



# Implementation Guide for Public Health Practitioners and Food Service Organizations

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Sodium Reduction in Communities Program: A Guide to Approach Sodium Reduction

**MODERATOR:**

Hello and welcome to today's Coffee Break presented by the Applied Research and Evaluation Branch in the Division for Heart Disease and Stroke Prevention at the Centers for Disease Control and Prevention.

My name is Ally Chase, and I am an ORISE Fellow and I will be acting as today's moderator. Our presenter today is John Whitehill, an evaluator on the Evaluation and Program Effectiveness Team within the Division for Heart Disease and Stroke Prevention's Applied Research and Evaluation Branch.

## Before we begin...

- All phones have been placed in SILENT mode.
- Any issues or questions?
  - Use Q & A box on your screen
  - Email [AREBheartinfo@cdc.gov](mailto:AREBheartinfo@cdc.gov)



### MODERATOR:

Before we begin, there are some housekeeping items. If you are having issues with audio or seeing the presentation, please message us using the chat box or send us an email at [AREBheartinfo@cdc.gov](mailto:AREBheartinfo@cdc.gov). Please hold your questions until we reach the end of the presentation. Since this is a training series on applied research and evaluation, we hope you will complete the poll at the end of the presentation and provide us with your feedback.

## Disclaimer

The information presented here is for training purposes and reflects the views of the presenters. It does not necessarily represent the official position of the Centers for Disease Control and Prevention.

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So, without further delay. Let's get started. John, the floor is yours.



• The presentation is divided into five main sections:

- Sodium reduction and history of the Sodium Reduction in Communities Program (SRCP)
- Methods for guide development
- Guide purpose and structure
- How public health practitioners can use the guide
- Q&A

Thanks, Ally! In today's Coffee Break, I will provide an overview of the implementation guide we created during the Sodium Reduction in Communities Program or SRCP and will highlight the ways public health practitioners can support food service organizations to use the guide to determine how to plan, implement, and maintain sodium reduction strategies to achieve lasting change or to support partners doing those.

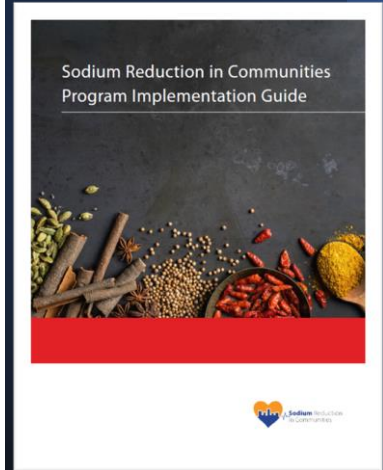
- The presentation is divided into five main sections:

1. Background on sodium reduction, a brief history of the SRCP, and sodium reduction strategies
2. Brief overview on methods used to develop the SRCP Implementation Guide
3. High-level overview of the purpose and structure of the Guide
4. Discussion on how public health practitioners can take information from the Guide to support their communities
5. And we'll end with a brief Q&A session

## Where to Locate the Guide

The Sodium Reduction in Communities Program Implementation Guide can be found at this link:

[https://www.cdc.gov/dhdsp/evaluation\\_resource/guides/srcp.htm](https://www.cdc.gov/dhdsp/evaluation_resource/guides/srcp.htm)



First, we would like to point out where the SRCP Implementation Guide can be found. The provided link is on Division for Heart Disease and Stroke Prevention's Evaluation Resources webpage and is live for downloading.

## Importance of Sodium Reduction

The 2020-2025 Dietary Guidelines recommend no more than 2,300 mg/day, yet individuals consume on average 3,393 mg/day.<sup>1</sup>

About 70% of comes from packaged and restaurant foods<sup>2</sup>

High sodium intake is associated with hypertension<sup>3</sup>, a common and costly health risk in the United States<sup>4</sup>

