



April 19, 2017

TO: The Maryland-National Capital Park and Planning Commission

VIA: Patricia C. Barney, Executive Director *Patricia C. Barney*

William Spencer, Human Resources Director *W. Spencer*

FROM: Jennifer McDonald, Benefits Manager *J. McDonald*

SUBJECT: Restated Resolution for Adoption of Healthy Vending Requirements

Action Requested

Approve the restated Healthy Vending Machine policy that accompanies Resolution 17-02 for the purpose of requiring healthy food and beverage options in vending machines located on property of The Maryland-National Capital Park and Planning Commission. The restated resolution establishes healthy vending contract requirements to achieve specified nutritional standards.

Background

The Commission considered Resolution 17-02 during its meeting on March 15, 2017, and voted favorably for its adoption after a spirited discussion. At that time, however, the body expressed a clear desire for certain conceptual amendments to the policy, and members also raised a few outstanding questions. The restated resolution is presented accordingly in order to capture the amendments previously discussed.

In addition, after the Commission meeting, representatives from a local soft drink bottler and an advocate for the bottling industry contacted our staff to request reconsideration of the policy. They specifically proposed making the following three changes to the policy:

- Increase the caloric limit of the universal beverage requirements from 250 to 290.
- Remove the product placement requirements.
- Remove the pricing requirements.

These proposals were, in turn, vetted internally among all of the departmental vending program contract managers (subject matter experts). Based on these internal discussions, the recommendation by [Health and Benefits] is to accept the first proposal only, and that change is accordingly reflected in the restated policy presented now. Two additional changes, recommended by the Department of Parks and Recreation, were also vetted and are included in the restated policy.

Restated Provisions

In this light, we have highlighted our recommended changes below:

REVISION #1

I. Universal Vending Machine Requirements

(a) The following criteria must be met by all items offered in vending machines.

(1) Any packaged food and beverage item offered shall contain no more than:

(A) 0.5 grams of trans-fat per serving; and

(B) ~~200-milligrams~~ **270 milligrams of sodium per package.**

(2) Any beverage container offered shall contain no more than:

(A) ~~250-calories~~ **290 calories;**

(B) 20 fluid ounces.

Rationale for the proposed revisions:

Sodium: Requiring the sodium content to be less than or equal to 200 does not allow for sports drinks such as Powerades and Gatorades, unless sold in mini-size (12 fl. Oz), as their sodium content is more than that; 250 mg and 270 mg per beverage, respectively. Since, at many of our facilities, we host sporting events and have places where people engage in intense physical activity, not being able to have these sports drinks does not seem practical.

Calories: The bottling representatives asked that we consider increasing the caloric content of beverages because it would essentially ban several products. Part of their rationale is that there are bottling plants in both Montgomery and Prince George's counties. The ban will result in decreased in sales which in turn will reduce production and eventually eliminate jobs in the counties we serve. They requested that we look at the big picture of how this limit may affect the economy and jobs within our community.

REVISION #2

II. Healthy Vending Standards

- (a) Healthy Food Choices shall meet the following specifications:
 - (1) Individual healthy food choices offered in vending machines must meet the following criteria:
 - (A) No more than 200 calories per package;
 - (B) ~~Less than 35% of total calories from fat except for foods containing 100% nuts or seeds with no added fats.~~ **Less than 35% of total calories from fat except for nuts, nut butters, seeds, reduced-fat cheese, dried fruit & nut combos;**

Rationale for the proposed revision:

This proposed change, taken from a set of guidelines on how to implement Healthy Vending produced by the California Department of Public Health, was recommended by the Department of Parks and Recreation. This change will allow for more nut-based granola bars and nut and fruit mixes to qualify as being healthier as long they still meet the total calorie, saturated fat, and sugar guidelines set forth.

