





National Healthy Food and Drink Policy

Guidance on healthier food and drink options for district health boards and associated providers and partners

2nd Edition - September 2019

Developed by the
National District Health Board Food and
Drink Environments Network

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Introduction

Healthy eating is essential for good health and wellbeing. With increasing rates of obesity and the subsequent rise of associated poor health outcomes, including type 2 diabetes and cardiovascular disease, it is important that health sector organisations show leadership by providing healthy eating environments for their staff, visitors and the general public.

The National DHB Food and Drink
Environments Network (the Network)
was established in 2015 to develop a
consistent National Healthy Food and Drink
Policy (the Policy) for use across all New
Zealand District Health Boards (DHBs),
and potentially other settings. The Network
received support and advice from the Heart

Foundation, Activity and Nutrition Aotearoa, the Ministry for Primary Industries, the New Zealand Beverage Guidance Panel and the University of Auckland in the development of the Policy. For more information on this process, see Appendix 1.

It is the intention that the Network will continue to support DHBs and the Ministry to implement the Policy.

This 2nd edition differs from the original edition published in September 2016. Following a limited review of key issues identified by Network members, small changes have been made to the criteria to make the Policy more practical to implement.

Overview

Purpose

The Policy supports health sector organisations to:

- demonstrate commitment to the health and wellbeing of staff, visitors and the general public by providing healthy food and drink options, which support a balanced diet in accordance with the Eating and Activity Guidelines for New Zealand Adults (Ministry of Health 2015)
- act as a role model to the community by providing an environment that supports and promotes healthy food and drink choices
- assist the food and drink industry by having one set of criteria for food and drink provision for all health sector organisations.

In providing healthy food and drink environments, consider:

- the needs of different cultures, religious groups and those with special dietary needs, and accommodate these on request, where possible
- ecologically sound, sustainable and socially responsible practices in purchasing and using food and drinks, which includes encouraging the procurement of seasonal and locally grown and manufactured (regional and national) food and drinks, and minimising waste where possible
- the importance of discouraging association with products and brands inconsistent with a healthy food and drink environment, as defined by the Policy.

The Policy applies to all health sector facilities/sites, contractors and staff, including:

- all food and drink provided by, or able to be purchased from any retailer, caterer, vending machine, snack box or volunteer service on the organisation's premises for consumption by staff, visitors and the general public¹
- any gifts, rewards and incentives offered to staff, guest speakers and/or formal visitors on behalf of the organisation
- any fundraisers organised by either internal or external groups where food and drinks are sold or intended for consumption on the organisation's premises. Fundraisers associated with groups outside the organisation that do not meet this policy should not be promoted on the organisation's premises or through the organisation's communications (eg, chocolate fundraisers), however, alternative healthy fundraising and catering ideas should be encouraged
- all health service providers contracted by the organisation that have a food and drink environment clause in their contract with the organisation
- any external party that provides food or catering:
 - on site at any health sector facility (eg, recruitment agencies, drug companies)
 - off site where the organisation plans and/or hosts a function for staff, visitors and/or the general public (eg, conferences, training).

Scope
The Police

¹ This includes foods and drink that patients can buy.

While the provision and consumption of healthy food and drink options is strongly encouraged, the Policy excludes:

- food and drink brought to work by staff for their own consumption
- gifts from families/whānau to staff
- self-catered staff-shared meals, both on and off site (eg, food brought for special occasions, off-site self-funded Christmas parties or similar celebrations)
- gifts, rewards and incentives that are self-funded
- inpatient meal services and Meals on Wheels – different standards exist for inpatients and Meals on Wheels, which reflect food and drink requirements in both health and illness; and for various age groups. The majority of inpatients

- are admitted because they are unwell and, therefore, require food and drink that is appropriate for their clinical care and treatment
- food and drink provided by clients/ patients and their families and visitors for their own use (families and visitors are encouraged to check with health care staff before bringing in food for inpatients)
- alcohol-related recommendations (please refer to your organisation's position on alcohol).

Monitoring and evaluation

Monitoring and evaluating the policy will be part of each organisation's Implementation Plan and will be aligned to the agreed expectations of the Network and the Ministry of Health.

National Healthy Food and Drink Policy

Healthy food and drink environments

This Policy is to ensure organisations and their contracted health service providers (with a healthy food and drink contract clause) promote an environment that consistently offers and promotes healthy food and drink options. Refer to the nutrient criteria table (page 9) for greater clarity on how the Policy can be implemented.

