

The New York City Food Standards aim to reduce the prevalence of chronic disease, such as obesity, diabetes and cardiovascular disease, by improving dietary intake. This document outlines standards for food purchased and meals and snacks served, with the goal of improving the health of all New Yorkers served by hospitals. These standards apply to regular diet patient meals.

Hospitals and their contractors are expected to follow the standards described in each of the four sections:

I. Standards for Purchased Food

Addresses food items purchased and gives specific standards by food category.

II. Standards for Meals and Snacks Served

Addresses the overall nutrient requirements for meals served and gives standards for snacks.

III. Population-Specific Standards and Exceptions

Addresses standards for specific populations (e.g. children, seniors) and exemptions for patients on special diets. The additions and exceptions in the third section supersede the first two sections. For example, children under 2 years may be served whole milk, instead of 1% or nonfat milk required in the first section.

IV. Sustainability Recommendations

Addresses recommendations to support a healthy and ecologically sustainable food system.

The first two sections overlap: all purchased food items must meet the standards in Section I and must fit in to meals and snacks served such that the nutrient requirements in Section II are met. The purchased food standards ensure that hospitals make healthier foods a regular part of patients' diets and ensure that patients who only eat a few items of each meal are still eating healthy options. The meal and snack standards ensure that patients eating whole meals and snacks have a healthy, balanced diet.

All food purchased or served by a hospital for regular diet patient meals must meet the required standards that appear in bold.

I. Standards for Purchased Food

These standards are defined per serving of food as shown on the product's Nutrition Facts label.¹

Nutrient Standards

Trans fat

- Require restriction consistent with DOHMH, City regulation and law.²

Sodium

- Require all individual items contain ≤ 480 mg sodium per serving, not including specific items stated in the Food Category Standards below. Recommend purchasing "low sodium" (≤ 140 mg sodium per serving) whenever feasible.

Food Category Standards

Beverages

- Require ≤ 25 calories per 8 oz for all beverages other than 100% fruit juice or milk.
- Require 100% fruit juice, if purchasing juice.

Dairy

- Require milk be 1% or non-fat, and unsweetened.^{3,4}
- Require fluid milk substitutes (e.g. soymilk) be unflavored.⁴
- Require low-fat or non-fat yogurt.
- Recommend purchase plain yogurt or yogurt with ≤ 30 g sugar per 8 oz or equivalent (e.g. ≤ 15 g sugar per 4 oz, ≤ 23 g sugar per 6 oz).
- Recommend choose lower sodium cheese.

Bread, pasta, and other grains

- Require sliced sandwich bread contain ≤ 180 mg sodium per serving, be whole wheat/whole grain and contain ≥ 2 g fiber per serving.
- Require other baked goods (e.g. dinner rolls, muffins, bagels, tortillas) contain ≤ 290 mg sodium per serving.
- Recommend purchase whole grain pasta, whole grain baked goods (dinner rolls, muffins, bagels, tortillas), brown rice, etc.

Cereal

- Require cereal contain ≤ 215 mg sodium per serving, ≤ 10 g sugar per serving, and ≥ 2 g fiber per serving.⁵

¹ Serving size is based on FDA-established lists of "Reference Amounts Customarily Consumed Per Eating Occasion."

² For more information: www.nyc.gov/html/doh/downloads/pdf/public/notice-adoption-hc-art81-08.pdf

³ For children ages 4-18 years, flavored milk and flavored fluid milk substitutes are permitted and **required** to be ≤ 130 calories per serving. Recommend that agencies continue to phase out flavored milk and flavored fluid milk substitutes over time. As per Article 47 of the New York City Health Code, child care facilities may not serve milk with added sweeteners.

⁴ **Require** unsweetened whole milk for children ages 12 months to under age two.

⁵ Cereals that contain dried cranberries, dates, and/or raisins are exempt from the sugar standard due to the limited availability of this product type that meets the sugar standard. Cereals must still meet fiber and sodium standards. Recommend phasing out these high sugar cereals over time.

Fruits and vegetables

- ‡ **Require** canned/frozen vegetables and beans contain ≤ 290 mg sodium per serving.
- ‡ **Require** fruit canned in unsweetened juice or water. No fruit canned in syrup.

Tuna, salmon and other seafood

- ‡ **Require** canned/frozen seafood contain ≤ 290 mg sodium per serving.

Poultry

- ‡ **Require** canned/frozen poultry contain ≤ 290 mg sodium per serving.

Beef and pork

- ‡ **Require** canned beef/pork contain ≤ 480 mg sodium per serving.
- ‡ Recommend purchase “extra lean” beef and pork (total fat $\leq 5\%$) and at least 90% lean ground beef.
- ‡ Recommend bacon contain ≤ 290 mg sodium per serving.