REVISION #3

III. Healthy Vending Contract Requirements

- (a) All new vending machine service contracts and all vending machine service contract renewals entered into after July 1, 2017 shall require that:
 - (1) At least 50% of the food and beverage items offered in vending machines meet the requirements listed in Section (II) above.
- (b) All new vending machine service contracts and all vending machine service contract renewals entered into after July 1, 2019 must require that:
 - (1) ~~At least 65% of the food and beverage items offered in vending machines meet the requirements listed in Section (II) above.~~ **The agency will strive to increase the 50% (percentage) in subsequent years.**

Rationale for the proposed revisions:

Recommendations were made by the Commissioners on March 15, 2017 to monitor the program for the first year before deciding new goals.

REVISION #4

VI. Compliance, Evaluation and Reporting

~~(b) Each Department shall monitor compliance and issue a report to the Commission at least once every other year post enactment on the status of implementation.~~ **Each Department shall monitor compliance and issue a report to the Commission on the first anniversary of this Resolution and at least every other year.**

(d) Evaluation and reporting shall meet the following:

(1) At the end of the first year, June 30, 2018, the M-NCPPC will evaluate the results of the program and will assess what the new goals and standards should be, effective July 1, 2019.

(2) Before July 1, 2019, the M-NCPPC will provide a report to the Commission on the assessment of the program. Depending on the results of the assessment, the agency will strive to increase the healthy vending product requirements to a percentage greater than 50%.

(3) The agency will conduct a study of the number of products in vending machines that have artificial sweeteners and provide research data on the long-term effects of the use of artificial sweeteners. Depending on the results of the research, requirements regarding the use of artificial sweeteners may be added to the Healthy Vending Machine policy. A report will be presented to the Commission by July 1, 2018.

Rationale for the proposed revisions:

Recommendations were made by the Commissioners on March 15, 2017 to provide reports on the results of the program for the first and second years before deciding new goals and to provide a report on the use of artificial sweeteners.



THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION

6611 Kenilworth Avenue • Riverdale, Maryland 20737

M-NCPPC RESOLUTION NO. 17-02

ADOPTION OF HEALTHY VENDING MACHINE POLICY

WHEREAS, According to the Centers for Disease Control and Prevention, 112,000 Americans die each year due to diseases such as heart disease, cancer, stroke and diabetes – diseases linked to poor nutrition, excess weight, and lack of physical activity; and

WHEREAS, One-third of all White children and half of all African-American and Latino children born today will likely develop type 2 diabetes in their lifetimes, according to the Centers for Disease Control and Prevention. Undiagnosed or uncontrolled diabetes can lead to debilitation, blindness, serious heart and kidney complications, amputations, and even death; and

WHEREAS, According to the American Academy of Pediatrics, the percentage of teenagers who were diagnosed with type 2 diabetes or pre-diabetes soared from 9% in 1999 to 23% in 2008; and

WHEREAS, Prevention and management of chronic disease is essential for improving the overall health, life expectancy, and quality of life for all patrons and employees of the Maryland-National Capital Park and Planning Commission (“M-NCPPC”); and

WHEREAS, M-NCPPC spends \$25 million each year to fund its employee health insurance program and invests additional dollars in its employee wellness program. Reducing chronic diseases through improvements to M-NCPPC’s food environment may help improve employee health and reduce taxpayer costs; and

WHEREAS, According to the Centers for Disease Control and Prevention and other health experts, small steps, like making healthier food and beverages more widely available in vending machines, can help reduce Type 2 diabetes, obesity, and other chronic diseases; and

WHEREAS, the Commission desires to adopt a policy that promotes healthy eating by requiring healthy choices be included in vending machines on M-NCPPC property.

NOW THEREFORE, BE IT RESOLVED that the Maryland-National Capital Park and Planning Commission hereby adopts a policy setting goals and standards for the availability of healthy choices in vending machines on M-NCPPC property as reflected in ATTACHMENT 1 attached hereto; and

BE IT FURTHER RESOLVED that the Commission does hereby authorize the Executive Director and Department Directors to take action as may be necessary to implement this resolution.