Consistent with the *Eating and Activity Guidelines for New Zealand Adults*, (Ministry of Health 2015) messages and practices relating to food and drinks in the organisation will reflect the following principles.

Healthy food and drink policy principles

Offer a variety of healthy foods from the four food groups.

This means:

- plenty of vegetables and fruit
- grain foods, mostly wholegrain and those naturally high in fibre
- some milk and milk products, mostly low and reduced fat
- some legumes, nuts, seeds, fish and other seafood, eggs, poultry (eg, chicken) and/or red meat with the fat removed.

Food should be mostly prepared with or contain minimal saturated fat, salt (sodium) and added sugar, and should be mostly whole or less processed.

This means:

- some foods containing moderate amounts of saturated fat, salt and/or added sugar may be available in small portions (eg, some baked or frozen goods)
- no deep-fried foods
- no confectionery (eg, sweets and chocolate).

Water and unflavoured milk will be the predominant cold drink options.



This means:

- the availability and portion sizes of drinks containing 'intense' sweeteners,² and no-added-sugar juices, are limited
- no sugar-sweetened drinks.³

Healthy food and drink choices (including vegetarian and some vegan items) appropriate to a wide variety of people should be available, with consideration given to cultural preferences, religious beliefs and special dietary requirements such as gluten free.

² Intense sweeteners (also known as artificial sweeteners) are a type of food additive that provides little or no energy (kilojoules). Intense sweeteners permitted for use in New Zealand include aspartame, sucralose and stevia.

³ Any drink that contains added caloric sweetener, usually sugar. The main categories of sugary drinks include soft drinks/fizzy drinks, sachet mixes, fruit drinks, cordials, flavoured milks, flavoured waters, iced teas/coffees and energy/sports drinks.

Breastfeeding is supported in all health sector settings as the optimum infant and young child feeding practice.

Promoting healthy options

It is important the health sector is a role model for the community in preventing obesity and disease while advocating for healthy food in the workplace and other settings. Providing a healthy eating environment is a health and safety issue that should be supported by all levels of the organisation.

The organisation should actively promote healthy food and drink options with staff, visitors and the general public. Healthy options ('Green item' foods and drinks) should be the most prominently displayed items by retailers and should be readily available in sufficient quantities, competitively priced, and promoted to

encourage selection of these options. The organisation will promote healthy eating behaviours to staff, visitors and the general public through the provision of consistent, evidence-based nutrition messages.

Partnerships, fundraisers, associations and promotions involving products and brands that are inconsistent with a healthy food and drink environment, as defined by this Policy, are not to be promoted on health sector premises.

The health sector should encourage healthier food options or non-food alternatives for fundraising.

See the following link for fundraising ideas: Healthy Events and Fundraisers (Canterbury DHB: www.cph.co.nz/wp-content/uploads/nut0098.pdf)

Staff facilities

Storing and preparing own meals

Provide staff with reasonable access to food storage facilities such as fridges, lockers or cupboards. Wherever possible this also includes reasonable access to a microwave oven.

Drinking-water

The organisation will provide reasonable access to drinking-water for all staff, visitors and the general public on site. Wherever possible this should be tap water and/or water fountains, with staff encouraged to bring their own water bottle. Where water coolers are provided, each service must ensure they are replenished, cleaned and serviced on a regular basis. Consider environmentally friendly and

recyclable options when purchasing cups for water dispensing.

Breastfeeding in the workplace

The organisation will promote and support breastfeeding by:

- encouraging and supporting breastfeeding within the workplace
- providing suitable areas that may be used for breastfeeding and for expressing and storing breast milk
- providing suitable breaks for staff who wish to breastfeed during work, where this is reasonable and practicable.

Refer to your organisation's own specific breastfeeding policy for more detailed information.

Healthy food and drink environments criteria

Food and drink classifications

The purpose of the colour-coded food and drink classification is to provide a practical way for food service providers to identify foods as 'healthy' and 'less healthy'. Foods should not be labelled or promoted using

these colours as the main purpose of this Policy is to increase the overall availability of healthier options, not as a labelling guide for consumers.

Foods and drinks are classified into three groups, as follows.

