About this toolkit

This toolkit was developed by and for supported accommodation providers in Queensland, Australia, in partnership with Queensland Health community nutritionists, to promote healthy eating in supported accommodation services.

Supported accommodation providers play a crucial role in keeping residents healthy, both through providing access to personal care services, and also by providing food that is nutritionally adequate to meet residents’ needs.

The toolkit includes practical information about providing healthy food for all residents, adjusting meals for residents with special needs, and how the surroundings of your facility can help residents to make healthier choices.

Every supported accommodation setting is different, so not all the suggestions will be relevant to your service. Choose the ideas that work for your service, or modify them to fit better into your setting.

You can read the toolkit from beginning to end or just turn to the section that you need help with right now. It might be helpful to first read 1 – Introduction to healthy eating to give you an understanding of the basis for the recommendations in each section.

Each section of the toolkit has been kept purposely brief, to give you the key information without wasting your time. If you are interested in learning more about a particular area, some useful links are provided at the end of each section.

A note about change

For successful change to occur in any setting, it’s important to get the support and involvement of others.

As you read each section of the toolkit and consider how some of the suggestions might apply to your service, also consider who in your service should be involved in the consultation or decision-making about any changes. This may be kitchen staff, food suppliers, external services that visit your facility, or residents and their friends and family.

Sharing information that is accurate and easy to understand is also an important way to bring people along with any new ideas or changes that you want to implement. Some templates and ideas about communicating suggested changes in your service can be found in 5 – Helping residents to make healthy food choices.

We would be interested to hear about your experiences, either good or bad, in implementing ideas suggested in this toolkit. If you would like to share your story, please contact: access&capacity@health.qld.gov.au
Acknowledgements

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# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>About this toolkit</td>
<td>iii</td>
</tr>
<tr>
<td>A note about change</td>
<td>iii</td>
</tr>
<tr>
<td>Acknowledgements</td>
<td>iv</td>
</tr>
<tr>
<td><strong>1 Introduction to healthy eating</strong></td>
<td></td>
</tr>
<tr>
<td>Accreditation</td>
<td>1</td>
</tr>
<tr>
<td>Food and nutrition essentials</td>
<td>2</td>
</tr>
<tr>
<td>Food safety</td>
<td>7</td>
</tr>
<tr>
<td>Food and nutrition frequently asked questions</td>
<td>8</td>
</tr>
<tr>
<td><strong>2 Menu planning</strong></td>
<td></td>
</tr>
<tr>
<td>Accreditation</td>
<td>11</td>
</tr>
<tr>
<td>Menu planning guidelines</td>
<td>11</td>
</tr>
<tr>
<td>Example menu</td>
<td>14</td>
</tr>
<tr>
<td>Menu self-assessment checklist</td>
<td>15</td>
</tr>
<tr>
<td>Making menu changes</td>
<td>15</td>
</tr>
<tr>
<td>Menu action plan</td>
<td>17</td>
</tr>
<tr>
<td>Cooking and serving guides</td>
<td>18</td>
</tr>
<tr>
<td>Food label reading</td>
<td>21</td>
</tr>
<tr>
<td>Making the most of your food dollar</td>
<td>23</td>
</tr>
<tr>
<td>Real-life stories from supported accommodation</td>
<td>25</td>
</tr>
<tr>
<td><strong>3 Healthy meal ideas and tips</strong></td>
<td></td>
</tr>
<tr>
<td>Accreditation</td>
<td>27</td>
</tr>
<tr>
<td>Modifying recipes</td>
<td>27</td>
</tr>
<tr>
<td>Healthy snack ideas</td>
<td>33</td>
</tr>
<tr>
<td>Suggested recipes and cookbooks</td>
<td>34</td>
</tr>
<tr>
<td>Real-life hints and tips from supported accommodation</td>
<td>35</td>
</tr>
<tr>
<td><strong>4 Food for special needs</strong></td>
<td></td>
</tr>
<tr>
<td>Accreditation</td>
<td>36</td>
</tr>
<tr>
<td>Diabetes</td>
<td>36</td>
</tr>
<tr>
<td>Mental illness and diet</td>
<td>42</td>
</tr>
<tr>
<td>Cultural and religious meal considerations</td>
<td>45</td>
</tr>
<tr>
<td>Food allergies and intolerances</td>
<td>48</td>
</tr>
<tr>
<td>Chewing and swallowing difficulties</td>
<td>52</td>
</tr>
<tr>
<td>Increasing energy and strength</td>
<td>54</td>
</tr>
</tbody>
</table>
5  Helping residents to make healthy food choices

Accreditation 65
Vending machines 65
Food kiosks 66
Dining rooms – providing a pleasant mealtime environment 67
Promoting healthy eating to residents 69
The healthy eating message for visitors 70
Example letters for communicating healthy eating philosophy 71
Ideas for active and enjoyable outings 73
Developing a nutrition policy 74
Nutrition policy example 76
Real-life stories from supported accommodation 77

6  Where to get more help

How to find a dietitian 78
Other helpful contacts 78
Links 79

7  Glossary

A–Z list of nutrition terms 82

8  Templates

Menu template 86
Action plan template 87
Nutrition policy template 88
Menu self-assessment checklist template 89
Accreditation

All supported accommodation service providers are required by the Queensland Government to comply with the Residential Services (Accreditation) Act 2002.

The Act recognises and safeguards residents’ rights and ensures that all buildings and amenities are safe. For Level 2 and 3 supported accommodation providers, it also provides authority to regulate the provision of a food service and access to personal care services, which may assist residents with bathing, laundry and taking medication.

This resource aims to help supported accommodation providers meet the requirements outlined in Residential Services (Accreditation) Regulation 2018:

2.1 Food and Nutrition

- Residents are provided with food and nutrition complying with the best practice guide of healthy eating in supported accommodation published by the health department on the website of the Metro South Hospital and Health Service.

2.2 Kitchens

- The kitchen facilities comply with the service provider’s accredited food safety program, if any, or the Food Standards Code, standard 3.2.3.

2.3 Food Handling and Storage

- Procedures are in place to ensure the safe delivery and storage of food.
- Persons preparing and serving food observe personal hygiene and cleanliness practices, take reasonable action to minimise the risk of food contamination, and comply with the service provider’s accredited food safety program, if any, or the Food Standards Code, standard 3.2.2.

The following sections of the resource will explain more specifically which accreditation standard that part of the resource will help you achieve.
Food and nutrition essentials

We know healthy eating plays an important role in keeping our bodies healthy and strong, as well as preventing illness. This is particularly important for people living with an intellectual disability, acquired brain injury or mental illness, because they are more likely than the general population to have health issues associated with poor nutrition. These issues are common in people who live in supported accommodation.

The Australian Dietary Guidelines (2013) provide up-to-date advice about the amount and types of foods and drinks that we need to eat regularly for health and wellbeing. They are based on scientific evidence and research, including a review of over 55,000 scientific journal articles by nutrition and medical experts.

Many of the fad diets you hear about in the media are based more on fashion than on evidence. Fad diets can also be expensive to follow and may even mean you miss out on essential nutrients.

**Australian Dietary Guidelines**

**Guideline 1:** To achieve and maintain a healthy weight, be physically active, and choose amounts of nutritious food and drinks to meet your energy needs.

**Guideline 2:** Enjoy a wide variety of nutritious foods from the five food groups every day and drink plenty of water.

**Guideline 3:** Limit intake of foods containing saturated fat, added salt, added sugars, and alcohol.

**Guideline 4:** Encourage, support and promote breastfeeding.

**Guideline 5:** Care for your food; prepare and store it safely.

**The five food groups**

Different foods contain different key nutrients important for our health. Foods are grouped into five food groups of:

- Vegetables and legumes/beans
- Fruit
- Grain (cereal) foods (mostly wholegrain and high fibre varieties)
- Lean meats and poultry, fish, eggs, tofu, nuts and seeds and legumes/beans
- Milk, yoghurt or cheese (mostly reduced fat)
The role of the food groups in our body

Foods are grouped into five food groups because they provide similar amounts of the key nutrients in that group. Here are just some of the important roles foods from each food group play in our body:

- **Vegetable and legumes group and fruit group**: These foods help to keep our bowels regular, and there is evidence to show they help to prevent weight gain. They are protective for heart disease and help to prevent many cancers. They also help our immune system to ward off colds and other sicknesses.

- **Milk, yoghurt or cheese group**: These foods keep our bones healthy and are used by our nerves to carry messages from our brain to the rest of our body. New evidence also shows a link between drinking milk and a reduction in heart disease and some cancers.

- **Lean meats and poultry, fish, eggs, tofu, nuts and seeds and legumes/beans group**: These foods are important for us to be able to build and repair our body. They are needed to produce healthy blood and for our immune system to function properly. In particular, eating fish has been shown to prevent stroke, dementia, and age-related damage to our eyes.

- **Grain (cereal) foods group**: Wholegrain cereals still contain all three parts of the grain (the bran, germ and endosperm) and have more goodness in them compared to more refined or ‘white’ cereals. Wholegrain cereals give the body energy, help prevent constipation and are protective against bowel cancer and diverticulitis.

**A note about water**: Water is needed for nearly every function in our body! It is used in our bloodstream, in our digestion, to regulate our body temperature, to get rid of waste products, to lubricate and cushion joints, and to keep our skin healthy.

**A note about healthy fats and oils**: Small amounts of fats are important for our eyes, brain, skin and nerve tissues, and for making hormones. Healthy fats (unsaturated fats) also help to reduce the risk of heart disease and lower cholesterol levels when they replace unhealthy fats in the diet. For more information about which fats are the healthiest, see FAQ: What types of fats are best?

**Variety**

Eating a wide variety of foods from each of these five food groups every day means we get all the nutrients we need for good health over time. It’s also important to eat a selection of the foods within each group (such as eating different-coloured vegetables within the vegetable group, because orange carrots contain more vitamin A than white potatoes).

For these reasons it is essential that residents are offered a variety of foods from each of the five food groups every day, as well as different foods within each group over the menu cycle.
How much of each food group do we need each day?

The Australian Guide to Healthy Eating shows us visually the amounts of each food group that should generally make up our diet each day to get all the nutrients our bodies need.

In other words, throughout the day we should base most of our meals on the vegetables and wholegrain food groups, and then eat equally from the fruit, lean meats or milk, yoghurt and cheese groups. Small amounts of healthy fats are also an important part of a balanced diet. [For more information about which fats are the healthiest, see FAQ: What types of fats are best?]
More specifically, people of different ages, life stages and gender need different amounts of each food group. The table below shows the minimum amount of each food group most supported accommodation residents need to eat every day to get the full amount of nutrients their bodies need. This information can be particularly useful when planning what foods to offer your residents, and the quantities of foods to purchase. This is explained more in the Menu planning section of the toolkit.

### SERVE SIZES

#### Vegetables and legumes/beans

A standard serve of vegetables is about 75g (100-350kJ) or:
- ½ cup cooked green or orange vegetables (for example, broccoli, spinach, carrots or pumpkin)
- ½ cup cooked, dried or canned beans, peas or lentils
- 1 cup green leafy or raw salad vegetables
- ½ cup sweet corn
- ½ medium potato or other starchy vegetables (sweet potato, taro or cassava)
- 1 medium tomato

‘preferably with no added salt’

#### Fruit

A standard serve of fruit is about 150g (350kJ) or:
- 1 medium apple, banana, orange or pear
- 2 small apricots, kiwi fruits or plums
- 1 cup diced or canned fruit (with no added sugar)

Or only occasionally:
- 125ml (½ cup) fruit juice (with no added sugar)
- 30g dried fruit (for example, 4 dried apricot halves, 1½ tablespoons of sultanas)

#### Grain (cereal) foods, mostly wholegrain and/or high cereal fibre varieties

A standard serve (500kJ) is:
- 1 slice (40g) bread
- ½ medium (40g) roll or flat bread
- ½ cup (75-120g) cooked rice, pasta, noodles, barley, buckwheat, semolina
- polenta, bulgur or quinoa
- ½ cup (120g) cooked porridge
- ½ cup (50g) wheat cereal flakes
- ½ cup (50g) muesli
- 3 (35g) crispbreads
- 1 (60g) crumpet
- 1 small (55g) English muffin or scone

"The ‘serve size’ is a set amount that doesn’t change. It is the size that’s most likely to be eaten and the size that’s most likely to keep you healthy."