HEALTHY VENDING MACHINE POLICY**I. Universal Vending Machine Requirements**

- (a) The following criteria must be met by all items offered in vending machines.
- (1) Any packaged food and beverage item offered shall contain no more than:
- (A) 0.5 grams of trans-fat per serving; and
 - (B) 270 milligrams of sodium per package.
- (2) Any beverage container offered shall contain no more than:
- (A) 290 calories; and
 - (B) 20 fluid ounces.

II. Healthy Vending Standards

- (a) Healthy Food Choices shall meet the following specifications:
- (1) Individual healthy food choices offered in vending machines must meet the following criteria:
- (A) No more than 200 calories per package;
 - (B) Less than 35% of total calories from fat except for nuts, nut butters, seeds, reduced-fat cheese, dried fruit & nut combos;
 - (C) Less than 10% of calories from saturated fat; and
 - (D) No more than 35% of calories from total sugars except for 1%, 2%, or non-fat dairy products, non-dairy milk products, fruits and vegetables.
- (2) At least one healthy food choice offered must meet the Food and Drug Administration's definition of "low sodium" (<140 mg per serving).
- (3) Sugarless chewing gum and mints also meet healthy food choices specifications.
- (b) Healthy Beverage Choices shall meet the following specifications:
- (1) Individual Healthy Beverage Choices offered in vending machines must contain fewer than 40 calories per serving unless specified below.
- (2) The following beverages also meet Healthy Beverage Choices nutritional standards even though they exceed 40 calories per serving: Fat-free milk; 1% low fat dairy milk; Calcium or vitamin D fortified soy milk with less than 200 calories per container; packages containing 12 ounces or less of 100% fruit juice, vegetable juice

or fruit juice combined with water with no added caloric sweeteners and no more than 200 milligrams of sodium per container.

(3) Vegetable juice must contain <230 milligrams of sodium per serving.

III. Healthy Vending Contract Requirements

- (a) All new vending machine service contracts and all vending machine service contract renewals entered into after July 1, 2017 shall require that:
 - (1) At least 50% of the food and beverage items offered in vending machines meet the requirements listed in Section (II) above.
- (b) The agency will strive to increase the 50% (percentage) in subsequent years.

IV. Product Placement

- (a) Healthy Food or Beverage Choices shall:
 - (1) Be displayed in a way that is easily distinguishable from food and beverages that do not meet Healthy Vending Standards listed in Section (II) above; and
 - (2) Be stocked in positions with highest selling potential.
- (b) Water without added caloric sweeteners is required to be stocked in beverage machines.
- (c) Beverages that do not meet the Healthy Vending Standards listed in Section (II) above shall be placed in positions with the lowest selling potential.

V. Pricing and Labeling

- (a) Food and beverage items that meet the Healthy Vending Standards in Section (II) must be comparatively priced or less expensive than products that do not meet the standards.
- (b) All vending machines shall display nutritional labeling that, at a minimum, complies with the standards for nutritional labeling set forth in 21 CFR, sections 101 and 109, as may be amended from time to time.

VI. Compliance, Evaluation and Reporting

- (a) To assist and oversee the implementation of the nutrition and procurement standards required by this policy, each Department Head shall designate a staff person within the

Department to disseminate information and train M-NCPPC staff and vendors on the standards to support compliance.

(b) Each Department shall monitor compliance and issue a report to the Commission on the first anniversary of this Resolution and at least every other year. The report shall include:

- (1) An assessment of Department compliance with this policy;
- (2) Successes, challenges, and barriers experienced in implementation; and
- (3) Recommendations for improvement of the standards and compliance.