Green Red These foods and drinks These foods and drinks are part of a These foods and are not considered part drinks are of poor healthy diet. They are consistent with the healthy food and drink policy principles of an everyday diet, nutritional value and and reflect a variety of foods from the four but may have some high in saturated fat, food groups, including: nutritive value. Foods added sugar and/or and drinks in this group added salt. They can plenty of vegetables and fruit can contribute to excess easily contribute to grain foods, mostly wholegrain and energy consumption and consuming excess those naturally high in fibre are often more processed. energy as they some milk and milk products, mostly The Amber group contains commonly contain a low and reduced fat a wide variety of foods and lot of calories. These some legumes, nuts, seeds, fish and drinks, some healthier than are often highly other seafood, eggs, poultry others. Where possible, processed foods and (eg, chicken) and/or red meat with the provide the healthier drinks. fat removed. options within this group (eg, a potato-top pie Foods classified as Green items are low instead of a standard pie). in saturated fat, added sugar and added salt, and are mostly whole and less Note: Amber items can contain processed. a mixture of 'Green' and 'Amber' foods, drinks and Note: Green items must consist only of 'Green' ingredients. foods, drinks and ingredients.

Food and drink availability

Healthy food and drinks should be the easy choice. Within a food service (eg, cafeteria, catered event or shop), Green item foods and drinks should predominate. This means they should make up at least 55 percent of food and drinks available for consumption. Over time, organisations should aim to increase the proportion of Green healthy

foods and drinks (over and above the minimum 55 percent).

To achieve this, have at least 55 percent (or just over half) of the items available under each food category* (eg 'breads and crackers', 'breakfast cereals', etc) fit the Green criteria.

* With the exception of 'mixed meals', 'sandwiches' and 'sushi' categories (see page 13).

Green items Amber items Red items Dominate the food and drinks Are not permitted (refer Make up less than 45% available (at least 55% of of choices available to scope of the policy, choices available) page 2) Come in small portion Are displayed prominently on sizes (as per the nutrient Should be phased out shelves, benches, cabinets criteria table) over time in accordance and vending machines with each individual Are not prominently organisation's Policy Are always available in displayed at the expense implementation plan sufficient quantities to be the of Green items. if these products are predominant option. currently available.

Additional requirements

In addition to complying with the criteria within the *Healthy food and drink* environment nutrient criteria table, the following requirements should be complied with.

- All unpackaged or prepared-on-site foods and drinks should be consistent with the overarching policy principles.
- All packaged foods (excluding drinks and bakery items) must meet set nutrient criteria standards (eg, a Health Star Rating (HSR) of at least 3.5 stars⁴). Additional criteria (such as portion sizes) may apply to some categories. For packaged foods without a HSR, manufacturers⁵ can calculate a rating using the tool at

http://healthstarrating.gov.au/internet/healthstarrating/publishing.nsf/Content/online-calculator#/step/1

There may be some exceptions where specialty items such as gluten- and dairy-free products may not comply with all criteria. However, products are still required to reflect the overarching policy principles and relevant criteria, where practicable.

Vending machines

Foods sold in vending machines must include a selection of Green items from a range of food categories (eg, Vegetables and Fruit, Grain Foods, Milk Products, Nuts and Seeds, Ready-to-Eat Meals)

Over time, retailers should work towards more than half of their vending offering being Green.

⁴ Technical Report: Alignment of NSW healthy food provision policy with the Health Star Rating system. URL: www.health.nsw.gov.au/heal/Pages/health-star-rating-system.aspx

⁵ It is up to the packaged food provider/manufacturer to calculate and provide the Health Star Rating of their product(s). Retailers or food service staff can contact the manufacturer/provider to seek this information prior to purchasing.

Healthy food and drink environments nutrient criteria table⁶

Category	Green	Amber	Red
	≥ 55% of products on offer must fit within Green	< 45% of products on offer must fit within Amber	These products are not permitted

Vegetables and fruit

Category	Green	Amber	Red
Vegetables	Fresh, frozen, canned and dried plain vegetables Opt for no/minimal added fat/ salt varieties	Processed vegetable products (eg, wedges, hash browns) with ≥ 3.5 HSR	Processed vegetable products (eg, wedges, hash browns) with < 3.5 HSR
Fruit	Fresh, frozen and canned fruit Opt for no/minimal added sugar varieties	Dried fruit including freeze-dried: ≤ 30 g portion as an ingredient or part of a fruit and nut mix Highly processed fruit products with ≥ 3.5 HSR	Dried fruit including freeze-dried: > 30 g portion as an ingredient or part of a fruit and nut mix or dried fruit on its own Highly processed fruit products with < 3.5 HSR

Grain foods

Category	Green	Amber	Red
Bread and crackers	Wholegrain, multigrain, wheatmeal and wholemeal bread with ≥ 5 g fibre/ 100 g and < 450 mg sodium/100 g. All wholegrain, multigrain, wheatmeal and wholemeal crackers with ≥ 3.5 HSR	Other bread products with < 5 g fibre and/or > 450 mg sodium/100 g. All other crackers with ≥ 3.5 HSR	Crackers with < 3.5 HSR
Breakfast cereal	Wholegrain breakfast cereal with both ≥ 3.5 HSR and ≤ 15 g sugar/100 g	Other breakfast cereal with ≥ 3.5 HSR	Breakfast cereals that do not meet the Green or Amber criteria

⁶ Criteria for packaged and unpackaged food and drink items may not necessarily align.

