

[Send to printer](#) [Close window](#)

From the Field: Miracle in New Milford

BY MONICA KIDD, M.D.



WALTER KIDD

Marydale DeBor greets me at the door of her New Milford Hospital office, her dachshund Ticho barking out her own welcome from within. I've come here as a Canadian family doctor interested in hospital food. I'm dismayed by what I've seen in most institutions in my country—food that is too packaged, too lifeless, too fried—and have read about this small hospital doing things right in New Milford. I've come to see for myself.

Within moments of sitting down with me, DeBor smooths her bright blue jacket and levels her gaze. “We’re pretty radical about this,” she says. “We consider good food part of the scope of practice of medicine. It makes me so angry, what we’re feeding people. We’re making people sick. It’s just so completely immoral.”

Sounds like I've come to the right place.

New Milford Hospital began its road to good food back in 2005, when DeBor, a lawyer and activist in the field of women’s health, moved to town from New York City and was hired as the hospital’s vice president in the Department of External Affairs. Not long after, the hospital also hired a new CEO, Dr. Joseph Frolkis, who just happened to work in the field of preventive cardiology. Sensing an opportunity, DeBor knocked on his door and asked if she could do something about the food. His reply: “Absolutely.”

She teamed up with pediatrician Diane D'Isidori and chef Anne Gallagher at the September Connecticut Farmland Trust event that celebrates local farmers and local food. “We’d all been very upset with what we’d been seeing with pediatric patients, with these increasing obesity rates and type II diabetes,” recalls DeBor. (According to the Centers for Disease Control, one of every six Americans between ages 2 and 19 was obese in 2009.) “So we said, ‘You know what? We just have to start.’”

Their first step was to get to know the local farmers. In 2007, they got together with the Silo Cooking School at nearby Hunt Hill Farm and created a series of classes co-taught by a farmer, a chef, and a physician, nurse or dietician. “The farmer would bring in a central ingredient for whatever was on the menu,” says DeBor. “Students would cook the food, and the guy who ran our prevention clinic for cardiac disease would talk about why it is essential to eat this way. People loved it.”

They had so much success with adults, they then moved on to the kids that pediatrician Diane D'Isidori was so worried about, and Youth Chef Advocates was born. It's a program for public school kids in seventh and ninth grades involved with the local youth

agency. “They’re not the jocks and overachievers—put it that way,” says DeBor. They started with 22 kids, and offered a nine-month program that took them out on a boat to see how scallops live, and are caught and processed, and on a wagon ride to see how farms work. Each trip, they’d bring back their harvest and learn what to do with it.

“They all wear proper white chef’s outfits, which are to be clean and pressed for every class,” explains DeBor. “They have professional knife kits, and they really learn how to be in the kitchen. They cannot have their iPod on, they cannot have their cell phone. And they present the meal. They come out, explain the menu, where the ingredients are sourced from, make eye contact, speak politely. So they also learn respect, and to really love these farmers.”

Finally it was time to move on to making changes in the hospital. Not being familiar with hospital food purchasing herself, DeBor hired John Turenne to help. Turenne now heads a company called Sustainable Food Systems, but a few years back, as DeBor tells it, he was executive chef at Yale College when Alice Waters’—yes, that Alice Waters—daughter was a student there.

“She was unimpressed with the food,” says DeBor, “so she did an Alice Waters and flipped out, went and saw the president and stomped her feet—was generally outraged. The president calls up the chef and says, ‘I have a parent here who wants to talk to you.’ So John walks in and his jaw drops when he sees who’s there. He and Waters started a pilot project in the college to improve the food, and soon the other kids were counterfeiting their IDs to get into his cafeteria.”

Turenne helped DeBor draw up a request for proposals (RFP) to find a new vendor to turn things around in the New Milford Hospital kitchen. The RFP included explicit prohibitions against fried foods, processed foods and high fructose corn syrup. Eventually the contract went to Unidine. As DeBor recalls, it was a rough transition: First, they had to part ways with their old vendor, then came six months of removing deep-fat fryers, improving on badly designed workspaces and retraining kitchen staff to cook from scratch. But by the end of those six months, New Milford's rating with Press Ganey, a national organization that surveys patient satisfaction for hospitals, went from the 30th percentile to the 99th. That's a big deal for a hospital that wants to attract new patients.

"And talk about reducing waste!" says DeBor. "We don't have all that packaging, and we don't throw food away. Any unused fresh food goes in the stockpot for the chicken soup the next day—you know, like you do at home."

New Milford Hospital now has six local farms growing for it. To the extent that they serve meat—and mostly they don't—they try to serve pork, which is raised without growth hormones and nontherapeutic antibiotics. Employees and visitors like the new food, too; cafeteria numbers have gone up, and so has revenue.

Through DeBor's "über-organizer/administrative" efforts, the hospital has managed to fund all the extra food initiatives through outside sources; the current hospital food budget—around \$850,000 per year—is about the same as it was before the healthy changes. That's largely, says DeBor, because they've eliminated so much waste.

So, fine: New Milford took on food and won. But why bother? Why go to all the trouble of breaking up with their old vendor, ripping out their old kitchen, retraining their staff for the sake of a few vegetables? No one expects any great shakes from hospital food anyway.