1. U.S. Department of Agriculture, U.S. Department of Health and Human Services (USDA/USDHHS), Dietary guidelines for Americans, 2020-2025, 9<sup>th</sup> Edition, December 2020; [https://www.dietaryguidelines.gov/sites/default/files/2020-12/Dietary\\_Guidelines\\_for\\_Americans\\_2020-2025.pdf](https://www.dietaryguidelines.gov/sites/default/files/2020-12/Dietary_Guidelines_for_Americans_2020-2025.pdf).
2. Hamack LJ, Cogswell ME, Shikany JM, Gardner CD, Gillespie C, Loria CM, et al. Sources of sodium in US adults from 3 geographic regionsexternal icon. *Circulation*. 2017;135(19):1775-1783. doi:10.1161/CIRCULATIONAHA.116.02889.
3. Zhang Z, Cogswell ME, Gillespie C, et al. Association between usual sodium and potassium intake and blood pressure and hypertension among US adults: NHANES 2005-2010. *PLoS one*. 2013;8(10):e75289.
4. Benjamin EJ, Virani SS, Callaway CW, et al. Heart disease and stroke statistics-2018 update: a report from the American Heart Association. *Circulation*. 2018;137(12):e67-e492.



- Before we get to the guide though, it would be a good idea to discuss the importance of sodium reduction.
- Average sodium intake in the United States vastly exceeds the recommended amount. The 2020-2025 Dietary Guidelines recommend individuals consume no more than 2,300 mg/day (*as part of an overall healthy dietary pattern*), yet individuals consume on average 3,393 mg/day.<sup>1</sup>
- About 70% of sodium consumed is from processed and restaurant foods with only a small portion of sodium intake coming from salt used in cooking or added at the table.<sup>2</sup>
- High sodium intake is associated with hypertension<sup>3</sup>, a common and costly health risk in the United States<sup>4</sup>

## History of the Sodium Reduction in Communities Program



- Implemented over three program rounds (2010-2021)
- Communities implemented evidence-based strategies to reduce sodium intake to no more than the recommended maximum amount as per the [Dietary Guidelines for Americans](#)
- Final program round commenced 2021 and funded six communities and two states to improve nutrition and access to lower-sodium options

5. Centers for Disease Control and Prevention. Sodium Reduction in Communities. 2022. Available from [https://www.cdc.gov/dhbsp/programs/sodium\\_reduction.htm](https://www.cdc.gov/dhbsp/programs/sodium_reduction.htm)

- One of CDC's efforts to increase access to lower sodium foods, was met through the Sodium Reduction in Communities Program.
- SRCP was implemented over 3 program rounds spanning 2010-2021 and administered by CDC's Division for Heart Disease and Stroke Prevention.
- Thru SRCP, funding was awarded to communities to implement evidence-based strategies to reduce sodium intake to no more than the recommended maximum amount as per the [Dietary Guidelines for Americans](#) which I mentioned last slide is 2,300 mg per day.
- I want to emphasize again that the majority of the sodium consumed in the U.S. is already present in packaged or prepared foods before consumption so recipients strategically worked with food service providers and food industry partners.



## SRCP Strategies



Implement Food Service Guidelines or Nutrition Standards That Include Sodium



Implement Procurement Practices



Implement Meal and/or Menu Modifications



Implement Environmental Strategies and Behavioral Economics Approaches

State and local health departments that received SRCP funding have worked with food service organizations to increase the availability and purchase of lower-sodium food options. The recipients and their partner institutions tested multiple approaches to sodium reduction, and they identified four key strategies as the most effective and feasible in which the guide is developed around:

### **1. Implement Food Service Guidelines or implement nutrition standards.**

- And to be brief this encompassed setting thresholds for sodium levels for foods served.

### **2. Implement or Change Procurement Practices to reduce sodium in foods & ingredients purchased**

- Including nutritional specifications for food service contracts and working with distributors to purchase lower sodium items.



## **1. Meal and/or Menu Modifications**

- Which are strategies such as developing new recipes or modifying existing recipes to limit salt and Procuring lower sodium ingredients and even scratch cooking.

## **2. And lastly, Environmental Strategies and Behavioral Economics Approaches**, which basically involves modifying physical and social environments to encourage selection of lower-sodium foods.