"Few people eat exactly the same way each day and it is important to vary the types of foods and groupings you choose to eat to ensure that you get a range of the nutrients your body needs to be healthy."

"It’s helpful to get to know the recommended serving sizes of the five food groups, and apply the serve sizes go to: www.eatforhealth.gov.au"

"Grain (cereal) foods, mostly wholegrain and/or
high cereal fibre varieties"

"The size is larger than the ‘serve size’, then you will need to eat up being similar to the number of serves you need each day."

"If you eat portions that are smaller than the ‘serve size’ you will

"You can weigh foods to get an idea of what a serve looks like.

"We've given you the serve size in grams too, so tables above."

"For further information go to www.eatforhealth.gov.au."

"Men 6 6 4½"

"Women 5 5 5"
SERVE SIZES

Lean meat and poultry, fish, eggs, tofu, nuts and seeds, and legumes/beans

A standard serve (500-600kJ) is:

<table>
<thead>
<tr>
<th>Serves per day</th>
<th>19–50 years</th>
<th>51–70 years</th>
<th>70+ years</th>
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<tbody>
<tr>
<td>Men</td>
<td>3</td>
<td>2½</td>
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<tr>
<td>Women</td>
<td>2½</td>
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Milk, yoghurt, cheese and/or alternatives, mostly reduced fat

A standard serve (500-600kJ) is:

<table>
<thead>
<tr>
<th>Serves per day</th>
<th>19–50 years</th>
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<td>Men</td>
<td>2½</td>
<td>2½</td>
<td>3½</td>
</tr>
<tr>
<td>Women</td>
<td>2½</td>
<td>4</td>
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- To meet additional energy needs, extra serves from the Five Food Groups or unsaturated spreads and oils, or discretionary choices may be needed only by those adults who are taller or more active, but not overweight.
- An allowance for unsaturated spreads and oils for cooking, or nuts and seeds can be included in the following quantities: 28-40g per day for men less than 70 years of age, and 14-20g per day for women and older men.
- For meal ideas and advice on how to apply the serve sizes go to: [www.eatforhealth.gov.au](http://www.eatforhealth.gov.au)

Based on material provided by the National Health and Medical Research Council.

What about unhealthy, processed foods?

Cakes, biscuits, soft drinks, ice cream, and even highly processed meats are all examples of foods that don’t provide many (if any) nutrients for our bodies other than extra fats, sugars and salt. This is why sometimes they are called discretionary foods.

Many of our health problems are a result of eating too many of these foods. Type 2 diabetes, overweight, tooth decay, heart disease and stroke are all linked to a diet high in discretionary foods. These foods also replace healthy foods that contribute to wellbeing and fight disease.

We all know these foods can be an enjoyable part of our diet, but they are best included occasionally and in small serves.
Some residents who are very tall, very active or have higher energy needs due to illness need extra serves of foods. It is best if these extra serves come from the **five food groups**, particularly wholegrain cereals, vegetables and legumes/beans and fruit. They can, however, also sometimes include serves of **discretionary foods**.

On a day-to-day basis, eating too many **discretionary foods** can make the illnesses we already have worse or harder to manage. This is particularly relevant for many of the residents in supported accommodation services.

**For more information about healthy eating:**
- Eat for Health: Australian Dietary Guidelines (2013)  
  www.eatforhealth.gov.au
- Healthier Happier  
- Dietitians Association of Australia: Healthy Eating  

**Food safety**

Preparing and storing food safely forms part of the Australian Dietary Guidelines and is a vital step in maintaining residents’ health and reducing preventable illness. Under **Accreditation Standard 2.2: Kitchens**, all supported accommodation providers are expected to comply with local council food safety standards.

All foods, and particularly fresh foods, need to be transported, stored and prepared properly to avoid contamination.

Contamination can occur when:
- foods aren’t kept at the right temperature
- raw foods (especially raw meat, poultry, seafood and raw vegetables) aren’t separated from cooked and ready-to-eat foods
- utensils aren’t cleaned properly
- people preparing foods are unwell and don’t follow good personal hygiene practices.

Food poisoning can occur when we eat contaminated foods or drinks.

**Symptoms of food poisoning**

Symptoms of food poisoning can include:

- stomach cramps
- nausea
- vomiting
- diarrhoea
- headache
- fever.

Depending on the cause, food poisoning may start within an hour, but it may also occur up to weeks after eating contaminated food.

These symptoms may also be caused by viruses and may be highly infectious. It is important to investigate the causes of any gastro outbreak and act according to medical instructions. Staff should not attend work until 48 hours after their last gastro symptoms.
Who’s most at risk of food poisoning?
Anyone can get food poisoning. Most healthy people recover quickly from most types of food poisoning, but some people can experience serious health issues and even hospitalisation.

Those more at risk include people who are pregnant, elderly or very young, or someone whose immune system is weak through illness or drugs.

For more information on safe food, training and licensing for businesses, contact your local city council.

Food and nutrition frequently asked questions

Q: Are low fat dairy foods better than full fat foods?
A: The Australian Dietary Guidelines and new evidence reviewed by the National Heart Foundation currently recommend reduced fat dairy products (milk, yoghurt or cheese) for everyone over the age of two years. This is because full fat dairy products would mean more energy or kilojoules in our diet, which can lead to overweight.

Sometimes flavoured low fat yoghurts or flavoured low fat milks can have lots of added sugar. Low fat natural yoghurts and low fat unflavoured milks are the best choices.

Q: What types of fats are best?
A: New evidence suggests that whole diet changes, not just changing the type of fats, are required for the best health. The healthiest types of fats are still known to be monounsaturated and polyunsaturated fats.

Polyunsaturated fats are found in fish, tahini, flaxseed, chia seeds, pine nuts, walnuts and Brazil nuts, cooking oils (e.g. soybean, sunflower, safflower and canola oils), and in polyunsaturated margarines.

Monounsaturated fats are found in avocados, almonds, cashews and peanuts, and in cooking oils, e.g. canola, olive, rice bran, sesame, soybean and sunflower oils.

The newest evidence shows that we should replace saturated fats in our diets with the healthier fats listed above, as well as eat plenty of whole grains and reduce our sugar intake to lower our risk of heart disease. Saturated fats are found mostly in animal products (meat, chicken and dairy), coconut and palm oils, processed foods like cakes and biscuits, and takeaway foods.

Trans fats are also unhealthy and are best avoided. These are unsaturated fats that have been highly processed and behave like saturated fats; they are found in many packaged and baked foods and may be listed as ‘hydrogenated oils’ or ‘partially hydrogenated vegetable oils’.

Large catering packs of prepared foods are more likely to contain unhealthy fats than supermarket products. Contact the supplier if you are unsure.

Remember, the fats in foods are just one part of our diet. Eating more vegetables, fruit and whole grains, and fewer added sugars is also important to keep healthy.
Q: Are all sugars created equal?
A: It’s well known that too much added sugar contributes to overweight and tooth decay. New evidence also suggests that it may increase our risk of heart disease. Added sugars are hidden in most processed foods. The Australian Dietary Guidelines recommend cutting back on eating foods containing added sugars, such as lollies, soft drinks, fruit drinks, cordials, vitamin waters, energy drinks, sports drinks, biscuits, pastries and cakes.

There’s a huge range of sugars and syrups available today, including white sugar, raw sugar, honey, maple syrup, agave, coconut sugar, rice malt syrup and molasses. Despite their different colours and flavours, the nutritional value of sugars and syrups is very similar. They all add extra energy or kilojoules and not many other nutrients, and most are bad for your teeth.

Some sugars and syrups may have a few more B vitamins (e.g. honey), or more minerals like potassium, magnesium and iron (blackstrap molasses), but remember: they have much less than the amount of nutrients found in vegetables, fruits and wholegrains! It’s best for us to eat the sugars found naturally in whole foods like fruit and dairy products, avoid adding lots of extra sugars or syrups to our foods, and to keep processed, sweet treats to small serves eaten only sometimes.

Q: Should we use artificial sweeteners or ‘diet foods’?
A: Artificial or intense sweeteners such as stevia, aspartame, saccharin or sucralose are often found in processed ‘diet foods and drinks’. They do not contain kilojoules or energy, but neither do they provide any nutrients. Essentially, these foods are not really part of a healthy diet.

In the past, safety concerns have been raised about some artificial sweeteners. These concerns resulted from studies conducted on animals, but the doses or amounts were many times more than a person could really eat or drink. Food Standards Australia and New Zealand (FSANZ) has deemed these products safe for use in our food.

Regular use of artificial sweeteners, however, may train our brain to crave sweet-tasting foods. Studies have also suggested that some sweeteners may increase our appetite or disrupt our healthy gut bacteria, leading to weight gain, but more high quality research is needed to confirm these findings. Diet soft drinks also contain acids that are bad for our teeth.

The best thing to do is have as little as possible of all sugars, syrups and sweeteners. Add sweetness and flavour to food with ‘warm’ spices like cardamom, cinnamon, ginger and nutmeg. Muffins and cakes can usually be made with at least 25 per cent less sugar, and the sugar in stewed fruit and pie fillings can be cut in half. The best way to reduce sugar and artificial sweeteners in hot drinks is to gradually reduce the amount over time.

Q: Frozen, tinned or fresh vegetables?
A: Vegetables are nutritious whether they are fresh, frozen, canned or dried. If you use canned vegetables, choose those with no added salt. When a food is frozen, the nutrients are locked in at the time of freezing, so frozen veggies can be both convenient and nutritious. Check the label to make sure there is no added salt, sugar or fat. Fresh vegetables that are in season are often cheaper and tastier than other fresh vegetables.

Fried vegetables such as hot potato chips are best eaten only sometimes and in small amounts.
Q: Why is processed meat unhealthy?
A: Processed meats (e.g. sausages) and deli meats (e.g. ham, bacon and salami) are high in salt and unhealthy fats (saturated fats). These meats are bad for our heart and other blood vessels. Processed meats have also been linked to some cancers. These types of meats are considered part of the discretionary or ‘extras’ group and we should avoid eating them regularly. It is best to choose lean meats or poultry that is trimmed of all visible fat and skin.

Q: Isn’t a high protein or a Paleo-type diet what is recommended now?
A: High protein diets seem to be the latest thing in the media. In particular, the Paleo diet is promoted as being better suited to our bodies and is supposed to be how our ancestors ate. Many researchers say this is simply not true: firstly, the diets of our ancestors depended on where in the world they lived and what foods they could access easily, so there really wasn’t just one type of diet. Secondly, it is likely that both humans and foods have changed since our caveman days.

While it’s true that most Australians don’t eat enough vegetables and fruit, and eat far too many processed or discretionary foods, the Paleo diet focuses a bit too much on meats, poultry, fish and eggs for most people. High protein diets also generally cost more and are hard to follow long term. Healthy starches or carbohydrate foods also provide essential nutrients and fibre, and are an important fuel for the helpful bacteria that live in our gut. In high protein diets, these benefits are being missed out on.

Paleo diets have not been studied over the long term, nor in many people. It’s important to remember that the Australian Dietary Guidelines are based on evidence from thousands of studies. So the bottom line is definitely to eat a diet containing vegetables, fruit, lean meats, poultry, fish, eggs and nuts. Also include whole grains and some low fat dairy foods – but keep processed foods to a minimum!

Sources of information
2 Menu planning

Accreditation

This section outlines how to go about menu planning. Sound menu planning is the way to ensure residents are provided with food that is adequate in quality, quantity, variety and nutritional value to meet their daily food requirements as specified in Accreditation Standard 2.1: Food and Nutrition. Well-planned menus also allow for better coordination of food deliveries and stock rotation, and are an aid in achieving Accreditation Standard 2.3: Food Handling and Storage.

