaySection.xhtml?sectionNum=1250.&lawCode=HSC
3. Slevin, P. October 27, 2000. https://www.washingtonpost.com/archive/politics/2000/10/27/meatless-cuisine-debuts-on-tables-of-federal-prisons/2ebecb0f-e509-434b-9b3b-c1bf9045eee/?noredirect=on&utm_term=.e7cb7b85b8d0
4. Mariel A. Marlow, Ruth E. Luna-Gierke, Patricia M. Griffin, Antonio R. Vieira, "Foodborne Disease Outbreaks in Correctional Institutions—United States, 1998–2014", *American Journal of Public Health* 107, no. 7 (July 1, 2017): pp. 1150–1156.
5. Sawyer, W. March 3, 2017. <https://www.prisonpolicy.org/blog/2017/03/03/prison-food/> Accessed April 14, 2019.
6. Santo, A and Iaboni, L. <https://www.themarshallproject.org/2015/07/07/what-s-in-a-prison-meal/> Accessed April 14, 2019.
7. 42 CFR §483.60, 2016. <https://www.federalregister.gov/d/2016-23503/>
8. Simmons SF, Cleeton P, Porchak T. Resident complaints about the nursing home food service: relationship to cognitive status. *J Gerontol B Psychol Sci Soc Sci*. 2009;64(3):324–327. doi:10.1093/geronb/gbp007
9. Sinha R, Cross AJ, Graubard BI, Leitzmann MF, Schatzkin A. Meat intake and mortality: a prospective study of over half a million people. *Arch Intern Med*. 2009;169(6):562.
10. Etemadi A, Sinha R, Ward MH, Graubard BI, Inoue-Choi M, Dawsey SM, Abnet CC. Mortality from different causes associated with meat, heme iron, nitrates, and nitrites in the NIH-AARP Diet and Health Study: population based cohort study. *BMJ*. 2017;357:j1957. Epub 2017 May 9.
11. Tusso PJ, Ismail MH, Ha BP, Bartolotto C. Nutritional update for physicians: plant-based diets. *Perm J*. 2013;17(2):61–66. doi:10.7812/TPP/12-085
12. Hu FB. Plant-based foods and prevention of cardiovascular disease: an overview. *Am J Clin Nutr*. 2003 Sep;78(3 Suppl):544S–551S. doi: 10.1093/ajcn/78.3.544S.
13. Wright N, Wilson L, Smith M, Duncan B, McHugh P. The BROAD study: A randomised controlled trial using a whole food plant-based diet in the community for obesity, ischaemic heart disease or diabetes. *Nutr Diabetes*. 2017 Mar 20;7(3):e256. doi: 10.1038/nutd.2017.3.
14. Kerley, CP. A Review of Plant-based Diets to Prevent and Treat Heart Failure. *Card Fail Rev*. 2018 May;4(1):54-61. doi: 10.15420/cfr.2018.1:1.
15. Pimentel D¹, Pimentel M. Sustainability of meat-based and plant-based diets and the environment. *Am J Clin Nutr*. 2003 Sep;78(3 Suppl):660S–663S. doi: 10.1093/ajcn/78.3.660S.
16. Marlow HJ¹, Hayes WK, Soret S, Carter RL, Schwab ER, Sabaté J. Diet and the environment: does what you eat matter?. *Am J Clin Nutr*. 2009 May;89(5):1699S–1703S. doi: 10.3945/ajcn.2009.26736Z. Epub 2009 Apr 1.
17. California Senate Rules Committee. *Unfinished Business on Senate Bill 1138, August 20, 2018*.
18. Wolf, K. April 21, 2015. <https://arizonasonoranewsservice.com/maricopa-inmates-learn-live-vegetarian/>. Accessed March 22, 2019.
19. The Humane Society of the United States. Meatless Monday. http://www.humanesociety.org/sites/default/files/archive/assets/pdfs/farm/meatless_mondays_toolkit_hospitals.pdf

RELEVANT AMA POLICY:

Dietary Intake of Incarcerated Populations D-430.995

Our AMA: 1) urges the National Commission on Correctional Health Care, the American Correctional Association, and individual states to mandate adherence to the current Dietary Reference Intakes and Dietary Guidelines for Americans (with adjustments, as needed, for special populations) as a criterion for accreditation and/or standards compliance, until national dietary guidelines specific for adolescent and adult incarcerated populations becomes available; and 2) urges the Food and Nutrition Board of the Institute of Medicine to examine the nutrient status and dietary requirements of incarcerated populations and issue guidelines on menu planning for adolescent and adult incarcerated populations.

Citation: (CSAPH Rep. 4, A-11)

Nutrition Labeling and Nutritionally Improved Menu Offerings in Fast-Food and Other Chain Restaurants H-150.945

Our AMA:

1. supports federal, state, and local policies to require fast-food and other chain restaurants with 10 or more units (smaller, neighborhood restaurants could be exempt) to provide consumers with nutrition information on menus and menu boards;
2. recommends that nutrition information in fast-food and other chain restaurants include calorie, fat, saturated fat and trans fat, and sodium labeling on printed menus, and, at a minimum,

calories on menu boards, since they have limited space, and that all nutrition information be conspicuous and easily legible;

3. urges federal, state, and local health agencies, health organizations, and physicians and other health professionals to educate people how to use the nutrition information provided in restaurants to make healthier food choices for themselves and their families; and

4. urges restaurants to improve the nutritional quality of their menu offerings--for example, by reducing caloric content; offering smaller portions; offering more fruits, vegetables, and whole-grain items; using less sodium; using cooking fats lower in saturated and trans fats; and using less added sugars/sweeteners.

Citation: Res. 419, A-07; Reaffirmed in lieu of Res. 413, A-09, Res. 416, A-09 and Res. 418, A-09; Reaffirmed: CSAPH Rep. 01, A-19

H-150.944 Increasing Healthy Food Options in School Lunches for Elementary and Middle School Students

Our AMA supports efforts to: (1) reduce health disparities by basing food assistance programs on the health needs of their constituents; (2) provide vegetables, fruits, legumes, grains, vegetarian foods, and healthful dairy and nondairy beverages in school lunches and food assistance programs; and (3) ensure that federal subsidies encourage the consumption of foods and beverages low in fat, added sugars, and cholesterol.

Citation: Res. 413, A-07; Reaffirmation A-12; Reaffirmation A-13; Modified: CSAPH Rep. 03, A-17

H-150.949 Health Food Options in Hospitals

1. Our AMA encourages healthy food options be available, at reasonable prices and easily accessible, on hospital premises.

2. Our AMA hereby calls on US hospitals to improve the health of patients, staff, and visitors by: (a) providing a variety of healthy food, including plant-based meals, and meals that are low in fat, sodium, and added sugars; (b) eliminating processed meats from menus; and (c) providing and promoting healthy beverages.

3. Our AMA hereby calls for hospital cafeterias and inpatient meal menus to publish nutrition information.

Citation: Res. 410, A-04; Reaffirmed: CSAPH Rep. 1, A-14; Appended: Res. 406, A-17; Modified: Res. 425, A-18