## Sodium Reduction in Communities Program Implementation Guide

### Methods for Guide Development



- Draws upon experiences and lessons learned during SRCP
- Data included:
  - Performance measures
  - Cost data
  - Key informant interviews

- The guide draws upon experiences and lessons learned during SRCP and provides detailed information on how to implement activities related to the key strategies discussed earlier.

### Methods included

- Review of SCRP evaluation data over the last 3 iterations of SRCP which included recipient-reported performance measures, gathering and analyzing cost data, and key informant interview that included both recipients and partners
- Analyses of these data were used to investigate reach, effectiveness, implementation, cost-effectiveness/ROI, adoption, and maintenance of the four strategies

- We collaborated with RTI to draft the guide and it was made available in January of this year



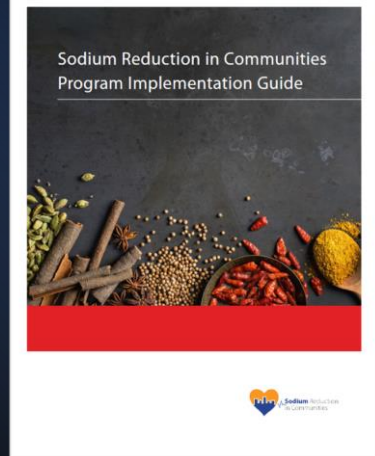
## Purpose of the Guide

- Assist food service staff and public health organizations reduce sodium in food service organizations
  - Provide guidance to food service staff to implement activities related to each sodium reduction strategy
  - ***Help public health staff to support partners in planning, implementing, and maintaining sodium reduction strategies***

- The purpose of this guide is to assist food service staff and public health organizations reduce sodium in food service organizations.
- This guide provides information and examples on how to implement activities related to each of the sodium reduction strategies. Food service staff, including registered dietitians, food service managers/directors, executive chefs, and food service line staff, can draw upon this guide to plan, implement, and maintain sodium reduction activities.
- This guide will also help frame the information so that public health practitioners can support partners in planning, implementing, and maintaining sodium reduction strategies to achieve lasting change.

## Implementation Guide Structure

- The guide is divided into five main sections:
  - Overview
  - Sodium Strategies for Cafeteria and Non-cafeteria Settings
  - Planning and Implementing Strategies
  - Planning for Sustainability
  - Conclusions
- Appendices and references are included at the end of the document



The implementation guide is divided into five main sections:

1. Overview
2. Sodium Strategies for Cafeteria and Non-cafeteria Settings (which were the four strategies previously mentioned)
3. Planning and Implementing Strategies (there are six phases in this section)
4. Planning for Sustainability
5. Conclusions

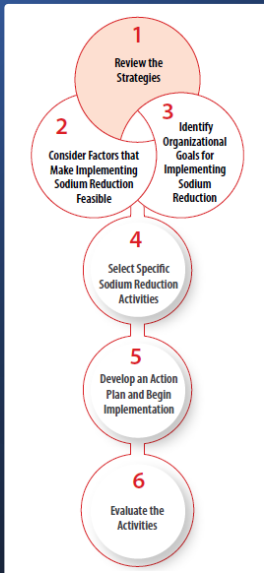
Appendices and references are included at the end of the document. There are a lot of tools in these sections and should not be overlooked. Many of the program recipients created, refined, and published these tools to help make sodium reduction activities easier for future adoption.



## How Can Public Health Practitioners Use the Guide?

To understand how to partner with and support food service organizations (FSOs) focused on implementing sodium reduction strategies

- You might be asking yourself: How, as a public health practitioners, would I use this Guide?
- Well let me start by saying that while this Guide provides a wealth of information for food service organizations, it can also help you understand how to partner with and support food service organizations focused on implementing sodium reduction strategies.
- I am now going to highlight how a public health practitioner would utilize this guide to support a partner's work in sodium reduction.



## Planning and Implementing Strategies

- The Guide outlines six phases of planning and implementation
  - The first three phases help FSOs, and public health practitioners explore the feasibility of strategies
  - The last three phases inform strategy selection and support implementation

- Lets dive into section 3 of the Guide which describes six phases for planning and implementing sodium reduction strategies
- The first 3 phases, the top of the figure, include activities that are designed to help food service organizations explore which strategies may be the best fit for them and help you determine the viability of sodium reduction for their organization
- The last 3 phases, or the bottom of the figure, focus primarily on the selection of sodium reduction strategies and implementation of those supporting activities.
- I am now going to highlight a few phases from this graphic along with tools from the guide to show how this guide can support your partner in sodium reduction implementation.