Use the Menu planning guidelines and Menu planning self-assessment checklist to develop a healthy, rotating menu that is based around the five food groups.

Use the visual Meal preparation guide to ensure the right amounts of foods from each food group are cooked for each meal. The visual Meal serving guide will help with serving residents the recommended quantities of each food group for a balanced meal.

Menu planning guidelines

Why plan a menu?

A menu is a list of foods or a combination of foods and drinks that will be served at specific meal times. A cyclical menu is planned for a certain period of time, such as two weeks, and is then repeated at the end of that time.

Here are the main reasons why planning a written menu makes good business sense.

- Having a planned menu can help to save money and time. It makes shopping easier for staff when they know the items required, and food can then be purchased in bulk or in advance. In other words, it reduces the need for multiple, frequent food shopping expeditions or deliveries.
- It can make it easier to plan workloads for your kitchen staff.
- It makes it easier to ensure residents are offered a healthy and varied diet from all the five food groups.
- It reduces boredom with meals, so residents are more likely to consume the foods offered. This means they are more likely to meet their nutrition needs.
- It’s also the easiest way to make sure you meet the special needs of residents.
- On-site storage capacity for foods can be considered well in advance, to reduce overstocking and to allow for better rotation of stock.
- There tends to be less food wastage as a result of better ordering and increased consumption of food.
How do I plan a menu?

1. Gather information for planning

- Favourite recipes/cookbooks.
- List of residents’ food preferences.
- List of any special diets residents need, including allergies and religious food requirements.
- List of residents’ ages and ethnicities.
- Any previous resident satisfaction surveys. Consider involving residents in the menu planning process.
- A blank template of your meal pattern. Consider the length of your menu cycle; a two-week menu is recommended as a minimum cycle. Where there is little choice provided, a four-week menu is usual.

2. Plan each menu item in turn for the complete cycle

- For example, focus your thoughts on one item at a time, e.g. dinner meats across the cycle.
- Consider a variety of colours, textures, flavours, cooking methods and shapes for each item across the cycle.
- Consider seasonal availability of foods, and food preferences in summer versus winter.
- Fill in standard items that are the same every day, such as fresh fruit or some breakfast items.
- Progress through each item for the entire menu cycle, ensuring that foods from as many of the five food groups as possible are included at each meal.
- Remember to plan snacks between meals that are based on a food group, such as the fruit, vegetable or milk/yoghurt and cheese groups.
- Specifically plan to:
  - include one or two fish meals each week
  - include an orange vegetable for vitamin A every day (pumpkin, orange sweet potato or carrot).
Plan modifications for special diets

- As a general rule, try to plan healthy meals that are suitable for all residents (including those requiring special diets) to reduce workload.
  
  i. Use lean meats most often.
  
  ii. Limit processed meats, e.g. sausages, frankfurts, cheerios, bacon and ham, which are high in salt and fat.
  
  iii. Use cooking methods such as roasting, steaming, barbequing, stewing or microwaving that use little or no added fat.
  
  iv. Reduce the added sugars in recipes if possible.

- Plan alternative foods or textures in addition to the main menu, as required, to meet special needs of residents.

Review the entire menu before finalising

- Use the menu planning self-assessment checklist to see if your menu is balanced.
  
  - If you can’t quite meet all the items on the checklist, start an action plan to help you work towards this.

- Ensure you have taken into account staff and equipment availability.

- Check for repetition of any items throughout the cycle. Over a four-week cycle menu, it is acceptable to repeat some very popular meals.

- Communicate the final menu to staff and display the daily menu for residents to see.

- After implementation, evaluate resident satisfaction. This could be done by recording wastage, talking to residents and using a suggestion box in your facility.

- It is best practice to change your menu seasonally.
<table>
<thead>
<tr>
<th>Week</th>
<th>Breakfast</th>
<th>Morning tea</th>
<th>Lunch</th>
<th>Afternoon tea</th>
<th>Dinner</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Monday</strong></td>
<td>Cereal (muesli and wheat biscuit), fruit, wholegrain and wholemeal toast and spreads</td>
<td>Wholemeal date scones</td>
<td>Tuna fish and rice with chopped celery and cauliflower</td>
<td>Wholemeal date slices</td>
<td>Beef and vegetable curry served on a bed of basmati rice, stewed fruit and homemade low fat custard</td>
</tr>
<tr>
<td><strong>Tuesday</strong></td>
<td>Cereal (muesli and wheat biscuit), fruit, wholegrain and wholemeal toast and spreads</td>
<td>Wholemeal date scones</td>
<td>Wholemeal date slices</td>
<td>Wholemeal date slices</td>
<td>Roast chicken, roast potato, pumpkin, steamed green veggies and gravy, fruit salad and ice cream</td>
</tr>
<tr>
<td><strong>Wednesday</strong></td>
<td>Cereal (muesli and wheat biscuit), fruit, wholegrain and wholemeal toast and spreads</td>
<td>Wholemeal date scones</td>
<td>Wholemeal date slices</td>
<td>Wholemeal date slices</td>
<td>Ham and veggie frittata, garden salad, zucchini slice, roast chicken, roast potato and pumpkin, steamed green veggies, stewed fruit and homemade low fat custard</td>
</tr>
<tr>
<td><strong>Thursday</strong></td>
<td>Cereal (muesli and wheat biscuit), fruit, wholegrain and wholemeal toast and spreads</td>
<td>Wholemeal date scones</td>
<td>Wholemeal date slices</td>
<td>Wholemeal date slices</td>
<td>Air-popped popcorn, Neapolitan pasta bake (with chopped zucchini, capsicum and tomato), garden salad, muesli and date biscuits, glass of low fat milk, honey soy chicken drumsticks served on a bed of basmati rice, steamed mixed vegetables, fruit salad and ice cream</td>
</tr>
<tr>
<td><strong>Friday</strong></td>
<td>Cereal (muesli and wheat biscuit), fruit, wholegrain and wholemeal toast and spreads</td>
<td>Wholemeal date scones</td>
<td>Wholemeal date slices</td>
<td>Wholemeal date slices</td>
<td>Raisin toast, honey soy chicken drumsticks served on a bed of basmati rice, steamed mixed vegetables, fruit salad and ice cream</td>
</tr>
<tr>
<td><strong>Saturday</strong></td>
<td>Baked beans on wholemeal or wholegrain toast, and fruit</td>
<td>Wholemeal date scones</td>
<td>Wholemeal date slices</td>
<td>Wholemeal date slices</td>
<td>Baked beans on wholemeal or wholegrain toast, and fruit</td>
</tr>
<tr>
<td><strong>Sunday</strong></td>
<td>Baked beans on wholemeal or wholegrain toast and fruit</td>
<td>Wholemeal date scones</td>
<td>Wholemeal date slices</td>
<td>Wholemeal date slices</td>
<td>Baked beans on wholemeal or wholegrain toast and fruit</td>
</tr>
</tbody>
</table>
Menu self-assessment checklist

This checklist can be used as a guide to help you modify your menu to meet the Australian Dietary Guidelines (2013). Find an easy to use version of this checklist in 8 – Templates.

Each day we offer:

☐ two pieces of fruit per resident
☐ at least two different coloured vegetables (other than white potato) at lunch AND dinner
☐ wholegrain cereal foods, such as brown rice, wholemeal pasta and wholemeal or wholegrain bread, for at least half of the grain products
☐ low fat dairy foods such as low fat yoghurt, reduced fat cheese or low fat milk
☐ snacks that include fruits, vegetables, wholegrains and low fat dairy foods
☐ lean cuts of meat when possible, or meats trimmed of their visible fat
☐ meals that are flavoured with herbs, spices, garlic, onion or lemon juice instead of salt

We rarely offer/we limit:

☐ processed meats such as sausages, ham, bacon and luncheon meats
☐ celebration foods such as cakes, biscuits, chips and ice cream
☐ sugar-sweetened soft drinks and cordials, sports and energy drinks

Making menu changes

Adapting to change in our lives can be challenging. Residents who have little control over many aspects of their lives may be quite resistant to changes to their menu or foods. Staff who have been working the same way for a long time may also be wary of change, fearing extra workload or seeing changes to a menu as a sign of being unhappy with their work.

To minimise disruption to both staff and residents, move towards a healthier menu by making small changes over time. Consider these ideas when introducing new items to your menu:

• Involve residents in menu planning. Get an interested group of residents together to discuss proposed changes, and explain what you are doing and why.
• Make sure kitchen staff also understand why changes are being made and how important their roles are in making this happen.
• Make one change at a time. Rather than overhauling your entire menu, just choose one new dish to introduce per week.
• Consider taste-testing a new item and seeking resident feedback.
• Get creative with the presentation of a new meal to make it especially appealing.
• Try new recipes as a side dish with more familiar foods. This will also mean less wastage if the dish is not as popular as other dishes.
• If modifying an existing meal, slowly make changes over a period of time. For example, include a small amount of beans or legumes in a meat dish and increase the amount of beans in the recipe over a series of servings.
• Have a ‘launch’ or ‘promotion’ of a new menu or new dishes with an event or theme.
• Record food wastage and review how the new menu or new meals are going. Meet with other kitchen staff and provide regular feedback on how the changes are going.
• Give residents time to ‘get used to’ a new meal, and remind them of the benefits of the changes.
• Provide a ‘suggestion box’ in your facility for residents to give written feedback if they don’t feel comfortable talking face to face about some of the menu changes.
• Always talk to staff and residents in a positive manner about the new meals or changes you are making to the menu.
• Support the changes in the menu with other activities and promotion of healthy eating outside the kitchen, as suggested in 5 – Helping residents to make healthy food choices.

Balancing residents’ rights with promoting healthy eating

As a supported accommodation provider you cannot force or restrict residents from eating the foods that they wish. A resident has the right to decide how much they eat and whether they eat a certain food. But you can choose what food you provide, when you provide it and where it’s available. To meet Accreditation Standard 2.1: Food and Nutrition your residents do need to be served meals according to the current Australian Dietary Guidelines. Essentially, we want to enable healthy choices or, in other words, make healthy choices the easy choice for residents.

What does this mean for supported accommodation?

As a service you are providing and promoting healthy options so that residents can achieve their maximum physical potential and maintain independence, which is in line with The General Principles of the Guardianship and Administration Act 2000. Residents may still choose to purchase from external food and drink suppliers if they wish.

You could consider it in the same way as smoking or alcohol. Residents may still purchase cigarettes or alcohol from external suppliers, but you would not provide these items as a service.

What you can do:

Focus your efforts on the elements of a resident’s diet that you can influence.

✓ What: Ensure that the food you provide on site is healthy and appealing. Both your main meals and snacks should be based on the five food groups as much as possible. Consider what food you make available to residents outside the kitchen.
✓ When: Consider the times you are providing food and drinks. Make sure you’re offering food from the five food groups, spread throughout the day.
✓ Where: Provide a pleasant mealtime environment.

Adapted from Division of Responsibility in Feeding by Ellyn Satter.
Menu action plan

Achieving everything on the self-assessment checklist could mean some big changes to your menu. Try a staged approach, focusing on just a few areas at a time. Use this template to document how you are working towards achieving the self-assessment checklist. This can include the area or issue you’d like to focus on and things you’ve tried that worked well or not so well. You can also use this document as evidence for your accreditation. Find a blank Action plan template in 8 – Templates.

Action plan example

Date plan developed: 29th August, 2017

Focus area:
Offer fewer cakes, biscuits and slices as snacks.