(c) Future requests for bids and contracts for the procurement or provision of covered food and beverages shall incorporate the requirements of this policy. To facilitate monitoring and compliance with the requirements of this policy, future requests for bids and contracts for covered food and beverages shall require accurate and timely financial reports from vendors, provide for periodic reviews or audits of financial records, and include specific breach of contract and enforcement provisions relating to the requirements of this policy.

(d) Evaluation and reporting shall meet the following:

(1) At the end of the first year, June 30, 2018, the M-NCPPC will evaluate the results of the program and will assess what the new goals and standards should be, effective July 1, 2019.

(2) Before July 1, 2019, the M-NCPPC will provide a report to the Commission on the assessment of the program. Depending on the results of the assessment, the agency will strive to increase the healthy vending product requirements to a percentage greater than 50%.

(3) The agency will conduct a study of the number of products in vending machines that have artificial sweeteners and provide research data on the long-term effects of the use of artificial sweeteners. Depending on the results of the research, requirements regarding the use of artificial sweeteners may be added to the Healthy Vending Machine policy. A report will be presented to the Commission by July 1, 2018.

(e) From time to time but at least once every five (5) years, the Health and Benefits Office shall review, and if necessary, update the Healthy Vending Standards in Section (II) to reflect advancements in nutrition science, dietary data, new product availability, and/or updates to the Dietary Guidelines for Americans.

Submitted Comments



April 18, 2017

Jennifer McDonald
Benefits Manager
Maryland-National Capital Park and Planning Commission
6600 Kenilworth Avenue
Riverdale, MD 20737

Dear Ms. McDonald:

The American Heart Association strongly objects to the revisions for Restated Resolution 17-02, to be considered by M-NCPPC Commissioners on April 19, 2017. The revised provisions not only fail to meet the national nutrition guidelines approved by the Commission on March 15, 2017, but this draft incorrectly and confusingly characterizes unhealthy food and beverages as "healthy." The Restated draft violates the spirit and intent of the March 15 vote of approval, by placing the interests of the beverage industry ahead of the health of children and families in Montgomery and Prince George's Counties.

The Restated Resolution weakens sound public health policy, which is based on science and decades of research. The policy, as approved in March, allows individuals to make healthy choices. The Restated draft eliminates much of that choice. The Restated draft would allow vending machines on M-NCPPC property to be stocked with high calorie, high sugar, high sodium products, rather than the healthier options produced and sold by those very same companies.

Jurisdictions throughout the country, including Baltimore City and Washington, DC have adopted healthy vending standards similar to those approved by M-NCPPC in March. By weakening these already adopted standards, M-NCPPC will become a national outlier, choosing the interests of big soda instead of the wellbeing of Maryland kids.

*"Building healthier lives,
free of cardiovascular
diseases and stroke."*

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The nutrition standards in the approved March 2017 policy are based on the Dietary Guidelines for Americans: <https://health.gov/dietaryguidelines/2015/>

- Page 52: Americans are consuming more solid fat (saturated and trans fat) than is recommended
- Page 54: Added sugar intake is higher than recommended, justifying the need for a calorie cap on beverages, since those calories are primarily coming from added sugar
- Page 58: Americans are consuming far more sodium than is recommended

Sugary drinks are the single largest source of added sugar in the American diet, hence the need to limit consumption of added sugars. The 250 calories per container standard does not eliminate all sugary drinks, just the drinks with especially high levels of added sugar. For example, a full-calorie 20-ounce Coca-Cola contains 240 calories, and meets the criteria. 250 calories is approximately 15.5 teaspoons of added sugar. The American Heart Association recommends that women and children consume no more than 6 teaspoons (100 calories) of added sugar per day and men no more than 9 teaspoons (150 calories).

Allowing 250 calorie sugary drinks already goes considerably beyond the advice of health professionals for daily consumption. Therefore, there is no good reason to amend the Resolution with such weakened, unhealthy standards.