## Guide Tool: FSO Resources for Public Health Practitioners to Consider



Champions	Questions to Consider
Staff Capacity; Readiness to Change	<ul style="list-style-type: none"> <li>How many staff have the capacity to contribute?</li> </ul>
Leadership Support	<ul style="list-style-type: none"> <li>What role will leadership play implementation?</li> </ul>
Champions	<ul style="list-style-type: none"> <li>Can you identify existing leader with the FSO who can serve as a champion?</li> </ul>
Financial Resources	<ul style="list-style-type: none"> <li>Does the FSO have internal financial resources; who will fund the activities?</li> </ul>
Infrastructure	<ul style="list-style-type: none"> <li>Do kitchen staff have necessary equipment?</li> </ul>

Exhibit A.1

- Phase 2 provides guidance to assist in the identification and consideration of factors that may or may not make implementing sodium reduction strategies feasible for your partner.
- As a public health practitioner, you can support sodium reduction planning efforts by assessing the readiness of your partner to implement changes. We learned through SRCP, that assessing these components prior to implementation led to more successful adoption rates.
- In the guide you will find many tools. This is a modified version of **Exhibit A.1** which summarizes the minimum resources needed to successfully implement any of the sodium reduction strategies. It helps outline questions to consider around staff capacity, leadership support, champions, financial resources, and infrastructure.
- As you can imagine, knowing this information would be incredibly important for you and your partner to know prior to investing resources into sodium reduction
- Additionally, Phase 3 provides guidance around understanding an organizations



goals for sodium reduction. It would be important to know why a partner would even attempt sodium reduction, if staff understand why sodium reduction is being implemented their organization, or if this is a priority. The guide provides questions for a you, the public health staff, to answer to understand whether you should partner with a food service organization or not. When priorities do not align, there are misunderstandings with how sodium reduction should be implemented and maintained. Again, important information to know prior to attempting the work.

## Guide Tool: Basic Requirements for Each Sodium Reduction Strategy



Sodium Reduction Strategy	Basic Requirements
Implement food service guidelines or standards that include sodium	Organizational structure that includes policies and procedures
Implement procurement standards and practices	Use of procurement practices to supply food service
Implement meal or menu modifications	Food preparation infrastructure
Implement environmental strategies or behavioral economic approaches	Food display and/or marketing infrastructure

Exhibit 3.4

- Skipping to ahead to phase four which is all about Selecting A Specific Sodium Reduction Strategy, it would be beneficial to understand what basic requirements need to be met in order for successful implementation to take place.
- Lucky for you, **Exhibit 3.4** provides this information. This is a simplified version of the table. It should also be noted that

different food service organizations will have additional considerations in addition to the basic requirements when selecting specific sodium reduction strategies. This tool is to help set minimums for each strategy.

## Phase 5. Develop an Action Plan and Begin Implementation

Strategy: Implement Procurement Practices Activity: Purchasing Lower-Sodium Products (Non-vending)					
Implementation Step	By Whom	By When	Resources and Support Available (staff, leadership, funds, partners)	Communication	Status In Progress, Completed, Delayed
What tasks need to be done to complete this step?	Who will carry out this task?	By what date will the task be completed?	What resources are available?	What additional resources are needed?	What individuals and organizations should be informed of this task?
<b>Step #1: Identify existing procurement standards (write in)</b>					
1. Gather information on standards	Heather	3/1	Registered dietitian, on-line resources (USDA.gov, HHS.gov, FDA.gov)	None	Leadership, registered dietitian, food service managers
2. Review standards and determine which apply to the patron and setting	Karon, Heather	3/15	Registered dietitian	Patron demographic data	Leadership, registered dietitian, food service managers
<b>Step #2: Identify higher-sodium items to replace (write in)</b>					
1. Conduct a pantry assessment (food product inventory)	Ben	3/1	Pantry assessment tool, food service manager	None	Food service manager
2. Review distributor products and product availability	Ben	3/8	Registered dietitian, distributor product list	Nutritional information for product list	Distributor, food service purchasing staff