"I looked at this place," recalls DeBor, "and I thought, 'What can I do to make a difference?' I moved up here from the city for personal reasons after 9/11, and sort of fell into this job. It was part of building a life here. I took it on because food policy in this country is making entire populations of people sick, and the poor and black and brown among us even sicker. It's shameful. People love food. It says something about their culture—it's a gift, it's warmth, and it's the easiest thing to fix."

We leave our little boardroom for a tour of the cafeteria and kitchen. On the line today are two soups: chicken and rice, and sweet potato, corn and kale. There's an orzo and quinoa salad, an herb-crusting salmon dish, and an open-faced turkey ciabatta sandwich. Inside the double doors to the kitchen, a massive pot of soup stands simmering. Two boxes of local kale and cauliflower still sparkle from being washed. The retail menu rotation for the week is posted on a bulletin board: Tomorrow's lunch features roasted plum tomato soup, or potato leek if you prefer. There's Mediterranean ravioli in an eggplant-chick pea-rosemary-cherry tomato sauce. Or you could opt for the portobello burger with Gorgonzola and charred red onion.

Out behind the kitchen is the kitchen garden. There's basil and parsley and sage. Fresh lavender for the hospital's signature lavender scones. And spilling over the wire fence is a bean plant from which the chef harvested two gallons just this morning. New Milford is a small hospital, with fewer than 100 licensed beds. But this new food culture is turning people's heads, and it makes DeBor very happy. "You hear people saying, 'You cannot believe the food at the hospital.' And that's exactly what I wanted them to say."

Let me just say that Mark Mankin could stunt-double for Philip Seymour Hoffman. I'm not sure what he would think of that comparison, but I mean it in the best possible way. He's big in a ball-capped, deep-voiced, blond kind of way—just the kind of guy you'd want as executive director of the New Milford Youth Agency, the guy who oversees 23 programs ranging from latchkey support through substance abuse and confidential counseling through rehabilitating juvenile offenders. He's also the de facto head farmer here at the 126-acre Sullivan Farm, one of the six farms that now produce for New Milford Hospital.

"Years ago, we took a different road from traditional counseling," explains Mankin. "We started this program with six or seven really angry 17- and 18-year-old males. It was brutal, pulling them apart in these massive fights. But most of the kids were able to get through college. Now we mostly take kids who have an interest in agriculture, soil conservation—that kind of thing."

Today the farm property is picture-perfect, with large tended fields and an army of massive trees set against the rock cuts and verdant hills of the Berkshires. When the youth-agency folks arrived years ago, though, the place hadn't been farmed in over a decade and was mostly brush. A friend of Mankin's with a tree spade spent a week helping them move dozens of 30-foot trees in from around town. The barn was also completely destroyed, so the group had to put on a new roof, new siding and all new windows. The result, Mankin says, is a tremendous sense of ownership: "It's not 'the' farm, it's 'our' farm."

Mankin is temporarily distracted by a rather small kid driving past on a rather large John Deere tractor. Kids grow up fast on a farm. He seems to watch in disbelief, then jokes, "Where's the big tractor?"

The driver, a teen with short brown hair, shrugs and yells over the engine: "It's in the back. I parked it in the back."

"Oh, okay. I was just, you know . . . silly me."

The conversation comes back to weather and climate change, which Mankin says has hurt the maple syrup operation, but also gives them three crops of tomatoes a season, along with watermelons. If he had his way, they'd start planting peanuts; he learned about peanut farming from an episode of the TV program "Guess How It's Done." Which cues me to ask about his background in farming.

"I grew up out in Colorado, and we did a lot of haying there," he says. "That's the only reason we grow horse hay here at the farm, which is very difficult to do. Anyway, I knew how to drive the tractors, drive the baler. The vegetable part of it we literally did by trial and error, a lot of reading and talking to other farmers. And each staff member brings a little knowledge."

The kid from the tractor hops off, and he and his twin brother walk out with us for a tour of the garden. "We're drowning in tomatoes," Mankin says. I'm not sure if this is a complaint or a boast. "We're doing almost 400 pounds a week," he adds. "Last year we had blight and you couldn't get a tomato; this year, look at this! We haven't picked in two days because of the weather. This is a two-day accumulation of redness. It's wild!"

We wander amongst the heirloom tomato varieties. There's broccoli, which is on its third cutting. Three different kinds of pumpkins. Squash. Green peppers. Potatoes: red New Orleans, and blues, Kennebecs and Yukon Golds. Lettuce, cabbage, radicchio, Chinese cabbage, beans, Savoy cabbage, carrots, beets. Bizarre little peppers. Radishes. Arugula. Cresses—all kinds of cresses. All this is done with their own mulch and a fish emulsion; no chemical additives are used.

"Oh, look at the watermelons, guys! We just put those in as a joke—what, four weeks ago?" The melons are roughly the size of softballs. "We had South Carolina weather this year, so it was a watermelon year. These are Sweet Babies. And here's some eggplant."

Walking in a garden like this puts me at such ease. It's my own contention that hospitals and other places of healing have much to gain by looking to farmers and the fields, and giving food back its rightful place at the table.

We wander back toward the barn, and before getting in my car, I buy a pint of bright red cherry tomatoes. I wave goodbye and pull back out onto the country road leading in and out of New Milford.

I pop the tomatoes one by one into my mouth and smile. Perhaps this is the taste of ridiculously tall trees, the Housatonic River, tobacco sheds, Victorian houses with deep verandas—a place of refuge post-9/11. Food is how we embody the places we live. Maybe one day, with examples like this in New Milford, medicine will remember that.