There must be at least one Green item at each meal, aiming for more than half of the foods in this category being Green over time (recommended within two years from Policy's implementation)

Wholegrain and high-fibre varieties

eg, wholegrain rice, wholemeal pasta and couscous, quinoa, polenta, buckwheat, bulgur wheat, oats, pearl barley, spelt, rye Refined grains and white varieties

eg, rice, plain pasta, unflavoured noodles, couscous Flavoured pocket varieties with < 3.5 HSR

Milk and milk products

Category	Green	Amber	Red
Milk and milk products See Drinks section	Reduced or low-fat with ≥ 3.5 HSR: • milks and added calcium soy milk • yoghurt/dairy food (≤ 150 ml portion) • custard (≤ 150 ml portion) • cheese (≤ 40 g portion). Added-calcium unsweetened milk alternatives (eg, rice, almond, oat)	Full fat (with ≥ 3.5 HSR): • milks and added-calcium soy milk • yoghurt/dairy food (≤ 150 ml portion) • custard (≤ 150 ml portion) • cheese (≤ 40 g portion). Reduced- or low-fat varieties of the above with ≥ 3.5 HSR, with portion sizes greater than those stipulated in the Green group Lite varieties of cream, sour cream and cream cheese Frozen desserts (eg, yoghurt, ice-cream) with ≥ 3.5 HSR and ≤ 100 g portion	 Full fat with a < 3.5 HSR: yoghurt/dairy food custard cheese or portion size greater than those recommended in Green and Amber. Standard varieties of cream, sour cream and cream cheese Frozen desserts with < 3.5 HSR or > 100 g portion All sugar-sweetened cold milk drinks

Legumes, nuts, seeds, fish and other seafood, eggs, poultry (eg, chicken) and red meat

Category	Green	Amber	Red
Legumes	Fresh, dried, canned beans and peas eg, baked beans, red kidney beans, soy beans, mung beans, lentils, chickpeas, split peas, bean curd and tofu Use reduced salt/ sodium varieties, where applicable.		
Nuts and seeds	Unsalted nuts and seeds with no added sugar	Salted nuts and seeds ≤ 50 g portion (with no added sugar) All nuts and seeds with dried fruit ≤ 50 g portion	Salted nuts and seeds > 50 g portion All sugared or candy-coated nuts and seeds Nuts and seeds with confectionery ⁷

⁷ Confectionery definition: confectionery includes a range of sugar-based and intensely sweetened products, including boiled sweets (hard glasses), fatty emulsions (toffees and caramel), soft crystalline products (fudges), fully crystalline products (fondants), gels (gums, pastilles and jellies), chocolate (including carob and compound chocolate), fruit leathers, enrobed (eg, yoghurt-covered) items and candied fruit/nuts. A limited range of confectionery products with therapeutic benefits (eg, one variety of throat lozenges, ginger and/or mints) may be sold – ideally at pharmacies, if on site.

Category	Green	Amber	Red
Fish and other seafood, eggs, poultry (eg, chicken) and red meat	Fresh or frozen fish, seafood, skinless poultry (eg, chicken or turkey) and lean meat	Meat with small amounts of visible fat only. Chicken drumsticks	Meat where fat is clearly visible Poultry with visible fat and skin remaining (other than drumsticks)
	Eggs		
	Premium or prime mince* (≥ 95% visual lean meats or ≥ 90% chemical lean)	Standard mince* (≥ 90% visual lean meats or ≥ 85% chemical lean)	Standard mince (where the fat is not drained off)
	,	Processed fish, chicken (eg, smoked) and meat:8	,
		• ≤ 50 g in sandwiches, rolls, wraps, or salads	
		 ≤ 120 g as a main meal ≤ 150 g sausages per meal 	
		Dried meat products (eg, jerky, biltong ≥3.5 HSR and ≤ 800kJ per packet)	
	Canned and packaged fish, chicken and meat with ≥ 3.5 HSR	Canned or packaged fish, chicken, and meat with < 3.5 HSR	Processed fish, chicken and meat products that do not meet Amber serving size

^{*} Cooked and fat drained off.

