

Police Rehabilitation Centre - Flint House

Healthy Eating Policy

Britain: the incidence of Coronary Heart Disease is one of the highest in the world

“Our policy is based on government guidelines and recommendations to help reduce the incidence of Heart Disease, Obesity and Type II Diabetes”

Main Aims of our Policy are:-

- To help reduce the intake of saturated fats, by moderate use of mono and polyunsaturated fats
to contribute 35% of daily energy needs
- To help reduce salt consumption to below 5g per person per day by 2025.
W.H.O. Member states agreed voluntary global target aim of achieving a target of less than 5 grams per day (approximately 2g sodium) by 2025
- To help reduce ‘free sugar’ (previously known as ‘non-milk extrinsic sugars’) from 10% to 5% of diet
- To provide ‘non-refined’ Carbohydrates: Whole meal: Bread, Rice & Pasta, whenever possible
**to contribute 50% of daily energy needs
of which sugars – reduce to 5% from 10% of daily energy needs**
- To encourage the consumption or eating of more ‘Dietary Fibre’, unrefined starchy foods
30g per day - recommended 30g of AOAC fibre (18g of NSP) per day
*Dietary fibre is NSP PLUS non-digestible fibres which also help to lower LDL cholesterol levels
Average consumption 18g (‘sacn’ Jul -2015) Dietary Fibre (formally ‘roughage’ or ‘NSP’ (non-starch polysaccharides))
A product claiming to be ‘high fibre’ should contain at least 6g of fibre per 100g or at least 3g of fibre per 100 kcal.*
- Encourage the consumption (the eating) of at least five portions of ‘Vegetables & Fruit’ a day
Minimum intake 400g (dry weight) a day more vegetable rather than fruit based – to help reduce sugar intake
- To help limit/control protein in-take: minimum requirement of approximately 0.75g per kg (max 1.5g)
(Avg. Male 19-50 years is 74kg = 55.5 g a day. Avg. Female 19-50 years is 60kg = 45g a day.)
*COMA (Committee on Medical Aspects of Food Policy, Panel on DRA (Dietary Reference Values) 1991
Rigorous exercise means eat more carbohydrates and not more protein – the idea that more protein increases muscle growth is erroneous
to contribute 10% of daily energy needs
– on average our diets, actually provide < 17% of our energy intake
*Fox and Cameron’s, Food Science, Nutrition and Health (7th edition) 2006 – Michael Lean p 146/147**
- Drink more water; reduce/limit consumption of: tea, coffee, fruit juice, alcohol, including:-
ASB’s (artificially sweetened beverages) or SSB’s (sugar-sweetened beverages) drinks - whether sparkling or not.

References for the Healthy Eating Policy are:-

National Service Framework: for Coronary Heart Disease

March 2000 Guidance, DH (Dept. of Health)

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/198931/National_Service_Framework_for_Coronary_Heart_Disease.pdf

Cardiovascular Disease Outcomes Strategy:

Improving outcomes for people with or at risk of cardiovascular disease March 2013

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/217118/9387-2900853-CVD-Outcomes_web1.pdf

Coronary heart disease statistics update: annual update March 2014 (TBP)

‘SACN’ (Scientific Advisory Committee on Nutrition)

Dietary recommendations from ‘Carbohydrates and Health’ (including advice on ‘free sugar’) July 2015

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/445503/SACN_Carbohydrates_and_Health.pdf

(CASH) Consensus Action on Salt and Health: Salt reduction programme March 2014

<https://responsibilitydeal.dh.gov.uk/salt-reduction-onwards-and-downwards/>

F9: New revised UK-wide salt reduction targets (March 2014) for completion December 2017

DH (Dept. of Health)

Reducing obesity and improving diet. Guidance on Voluntary Energy (kJ/kcal) Labelling for Out of Home Businesses (February 2015)

<https://responsibilitydeal.dh.gov.uk/wp-content/uploads/2015/02/OOH-energy-labelling-guidance-2015-final-9.2.15.pdf>

<http://www.cqc.org.uk/content/regulation-14-meeting-nutritional-and-hydration-needs>

NHS Choices and BDS

<http://www.nhs.uk/livewell/healthy-eating/Pages/Healthyeating.aspx>

<https://www.bda.uk.com/foodfacts/home>

Method of Achieving the Policy for Healthy Eating

Vegetables & Fruit

Vegetables – Steamed, whenever possible – so without Salt

Vegetables & (Salads - Lunch time) served plain no Butter or Oil

Salads – Look for plain – no Mayonnaise based Salads – **Mayonnaise is high in Fat**

Fresh Fruit in Dining Room all day

Consider 5 portions of either cooked or raw plain vegetables and or plain salad a day

Consider two different pieces of fruit a day to achieve a potential 7 plus a day

Carbohydrates, Unrefined Starches & Dietary Fibre (was 'roughage' or 'NSP')

Potatoes including 'Sweet', **Wholegrain** Cereals, (Semi &) **Wholegrain** Pasta, **Wholegrain** Basmati or Long Grain Rice

Whole Meal, Wholegrain, Multi- Cereal or White Farmhouse Bread (or Baguettes/Loaves with Soups)

Sugar

Reduce the amount of *added* '**Free Sugar**' - using dried fruit in kitchen recipes

Artificial sweeteners for patient use - some to be used in cooking where practical – i.e. desserts

Salt

Reduce quantity of salt used in recipes, use herbs & spices to enhance flavors as required

'LoSalt' – lower Sodium > 'Potassium' based salt for cellars & in cooking

Fluid - Drinks > Water

Fresh tap Water will always be available on tables at meal times >>> **Drink More Water**

Fruit Juices - Breakfast suggested **150ml maximum portion size** as for school-children

Filtered Water is available in the lounges plus from dispensers around the buildings

Fat

Reduce intake of all fat. Use mono and polyunsaturated fats – **Kitchen: Olive and Rapeseed Oils**

Choice of two spreads on table: - **Flora & Unsalted Butter**

Meats will be lean with fat removed. **Poultry to have skin removed in most dishes**

Cooking methods will be by Steaming, grilling, baking, boiling or braising. **Frying - used rarely**

Full choice of Milk: Milk whole (4%) or semi-skimmed (2%) plus (1%) or skimmed (0.2 to 0.6%) Goats Milk to order

Cow's & Goat's Milk Lactose free alternative available upon request (before arrival) – subject to availability

Dairy alternatives also available to order – e.g. Hazelnut, Soya, Hemp, Oat, Almond etc.

Full Fat (4%) yoghurt, whipping cream (35% Fat) used in dessert making. **Not Double Cream 48%**

Cheese – Cheddar & Red Leicester replaced by reduced fat versions

Yoghurt & Cream mix (75% Yoghurt + 25% single cream) (18% fat) alternative to single cream for you dessert in the evening

Meat

Reduced use of Red Meat, smaller portions, always offering a vegetarian alternative

Fish

Fish available daily – Oily fish (**Omega-3 Oils**) at least twice a week – e.g. **Breakfast Smoked Salmon & Scrambled Eggs**

'Allergens'

**The 'Allergen' sheet indicates if any of the 14 allergens are present in any meal
Patients to seek advice from Duty chef with their individual needs**

'Healthy Eating & Nutrition'

Every Wednesday for Patients; an holistic approach to

'Healthy Eating & Nutrition' developed by the

Health and Wellbeing, Physiotherapy & Catering Departments

Wednesday 1:45pm prompt Dining Room Servery

Then in the Conference Room, Flint House - 1st floor, above the Bar, from 2:00pm

See Notices in Dining Room or on the Touch Screen Menu Monitor for updates