

Healthy Food and Drink Choices for Staff and Visitors in SA Health Facilities



 **eat well** *be active.*



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SA Health

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Policy

1. Introduction

The relationship between diet and health is irrefutable. Good nutrition contributes to the community's physical and mental health, wellbeing and quality of life. Healthy eating plays a key role in preventing disease and disability and is also fundamental to children's healthy growth and development. Sound nutrition combined with adequate physical activity is a critical factor for promoting healthy weight.

In September 2006 South Australia's Minister for Health requested a review of the types of food available in hospital canteens and onsite vending machines. As a result of the review it was agreed that a policy be developed to ensure that healthy food and drink choices are consistently available and promoted in all SA Health facilities, including health services and office buildings.

The settings in which we live and work and are educated, cared for and spend our leisure time have a major impact on our health. This initiative recognises that South Australian health facilities are well placed to model healthy eating to the broader community. It also acknowledges that SA Health employs a large workforce and has a responsibility to provide staff with healthier food and drink choices.

This policy draws on and acknowledges the New South Wales Department of Health's *Healthier Food and Drink Choices for Staff and Visitors in NSW Health Facilities* policy directive (2007) and the Queensland Department of Health's *A Better Choice – Healthy Food and Drink Supply Strategy* (2007). The nutrient criteria and food standards that underpin the policy have been developed from interstate and state healthy eating policy initiatives including the South Australian Government's *Right Bite* Healthy Food and Drink Supply Strategy for SA Schools and Preschools (2007).

This policy directive has been developed through an extensive statewide consultation process involving information and feedback sessions, focus groups and an online staff survey. SA Health acknowledges all those who provided feedback and advice throughout the policy development, including the members of the Healthy Food in SA Health Services Advisory Committee.

2. Aim

This policy directive aims to make healthy alternatives easier choices by improving the nutritional quality of food and drinks supplied and promoted to staff, visitors and the general public in SA Health facilities. Healthy choices are those that are in line with national *Dietary Guidelines for Australians*^a and *The Australian Guide to Healthy Eating*^b.

3. Expected outcomes

The expected outcomes of this policy are the:

- > increased range, number, availability and promotion of healthier food and drink choices
- > decreased availability and promotion of energy-dense, nutrient-poor food and drinks
- > increased availability of healthy food and drinks after hours.

4. Scope

This policy directive applies to all SA Health facilities including hospitals, community health services, GP Plus Centres and central and regional offices. It is particularly relevant to those SA Health personnel and volunteers whose work relates to the provision of food and drinks to staff and visitors.

^a NHMRC, *Dietary Guidelines for Australian Adults*, 2003; NHMRC, *Dietary Guidelines for Children and Adolescents in Australia* incorporating the *Infant Feeding Guidelines for Health Workers*, 2003.

^b Children's Health Development Foundation, South Australia and Deakin University, Victoria. *The Australian Guide to Healthy Eating*. Commonwealth of Australia, 1998.

The policy directive applies to all food outlets and in all situations where food and drinks are provided to staff, visitors and the general public, including:

- > cafeterias, cafes, kiosks, canteens, shops and mobile trolleys
- > vending machines
- > shops and retail outlets on hospital grounds
- > catering at functions, meetings and events
- > fundraising
- > catering for patient or client education programs.

It also applies to advertising, promotion and sponsorship.

The policy directive does not apply to:

- > meals and snacks provided by health services to in-patients for whom nutrition is frequently part of their clinical management
- > food prepared in a health facility for outside client groups such as Meals on Wheels recipients, nursing home residents or clients attending day activity centres for the frail aged, as there will usually be existing specifications for such meals
- > food and drinks that staff bring from home for their personal use.

5. Overall approach

5.1 Intention

The overall intention of this policy directive is to work towards increasing healthier options while restricting less healthy options.

5.2 Principles

When applying the policy directive, services and facilities should be guided by the following principles:

- > SA Health has a responsibility to role model and lead the way in creating environments that foster healthy eating.
- > Government recommendations for healthy eating, including the National Health and Medical Research Council's dietary guidelines, underpin the policy.
- > The focus of the policy is on foods and drinks supplied in SA Health facilities to staff, visitors and the general public.
- > All stakeholders, including SA Health staff and volunteers, should work together to promote healthy eating in positive ways and make sustained changes using consistent messages.
- > The health and wellbeing of staff, visitors and the general public should come before profit.
- > Good food hygiene and handling practices that comply with the food safety standards in the Food Standards Code^c should be used at all times.
- > Waste minimisation and other practices that contribute to environmental sustainability should be fostered.

5.3 Categorising food and drinks

The *Food and Drinks Guide* provides information about foods and drinks commonly supplied through food outlets or as a part of catering. It helps identify foods and drinks that are to be promoted and those that are to be limited under this policy. Foods and drinks have been classified into three categories according to their nutritional value: **GREEN** (best choices), **AMBER** (select carefully) and **RED** (limit).