Luncheon meat

- ‡ **Require** luncheon meat contain ≤ 480 mg sodium per serving.

Condiments and sauces

- ‡ **Require** salad dressings contain ≤ 290 mg sodium per serving.
- ‡ **Require** sauces contain ≤ 480 mg sodium per serving.⁶
- ‡ Recommend use lower sodium condiments and sauces such as reduced sodium soy sauce.

Portion controlled items and other convenience foods

- ‡ **Require** portion controlled items and other convenience foods such as breaded chicken, veal patties, frozen French toast and waffles contain ≤ 480 mg sodium per serving.

Note regarding populations with religious or special dietary food needs:

If a hospital cannot meet required purchased food standards due to a present lack of availability of food items that meet the specific needs of the population they serve (e.g. packaged kosher foods), the hospital is expected to seek suitable replacements in the marketplace as quickly as is feasible.

⁶ Soy sauce is exempt due to lack of market availability for products that meet this standard. Recommend use reduced sodium soy sauce.

II. Standards for Meals and Snacks Served

All hospitals must have a plan for regular menu review to ensure that they meet the nutrient content standards. Outlined in this section are standards for Nutrition, Meals Served, and Snacks Served.

A. Nutrition Standards

These standards are based on the USDA's *2010 Dietary Guidelines for Americans*.⁷ Standards in chart are requirements for adult populations; see page 6 for children's standards.

Require the following daily nutrient standards:	
Calories	2,000 calories ⁸
Sodium*	< 2,300 mg ⁹
Sodium (> 50 years)	≤ 1,500 mg
Total Fat	≤ 30% of total calories
Saturated Fat	< 10% of total calories
Fiber	≥ 28 grams ¹⁰
Recommend the following daily nutrient standards:	
Protein	10-35% of total calories
Carbohydrate	45-65% of total calories
Cholesterol*	< 300 mg
Potassium	4,700 mg
Calcium	1,000 mg
Iron	> 8 mg (18 mg F; 8 mg M)

* Daily limit, regardless of total calorie intake

B. Meal Standards

Fruits and vegetables

- Require minimum of two servings of fruits and vegetables per meal for lunch and dinner.
- Require minimum of five servings of fruits and vegetables a day.
- Require at least 5 servings of non-starchy vegetables weekly per lunch and per dinner.¹¹
- Recommend serve fresh or frozen fruits and vegetables instead of canned.

Beverages

Water

- Require water be available at all meals (this can be in addition to or in place of other beverages regularly served). Tap water should be used if possible.

Fruit juice

- Require 100% fruit juice and portion size limited to ≤ 6 oz per serving.
- Require juice be served no more than one time per day.

Food preparation and service

- Require no use of deep fryers; no deep frying.

⁷ Available at: www.cnpp.usda.gov/DGAs2010-PolicyDocument.htm

⁸ Require calories are no more than 10% above or below the standard.

⁹ Require hospitals serving populations with a majority of children 6-18 years of age limit sodium to ≤ 2,200 mg per day.

¹⁰ Require fiber be ≥ 25 grams per day at hospitals serving populations with a majority of children 4-18 years old.

¹¹ Starchy vegetables include white potatoes, corn, green peas and lima beans.

C. Snack Standards

Snacks should add important nutrients to the overall diet and help curb hunger.

Overall Guidelines

- Require all items have 0 g trans fat.
- Recommend foods served be on the list of acceptable choices below or provide equivalent nutrient value (for example: melon slices substituted for a banana in the fruit category).
- Recommend water be available.

Food Category 1: Dairy beverages

- Require milk be 1% or non-fat and unsweetened.¹²

Food Category 2: Fruit or vegetable

- Require juice be 100% fruit juice and portion size limited to ≤ 6 oz per serving.
- Examples of acceptable choices: carrot sticks, celery sticks, pepper slices, salads, apples, bananas, pears, oranges, dried fruit, applesauce with no sugar added, and canned fruit in unsweetened juice or water.

Food Category 3: Bread or grain

- Require sodium ≤ 180 mg per serving for sliced sandwich bread.
- Require sodium ≤ 200 mg per serving for all crackers, chips and salty snacks.
- Require sugar ≤ 10 g per serving.
- Require fiber ≥ 2 g per serving.
- Recommend all items served be whole grain.
- Examples of acceptable choices: whole wheat pita triangles, whole grain cereal, whole grain crackers, whole grain bread, rice cakes, popcorn.
- Examples of non-appropriate items: doughnuts, pastries, croissants, cake, etc.

Food Category 4: Protein

- Examples of acceptable choices: hummus, bean dip, cottage cheese, low-fat cheese, hard boiled eggs, low-fat or non-fat yogurt, low-sodium tuna, nuts, nut butters, sunflower seeds, turkey slices.