That is the basis and intent of healthy vending, to provide healthy options and to encourage healthier choices, particularly in venues like parks. The proposed revisions create a less healthy environment for M-NCPPC visitors. Moreover, the companies that produce these high calorie, high sugar beverages also sell zero and low calorie, low sugar options. The market demands these healthier products, and they should be widely available in M-NCPPCC vending machines.

The American Heart Association guidelines included in the originally approved policy generally align with guidelines developed and implemented by the Federal government and other national health organizations. They are based on rigorous science and research. The revised draft is based on the marketing goals of big soda.

In addition to reducing added sugar, it is imperative that we do more to help people consume less sodium. Evidence links excess sodium to high blood pressure, which increases the risk of heart attacks, stroke, and kidney disease. Too much sodium also has been linked to kidney damage, stomach cancer, and increased urinary calcium secretion, potentially leading to osteoporosis. About half the U.S. adult population faces increased risk of high blood pressure due to excess sodium, and more than 90 percent of school-age children consume too much sodium. Evidence shows that a lower sodium intake early in life may have a significant impact on lifetime blood pressure.

The policy approved on March 15 included a sodium limit of 200 calories per package. The American Heart Association recommends no more than 2,300 milligrams per day, and an ideal limit of no more than 1,500 mg per day for most adults. At 200 mg per snack, that allows about 10% of a person's recommended sodium intake, which is an appropriate percent for a snack.

Many communities across the country have already adopted healthy vending guidelines that are stronger than the 270 mg limit the industry is suggesting. If the sodium standards are increased to 270 mg, they will become markedly weaker than many policies in place across the country, including community policies in less progressive states like Arkansas, Mississippi, Missouri, Oklahoma, and South Carolina.

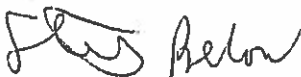
The American Heart Association is deeply troubled that despite a strong and vocal majority of M-NCPPC Commissioners voting to approve this common-sense health policy in March, interference by industry has resulted in staff making changes that contradict the objectives that the Commissioners intended to enact.

The previously approved policy creates an opportunity for M-NCPPC to be widely promoted as a model policy for peer agencies around the country to emulate. The revised draft is a favor to big soda, and includes weakened standards which AHA cannot support.

The American Heart Association strongly opposes the calorie, sodium, and fat amendments to Resolution 17-02. We encourage M-NCPPC to restore the guidelines from the original, approved draft, along with the healthy, science-based policy that the Commissioners approved in March.

Please contact me with any questions at stuart.berlow@heart.org or 703-248-1722.

Sincerely,



Stuart Berlow
Director, Government Relations
American Heart Association
Greater Washington Region



Date: April 17, 2017
To: The Honorable Casey Anderson, Chair The Honorable Elizabeth M. Hewlett, Vice Chair
Members of the Maryland-National Capital Park and Planning Commission
From: Shawn McIntosh, Executive Director, Sugar Free Kids Maryland
Re: Resisting Beverage Industry Amendments to Resolution 17-02 for Healthy Vending

On behalf of Sugar Free Kids Maryland I am requesting that the proposed amendments to increase calorie limits, sodium limits, and fat content definitions be rejected and that the health standards be returned to those that were passed for Healthy Vending Resolution 17-02 by a majority vote on March 15, 2017.

The originally proposed health measures are not arbitrary; they are evidence based recommendations from the American Heart Association, the Center for Science in the Public Interest and the National Alliance for Nutrition and Activity. They are best practices that have been implemented in jurisdictions across the country.

While we recognize that patrons of recreation centers may desire sports drinks, we are concerned about the health impacts of the large containers that have over 250 calories and more than 200 milligrams of sodium. There are other options including smaller containers and lower calorie, lower sodium products that would fit within the originally proposed standards, if vendors choose to offer sports drinks.

As far as the concerns regarding job loss, we are not aware of any jobs lost as a result of healthy procurement policies that have been implemented in over 80 jurisdictions. In fact, with data that shows an increase in sales as a result of healthier choices, it seems logical that the worst case scenario would be a shift in production towards healthier items.