Strategies:
1. Start offering sliced fruit and yoghurt as a snack twice each week.
   - Start date: 4th September, 2017
   - Review date: 2nd October, 2017
   - We tried this strategy: Yes
   - What went well: Everybody loved the yoghurt.
   - What could’ve gone better: Sometimes the fruit went brown or soggy by the time it was served.
   - What else we could try: Store fruit in an airtight container coated in lemon juice, or choose longer-lasting fruits like grapes, melons and pineapple.
   - Put this into a new action plan? No
2. Start offering air-popped popcorn as a snack once each week.
   - Start date: 18th September, 2017
   - Review date: 16th October, 2017
   - We tried this strategy: Yes
   - What went well: Everybody loved the smell of the popcorn, and it was quick and easy to make.
   - What could’ve gone better: Some residents were requesting toppings like salt and butter.
   - What else we could try: We could look into herbs and spices to make savoury popcorn, or serve popcorn with some chopped, mixed, dried fruit through it. Look for new recipes to trial for afternoon snacks.
   - Put this into a new action plan? Yes, new action plan to trial other snacks, e.g. zucchini slice.

Action plan developed by [contact person]: Jane Smith
Cooking and serving guides

We have developed some visual guides to help you prepare and serve meals with the recommended amount of each food group for general healthy eating.

Meal preparation guide

This guide shows what amounts of foods make up a healthy meal for any recipe.

- Different coloured vegetables should fill ½ of the pot.
- Grain (cereal) foods such as brown rice, wholemeal pasta or whole wheat couscous fill ¼ of the pot.
- Lean meats, poultry, fish, eggs, tofu or legumes/beans should fill ¼ of the pot.
Meal serving guide (1)

This guide shows the amounts to serve of each food group to make up a healthy meal.

- **Different coloured vegetables** should fill ½ of the plate.
- **Lean meats, poultry, fish, eggs, tofu or legumes/beans** should fill ¼ of the plate.
- **Grain (cereal) foods** such as brown rice, wholemeal pasta or wholemeal or grain bread should fill ¼ of the plate.

If dessert is served, choose low fat yoghurt, plain savoury biscuits with reduced fat cheese, low fat custard, tinned or fresh fruit or fruit crumble.

Serve water at every meal.
Meal serving guide (2)

This guide shows the amounts to serve of each food group to make up a healthy meal.

Lean meats and grain (cereal) foods can be combined equally to make a meal to fill ½ of the plate.

Different coloured vegetables should fill ½ of the plate.

If dessert is served, choose low fat yoghurt, plain savoury biscuits with reduced fat cheese, low fat custard, tinned or fresh fruit or fruit crumble.

Serve water at every meal.
Food label reading

It’s important to remember that food labels are only found on food items that have been processed in some way. Many of the whole foods in the five food groups don’t have a food label (such as fresh vegetables – and we already know they are healthy).

It’s best to focus first on using labelled foods from the five food groups as much as possible. These could be items like cheese or milk, or canned fruit and frozen vegetables, or breakfast cereals and breads. Many other labelled foods are unhealthy or discretionary foods (e.g. biscuits, cakes and desserts) and should be used sparingly.

Understanding how to read food labels is useful to help choose the best type of a processed food from the five food groups. For example, it might be a healthier bread or cheese.

Labels on packaged food must meet strict requirements that include information for people with food allergies, food additive listings and food storage instructions. This is documented in the Australia New Zealand Food Standards Code.

Food labels can be confusing and often we don’t have time to work out what they mean and how to use them. Here are the key things to look for on food labels to help you make the best choices for your residents’ health:

1. Ingredient list

All ingredients in a food product must be listed on the label. They must appear in order, from largest to smallest, by weight.

You can use this list to spot foods that might be high in unhealthy fats, added salt or added sugars, because these ingredients would be listed in the first three or so ingredients.

Also look out for these other words for salt, unhealthy fat and sugar that might be on the ingredients list:

**Salt**
- baking powder
- booster
- sodium
- monosodium glutamate (MSG)
- sea/rock salt
- celery/onion/garlic salt
- stock
- meat or yeast extract

**Unhealthy fat**
- beef fat
- butter
- shortening
- copha
- dripping
- lard
- palm oil
- coconut oil
- hydrogenated oils
- cream
- milk solids
- ghee

**Sugar**
- brown sugar
- high fructose corn syrup
- dextrose
- glucose
- golden syrup
- honey
- evaporated cane juice
- molasses
- sucrose
- fruit juice concentrate
2. Nutrition information panels

Nearly all packaged foods must have a nutrition information panel in Australia. They can be used to compare packaged foods of the same food type to decide which product is healthier per 100g (or 100ml if liquid).

Nutrition information panels show the average amount of energy (kilojoules), protein, fat, saturated fat, carbohydrate, sugars and sodium (a component of salt) in the food. They also show amounts of any other nutrient referred to on the front of the food label. For example, if a food label has a ‘good source of fibre’ claim, then the amount of fibre in the food must be shown in the nutrition information panel.

### How to understand food labels

#### What to look for...

Don’t rely on health claims on labels as your guide. Instead learn a few simple label reading tips to choose healthy foods and drinks, for yourself. You can also use the label to help you lose weight by limiting foods that are high in energy per serve.

#### Nutrition Information

<table>
<thead>
<tr>
<th>Nutrient</th>
<th>Per serve</th>
<th>Per 100g</th>
</tr>
</thead>
<tbody>
<tr>
<td>Energy</td>
<td>432kJ</td>
<td>1441kJ</td>
</tr>
<tr>
<td>Protein</td>
<td>2.8g</td>
<td>9.3g</td>
</tr>
<tr>
<td>Fat</td>
<td>0.4g</td>
<td>1.2g</td>
</tr>
<tr>
<td>Saturated Fat</td>
<td>0.1g</td>
<td>0.3g</td>
</tr>
<tr>
<td>Carbohydrate</td>
<td>18.9g</td>
<td>62.9g</td>
</tr>
<tr>
<td>Sugars</td>
<td>3.5g</td>
<td>11.8g</td>
</tr>
<tr>
<td>Fibre</td>
<td>6.4g</td>
<td>21.2g</td>
</tr>
<tr>
<td>Sodium</td>
<td>65mg</td>
<td>215mg</td>
</tr>
</tbody>
</table>

**Ingredients:** Cereals (76%) (wheat, oat bran, barley), psyllium husk (11%), sugar, rice, malt extract, honey, salt, vitamins.

### 100g Column and Serving Size

If comparing nutrients in similar food products use the per 100g column.

If calculating how much of a nutrient, or how many kilojoules you will actually eat, use the per serve column. But check whether your portion size is the same as the serve size.

#### Energy

Check how many kilojoules per serve to decide how much is a serve of a ‘discretionary’ food, which has 600kJ per serve.

#### Sugars

Avoiding sugar completely is not necessary, but try to avoid larger amounts of added sugars. If sugar content per 100g is more than 15g, check that sugar (or alternative names for added sugar) is not listed high on the ingredient list.

#### Sodium (Salt)

Choose lower sodium options among similar foods. Food with less than 400mg per 100g are good, and less than 120mg per 100g is best.

#### Ingredients

Listed from greatest to smallest by weight. Use this to check the first three ingredients for items high in saturated fat, sodium (salt) or added sugar.
What about the Health Star Rating system?

The Health Star Rating system is a front-of-pack labelling scheme that was developed for use in Australia and New Zealand in 2014.

The Health Star Rating is designed to provide a quick and easy way to compare the nutrition of similar packaged food products. The nutrition rating is displayed as a number of stars. The more stars, the healthier the choice within that food category.

Health Star Ratings can also show the specific nutrient content of the product. Nutrient icons or badges provide information about the energy content, as well as the levels of saturated fat, sodium (salt) and sugars. In some cases, a badge may display a healthy nutrient (e.g. fibre). This positive nutrient icon is displayed to help you make healthier choices.

Health Star Ratings are voluntary and will be appearing on more food packages over the next few years.

What about health claims?

Sometimes manufacturers will use nutrition content claims like ‘low fat’, ‘reduced salt’ or ‘high fibre’ on the front of food packaging. These claims are only allowed to be used if the food meets certain criteria. For example, with a ‘good source of calcium’ claim, the food must contain more than a set amount of calcium specified by the Food Standards Code.

While nutrition content claims can generally guide you to healthier choices, it is important to check the claim by looking at the nutrition information panel. For example, products carrying ‘low fat’ claims may not be the healthiest option overall. Compare the nutrition information panels of similar products to see what the fat and also the energy (kilojoules) content is per 100g. For a more thorough assessment, you can also check if there are any healthy nutrients.

For more information on food claims, visit the Food Standards Australia New Zealand website.

Making the most of your food dollar: planning and shopping

Follow these hints and tips to get the most value for money from your food budget.

- Whenever possible, purchase food at a wholesale store. Buying basic food and supplies such as pasta, potatoes, rice, flour, oats, dried fruit, nuts, seeds and beans in bulk can save money. Keep in mind your storage capacity and stock rotation procedures for bulk purchases.

A note about catering foods:

- Some catering margarines might be vegetable based, but have a high amount of unhealthy, saturated fat in them. Check that the margarine you are purchasing is mostly polyunsaturated or monounsaturated, and fortified with vitamins A and D.
- Check that the breakfast cereals you are purchasing are fortified with B vitamins and iron.
• Check the ‘best before’ or ‘expiry’ date on perishable foods. Only purchase items that can realistically be used before the specified date.

• Some grocery stores offer discounts for bulk purchasing or business purchasing. Check with your local grocery stores to find out what discounts you can negotiate.

• If you operate more than one site, purchase all food in the same trip, instead of making a separate trip for each site.

• Review the 20 items you purchase the most. Typically, this will represent about ½ of your total food budget. You should look for overcharges, possibly less-expensive alternatives, or bulk buying options.

• Consider partnering with another supported accommodation provider to increase your buying power when negotiating with food suppliers.

• Accessing FoodBank can be an option to save money when your food budget is especially tight – perhaps when resident occupancy is low. FoodBank regularly stocks healthy staple items like baked beans, wholegrain breads, and an ever-changing range of fruits and vegetables. It is best to purchase extras or discretionary food items from FoodBank only for special occasions such as Christmas or other cultural celebrations.

A note about purchasing fresh produce in bulk:

While bulk purchasing can save money, using and storing large amounts of excess fresh produce can be an added stress on kitchen staff.

You can incorporate some of your bulk, fresh produce in your current menu, and get creative by using that item in different ways, e.g. zucchini fritters, zucchini soup, or extra zucchini in a favourite casserole. Keep in mind, though, that residents need variety from both a nutrition point of view and so they don’t get bored.

You also need to consider the time kitchen staff will need to spend processing the fresh produce so it is able to be stored for a longer period – and whether you have the storage/freezer space. This might include cooking tomatoes, zucchinis or eggplant in a pasta sauce, peeling and freezing bananas, halving passionfruit and scooping out and freezing pulp, pickling capsicums, or slicing and freezing beans, etc.

Making the most of your food dollar: preparing and serving food

• Consider your operational costs, i.e. the direct expenses you incur to ‘put meals on the table’, and see if you can increase efficiencies and reduce costs in these areas:
  ✓ Processing, transporting, storing and handling food.
  ✓ Salaries of cooks and other food service workers. Providing residents with the right training and skills to prepare and serve food can be a great help in the kitchen, as well as a great learning experience for the resident.
  ✓ Kitchen equipment to suit your food preparation needs. Some facilities may benefit from items like combi ovens and programmable cooking equipment, which can increase efficiency and reduce operating costs.
• Preparing and cooking food can use a lot of electricity and/or gas. Shop around for the best utilities provider by using websites that are dedicated to finding you the best price (see http://www.energymadeeasy.gov.au/).

• Train staff to reduce all unnecessary waste; for example, scrape all residual ingredients from mixing bowls, especially when preparing large-volume recipes.

• Reducing waste is crucial to reducing food costs. Ensure you’re cooking the correct quantities and have a process for safely storing and making the most of leftovers. (Freezing and storing leftovers in single-serve containers for residents who may have missed meals is a much cheaper option than keeping frozen commercial meals in storage.)

• Extend meals by adding legumes and extra vegetables. By adding extra vegetables to meat dishes you will also reduce the energy [kilojoules] in the dish.

• Use all edible portions of vegetables, such as the stems of broccoli and cauliflower or the leaves of celery.

