*This policy is comprehensive in its approach and some sections may not be relevant to your organisation. Adapt the template policy as required to suit the needs of your organisation.*

 **[NAME OF ORGANISATION] NUTRITION AND CATERING POLICY**

**1.0 RATIONALE**

[Name of organisation] recognises the role of good nutrition in promoting physical and mental health and is committed to supporting clients/consumers/residents and staff at [Name of organisation] to eat well.

Unhealthy eating patterns increase the risk of weight gain as well as chronic diseases such as type 2 diabetes, cardiovascular disease, and some cancers. Poor nutrition can also negatively impact on mental health.

People living with a mental health condition are at increased risk of chronic disease and early mortality due to the higher prevalence of unhealthy lifestyle behaviours and the deleterious effects of some psychotropic medications on metabolic health.

Occupational health and safety legislation requires employers to keep their workplaces safe and without risk to the health of any person.

Creating a healthy food environment for clients/consumers/residents and staff has the potential to improve their physical and mental health.

**2.0 OBJECTIVES**

The objectives of this policy are to:

* Inform staff and clients/consumers/residents about the link between healthy eating and physical and mental health
* Communicate [Name of organisation]’s commitment to promoting healthy eating
* Ensure the food environment at [Name of organisation] supports clients/consumers/residents and staff to eat well

**3.0 DEVELOPMENT OF THE POLICY**

This policy was developed by [insert names of groups or staff positions involved in the development of the policy e.g. CEO, wellbeing coordinator] with feedback provided by [insert names of groups or staff positions involved in reviewing the draft policy e.g. resident committee].

**4.0 TIMING**

This policy is effective from [start date for the policy].

**5.0 COMMUNICATION**

Staff, clients/consumers/residents, visitors, volunteers and contractors are made aware of the policy through the following methods:

* The policy will be made available on the intranet or other suitable channel
* A statement will be included on new Job Description Forms that communicates that [Name of organisation] encourages a healthy environment
* Policy requirements will be outlined as part of the induction process for new staff and volunteers
* Clients/consumers/residents will be informed of this policy upon entry into the service through [insert any specific methods]
* Visitors and contractors will be informed of the policy as required [insert any specific methods – e.g. at their induction]
* Internal communication channels (e.g. [insert any specific communication channels - e.g. email, signage, intranet, internal newsletters, staff meetings, presentation]) will be used to communicate aspects of the policy and celebrate successes

**6.0 GUIDELINES**

 **6.1 FOOD PROVISION**

This guideline applies to all food and drinks provided by [Name of organisation] to clients/consumers/residents, staff and visitors. This includes:

* meals, snacks and drinks served to clients/consumers/residents each day,
* other foods and drinks made available to staff and clients/consumers/residents throughout the day (e.g. tea room items),
* foods and drinks given as prizes,
* foods and drinks sold for fundraising purposes, and
* foods and drinks provided at special events.

This guideline does not apply to food and drinks brought by staff or clients/consumers/residents for their personal use or to share for personal celebrations such as birthdays or farewells. However, [Name of organisation] encourages providing healthy options on these occasions.

Catering will reflect the foods and drinks recommended by the [Australian Dietary Guidelines](https://www.eatforhealth.gov.au/guidelines/about-australian-dietary-guidelines). See Appendix 1 for details.

See Appendix 2 for additional information that should be considered when developing meal plans for clients/consumers/residents.

**6.2 FOOD STORAGE FACILITIES**

Facilities will be provided for staff and clients/consumers/residents to safely store, prepare, consume and clean-up after meals and snacks.

**6.3 FOOD DONATIONS, FUNDRAISING AND PRIZES**

Only foods and drinks recommended by the [Australian Dietary Guidelines](https://www.eatforhealth.gov.au/guidelines/about-australian-dietary-guidelines) will be accepted as food donations, used in fundraising or given as prizes (**see list under 6.1**).

**6.4 EDUCATION AND SKILLS DEVELOPMENT**

To embed healthy eating practices at [Name of organisation], strategies will be employed to educate and build the skills and knowledge of staff and clients/consumers/residents, for example:

***Clients/consumers/residents***

* Encouraged to participate in health and wellbeing initiatives
* Group cooking classes
* Education sessions on various nutrition topics e.g. sugar in drinks
* Introduction of a community garden
* Signage displayed in common areas that promotes healthy eating
* Introduction of a regular walking group and/or other forms of physical activity
* Peer mentoring group to encourage healthy behaviours
* Invited to come shopping for groceries for the service

***Staff***

* Encouraged to participate in health and wellbeing initiatives
* Signage displayed in common staff areas that promotes healthy eating
* Introduction of a regular walking group and/or other forms of physical activity
* Presentation to staff on the links between nutrition and physical and mental health
* E-training for relevant staff on conducting menu audits
* Training for clinical staff on the link between weight and health and how to take BMI and waist measurements

**6.5 INDIVIDUAL SUPPORT**

The following strategies will be implemented to ensure all clients/consumers/residents are provided with an appropriate level of dietetic support:

* Case work will include a prompt to discuss nutrition and physical activity
* Weight, height and BMI will be collected at entry and exit to service
* Case workers to refer clients/consumers/residents with diet-related chronic diseases or who are concerned about weight gain or their nutritional intake to a dietitian for individualised advice