⁸ Examples of processed meats include: fresh sausages; cooked comminuted meat products (eg, luncheon, bologna, cooked sausages); uncooked comminuted fermented meat products (UCFM) (eg, salami, pepperoni); cooked cured meat products (eg, ham, corned beef, pastrami); cooked uncured meat products (eg, roast beef); bacon; dry-cured meat products (eg, prosciutto); meat patties.

Mixed dishes

There must always be at least one Green item on offer, aiming for more than half of the dishes on offer in this category being Green over time (recommended within two years from Policy's implementation)

Category	Green	Amber	Red
Mixed dishes including ready-to-eat dishes	Unpackaged: dish contains vegetables* and/or fruit and is prepared with Green items or ingredients, and minimal Amber items or ingredients ⁹ (ie, ≤ 25% Amber) Packaged: ≥ 3.5 HSR and meet the above criteria	Unpackaged: dish contains vegetables+ and/ or fruit and prepared with Green and >25% Amber items or ingredients only Packaged: ≥ 3.5 HSR and meet the above criteria	Unpackaged: dish includes no vegetables or fruit and/or contains Red items or ingredients Packaged: < 3.5 HSR
Sandwiches	Prepared with Green items or ingredients, and minimal Amber items or ingredients ⁹ (ie, ≤ 25% Amber)	Prepared with Green and Amber category items only	Prepared with Red items
Sushi	Prepared with Green items or ingredients, and minimal Amber items or ingredients ⁹ (ie, ≤ 25% Amber)	Other sushi. Excludes sushi containing deep- fried ingredients	Containing deep-fried items or ingredients

^{*} A variety of coloured vegetables/fruit is recommended. Vegetables can be incorporated into the meal or can accompany it.

⁺ As determined visually or by assessment of dish ingredients list (for more information see health.govt.nz/publication/national-healthy-food-and-drink-policy

⁹ Where applicable, use healthier cooking methods (ie, braise, bake, steam, grill, pan fry or poach).

Fats and oils, spreads, sauces, dressings and condiments

Category	Green	Amber	Red
Fats and oils, spreads, sauces and dressings, condiments	Fats and oils, and spreads Low-salt mono- or poly-unsaturated spreads (eg, margarine, no added salt or sugar nut butter) Oil sprays and vegetable oils (eg, canola, olive, rice bran, sunflower, soya bean, flaxseed, peanut or sesame)	Fats and oils, and spreads Single serve butter (≤ 10 g) – make margarine the default option for single-serve spreads Lite varieties of: coconut milk or coconut cream, or dilute coconut cream with water Refer to the 'Milk and milk products' section for cream, sour cream and cream cheese	Fats and oils, and spreads Saturated fats and oils eg, butter (excluding single serve ≤10g butter), lard, palm oil, and coconut oil Standard varieties of: coconut milk and coconut cream Refer to the 'Milk and milk products' section for cream, sour cream and cream cheese
	Sauces and dressings Reduced fat/sugar/ salt varieties of salad dressings, mayonnaise, tomato sauce Use in small amounts or serve on the side	Sauces and dressings Standard salad dressings, mayonnaise, tomato sauce Use in small amounts or serve on the side	
	Savoury condiments Reduced fat/sugar/salt varieties of: sauces (chilli, soy, fish, etc.), pastes (tomato), relishes, stocks, yeast and vegetable extracts (Marmite, Vegemite) or, if using standard items don't add salt Mustard Herbs and spices If using salt, use iodised salt	Standard varieties	
	Sweet condiments Reduced sugar varieties – eg jam, honey or commercially made compote	Standard varieties Limit sweet condiments to < 1 Tbsp per serve	
Deep-fried foods			No deep-fried foods ¹⁰

¹⁰ Where applicable, use healthier cooking methods (ie, braise, bake, steam, grill, pan fry or poach).

Packaged snack foods

Category	Green	Amber	Red
Packaged snack ¹¹ foods		≥ 3.5 HSR and ≤ 800 kJ per packet	Either < 3.5 HSR or > 800 kJ per packet
For single ingredient foods, refer to criteria descriptions under the individual catetory			
Confectionery ¹²			Confectionery (sugar and sugar free)

¹¹ Packaged foods criteria apply to packaged foods not covered by other categories (eg, bakery items, mixed meals and ready-to-eat meals, nuts and seeds, fruit, vegetables etc). Where shops are on site, multi-serve packaged foods that meet the HSR of ≥ 3.5 and any other criteria that apply per serving are able to be sold (eg, crackers, cereal, biscuits, canned or packaged soups, plain popcorn). For multi-serve packaged foods the 800 kJ limit would apply per serving.