• Offer tap water instead of juice or sweetened drinks; it’s free and the healthiest choice. Try serving tap water with slices of cucumber and mint for added interest.

Sources of information

• Ellyn Satter Institute: Division of Responsibility in Feeding

Real-life stories from supported accommodation:

Willow House

One of the biggest changes that we’ve made to our menu is replacing dessert at night with a cheese and fruit platter. Dessert was usually custard and fruit, carrot cake, fruit puddings served with cream or ice cream, or ice blocks and ice creams in the warmer months. We made the change because we noticed a lot of the residents were overweight and on medications for diabetes. We mentioned it first to our residents’ GP and they thought it would be a great idea.

Before we made the change we discussed it with the residents at our house meeting and explained the reason for the change and how these new foods are much better for their health. We also mentioned that the rest of the menu would be staying the same so that the change wasn’t too much all at once.

I let the staff know by discussing it at our staff meeting so that they were on board with the change and understood why we were doing it.

We found the platter took less time to prepare than our previous desserts did, and although it was slightly more expensive this was probably saved in staff preparation time.
The residents liked the new dessert and we found they were quite proud to tell their GPs about this ‘healthy change’. Residents were even more pleased when they started to notice changes in their weight. One resident lost 13kg over 6–7 months with a bit of extra walking too.

They love their fresh fruit, and we noticed they ate a lot more when it was cut up for them and presented nicely on a platter. We’ve had lots of positive comments and there are rarely any leftovers, so we’ll definitely keep this on the menu.

This is a great example of how Willow House has swapped discretionary foods for snacks that are based around the five food groups. They also practised good communication with staff and residents to encourage support of the menu changes as outlined in the Menu planning guidelines.

If you think your menu might be offering too many discretionary items, head over to the Healthy snack ideas section for some alternatives to processed and unhealthy foods.

**Fairhaven Care Centres**

We had a four-week menu, but the residents got to know it by heart so we changed it to an eight-week menu so we could give them more variety and keep them guessing.

They didn’t like many of the new meals – they were too different. It was too big a change. So we are back to the four-week menu but try and change it with whatever is seasonal. So it’s the same meat but sometimes a different meal. The cooks enjoy the flexibility as well rather than sticking rigidly to the menu.

This is a good example of recognising the need to change menus to prevent resident boredom; however, big changes all at once can be challenging for residents to adapt to. It’s great how Fairhaven Care Centres were able to identify this and opt for smaller changes, sticking with foods that are familiar to residents whilst making the most of seasonal produce.

If you would like to base your cyclical menu around what’s in season, use the Menu self-assessment checklist to ensure you still have all your food groups covered to meet your residents’ needs. Use the Action plan template to help you make small changes over time to work towards bigger menu changes.
3 Healthy meal ideas and tips

Accreditation

This chapter provides you with some ideas to make your existing recipes healthier, and where to source new recipes.

Healthier recipes and snacks on your menu mean your residents have more opportunities to consume foods that are good for their health every day. It also shows them that you value their health as a priority.

A folder of standardised recipes is great evidence to present at accreditation to show how healthy your menu is. This all contributes to achieving Accreditation Standard 2.1: Food and Nutrition.

Modifying recipes

When preparing meals on site, you have the chance to create something that’s both satisfying and healthy. Well-known, favourite meals like spaghetti bolognaise, shepherd’s pie or barbeques don’t have to be abandoned if a few healthy changes are taken on board.

Follow this three-step guide to improve your recipes:

1. Swap less-healthy ingredients for healthier ones.
2. Use less of the ingredients that you can’t swap out.
3. Add extra goodness with vegetables and fruit.

Small modifications to regular recipes add up over time. These changes can really reduce the amount of unhealthy fats and sugars, or increase the amount of vegetables, that residents eat over a year.

1 Swap ingredients

<table>
<thead>
<tr>
<th>Swap this</th>
<th>For this healthier ingredient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Butter</td>
<td>In frying:</td>
</tr>
<tr>
<td></td>
<td>• Small amounts of healthy fats such as olive, canola and sunflower oils.</td>
</tr>
<tr>
<td></td>
<td>On sandwiches:</td>
</tr>
<tr>
<td></td>
<td>• A thin layer of avocado, ricotta or cottage cheese, hummus or tahini, or unsalted nut spreads.</td>
</tr>
<tr>
<td></td>
<td>In baking:</td>
</tr>
<tr>
<td></td>
<td>• Unsaturated fat margarine (healthy fat), or healthy oils such as olive oil or rice bran oil.</td>
</tr>
<tr>
<td>Swap this</td>
<td>For this healthier ingredient</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Cream or sour cream</strong></td>
<td>• Reduced fat yoghurt.</td>
</tr>
<tr>
<td></td>
<td>• Reduced fat evaporated milk.</td>
</tr>
<tr>
<td></td>
<td>• Whipped, reduced fat ricotta cheese.</td>
</tr>
<tr>
<td><strong>Mayonnaise</strong></td>
<td>In dressing:</td>
</tr>
<tr>
<td></td>
<td>• Reduced fat yoghurt and mustard.</td>
</tr>
<tr>
<td></td>
<td>On sandwiches:</td>
</tr>
<tr>
<td></td>
<td>• A thin layer of avocado, ricotta or cottage cheese, hummus or tahini, or unsalted nut spreads.</td>
</tr>
<tr>
<td></td>
<td>• Reduced fat mayonnaise.</td>
</tr>
<tr>
<td><strong>Full fat milk and yoghurt</strong></td>
<td>• Reduced fat milks and yoghurt.</td>
</tr>
<tr>
<td><strong>Cheese</strong></td>
<td>• Reduced fat cheese.</td>
</tr>
<tr>
<td></td>
<td>• Smaller amount of a stronger-flavoured cheese (e.g. parmesan).</td>
</tr>
<tr>
<td></td>
<td>• Reduced fat ricotta or low fat cottage cheese (these are generally lower in fat than cheddar cheeses).</td>
</tr>
<tr>
<td><strong>Salt</strong></td>
<td>To flavour savoury foods:</td>
</tr>
<tr>
<td></td>
<td>• Spices such as pepper, garlic, chilli, mustard, curry, paprika and cardamom.</td>
</tr>
<tr>
<td></td>
<td>• Herbs such as parsley, basil, oregano, chives, rosemary, coriander, mint, sage, thyme, tarragon and marjoram.</td>
</tr>
<tr>
<td></td>
<td>• Other flavoursome ingredients such as lemon juice, onions, ginger, shallots, vinegar, wine, or salt reduced stock.</td>
</tr>
<tr>
<td></td>
<td>• Tomato-based sauces or Indian-style sauces/pastes to marinate food.</td>
</tr>
<tr>
<td><strong>Processed and fatty meats, e.g.</strong></td>
<td>• Lean meat, lean mince and skinless chicken, trimmed of all visible fat.</td>
</tr>
<tr>
<td><strong>Fried eggs</strong></td>
<td>• Boiled or poached eggs.</td>
</tr>
<tr>
<td></td>
<td>• Scrambled eggs or an omelette made on reduced fat milk.</td>
</tr>
<tr>
<td><strong>White bread</strong></td>
<td>• Wholemeal and/or wholegrain bread.</td>
</tr>
<tr>
<td><strong>White flour</strong></td>
<td>• Mixture of wholemeal and white flour. You may need to add a little extra liquid to keep the recipe moist.</td>
</tr>
<tr>
<td><strong>White rice</strong></td>
<td>• Choose a more slowly digested white or brown rice, e.g. Basmati or Doongara.</td>
</tr>
<tr>
<td><strong>White pasta</strong></td>
<td>• Wholemeal pasta.</td>
</tr>
<tr>
<td><strong>Toasted muesli and cereals</strong></td>
<td>• Raw or untoasted muesli and cereals.</td>
</tr>
</tbody>
</table>
## Use less

<table>
<thead>
<tr>
<th>Use less of this ingredient</th>
<th>Try these ideas instead</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fat</strong></td>
<td></td>
</tr>
<tr>
<td>Recipe:</td>
<td></td>
</tr>
<tr>
<td>• Make pies with only pastry on the top, or turn a quiche into a healthy frittata by using no pastry at all.</td>
<td></td>
</tr>
<tr>
<td>• When baking cakes, muffins and slices, you can usually reduce the amount of fat by a third, or even a half, with minimal effect on the final product. Try replacing it with fruit or veggie purée such as puréed apples or mashed banana. Just be aware that this might shorten the cooking time required, so check on your baking early to avoid it overcooking.</td>
<td></td>
</tr>
<tr>
<td>Cooking and serving:</td>
<td></td>
</tr>
<tr>
<td>• Choose low fat cooking methods such as steaming, stir-frying, grilling or microwaving.</td>
<td></td>
</tr>
<tr>
<td>• Use a non-stick pan and measure your healthy oil with a tablespoon rather than pouring it into the pan freely. You should only need 1–2 tablespoons for most recipes.</td>
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<tr>
<td>• When baking cakes, slices and biscuits, use non-stick baking pans and a small spray of cooking oil as required.</td>
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<tr>
<td>• If you do use sausages, only serve them every now and then. Consider boiling them in water first; this reduces some of the fat content.</td>
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<tr>
<td>• When making gravy, drain away any obvious fat from the meat juices in the pan first. The fat can be easier to remove by cooling the pan juices and allowing the fat to harden. Alternatively, use a reduced salt gravy mix powder made with water.</td>
<td></td>
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<tr>
<td><strong>Sugar</strong></td>
<td></td>
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<tr>
<td>Recipe:</td>
<td></td>
</tr>
<tr>
<td>• Gradually reduce the amount of sugar in your recipes. Often the sugars in a recipe can be reduced by a quarter without affecting the final product.</td>
<td></td>
</tr>
<tr>
<td>• Use fruit or 100% fruit juice instead of sugar to sweeten the recipe.</td>
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<tr>
<td>• Add sweetness and flavour to food with ‘warm’ spices like cardamom, cinnamon, ginger and nutmeg rather than sugar.</td>
<td></td>
</tr>
<tr>
<td>• <strong>Artificial or intense sweeteners</strong> can sometimes be used as an alternative to sugar. Follow the advice on the packet to see if it is suitable for cooking and for the correct conversion rate. Although <strong>artificial sweeteners</strong> do not contain energy <a href="https://en.wikipedia.org/wiki/Kilojoule">kilojoules</a>, they also do not provide any nutrients. As with sugar, try gradually reducing the amount used over time.</td>
<td></td>
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<tr>
<td>Cooking and serving:</td>
<td></td>
</tr>
<tr>
<td>• Serve cakes and slices with a dollop of reduced fat yoghurt instead of sugary icing.</td>
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</tr>
</tbody>
</table>
## Use less of this ingredient

<table>
<thead>
<tr>
<th>Ingredient</th>
<th>Recipe:</th>
</tr>
</thead>
</table>
| Salt        | • Choose ‘reduced salt’ or ‘no added salt’ options for canned vegetables, e.g. reduced salt baked beans.  
• Choose reduced salt sauces and stocks.  
• Gradually reduce the amount of added salt in your recipes over time. It only takes a few weeks for taste buds to adjust to the new flavour.  
• Compare the labels of brands of commonly used ingredients to see if there is a brand that is lower in salt.  
• Use lemon juice, garlic, vinegar, or herbs and spices for extra flavour rather than adding salt when you cook. |

| Serving: | • Stir in chopped herbs like parsley, basil or coriander just prior to serving, to add extra flavour, rather than using salt to season.  
• Remove salt shakers from the dining table, and encourage residents to taste their meal before requesting extra salt. |

## Add goodness

### Add more veggies

### Meal Ideas to add more vegetables

#### Hot meals
- Add finely diced or puréed vegetables to rice, casserole and soup dishes.
- Add finely diced or puréed capsicum, mushroom, eggplant, zucchini and spinach to your pasta and lasagne dishes.
- Add finely grated carrot and zucchini to meat loaf, rissoles or meatballs.
- Add blended leftover roast vegetables like pumpkin, sweet potato and carrot to creamy-style soups.
- Add finely chopped spinach, capsicum, corn and onion to your quiche or frittatas.
- Add sliced capsicum and mushrooms to your regular barbequed onions. Barbeque cobs of corn, slices of eggplant or zucchini, or make your own veggie skewers.
- Add tinned legumes or dried legumes (that have been cooked from scratch) to soups, casseroles, curries and pasta dishes.