^c Food Standards Australia New Zealand. *Food Safety Standards* (Australia only).
<http://www.foodstandards.gov.au/thecode/>

GREEN – Best choices

Actively promote and encourage these foods and drinks at all times. Ensure they are always available and display them in prominent areas.

AMBER – Choose carefully

Do not let these foods and drinks dominate the menu or choices displayed and avoid large serve sizes.

RED – Limit

Limit the availability of these products to no more than 20 per cent of the foods and drinks displayed. These foods and drinks are not to be:

- > promoted or advertised
- > displayed in prominent areas
- > supplied at functions or meetings
- > used for fundraising purposes.

5.4 Nutrient criteria

Tables 1 to 4 below list nutrient criteria to define whether a food or drink item falls into the **RED** category. Use these tables along with the product's nutrition information panel to determine whether a food or drink fits into the **RED** category. If a product fails any one of its specified **RED** nutrient criteria, then it is to be considered a **RED** choice.

Table 1 Sugar-sweetened drinks and ices* (assess per serve and per 100mL)			
Category	Nutrient criteria		
	Energy (kilojoules) per serve	Energy (kilojoules) per 100ml	Sodium (mg) per serve
Soft drinks, flavoured mineral waters, flavoured waters, sports waters, sports drinks, energy drinks, fruit drinks, slushees, ice confection, ice blocks and cordials	>300kJ	>50kJ	>100mg

Table 2 Hot food and other meal items* (assess per 100g)				
Category	Nutrient criteria			
	Energy (kilojoules) per 100g	Saturated fat (g) per 100g	Sodium (mg) per 100g	Maximum serve size as sold
Savoury pastries and pies, pizzas, quiches, dim sims, fried rice, instant noodles and oven-baked potato products	>1000kJ	>5g	>400mg	>250g
Crumbed and coated foods, frankfurts and sausages	>1000kJ	>5g	>700mg	>150g
Processed cold luncheon and cured meats	>900kJ	>3g	—	>50g

Table 3 Ready to eat meals* (assess per serve and per 100g)

Category	Nutrient criteria				
	Energy (kilojoules) per serve	Saturated fat (g) per 100g	Sodium (mg) per 100g	Sodium (mg) per serve	Fibre (g) per serve sold
Commercial, frozen ready to eat meals, mixed hot food or plated dinners	>2500kJ	>2g	>300mg	>900mg	<3g

Table 4 Snack foods* (assess per serve)

Category	Nutrient criteria			
	Energy (kilojoules) per serve	Saturated fat (g) per serve	Sodium (mg) per serve	Fibre (g) per serve
Savoury snack foods and biscuits	>600kJ	>3g	>200mg	—
Cakes, muffins, sweet tarts, slices and pastries	>900kJ	>3g	—	<1.5g
Snack food bars, muesli bars and sweet biscuits	>600kJ	>3g	—	<1g
Ice creams, milk or soy-based ice confection and premium dairy desserts	>600kJ	>3g	—	—

Key: > means more than; < means less than; — means not applicable.

*Acknowledgements:

Tables 1 & 2: Adapted from Queensland Health's *A Better Choice – Healthy Food and Drink Supply Strategy* (2007), which was based on the *Fresh Tastes @ School NSW Healthy School Canteen Strategy: Canteen Menu Planning Guide* (2004, revised 2006), NSW Department of Health and NSW Department of Education and Training.

Table 3: Adapted from Queensland Health's *A Better Choice – Healthy Food and Drink Supply Strategy* (2007).

Table 4: Based on *Fresh Tastes @ School NSW Healthy School Canteen Strategy: Canteen Menu Planning Guide* (2004, revised 2006), NSW Department of Health and NSW Department of Education and Training.

5.5 Food and Drinks Guide

Foods and drinks listed in the *Food and Drinks Guide* have been classified into the colour category (or categories) in which they are most likely to fit according to their nutrient profile. Different brands of similar food and drink products may fall into different categories due to their ingredients or the cooking techniques used during the manufacturing process.

For those items that may fit into either the **AMBER** or **RED** category, check the label against the **RED** nutrient criteria. There are also some products that, depending on their nutrient profile, could fall into the **RED**, **AMBER** or **GREEN** category – these will also need to be checked against the **RED** nutrient criteria.

5.6 Nutrition standards: applying the nutrient criteria to food and drink provision in SA Health facilities

5.6.1 The proportion of foods and drinks displayed by all food and drink outlets in SA Health facilities, including vending machines, is to be no more than 20% RED category products.

5.6.2 No RED category foods and drinks are to be supplied in the following situations:

> Work-related meetings and functions

This applies to catering provided in-house or by an outside organisation, and regardless of whether the event is held onsite or offsite. For very occasional special events such as a Christmas party, the requirement to avoid RED foods and drinks can be exempted at the discretion of Regional Chief Executives or their delegated authority. However, healthy food and drink choices should be encouraged at all times.

> Fundraising, giveaways, prizes and gifts

SA Health premises cannot be used for private fundraising activities involving RED category foods, for example chocolate drives. Occasional, temporary cake stalls such as those run by auxiliary groups in health services can be exempted at the discretion of Regional Chief Executives or their delegated authority.