**7.0 MONITORING AND REVIEW**

This policy will be reviewed six months after its introduction by the [Role of person in charge] and then on a two-yearly basis thereafter. This process will involve:

* Assessing progress (e.g. menu audit) and seeing if objectives have been met
* Providing staff and clients/consumers/residents with the opportunity to give feedback (e.g. meal survey)
* Considering all feedback and suggestions and making changes as required
* Communicating reviewed policy to staff and clients/consumers/residents

Date of last review: [Insert date]

Date of next review: [Insert date]

**Appendix 1 – Foods and drinks to include and those to limit**

|  |  |  |
| --- | --- | --- |
|  | **Include** | **Limit** |
| **Breads, grains and cereals** | * Bread and wraps (mostly grainy or wholemeal)
* Rice and pasta (mostly brown)
* Quinoa, barley and other wholegrains
* Grainy crackers
* Scones, pikelets and fruit bread
* Untoasted muesli
* Weet-bix/Vita Brits/Bran flakes
* Porridge
 | * Pastry (filo is an OK choice)
* High fat or salt crackers and biscuits
* High sugar or salt breakfast cereals (e.g. cornflakes, fruit loops)
 |
| **Meat and vegetarian alternatives** | * Lean red meat
* Chicken (skin off)
* Fish and seafood
* Eggs
* Beans and lentils
* Tofu
* Nuts
* Seeds
 | * Ham
* Bacon
* Salami
* Chorizo and other processed meats
* Deep fried options
 |
| **Vegetables** | * All fresh, frozen, dried and canned vegetables and legumes (choose reduced salt)
 | * Deep-fried vegetables e.g. chips and fritters
* Crisps, corn chips and similar savoury snacks
 |
| **Fruit** | * All fresh and frozen fruit
* Fruit canned in juice
* Small amounts of dried fruit (no more than a small handful twice a week)
 | * Fruit canned in syrup
 |
| **Dairy and alternatives** | * Mostly reduced-fat and unflavoured milk, cheese, custard and yoghurts (flavoured milks and yoghurts can be provided occasionally)
* Light evaporated milk
* Dairy alternatives (e.g. soy milk) fortified with calcium
 | * Ice cream (small serves of reduced-fat ice cream OK occasionally)
* Cream
* Sour cream
 |
| **Baked goods and sweets** | * Plain or fruit-based muffins (small serves)
* Wholegrain and fruit-based slices (small serves)
 | * Large muffins and cake slices
* Pastries (filo is OK)
* Friands
* Biscuits and cookies
* Doughnuts
* Lollies
* Chocolate
 |
| **Dips, spreads, sauces and dressings** | * Vegie-based dips and spreads e.g. tzatziki, avocado, hummus, chutney
* Mustard
* Olive oil or vinegar based dressings
* Reduced-salt sauces (e.g. BBQ, tomato), gravy, stock and marinades
* No-added-salt and no-added-sugar peanut and nut butters
* Use light coconut milk instead of coconut cream in recipes
 | * Thick spreads of butter, margarine or mayonnaise
* Mayonnaise-based dressings
* Jam
 |
| **Drinks** | * Water (still or sparkling)
* Small amounts of 100% fruit juice (no more than one cup a week)
* Smoothies made from milk, yoghurt and fruit (small serves of no more than 250mL)
* Tea and coffee
* Hot chocolate (follow the recommended serving size)
* Limit milky drinks like hot chocolate and coffee if these are being consumed excessively
 | * Sugary drinks (including soft drinks, cordials, fruit drinks, sports drinks, energy drinks etc.)
* Alcohol should not be provided
 |

**Appendix 2 – Additional notes for the provision of meals and snacks to clients**

Please consider the following when planning meals and snacks for clients:

* Include lean red meat (beef, lamb, kangaroo and pork) a maximum of three times a week. Alternative protein sources include chicken, fish, seafood, eggs, legumes (e.g. lentils and chickpeas), nuts and seeds
* Aim to serve fish (particularly oily fish like salmon) at least twice a week
* Aim to include some vegetarian meals each week
* Takeaway foods can be provided on occasion (e.g. once a month)
* Consider asking clients to provide meal suggestions by looking through healthy recipes on the [LiveLighter](https://livelighter.com.au/Recipe)® or [Food Bank](https://www.superherofoodshq.org.au/fsa/product-category/recipe-booklets/) websites (recipe books can also be ordered via LiveLighter®).
* Consider special dietary requirements e.g. gluten-free, dairy-free, vegan, nut or seafood allergies

Medications used in the treatment of mental illness can significantly increase hunger, which can lead to weight gain. To assist clients to feel full between meals and reduce unhealthy snacking consider the following strategies:

* Increase the vegetable content of meals to add ‘bulk’ e.g. add grated or diced carrot and zucchini to mince and pasta dishes, add chickpeas or cannellini beans to soups, salads, curries and casseroles.
* Aim for each meal to be made up of approximately half vegetables, one-quarter protein foods (e.g. eggs, dairy, red meat, chicken, legumes, nuts and seeds) and one-quarter wholegrains (e.g. brown rice, grainy bread, wholemeal pasta, barley)
* Use wholegrain/wholemeal breads and cereals in place of white options
* Offer soup as an entrée at dinner e.g. minestrone, tomato, spicy pumpkin
* Provide a fruit bowl in a central area for clients to access