#### Side dishes
- Serve all main meals with a side of cooked vegetables or a salad. Aim for vegetables to make up half of the meal.
- Throw some cooked peas and corn into cooked rice.
- Add other white vegetables, e.g. steamed cauliflower or roasted parsnip, to mashed potato.
### Healthy meal ideas and tips

#### Sandwiches and snacks

- **Fresh sandwiches**: Try colourful salad veggies like grated carrot and beetroot.
- **Toasted sandwiches**: Fill with sliced tomato, sliced onion, baby spinach or rocket, sliced capsicum or corn.
- Add chopped or grated vegetables to wholemeal pikelets, scones and muffins.

#### Add more fruit

<table>
<thead>
<tr>
<th>Meal</th>
<th>Ideas to add more fruit</th>
</tr>
</thead>
</table>
| Hot meals  | • Add frozen berries, grated apple or dried fruit to rolled oats when cooking porridge. Top with sliced banana once cooked.  
             • Add stewed, overripe or unsweetened canned apricots to stews and casseroles to give extra sweetness. |
| Side dishes| • Grate zest and squeeze lemon juice on salads, in rice dishes and on vegetables before roasting.  
             • Add fruit, e.g. sliced apples or pears, to your savoury salads for something different.  
             • Add dried fruit, e.g. sultanas and apricots, to stuffing; or stir them through wholemeal couscous or rice.  
             • Offer sliced fruit as a side dish at breakfast, morning tea, afternoon tea and dessert. Research shows people are more likely to eat fruit if it is cut up for them. |
| Snacks     | • Add frozen berries (or other fruit that you’ve frozen when in good supply, e.g. passionfruit or mango) to yoghurt.  
             • Add homemade fruit compote to yoghurt. Simply simmer cut-up fruits with the juice from oranges, and then swirl through yoghurt.  
             • Choose healthy, fruit-based desserts, e.g. baked apples, fruit crumbles, or stewed or poached fruit. Leave the skin on where possible.  
             • Add chopped, fresh, frozen or canned fruit to wholemeal fruit muffins, pikelets or scones. Bananas, berries, peaches, mangoes, apples and passionfruit (and even oranges and lemons!) all work well. |

### Vegetable and fruit skins

When appropriate, leave the washed skins on vegetables and fruit - many nutrients are found in the skin.

### Shop in season

Shape up supported accommodation menu favourites in three simple steps!

We’ve selected some of the most common meals listed on supported accommodation providers’ menus and provided our top tips for recipe modification.

**Roast dinner**
1. **Swap**: Swap fatty roast meat for lean roast meat trimmed of all visible fat.
2. **Use less**: Use less salt; season your meat and veggies with mixed herbs, garlic and pepper. Use less fat in the gravy by draining away all visible fat from the meat juices in the pan first.
3. **Add goodness**: Add cauliflower, carrot and beetroot to your regular selection of roasting vegetables.

**Fish and chips**
1. **Swap**: Swap regular potato for sweet potato to make oven-baked chips.
2. **Use less**: Use less fat by baking in a combi-oven, grilling or steaming fish instead of deep or shallow frying.
3. **Add goodness**: Serve with a big, colourful side salad.

**Beef stroganoff**
1. **Swap**: Swap the cream or sour cream for reduced fat yoghurt.
2. **Use less**: Use less fat by choosing lean cuts of beef and removing all visible fat.
3. **Add goodness**: Add sliced mushrooms, capsicum, beans and peas to the dish.

**Macaroni and cheese**
1. **Swap**: Swap the cheddar cheese for a stronger-flavoured parmesan cheese and halve the quantity required.
2. **Use less**: Use less salt; season your macaroni with chopped herbs, e.g. parsley and basil, just prior to serving.
3. **Add goodness**: Sneak in finely diced or puréed veggies like cauliflower and pumpkin. Serve smaller quantities with a large side salad or different-coloured, cooked veggies.

**Fruit crumble**
1. **Swap**: For the crumble, swap butter for unsaturated fat (healthy fat) margarine, and swap your regular crumble mix for a healthier mixture of wholemeal flour, rolled oats and coconut.
2. **Use less**: Reduce the amount of sugar in the stewed fruit. Try warm spices like cardamom, cinnamon, ginger and nutmeg for extra flavour.
3. **Add goodness**: Add in as many fruits as you like; some great ones to try are apples, pears, blueberries, rhubarb and apricots.

**Cake types and muffins**
1. **Swap**: Swap white flour for a mixture of wholemeal and white flour. You may need to add a little extra liquid to keep the recipe moist.
2. **Use less**: Use less sugar; serve cakes and slices with a dollop of reduced fat yoghurt instead of sugary icing.
3. **Add goodness**: Choose fruit-based cakes, e.g. banana cake, apple teacake or berry muffins. The fruit adds goodness and brings natural flavour and sweetness without large amounts of sugar.
Healthy snack ideas

Choose everyday healthy snacks that are based on the five food groups, such as the fruit, vegetable, or milk/yoghurt and cheese groups. The following ideas are alternatives to biscuits and cakes:

- Try sliced fresh fruit, fruit salad or tinned fruit. People are more likely to eat fruit that has been cut up than whole pieces of fruit.
- Make fruit muffins, pikelets or scones with wholemeal flour. Choose any fresh fruit in season, or tinned fruit to add to the batter. Bananas, berries, peaches, mangoes, apple and passionfruit (and even oranges and lemons!) all work well.
- Serve reduced fat yoghurt or reduced fat custard and fruit.
- Make savoury vegetable muffins, pikelets or scones with wholemeal flour. Choose any fresh veggies in season, frozen or tinned veggies to add to the batter. Try corn, carrot, zucchini and pumpkin.
- Serve raw vegetables cut into bite-sized pieces with healthy dips like salsa or hummus.
- Try zucchini slice or vegetable frittata portions.
- Use veggies to make dips: cucumber in tzatziki, eggplant in baba ghanoush, or chickpeas in a low fat hummus.
- Add a thin spread of ricotta cheese or nut pastes on top of fruit bread, wholegrain English muffins, toast or crumpets.
- Make low fat milk, yoghurt and fruit smoothies.
- Serve low fat cheese (e.g. cheddar, tasty, ricotta, cottage or cream cheese) and a few wholegrain crackers. Add sliced tomato for some extra colour and flavour.
- Make wholegrain or wholemeal finger sandwiches with colourful fillings, e.g. egg and lettuce, tuna and salad, cheese and tomato with chutney, or leftover roast meat and salad with mustard.
- Try single-serve containers of air-popped popcorn or a small handful of nuts.
- Remember to serve healthy drinks with your snacks. (Tap water is the cheapest and healthiest drink.) You could add cucumber and mint, slices of lime or lemon, or berries to water jugs for extra flavour.

Homemade cakes and biscuits

While homemade baked cakes, biscuits or muesli bars are often healthier than purchased ones, they still shouldn’t be everyday foods.

Serve your homemade snacks only sometimes and in small amounts.

How much? One serving of cake, muffin or doughnut is 40g. You can see from this photo that it’s a very small slice – about the size of a playing card and only the height of an apple.

It’s important to pay attention to portion size, as residents might actually be eating the equivalent of two or three discretionary food serves at one time.
A note about muesli and nut bars

Nut, muesli and cereal-style bars can be a convenient snack choice, but did you know they are actually a discretionary food? This is because they are often high in added sugar and fats. They are also very bad for your teeth because they stick to teeth and cause decay.

If you are choosing a nut, muesli or cereal bar, always read the label to choose one with the lowest amount of sugar per 100g and that has mostly healthy sources of fats in the ingredient list. Or better yet, make your own healthy version.

Suggested recipes and cookbooks

A standardised recipe is one that has been trialled, tested and adapted for use in a specific food service. Using standardised recipes helps to make sure the quality and quantity of food is consistent each time the recipe is prepared. It can help to reduce waste, save time and money, and assist with staff training. Standardised recipes are also useful evidence for accreditation.

To standardise recipes for your service you may need to trial and readjust the recipe several times until you are happy with the final product. Note the serve sizes as well as the number of servings per batch.

Here are a few recipe resources available to purchase in hard copy or electronically.

Name: Really Cooking Good Food, ‘Kukumbat gudwan daga’
Author: Women’s centres of Manyallaluk, GulinGulin and Wugularr, with the assistance of The Fred Hollows Foundation
Cooking quantities: 30, 50 and 100 serves
Version: Hard copy

Name: Recipes from eMenu (online recipe bank)
Author: Queensland Association of School Tuckshops
Cooking quantities: 10–50 serves
Version: Electronic, available online (free of charge)

Name: Meals on Wheels Recipes and Nutrition Folder 2013
Author: Angela Malburg
Cooking quantities: 10–100 serves
Version: Hard copy
Link: https://www.qmow.org/products/other-6

Sources of information:

- Diabetes Australia: Modifying recipes
Real-life hints and tips from supported accommodation

Herston Lodge

Our residents love lasagne. So rather than the usual high-kilojoule, meat-and-cheese based dish, we’ve added a vegetable lasagne and a Greek lasagne to the menu too. The vegetable lasagne is a great way to use up leftover roast veggies. We usually layer it with roast pumpkin, sweet potato, eggplant, carrots or any vegetable that you can slice up. This way we know all our residents are getting lots of vegetables, and it suits the vegetarian residents too. Sometimes if we have a glut of tomatoes we cook and blend them up for the tomato sauce to layer in the dish.

The ‘Greek lasagne’ is actually just traditional moussaka! We serve it with a Greek salad on the side. We call it lasagne on the menu because the residents know what that is, so it doesn’t seem too new or foreign to them and it’s been a really successful menu item.

We try to think ‘outside the box’ with our menu planning. We believe that variety really is the spice of life and food should be an adventure... and we like to take our residents around the world with our menu!

Cathy Patterson, Fairhaven Care Centres

Vegie patties or fritters are always popular. We also hide grated carrot, zucchini or beetroot in mince dishes, which works well. Soup with lots of added vegetables is also a good way for residents to get their veggies. We found most residents just do not like salad on a plate on its own, so we serve it as salad rolls.

Both of these examples show practical and appealing ways of getting more vegetables into meals for residents. They demonstrate a good understanding of their residents’ likes and dislikes, and Herston Lodge promotes their vegetable-filled meals cleverly by using a description the residents are familiar with. For more information on getting more vegetables into your recipes, see the three steps to modifying your favourite recipes.
Food for special needs

Accreditation

Sometimes residents require a special diet that is different from the food on the standard menu. This can be for many reasons, including medical needs (e.g. chewing or swallowing difficulties, allergies and intolerances), cultural and religious customs (e.g. halal), personal values (e.g. vegetarianism), or personal likes and dislikes.

Providing food relevant to individual needs should be prioritised, as it can impact directly on medical conditions and, in the case of severe food allergies, may be fatal.

Providing food considerate of individual needs is a component in achieving **Accreditation Standard 2.1: Food and Nutrition**.

This section will provide information on these areas, as well as some practical tips on planning, buying, preparing and serving foods for special needs.

Diabetes

**Key points:**

- No special menu is needed for the management of diabetes.
- A balanced, healthy diet is recommended.
- Choose slowly digested, starchy foods if possible.
- Only offer unhealthy, processed or discretionary foods occasionally.

Diabetes is the build-up of sugar (glucose) in the blood. If high blood sugar levels are not treated, people with diabetes can suffer serious health problems, including:

- heart disease (e.g. heart attack or stroke)
- eye damage
- kidney disease
- circulatory problems that might cause foot ulcers or infections.