> Patient or client education programs

This applies to catering provided in-house or by an outside organisation, and regardless of whether the event is held onsite or offsite. Food prepared in a SA Health facility for outside client groups such as Meals on Wheels recipients, nursing home residents and clients attending day activity centres for the frail aged is exempt from this nutrition standard application.

5.7 Alcohol

Alcohol is not to be used for fundraising. Otherwise, sensible and cautious use for relevant functions and for gifts is permitted, and should be in line with organisational policies.

5.8 Water provision

Water should always be available to children and adults, staff and visitors free of charge, for example from water dispensers and/or food outlets.

6. Requirements for implementation

All SA Health facilities have until 1 October 2010 to complete the policy implementation requirements listed below (refer to 6.1- 6.6). Facilities are encouraged to commence work as soon as possible.

The Nutrition Standards (refer to 5.6) may be gradually introduced in a phased approach over the 18 month implementation period (i.e. 1 April 2009 – 1 October 2010).

Requirements for the implementation are:

6.1 Initiating key activities

Initiate the following key activities within the first three months of the implementation period:

- > Dissemination of this policy directive.
- > Formation of a local implementation group (or utilisation of an existing committee) to assess the current situation, determine an action plan and oversee the phasing in of the required changes over the 18 month period.
- > Regular forums for consultation and communication with staff and other key stakeholders to provide information, education and opportunity for staff input into the planned changes including the needs of after hours staff.

- > Regular staff updates.
- > A strategy to accommodate Aboriginal perspectives and the needs of staff and visitors of different cultural and linguistic backgrounds.

6.2 Provision of food and drinks to staff and visitors

This must be in line with the nutrition standards detailed above (refer to 5.6).

6.3 Adoption of marketing practices that promote healthier food and drink choices

This includes:

- > point of sale identification and promotion of healthier choices
- > placement of healthier options to optimise their promotion; **RED** category foods and drinks are not to be placed in prominent locations
- > price parity of healthier and less healthy options i.e. the healthier option should not cost more than the standard
- > no super sizing or 'combos' (e.g. snack plus a drink) of any products sold except where they are classified as **GREEN** products
- > no point of sale merchandising of any **RED** products
- > no advertising of any food or drinks which are classified as **RED**
- > stocking **RED** products in the smallest size available during the phasing down period.

6.4 Incorporation of selection criteria relating to the provision of healthier food and drinks in food service contracts

- > As of 1 April 2009, tenders for new contracts must identify this policy directive and specify that the tenderer needs to nominate how they will comply with the policy's nutrition standards and marketing practices. The extent to which the tenderer is able to demonstrate how these standards and practices will be implemented should be a key selection criterion.
- > Also as of 1 April 2009, new contracts should incorporate the policy's nutrition standards and marketing practices and provide a clause which reserves the right for the health service to change the standards and practices from time to time.
- > Existing contractors should be informed about the policy changes and encouraged to implement the changes prior to expiry of contracts.

6.5 Provision of healthier food and drinks choices to staff after hours, on weekends and public holidays

This must take place in line with the nutrition standards (refer to 5.6) detailed in this policy directive.

6.6 Existing space and equipment

Health facilities should aim to implement the policy within existing space and utilising existing equipment.

7. Implementation issues

7.1 Issues considered

This policy directive has been prepared taking into consideration the following issues:

- > the diverse range of facilities and services
- > existing contracts with organisations outside SA Health
- > the significant impact that this policy will have on staff and visitors
- > the need for an adequate time-frame for policy implementation
- > the need for adequate consultation with key stakeholders during implementation.

7.2 Policy implementation

Policy implementation will be the responsibility of all SA Health facilities.

In addition to the *Food and Drinks* Guide, SA Health has developed some fact sheets. These are provided with the policy directive and are available on the SA Health website: www.health.sa.gov.au/pehs/health-promotion.htm.

SA Health will progressively provide further support for policy implementation.

8. Reporting on progress

Chief Executives of SA Health facilities are required to report on progress towards implementing this policy:

- > by 30 September 2009 to report on interim progress
- > by 1 October 2010 to report on mandatory compliance.

Further details will be provided in due course, but it is envisaged that interim progress will be monitored in relation to factors such as:

- > establishment of a committee
- > site assessment
- > action plan development
- > changes made to date
- > provision of examples of successful change.

Reporting in October 2010 is likely to be against indicators such as:

- > number and proportion of facilities which have changed in line with the nutrition standards (refer to 5.6)
- > number and proportion of facilities applying the marketing standards (refer to 6.3)
- > level of acceptance of the menu changes by staff and visitors
- > proportion of vending machine and other contracts with incorporation of the relevant nutrition and marketing standards (refer to 5.6 and 6.3).

Regional health services or individual facilities may wish to establish baseline data to monitor progress. This could be done through mapping of existing outlets for food and drinks, including vending machines, and an audit of products supplied by these outlets.

For more information

**Health Promotion Branch
SA Health**

Telephone: (08) 8226 6329

www.health.sa.gov.au/pehs/health-promotion.htm

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