On a final note, at the hearing on March 15th, after the majority of commissioners voted in favor of the resolution with the American Heart Association standards intact, Commissioner Hewlett expressed a desire for M-NCPPC to get public recognition for being a leader in setting healthy vending standards. Sugar Free Kids has been working to coordinate a press conference that would take place after ratification of the resolution. However, we can only celebrate this as a victory if the original resolution is ratified. The proposed changes do not meet our standards for optimal health impact.

We hope you will reverse this detrimental recommendation and return the resolution to the standards that were passed by the Commissioners of M-NCPPC.



The Johns Hopkins Medical Institutions

Lawrence J. Appel, MD, MPH • Hsin-Chieh "Jessica" Yeh, PhD
Director Associate Director

Date: April 17, 2017

To: The Honorable Casey Anderson, Chair
The Honorable Elizabeth M. Hewlett, Vice Chair
Members of the Maryland-National Capital Park and Planning Commission

From: Lawrence J. Appel, MD, MPH
C. David Molina, MD, MPH, Professor of Medicine with Joint Appointments in
Epidemiology, International Health (Human Nutrition) and Nursing
Director, Welch Center for Prevention,
Epidemiology, and Clinical Research
Johns Hopkins Medical Institutions

Re: Resist beverage industry amendments to Healthy Vending Resolution 17-02

I greatly appreciate the opportunity to provide testimony on the current resolution under consideration. In the strongest possible terms, I urge you to resist industry-proposed and staff recommended amendments to the Healthy Vending Resolution. Resisting these amendments will greatly promote important lifestyle changes and ultimately improve the health of your citizens, especially children and young adults.

Let me first document my credentials.

- I am a physician and clinical researcher at the Johns Hopkins University School of Medicine and the Bloomberg School of Public Health. The focus of my career is especially relevant to the resolution under consideration. Specifically, I have spent most of my career conducting research to prevent cardiovascular and kidney diseases, with a particular emphasis on the role of lifestyle changes. I have completed numerous studies, typically sponsored by the NIH. These studies have had a tremendous impact on health care policy. For example, I led the study which developed the DASH diet and which documented its beneficial effects. I have also implemented numerous lifestyle intervention studies, most of which tested weight loss interventions.
- I am an active volunteer of the American Heart Association (AHA). I chaired its highly influential Nutrition Committee. In the process, I have co-authored numerous scientific statements, including statements on dietary factors to control blood pressure and its landmark statement on sugar-sweetened beverages and health. I also chaired the AHA Council on Lifestyle and Cardiometabolic Health.
- I have had a prominent role in developing policy recommendations. I served on the 2005 and 2010 US Dietary Guidelines Scientific Advisory Committees, which set dietary recommendations for all Americans. I have served on four Institute of Medicine (IOM) studies. I was elected to the Institute of Medicine (IOM), which was recently renamed the National Academy of Sciences, in 2014. And in 2015, I was elected to the Association of American Physicians (AAP).

In the process of conducting my research and serving on these scientific advisory committees, I have thoroughly evaluated evidence on the relationship of diet and health, including the relationship of sugar-sweetened beverage intake with weight gain and on the relationship of obesity with adverse health outcomes. As a result of these experiences, I am extremely familiar with the scientific issues related to the resolution under consideration. I want to make a few key points:

1. AHA nutrition standards are based on documented nutrition science. Weakening them goes against the stated intent of the resolution. The American Heart Association nutrition standards, which form the core of Resolution 17-02, are based on the most up-to-date research. For communities wanting to improve the food environment and the health of their employees and visitors to public property, the AHA standards represent the best practice given current national dietary guidelines and evidence.