¹² Confectionery definition: confectionery includes a range of sugar-based and intensely sweetened products, including boiled sweets (hard glasses), fatty emulsions (toffees and caramel), soft crystalline products (fudges), fully crystalline products (fondants), gels (gums, pastilles and jellies), chocolate (including carob and compound chocolate), fruit leathers, enrobed (eg, yoghurt-covered) items and candied fruit/nuts. A limited range of confectionery products with therapeutic benefits (eg, one variety of throat lozenges, ginger and/or mints) may be sold – ideally at pharmacies, if on site.

Bakery items

Category	Green	Amber	Red
Category Bakery items	Green	Unpackaged and packaged bakery items More than half of the selection of baked products offered must contain some wholemeal flour, wholegrains (eg, oats, bran, seeds) and/or fruit or vegetables (eg, fresh, frozen or dried) No or minimal icing (eg, water icing) Use less saturated fat, salt and sugar No confectionery¹³ within products Pies only: follow the <i>How to Make Better Pies</i> guidelines (see Appendix 3) Portion sizes Scones, cake or dessert: ≤ 120 g Loaf, muffins: ≤ 100 g Slices, friands: ≤ 80 g Biscuits, muesli bars, pikelets: ≤ 40 g	All products that do not meet the Amber criteria
		Pies and quiches: ≤ 180 g Small pastries: ≤ 65 g Sausage rolls: ≤ 100 g	

¹³ Confectionery definition: confectionery includes a range of sugar-based and intensely sweetened products, including boiled sweets (hard glasses), fatty emulsions (toffees and caramel), soft crystalline products (fudges), fully crystalline products (fondants), gels (gums, pastilles and jellies), chocolate (including carob and compound chocolate), fruit leathers, enrobed (eg, yoghurt-covered) items and candied fruit/nuts. A limited range of confectionery products with therapeutic benefits (eg, one variety of throat lozenges, ginger and/or mints) may be sold – ideally at pharmacies, if on site.

Drinks

Category	Green	Amber	Red
Cold drinks	Plain, unflavoured, water, whether available from a tap, drinking fountain or bottled. Reduced-fat milk Added calcium but no added sugar milk alternatives (eg, reducedfat soy milk, almond milk)	Carbonated water Plain full-fat milk and calcium-enriched milk alternatives (eg, soy milk, almond milk) Still/carbonated flavoured drinks and milk drinks that may be sweetened with 'intense' sweeteners¹⁴ ≤ 300 ml Diluted no-added-sugar fruit or vegetable juices with total sugar content < 20 g¹⁵ and ≤ 300 ml per unit sold 100% fruit and/or vegetable juices (or ice blocks) with no added sugar (including unflavoured coconut water) and ≤ 200 ml	Sugar-sweetened drinks¹6 Milk-based drinks with added sugar eg, milkshakes and liquid breakfasts Still/carbonated drinks that may be sweetened with intense sweeteners > 300mls Diluted no added sugar fruit or vegetable juices with total sugar content ≥ 20g and/or > 300mls per unit sold Energy drinks
Hot drinks	No criteria developed for hot drinks at this stage. Minimise added saturated fat, salt and sugar, including sugar syrups and powdered flavours. Make reduced fat milk the default option.		
Category	Green	Amber	Red

Category	Green	Amber	Red
Milk-based smoothies prepared on site	No added sugar, reduced-fat milk or yoghurt-based smoothies made with fresh/frozen and no-added-sugar canned fruit ≤ 300 ml	No added sugar, full-fat milk or yoghurt-based smoothies made with fresh/frozen and no- added-sugar canned fruit ≤ 300 ml	Prepared with concentrate, fruit juice or added sugar (including honey or syrup) Smoothies > 300 ml

^{14 &#}x27;Intense' sweeteners (also known as artificial sweeteners) are a type of food additive that provides little or no energy (kilojoules). Intense sweeteners permitted for use in New Zealand include aspartame, sucralose and stevia.

¹⁵ This will be an equivalent sugar content to 200 ml of 100% fruit juice.

¹⁶ Any drink that contains added caloric sweetener, usually sugar. The main categories of sugary drinks include soft drinks/fizzy drinks, sachet mixes, fruit drinks, cordials, flavoured milk, flavoured water, cold tea/coffee, and energy/sports drinks.