**Exhibit 3.16**

- Phase 5 has a lot of very important tools to help develop a plan of action for the sodium reduction work to take place.
- The guide provides readers with templates to create an action plan to support the implementation phase of the project with your partner. Remember, a food service partner is working within the time constraints of their business or organization, and they might not have the resources to do this on their own.
- But, you can use the templates to support them. It provides you with a starting place to support the development of an action plan that ensures individuals will be assigned key roles, they will be actively engaged in those roles and have ownership of the implementation steps from the beginning. Reviewing the action plan regularly will also help to track which individuals and organizations need to be informed about specific tasks.
- This is **Exhibit 3.16** which is a small snapshot from the guide to provide you with a glimpse of the action plan template and example.

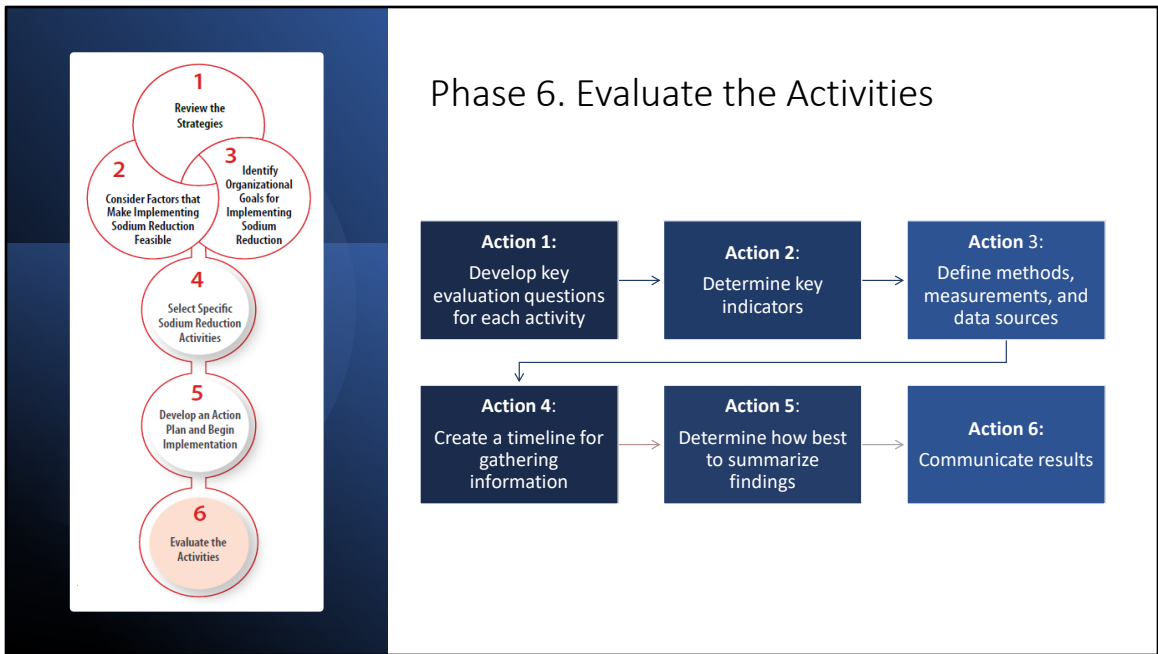
# Guide Tool: Organizational Resource Gap Analysis Worksheet

The Organizational Resource Gap Analysis Worksheet can narrow down the resources needed for each step