A typical 20 oz. bottle of regular soda, for example, contains 240 calories and more than 2.5 times the daily recommended limit of sugar for most adults and children (i.e., greater than 16 teaspoons per container). Increasing the calorie limit for drinks in parks and recreation vending machines to 290 calories would, by default, also significantly increase the amount of sugar offered to consumers in a single container by more than 3 teaspoons per drink. According to industry demands for increased sugar, salt, and calories in the vending machines would be a mistake if your intent is to improve health in Montgomery and Prince George's Counties.

2. Regular sports drinks are not needed by most recreational athletes, visitors to parks, and certainly not employees at work. According to media reports, the industry would like you to accommodate more of its larger sized sports drinks, thereby increasing the sodium limits for drinks in vending machine drinks. As passed in March 2017, Resolution 17-02 already allows for sports drinks to be sold in vending machines (albeit in smaller containers due to their high sodium content). According to nutrition experts, most athletes do not need sports drinks to rehydrate or recover. Please see the attached recent research brief on sports drinks that discusses youth sports drink consumption and positions of the American Academy of Pediatrics, American College of Sports Medicine, the American Academy of Nutrition and Dietetics and others on use of these drinks.
3. Changing the environment is critical to reducing diabetes prevalence and population weight. Given the massive scope of the obesity epidemic and the limited effectiveness of individual-based interventions, we CANNOT rely solely on interventions and programs that target individuals. Rather, we need a dual strategy that also changes the environment by making the low calorie, low sugar choice, the default. Proposals to replace sugar sweetened beverages with non-caloric beverages are an important step in creating an environment that promotes healthy weight and that prevents excessive weight gain, particularly in children.

4. Other communities around the country are passing bills and resolutions that adhere to the AHA or similar standards. These policies are now mainstream, part of a rising wave of initiatives among employers, and local and state governments. More than 80 local and state governments have policies in place to improve the food environment of their communities. Importantly, this is not limited to government. Many employers are likewise making dramatic changes to the workplace food environment in efforts to improve the health of their employees and reduce unsustainable medical costs. If the intent of this resolution is to improve health as is stated throughout the text of the resolution, then you should vote against industry-proposed amendments that would increase the amount of sugar, salt, and calories available in parks and recreation vending machines.

The Maryland-National Capital Park and Planning Commission now has a choice. I strongly urge it to remain in the vanguard of employers and mainstream organizations that are changing the default to promote the health of its constituents. Acceding to industry demands for more sugar, salt, and calories in vending machines would be a mistake and will not help you accomplish your intended goal of promoting health. I urge you to vote against the industry-promoted and staff recommended changes to Resolution 17-02.

Williams, Gayla

From: Dreyfuss, Norman
Sent: Tuesday, April 18, 2017 10:52 AM
To: MCP-Chair
Subject: FW: County Park Vending Machine Standards

From: Jennifer Hirsch
Sent: Tuesday, April 18, 2017 10:51:37 AM (UTC-05:00) Eastern Time (US & Canada)
To: Hewlett, Elizabeth; dorothybailey611@hotmail.com; mgeraldo@rglaw.net; a.s.washington@verizon.net; Doerner, William; Anderson, Casey; marye.wells-harley@mncpp-mc.org; Fani-Gonzalez, Natali; Dreyfuss, Norman; Cichy, Gerald
Subject: County Park Vending Machine Standards

Dear Commissioners,

I am writing to respectfully request that you support the vending guidelines proposed by the American Heart Association and do NOT validate amendments inserted by the beverage industry. Vending machines are an easy way to increase access to more healthful food choices for our children. Consistently offering unhealthy food to our children through vending machines is a failure to prioritize the health of our youth over the big beverage lobby.

Big Soda's back-door amendments to the vending standards for parks add more sugar, salt, calories and fat, exceeding the nationally accepted standards from the American Heart Association. Big Soda prioritizes their perceived profits over the health of our children. You should return to the original vending guidelines proposed by the American Heart Association.

Thank you for your consideration.

Jennifer Hirsch
MOCO Resident and mother of 2