Associated documents

Dunford E, Cobcroft M, Thomas M, et al. 2015. *Technical Report: Alignment of NSW healthy food provision policy with the Health Star Rating system.* Sydney, NSW: NSW Ministry of Health. URL: www.health.nsw.gov.au/heal/Pages/health-star-rating-system.aspx (accessed 17 March 2016).

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Appendix 1: Process

The National DHB Food and Drink Environments Network (the Network) was established in 2015 to develop a consistent National Healthy Food and Drink Policy (the Policy) for use across all New Zealand DHBs, and potentially other settings. The Network undertook regular teleconferences, a face-to-face meeting and a review of national and international healthy food policies. The Network finalised a set of overarching healthy food and drink policy principles in December 2015.

A sub-group of the Network developed draft nutrient criteria for the national policy following a face-to-face workshop and regular teleconferences. This resulted in a draft policy, which included both the principles and the detailed criteria, and which was further refined through input from the Network. The Network circulated the revised draft policy more broadly for input, particularly in relation to issues to consider for implementation.

Feedback on the draft policy was received from the following key stakeholders:

Unions: New Zealand Nurses Organisation, New Zealand Resident Doctors Association

Food industry: New Zealand Food & Grocery Council, Compass Group New Zealand

Health professional groups: Dietitians NZ, New Zealand Medical Associaton, Royal Australasian College of Physicians, NZ Health Partnerships Ltd, Allied Health Aotearoa New Zealand

District Health Boards: Northland DHB, Southern DHB, Taranaki DHB, Hutt Valley DHB, Capital & Coast DHB, Wairarapa DHB, Nelson Marlborough DHB, Bay of Plenty DHB, Waikato DHB, Canterbury DHB, West Coast DHB, Hawke's Bay DHB, Hauora Tairāwhiti

The Policy was finalised following consideration of the feedback.

Appendix 2: Network members and representatives of agencies supporting the development of the Policy

District Health Board and Ministry of Health Network members (as at June 2019)

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Auckland DHB	Julie Carter – Liaison Dietitian Rebecca McCarroll – Public Health Dietitian
Auckland Regional Public Health Service	Jacqui Yip – Public Health Dietitian Fiona Baggett – Public Health Dietitian
Auckland University, School of Population Health	Cliona ni Mhurchu – Professor Population Nutrition
Bay of Plenty DHB, Toi Te Ora Public Health Service	Hayley Adamson – Health Improvement Advisor Mel Arnold – Health Improvement Advisor, Healthy Policies
Canterbury DHB	Heather Allington – Nutrition Health Promoter Kerry Marshall – Manager, Communities Team Lee Tuki – Team Leader, Community and Public Health
Capital & Coast DHB	Jane Wyllie - Regional Public Health Dietitian
Counties Manukau DHB	Doone Winnard - Clinical Director Population Health (Public Health Physician) Stella Welsh - Manager, Food Service
Hawke's Bay DHB	Roya Ebrahimi – Population Health Advisor
Heart Foundation	Judith Morley-John – Food Industry Nutritionist
Wellington Regional Public Health	Jane Wyllie – Regional Public Health Dietitian Catherine Ward – Public Health Dietitian
Lakes DHB	Mel Arnold – Health Improvement Advisor
Mid Central Health	Nigel Fitzpatrick – Health Promotion Advisor
Ministry of Health	Louise McIntyre – Senior Advisor, Nutrition Harriette Carr – Deputy Director, Public Health
Nelson Marlborough DHB	Lauren Ensor – Health Promotion Manager
Northland DHB	Katie McVerry – Food Service Dietitian
South Canterbury DHB	Helen Sharples - Clinical Leader Dietetics
Southern DHB	Janice Burton – Professional Leader, Health Promotion Heather Fleming
Tairāwhiti Hauora	Tomairangi Chaffey-Aupouri – Health Promotion Advisor Kuini Puketapu – Operations Manager Population Health
Taranaki DHB	Jill Nicholls - Public Health Dietitian
Waikato DHB	Wendy Dodunski - Manager Nutrition and Food Services
Wairarapa DHB	Jane Wyllie - Regional Public Health Dietitian
Waitemata DHB	Rebecca McCarroll - Public Health Dietitian

West Coast DHB	Kimberley Browning - Clinical Dietitian Rosie McGrath - Health Promoter, Community and Public Health
Whanganui DHB	Karney Herewini – Health Promotion Pania Millar – Health Promotion

The following representatives and organisations also provided valuable support

The University of Auckland	Cliona Ni Mhurchu (PhD) - Professor of Population Nutrition	
Activity and Nutrition Aotearoa	a	
Heart Foundation		
Ministry for Primary Industries		

Appendix 3: How to make better pies



How to Make Better Pies

The pie is a popular food item in New Zealand. However some pies can be high in fat and salt. Responding to the increasing demand for healthier food options, the Pie Group is supporting local pie bakers to produce healthier pies through these How to Make Better Pies Guidelines.