People with severe mental illness are more likely to suffer these serious consequences from diabetes than the general population.
There are two main types of diabetes:

**Type 1 diabetes**
- Usually develops in young people, but can occur at any age.
- Sugar is not removed from the blood because the body stops making the hormone insulin.
- Cannot be cured or prevented.
- Is managed by insulin injections and balancing a healthy diet and exercise.

**Type 2 diabetes**
- The most common type of diabetes.
- Sugar is not removed quickly enough from the blood because:
  - the body does not respond to insulin AND/OR
  - the body does not produce enough insulin.
- Managed by eating a healthy diet and doing regular exercise.
- Some people may need medication or insulin injections to help control blood sugar levels.

**Healthy diet for diabetes**

No special menu is needed for the management of diabetes. The recommended diet for residents living with diabetes is the same balanced, healthy diet from the five food groups, as recommended for everyone in the Australian Dietary Guidelines.

Some key things to remember about diabetes:

- Regular meals throughout the day are important for residents, especially those using insulin injections. This may include the need for between-meal snacks.
- Eating too much food at one time can make blood sugars get too high.
- Follow the Meal serving guide for people with diabetes to serve residents the recommended amounts of each type of food at each meal.
- Choose wholegrain and high fibre foods (e.g. wholemeal/wholegrain bread).
• Provide reduced sugar or sugar free condiments and desserts.
• Provide whole fruits instead of fruit juices.
• Keeping to a healthy body weight is important for people with diabetes. Carrying too much fat on the body makes it harder to control blood sugar levels.

**Choosing the best starchy foods for a meal**

Some types of *starchy food* are digested more slowly than others.

Choosing more slowly digested, starchy foods means:
• sugar is released into the blood more slowly
• it is easier for the body to control blood sugar
• we may feel fuller for longer, which could help weight control.

**Choose these slowly digested starchy foods to fill ¼ of your plate.**

- *Grain and cereal foods* (e.g. Basmati rice, wholegrain pasta, wholegrain breads or rolled oats)
- *Slowly digested starchy vegetables and legumes/beans* (e.g. sweet potato, sweetcorn, lentils, baked beans or kidney beans)
Meal serving guide for people with diabetes

This guide shows the amounts to serve of each food group to make a healthy meal for people with diabetes.

Different coloured vegetables should fill ½ of the plate.

Lean meat, poultry, fish, eggs, cheese or beans should fill ¼ of the plate.

Slowly digested starchy foods should fill ¼ of the plate:
- starchy vegetables and legumes/beans (e.g. lentils, baked beans)
  OR
- grain (cereal) foods (e.g. brown/basmati rice, wholegrain pasta)

If dessert is served, choose low fat yoghurt, plain savoury biscuits with reduced fat cheese, low fat custard, tinned or fresh fruit or fruit crumble.

Serve water at every meal.
Tips for healthy meals for residents with diabetes

Planning and buying

- Plan a healthy menu from the **five food groups** that is suitable for all your residents, including those people living with diabetes.
  - ✓ Plan a variety of different coloured vegetables in the menu.
  - ✓ Plan **slowly digested, starchy foods** in the menu.
- When purchasing cooking oils, choose healthier fats such as rice bran oil, olive oil, sunflower oil or canola oil.

Preparing

- Add extra vegetables and legumes to casseroles, soups and stews.
- Try making sandwiches with one slice of wholegrain bread and one slice of white bread.
- Mix ½ wholemeal flour and ½ white flour when baking.
- Add fruits or vegetables to baked items (e.g. homemade blueberry muffins).
- Use wholegrain breadcrumbs in meat loaf.
- Make pizza using a wholemeal pizza base and top it with extra vegetables.
- Make changes gradually and trial the food with residents.
- Use low fat cooking options such as steaming, baking or grilling.
- Choose lean cuts of meat, trim any visible fat and remove the skin. Use processed meats (e.g. sausages, ham, bacon and luncheon meats) rarely or not at all.
- Offer unhealthy, processed or **discretionary foods** (e.g. cakes, biscuits, chips and ice cream) sparingly or only on special occasions.

Serving

- Serve whole fruits instead of fruit juices. Hot chocolate, flavoured milk and cordial should be offered only occasionally.
- Try serving a mix of brown rice and Basmati rice with casseroles.
- If you are trialling more **slowly digested, starchy foods** like Basmati rice or wholemeal pasta, continue to serve them regularly. Remember, it takes time for people to get used to the taste of a new food.
- Use small amounts of condiments. BBQ sauce, sweet chilli sauce and tomato sauce are high in sugar.
- Talk with residents about how a healthy diet will help them control their diabetes.

Diabetes frequently asked questions

Q: Can residents with diabetes have added sugar?

A: Small amounts of sugar are okay. Diabetes is not just about reducing **added sugars** – consider the serving size and the types of food eaten. For example, one teaspoon of sugar in coffee or tea at morning tea might have little effect, but if someone drinks ten cups of coffee a day, that amount is likely to affect the resident’s blood sugar levels. It is also likely to mean they will gain weight over time, which often makes diabetes harder to manage.
Q: **What about alternative or artificial sweeteners?**

A: Artificial or intense sweeteners such as stevia, aspartame, saccharin or sucralose are often found in processed ‘diet foods and drinks’. They do not contain kilojoules or energy, but neither do they provide any nutrients. Essentially, these foods are not really part of a healthy diet.

In the past, safety concerns have been raised about some artificial sweeteners. These concerns resulted from studies conducted on animals, but the doses or amounts were many times more than a person could really eat or drink. Food Standards Australia and New Zealand (FSANZ) has deemed these products safe for use in our food.

Regular use of artificial sweeteners, however, may train our brain to crave sweet-tasting foods. Studies have also suggested that some sweeteners may increase our appetite or disrupt our healthy gut bacteria, leading to weight gain, but more high quality research is needed to confirm these findings. Diet soft drinks also contain acids that are bad for our teeth.

The best thing to do is have as little as possible of all sugars, syrups and sweeteners. Add sweetness and flavour to food with ‘warm’ spices like cardamom, cinnamon, ginger and nutmeg. Muffins and cakes can usually be made with at least 25 per cent less sugar, and the sugar in stewed fruit and pie fillings can be cut in half. The best way to reduce sugar and artificial sweeteners in hot drinks is to gradually reduce the amount over time.

**For more information:**

Mental illness and diet

Key points:
- Assist residents with a mental illness to maintain a healthy weight by offering a healthy, balanced menu.
- Excessive thirst (polydipsia) or excessive drinking needs to be managed on the advice of a health professional.
- Large amounts of caffeine can worsen or induce some mental health conditions.

A mental illness is a health problem that affects how a person feels, thinks, behaves, and interacts with other people.

There are many different types and degrees of severity of mental illness. Some of the major types are depression, anxiety, schizophrenia, bipolar mood disorder, personality disorders and eating disorders.

People with a severe mental illness are more likely to have unhealthy eating habits and poor physical health. They are more likely to be overweight, have heart disease, diabetes and problems with their teeth.

Medications

Psychotropic medications play an important role in the treatment of severe mental illness. Residents on these medications may, however, experience side effects such as constipation, dry mouth and lethargy (tiredness). They are also more likely to have an increased appetite, and less likely to feel full when they eat. They might ask for larger meals and a second serving, which can lead to rapid weight gain.

Try these tips to help prevent residents from gaining unwanted weight:
- Suggest residents eat more slowly and chew foods well, rather than gulping food.
- Encourage residents to drink water before and with meals.
- Load meal plates up with low energy foods like vegetables.
- Don’t have unhealthy foods on show or easily available to residents.
- Offer residents healthy snack foods. Fruit, veggie sticks, wholegrain crackers, yoghurt and raw or unsalted nuts are all healthier snacks than chips, biscuits or cake.
- Consider whether other activities, such as walks or social outings, might help. They can serve as a distraction from hunger, as well as increase residents’ activity levels.
Excessive thirst

Polydipsia (excessive thirst that can’t be quenched) occurs in around 20 per cent of people with a long-term mental illness, and can be life-threatening. When someone drinks very, very large amounts of water, they are at risk of seizures and cardiac arrest.

If you notice a resident drinking excessive amounts of water or other fluids, refer them to their GP. The main way to manage polydipsia is fluid restriction.

Eating disorders

Eating disorders are a group of mental health disorders where sufferers show unusual eating behaviours such as food restriction or refusal, bingeing or purging.

No special menu is needed for people living with an eating disorder, and they should be encouraged to eat a wide variety of foods within regular meal and snack times.

If you suspect a resident is suffering from any form of disordered eating, refer them to their GP.

A note about caffeine

Caffeine is a stimulant drug found in coffee, tea, cocoa, cola-flavoured soft drinks and energy drinks.

Consuming too much caffeine (more than 6–8 cups of coffee/day) can have side effects. Large amounts of caffeine can:

- worsen or induce some conditions such as anxiety, insomnia, panic attacks, psychosis, mania and delirium
- worsen emotional and behavioural symptoms, anxiety and sleeplessness
- interfere with the effectiveness of some medications
- provoke panic attacks in people with panic disorder and social phobia.

If excessive caffeine intake is a problem in your service, try:

- limiting access to coffee, or offering decaffeinated coffee
- offering herbal tea as a hot drink alternative
- limiting or removing access to cola and energy drinks in on-site vending machines.

Tips to include healthy meals for residents living with a mental illness

Planning and buying

- For residents who have gained unwanted weight due to medications, refer to the Food for residents who are overweight section.
- To help prevent constipation, a common side effect of psychotropic medications, include lots of high fibre foods such as veggies, legumes and fruit in your menu.

Preparing

- Choose healthy cooking methods, e.g. roasting, steaming, barbequing, stewing or microwaving, which use little or no added fat. This helps with weight control and is good for overall health.
Serving

- Decide whether your service offers larger portion sizes or second serves when requested. If residents request a second serve, offer extra non-starchy vegetables first.
- Poor memory and poor attention can be common in people with a mental illness. Prompt these residents to attend mealtimes.
- If food hoarding is a problem in your facility, try plated meals rather than a buffet-style service.
- Consider limiting coffee or caffeine-containing beverages to two or three times a day.
- Offer water regularly. This can help alleviate medication side effects such as dry mouth and constipation. Drinking plenty of water also helps prevent dehydration, which can affect mood, causing irritability and restlessness. You may need to monitor water intake for residents with polydipsia.
- Encourage residents to eat regularly throughout the day. Fuelling your body consistently with food can help to stabilise mood.

For more information:

- Beyond Blue: Eating Well
  https://www.beyondblue.org.au/get-support/staying-well/eating-well
Cultural and religious menu considerations

Key points:

- Food is a major aspect of culture.
- Ask residents about their ethnic background and eating patterns, and learn what, when and how they eat.

Cultural customs

Culture is closely linked to every part of our life. It is important for the wellbeing of all people.

Food is a major aspect of our culture. The role of food is not just about providing enough nutrition; food connects people with their identity, family and traditions.

Although your residents may have the same cultural background, it is important not to assume that their beliefs and views are the same when it comes to food. The key aspect is to respect everyone’s food preferences.

Eating foods from a person’s own culture is important, but residents may also enjoy food from other cultures. People often choose a food intake that combines their traditional diet and meals from host countries. Culturally familiar food may provide comfort to people. Different cultural food also increases variety of menu choices for everyone in your accommodation.

Religious food practices

Food can also be a very important part of a person’s religion. A person may eat in a certain way, or not eat particular foods, because they are prohibited by their religion.

It is important not to assume what a person will eat just because they belong to a particular religion.

Practices can be diverse even within the same religion, and it is important to discuss with your residents what their religious food needs are.

In some religions, the way food is prepared and served is just as important as the food itself.

The following table provides a guide to common food restrictions for some of the religions you are likely to come across.
Fruit, vegetables and grains have no restrictions for the religions listed below.