Resources Available	Resource Gaps	Strategies to Address Resource Gaps
<b>Staff Capacity</b>		
<ul style="list-style-type: none"> <li>Designated staff have sufficient time and availability</li> <li>Designated staff have relevant knowledge and experience</li> <li>Staff stability (level of turnover) is sufficient</li> <li>Staff culture (norms and values) align with selected strategies</li> <li>Staff receptive to making changes required to implement selected strategies</li> </ul>	<ul style="list-style-type: none"> <li>Staff are too busy or feel overwhelmed with their routine tasks</li> <li>Designated staff are resistant to implementing sodium reduction strategies</li> </ul>	<ul style="list-style-type: none"> <li>Hire and train interns, volunteers, or consultants</li> <li>Conduct internal staff training to provide background education and rationale for sodium reduction</li> </ul>
<b>Leadership Support</b>		
<ul style="list-style-type: none"> <li>Leadership views sodium reduction as an organizational priority</li> </ul>	<ul style="list-style-type: none"> <li>Leadership not supportive of sodium reduction as an organizational priority</li> </ul>	<ul style="list-style-type: none"> <li>Identify a champion within the organization to help gain leadership and staff buy-in for sodium reduction</li> </ul>

Exhibit A2

- Taking the Action Plan further requires understanding available resources, gaps in those resources, and how to address those gaps.
- The Implementation Guide provide yet another tool, The Organizational Resource Gap Analysis Worksheet (**Exhibit A.2**) to assist with this exercise.
- The type and amount of resources will likely vary based on the strategy and interventions chosen. Some strategies and interventions are more complex than others and will require more staff capacity and financial resources than others. This tool helps organize this information for everyone.



Evaluating sodium reduction activities enables food service organizations and their public health partners to understand how well activities were carried out, the barriers, facilitators, and lessons learned, and whether the organization achieved its goals for sodium reduction efforts.

You can work with your partners to do more extensive evaluations to collect data that provides insight into the successful implementation of sodium reduction activities.

The guide provides six actions that are important components of implementing a comprehensive evaluation for sodium reduction activities, which can help a food service organization, tangibly show and communicate results that might support future investments in sodium reduction.

# Planning for Sustainability

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- Determining the minimum number of resources needed to maintain activities is vital
- Revisiting and reassessing resources is critical to understand what efforts can be sustain long term
- Guide provides questions to consider (Exhibit 4.2)



Section 4 of the Guide is all about planning for sustainability

- Sustaining sodium reduction efforts may involve revisiting the planning step, with an emphasis on maintaining or expanding activities the organization has implemented.
- You and your partner may need to reassess organizational resources that can support sustaining sodium reduction efforts
- The Guide includes questions that you should consider when planning for sustainability



## Appendices

- Appendix (4)
  - Resources
    - Assessment Tools (4)
    - Resources on Implementation (25)
    - Resources on National Guidelines (7)
    - Resources on Evaluation (4)

Finally, it needs to be highlighted that the Appendices in the guide are packed with resources and tools. Some of the tools I highlighted in the presentation but there are 4 resources around assessment tools, 25 focused on implementation, another 7 on national guidelines, and finally 4 resources on evaluation. I feel we could do a coffee break on each section because there is that much content in the appendices alone.



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## Conclusion



To conclude, although implementing sodium reduction strategies and activities takes time, planning, and ongoing efforts, food service organizations can lead the way in promoting healthy choices and ultimately in improving the health of their patrons and their own businesses.

Because individuals in the United States consume on average far more sodium than recommended, modest sodium reductions made by food service organizations can reduce health risks and even save lives. Thus, the role and importance of these organizations cannot be understated. But they do not have to undertake these efforts alone.

Public health practitioners can support food service organizations in the planning, implementing, and sustaining of sodium reduction efforts. This implementation guide was developed to support food services organizations and provide public health staff with tangible tools and guidance to support sodium reduction work from the ground up.



#### MODERATOR

This concludes today's Coffee Break presentation. At this time, we will take questions from the audience. Please enter your question into the Q/A feature at the bottom of your screen. As we wait for questions from the audience, I'll ask John a question to get us started.

Question to John: Do you have to use every section to implement strategies, or can you move around through the guide based on what is happening with a food service partner?

Answer: That's a great question! As we know, real world public health isn't fluid. You have to adapt to what challenges or circumstances you are faced. Some partners will need some direction on how to even start the process, so the guide from the beginning to end would be helpful for them. But what you or your food service partner might be experiencing could be pulled from one section of the guide. So I would recommend skipping to specific sections or tools that can help you or your partner. There is no need to go through section by section if you don't need too.