Examples of acceptable snacks, all served with water:

- Peanut butter, whole grain crackers and apple slices
- A peach and whole grain crackers
- Half of a tuna sandwich: tuna on whole wheat bread with lettuce and tomato
- Turkey served with whole wheat pita triangles and carrot sticks
- Milk and whole grain cereal, with fresh berries
 - Yogurt topped with blueberries and low-fat granola
 - Hummus with pita and sliced red peppers

¹² **Require** flavored milk and flavored fluid milk substitutes to be ≤ 130 calories per serving for children ages 4-18 years. Recommend that hospitals continue to phase out flavored milk and flavored fluid milk substitutes over time.

III. Population-Specific Standards and Exceptions

Hospitals that serve meals to populations with special nutritional needs (e.g. children, seniors) have specific nutrition requirements.

Patients Under Therapeutic Care

Nutrition requirements consistent with established medical guidelines and diets for patients under therapeutic care replace general nutrition criteria described here. The Patient Bill of Rights allows patients under therapeutic care to request specific food items. These items are considered part of the therapeutic diet and do not need to meet the nutrition criteria.

Children

Standards for Purchased Food

- When milk is provided, children ages two and older shall only be served milk with 1% or less milk-fat unless milk with a higher fat content is medically required for an individual child, as documented by the child's medical provider. When milk is provided, children ages 12 months to under age 2 should be served whole milk.
- For children ages 4-18 years, flavored milk and flavored fluid milk substitutes are permitted and **required** to be ≤ 130 calories per serving. Recommend that hospitals continue to phase out flavored milk over time.

Nutrition Standards

- Require** hospitals serving children 6-18 years of age limit sodium to ≤ 2,200 mg per day.
- Require** fiber be ≥ 25 grams per day for hospitals serving children age 4-18 years of age.
- Recommend hospitals serving patients under 19 years of age follow the Institute of Medicine, Food and Nutrition Board's Dietary Reference Intakes (DRI)¹³ for appropriate age groups.

Seniors

- Require** hospitals serving populations with a majority of the population 50 years of age and older limit sodium to ≤ 1,500 mg per day.
- Require** individual items contain ≤ 360 mg sodium per serving.
- Recommend hospitals follow the Institute of Medicine, Food and Nutrition Board's Dietary Reference Intakes (DRI) for appropriate age groups.

Federal Commodity Food Program

- Food provided by the federal government to hospitals is not required to meet the standards outlined in Section I. However, hospitals accepting these foods are required to meet the nutrition standards outlined in Section II.

Food for Disaster Response

- Food purchased by hospitals to serve solely for a disaster or crisis response are not restricted by the nutrition criteria included here, recognizing such stocks intentionally include nutrient dense food products.

¹³ Institute of Medicine, Food and Nutrition Board's Dietary Reference Intakes (DRI): <http://iom.edu/Reports/2006/Dietary-Reference-Intakes-Essential-Guide-Nutrient-Requirements.aspx>

IV. Sustainability Recommendations

The Standards for Meals/Snacks Purchased and Served focus on promoting a healthy eating pattern as part of a city-wide strategy to reduce the prevalence of chronic disease, such as obesity, diabetes, and heart disease, among New Yorkers. New York City also recognizes the importance of promoting a healthy and ecologically sustainable¹⁴ food system that conserves natural resources and supports long term public health goals.

Hospitals are encouraged to consider, when practicable and cost effective, sustainability criteria for the food they procure and serve. While New York City does not endorse any single criteria for sustainability, a number of food characteristics are associated with supporting the conservation of natural resources that are needed to sustain our food supply over the long term. For example, preferred products may include: (i) fruits and vegetables that are local, seasonal, or are grown by producers using low or no pesticides or an integrated pest management system, (ii) dairy products that are local or (iii) seafood that is sustainably raised or harvested.¹⁵ Hospitals may also request that their vendors offer fruit, vegetables, dairy products and seafood that is locally grown or produced. Hospitals are also encouraged to educate their patients, staff and visitors about these local and/or sustainably produced foods through labeling or other mechanisms.

These suggestions will continue to be evaluated and updated based on the latest scientific research on nutrition, the relationship between human health and food production methods, and the sustainability of the food system.

¹⁴ The federal statutory definition of sustainable agriculture (7 USC 3103) is a guide to the elements to look for in a sustainability program. New York City does not endorse any particular labeling or documentation system or program over another, and recognizes that many agricultural producers practice sustainable agriculture without their products being labeled as such.

¹⁵ For example, seafood that is identified as a “best choice” or “good alternative” on the Monterey Bay Aquarium Seafood Watch list, or similarly certified by other equivalent program.