Pastry Methods

English Method

(KG)	Top Pastry	(KG)	Base Pastry
10 0.5	Pastry flour (12% – 14% protein) 1st Pastry margarine	10	Plain flour (10% – 12% protein)
4.5-5	Water (variable)	4.5-5	Water (variable)
2.5-3.5	Lamination Pastry margarine slab room temperature	2-2.5	Cake margarine or shortening

The English Method for making pastry produces better quality pies, with significantly less fat compared to Scotch Methods, resulting in lower costs!



Top Pastry

- 1. Mix 1^{α} margarine through the flour and then add the water to the mix
- 2. Using a dough hook, ensure the dough is mixed well
- 3. Rest the dough for approximately ten minutes
- 4. Roll out the dough into a rectangle approximately 15mm thick
- 5. Lay the lamination pastry margerine so that it covers two thirds of the dough (as shown in step A)
- 6. Fold the dough into three (as shown in step B and C)
- Perform 3 book turns, allowing 15 minutes to rest between each turn After each fold turn the pastry 90°, then roll in one direction again
- 8. Pin/sheet to 2mm-2.5mm.

Allow the pastry to rest for at least 15 minutes before use

Scotch-All In Method

(KG)	Top Pastry	(KG)	Base Pastry
10 0.5	Pastry flour (12% – 14% protein) 1st Pastry margarine	10	Plain flour (10% – 12% protein)
4.5-5	Water (variable)	4.5-5	Water (variable)
3.5-4.5	2nd Pastry margarine nuggets room temperature	2-2.5	Cake margarine or shortening



- 1. Place flour, 1st margarine and water into mixing bowl and mix until ¾ mixed
- Add 2nd magarine at Water into mixing own and mix dimit with the layering fat is visible after mixing to ensure good lift. Fold the dough using the book turn technique (see diagram). This increases the number of layers in the dough by four each time a book turn is completed. The book turn method gives the pastry good volume using less fat
- Perform 3 book turns, allowing 15 minutes rest between each turn After each fold turn the pastry 90°, then roll in one direction again

Allow the pastry to rest for at least 15 minutes before use.

Base - Mixing Process

- 1. Place flour, margarine and water into mixing bowl
- Mix on slow speed until combined with no lumps
- 3. Rest 15mins before use.

Base - Folding Process

- 1. Give the pastry a half turn (see diagram) to match your tray width
- Turn the dough 90°. Pin/sheet to 3mm 4mm
- 3. Allow the pastry to rest before use, then line tins/trays







Meat Pie Filling

Measure quality ingredients	Meat	Use lean mince including Prime and Premium beef mince (Figure 1) Remove chicken skin and excess fat before cooking Choose lean cuts of beef and lamb (Figure 2)	
	Other Foods	Baked beans are a cost-effective filler that adds flavour and texture Use low fat milk in sauces Use herbs and spices to decrease the reliance on salt for flavour Do not use mono-sodium glutamate (MSG) as it is high in sodium Use small quantities of a highly flavoured tasty cheese Include frozen or fresh vegetables such as peas, carrots and corn to increase the pie bulk	
Temperature		Cold filings are recommended to prevent premature melting of the pastry fat Bake pies in a hot oven between 220°C and 250°C	
Technique	Skim fat off boiled filling		

Beef mince

Figure 1

otal fat
20%

Beef and Lamb cuts

Chemically Lean (CL)	Visually Lean (VL)
85%	90%
90%	95%
95%	100%
Figure 2	

TIPS

1) Always roll the pastry in one direction and do not reduce thickness too quickly. This creates a better lift and allows for less shrinkage.

2) Cover pastry during rest periods to prevent skinning or drying out.

Temperature

Pastry margarines should be stored between 18°C - 20°C – do not refrigerate

The final pastry dough temperature should be approximately 16°C - 20°C



In summer, chilled water can be mixed with the flour to meet the required temperature.

Better Pies by Reducing Fat





The Pie Group is a collaborative effort between:



(beef+lamb





Thank you to the following companies for their contribution: NZ Bakels, Profile Products, Dads Pies, GWF Baking Divisions NZ, Goodman Fielder, Couplands Bakeries

For further information on the Pie Group contact the Heart Foundation on 09 571 9191 or email info@heartfoundation.org.nz