<table>
<thead>
<tr>
<th>宗教</th>
<th>健康饮食建议</th>
<th>乳制品、酸奶或奶酪食品组</th>
<th>其他</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Buddhist</strong> (Buddhism)</td>
<td>Vegetable: All animal meats and meat products</td>
<td>Vegetarian: dairy containing animal rennet or gelatine</td>
<td>Vegetarian: Fats, gelatine (jelly), emulsifiers or additives made from animals</td>
</tr>
<tr>
<td><strong>Hindu</strong> (Hinduism)</td>
<td>Non-vegetarian: No restrictions Vegetarian: Eggs, tofu and legumes Nuts</td>
<td>Vegetable: Vegetarian cheese/yoghurt</td>
<td>Alcohol, including vanilla essence containing alcohol</td>
</tr>
<tr>
<td><strong>Seventh-Day Adventist</strong></td>
<td>Non-vegetarian: All animal meats and meat products</td>
<td>Vegetable: Non-vegetarian: No restrictions Vegetarian: Vegetarian cheese/yoghurt</td>
<td>Non-vegetarian: No restrictions Vegetarian: Vegetarian cheese/yoghurt</td>
</tr>
<tr>
<td><strong>Jewish</strong> (Judaism)</td>
<td>Certified kosher beef, lamb and chicken Fish and eggs (without blood spots) (Halal meat may be acceptable when kosher is unavailable.) Nuts, seeds and legumes Pork and pork products Fish and seafood without fins and scales (e.g. shellfish, prawns and squid)</td>
<td>Dairy containing animal rennet or gelatine Fats, gelatine (jelly), emulsifiers or additives made from animals Non-kosher alcohol</td>
<td>Non-vegetarian: No restrictions Vegetarian: Vegetarian cheese/yoghurt</td>
</tr>
<tr>
<td><strong>Muslim</strong> (Islam)</td>
<td>Certified halal beef, lamb, chicken, fish, eggs, tofu and legumes Nuts and seeds Pork and pork products Hanafi followers may not eat shellfish (e.g. prawns)</td>
<td>Dairy containing animal rennet or gelatine Fats, gelatine (jelly), emulsifiers or additives made from animals Alcohol, including vanilla essence containing alcohol</td>
<td>Non-vegetarian: No restrictions Vegetarian: Vegetarian cheese/yoghurt</td>
</tr>
<tr>
<td><strong>Sikh</strong> (Sikhism)</td>
<td>Non-vegetarian: All meats that are not halal or kosher Vegetarian: Eggs, tofu and legumes Nuts and seeds Halal or kosher meats</td>
<td>Dairy containing animal rennet or gelatine Fats, gelatine (jelly), emulsifiers or additives made from animals Alcohol, including vanilla essence containing alcohol</td>
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</tbody>
</table>

*Many Sikhs are vegetarian.*
Tips to include healthy cultural or religious meals for your residents

Planning and buying

- Consider your residents’ ethnic backgrounds and eating patterns, and understand what, when and how they eat. You may be able to discuss some of these preferences with residents when they first come to live in your supported accommodation.
- Consider including traditional dishes from the ethnic backgrounds of residents to increase the variety of foods offered in your menu.
- Check with residents how strictly they follow the dietary rules of their religion, and refer to the attached table to assist you in planning suitable meals.
- Consider using a range of grain products in your meals to reflect different cultural grain foods. For example, use rice, pasta, noodles, couscous, quinoa bread and pita breads in your menu.
- Lots of cultures and religions follow a vegetarian diet, so you might consider:
  - using more meat alternatives, e.g. more legumes, tofu, soy products, nuts and seeds in your menu
  - purchasing dairy foods that don’t contain animal rennet or gelatine so they can be served to everyone.
- Consider cultural or religious festivals and celebrations in menu planning [see http://www.australia.gov.au/about-australia/special-dates-and-events].
- When purchasing halal or kosher meats or foods, look for the symbols to show the products are certified. Let your residents know that you have prepared certified halal or kosher food for them, or display it on the menu.

Preparing

- Consider different cooking methods to reflect different cultural cooking styles, e.g. baking, grilling, roasting, pan-frying, stir-frying, slow-cooking and steaming.
- Some religions require that food is handled in a certain way. For example, halal foods must be cooked separately from non-halal foods, and kosher dietary laws prohibit the mixing of meat and milk products [cooking and consumption]. (See http://www.halalsquare.com.au/groceries/index.php/ and http://brisbanehebrewcongregation.com/about-us/kosher/.)
- Some religions also require that a person doesn’t consume alcohol. Use vanilla-flavoured essence that doesn’t contain alcohol, and avoid using alcohol in casseroles or pasta sauces.

Serving

- Some cultures prefer meals served in bowls instead of on plates, and some prefer to use chopsticks, or a spoon and fork, instead of a knife and fork.
- Provide traditional condiments on the table at mealtimes, e.g. soy sauce and fish sauce for Asian residents.
- Some residents might fast as part of their cultural or religious practice. Ask residents when and how they will fast and how you can support them.

For more information:

- For further information about kosher dietary laws and foods, and where to source: http://brisbanehebrewcongregation.com/about-us/kosher/
**Food allergies and intolerances**

**Key points:**
- Food allergies are serious. Food allergies can be life threatening.
- A medical professional should diagnose an allergy.
- Food allergies and food intolerances are not the same.

Supported accommodation residents are more likely to have difficulty communicating their special food needs and managing their allergies.

It is important to take information communicated about a resident’s food allergies or food intolerance seriously and follow the recommended diet.

If you are concerned about a resident, encourage them to see a GP for an assessment.

<table>
<thead>
<tr>
<th>Food allergies:</th>
<th>Food intolerances:</th>
</tr>
</thead>
<tbody>
<tr>
<td>can be life threatening</td>
<td>can make people sick but are not immediately life threatening</td>
</tr>
<tr>
<td>have no cure</td>
<td>require people to avoid or limit the food that causes symptoms</td>
</tr>
<tr>
<td>require people to strictly avoid allergy foods</td>
<td></td>
</tr>
</tbody>
</table>

**What is anaphylaxis?**

Anaphylaxis is a severe type of allergic reaction. Anaphylaxis can be life threatening and must be treated as an emergency. Look for these common signs:

- swelling of the lips, throat and face.
- a red, itchy skin rash.
- difficulty breathing.

**These foods commonly cause anaphylaxis**

- Peanuts
- Shellfish
- Eggs
- Tree nuts (e.g. almonds, cashews and macadamias)

If someone has anaphylaxis, they will probably carry a special medicine called an EpiPen or AnaPen. This gives an injection of adrenaline for emergency treatment. They will still need emergency medical attention after using this medicine.
Coeliac disease
Coeliac disease is a condition where the bowel is damaged by a food protein called gluten. Avoiding gluten means the bowel will heal and symptoms will improve. Although coeliac disease cannot be cured, it can be controlled with a lifelong, gluten-free diet.

Gluten is found in barley, rye, oats and wheat. It can also be added as an ingredient to many processed foods.

Even a tiny amount of gluten in the diet of someone with coeliac disease can cause damage and symptoms.

Gluten-free foods
There are many gluten-free foods available that together can make up a healthy diet for those with coeliac disease. These foods are gluten free in their natural form. Natural form means without added sauces, spices or flavourings.

There’s an app for that!
Coeliac Australia’s Ingredient List app details over 800 ingredients and 300 additives used in Australian and New Zealand foods, and indicates whether they are safe for inclusion in a gluten-free diet.

Vegetables and legumes/beans
Fruit
Grain foods – rice, corn and quinoa
Milk, cheese and yoghurt
Lean meats, fish, eggs, tofu, nuts, seeds and legumes

If a resident has coeliac disease, it is recommended they see a dietitian. For more information on gluten-free foods and a sample meal plan, visit https://www.health.qld.gov.au/__data/assets/pdf_file/0026/149930/gastro_coeliac.pdf
Lactose intolerance

Lactose is a natural sugar found in cow’s milk and also, in smaller amounts, in yoghurt and cheese. Lactose intolerance is a condition where the body has trouble digesting lactose.

The amount of lactose a person can tolerate varies, but it is usually not necessary to remove ALL dairy products from their diet.

Lactose-free foods

Most cheeses, and yoghurts with live bacteria, are very low in lactose and are usually well tolerated. There are many lactose-free milks available, such as lactose-free cow’s milk, soy milk, almond milk and rice milk. When purchasing lactose-free milk products, choose those that are fortified with at least 100mg of added calcium per 100g.

Lactose is also found in many processed or packaged foods. Check the ingredients list for lactose, which may also be listed as milk solids, non-fat milk solids, whey or milk sugar. If you are unsure about the suitability of a particular product for someone with lactose intolerance, check with a dietitian.

For more information:

- Further information on allergies:
  - National Allergy Strategy: All about Allergens (free online training for people working in food service): www.foodallergytraining.org.au
  - Download or order free allergy and anaphylaxis posters here: https://allergyfacts.org.au/shop/posters

- Further information on coeliac disease:

- Further information on lactose intolerance:
Tips for healthy meals for food allergies or intolerance

Planning

- Know which residents have an allergy or intolerance that has been verified by a doctor. Keep a list in the kitchen.
- Know which foods to exclude. Use pictures on your kitchen wall to show all kitchen staff the foods they must exclude.
- Store products with allergy foods separately from other products. Cross-contamination of food products might be enough to trigger a severe allergic reaction.
- Label storage containers clearly.

Buying

Check the ingredients list to make sure packaged foods do not contain allergy foods.

Preparing

- Use a commercial dishwasher to clean boards, knives and other utensils to avoid cross-contamination.
- Label and use a separate toaster, sandwich maker and strainers to avoid cross-contamination.

Serving

- Use colour-coded plates to distinguish allergy-free meals from standard meals, for example red plates for a seafood-allergy-friendly meal.
- Clearly label allergy-free meals for residents, and have processes in place on how you will label and store any leftovers.
Chewing and swallowing difficulties

Key points:
- Residents with chewing or swallowing problems are at risk of choking or having food or liquid go into their lungs. This can cause pneumonia.
- Follow recommendations from a speech pathologist about the need to change the texture of a resident’s diet. Get diets reviewed as necessary.

Do you have residents
- with missing teeth or poorly fitting dentures;
- who have had a stroke or a recent operation; or
- who are living with a disability?

If you are concerned about a resident, encourage them to see a health professional to check if they need changes to their diet for a chewing or swallowing difficulty.

Meals can be made softer or prepared using smaller pieces of food to make them easier to eat. This is called a texture-modified diet.

Residents requiring texture-modified meals
Residents may be prescribed a texture-modified diet by a health professional. It is important to follow this recommendation to keep your residents safe from choking. Review this recommendation with a health professional if you are unsure.

Textures of meals

Soft food:
- is moist, naturally soft or requires minimal cutting
- can become more moist by adding sauce or gravy
- is easily broken into small pieces (no larger than a small grape).

Minced/moist food:
- is soft, moist and easily formed into a ball
- doesn’t contain any hard or sharp lumps
- is easily broken or mashed into very small pieces (no larger than a sultana).

Smooth puréed food:
- is very smooth and lump free
- is moist and can hold its shape on a spoon
- should be puréed using a blender, vitamiser or food processor.
Tips for texture-modified meals

Planning

- Provide a variety of healthy foods from all the five food groups to residents requiring a texture-modified diet.
- Include different-coloured foods to make meals more appealing.
- Have appropriate equipment, e.g. a food processor and moulds (there are a variety of food moulds available online).
- Plan the same amount of food and similar types of meal as other residents’ meals.

Preparing

- Remove the skins and seeds from fruit and vegetables before puréeing.
- Prepare foods in defined shapes; for example, bake minced or blended foods in loaf tins and serve as slices. Shape puréed foods into patties.
- Cook foods until very soft.
- Add spices (not salt) to enhance flavour.
- Chop larger foods, such as meat, into smaller pieces before blending.
- Use soups, gravies, sauces, melted margarine, juice or milk to moisten pureed foods instead of water. Make sure the temperatures of these liquids match the food being puréed (hot liquid with hot food).
- If the purée is too thin, thicken with mashed potato or more solid food until it can hold its shape.

Serving

- Use food moulds to shape purées into recognisable foods or shapes.
- Use icing bags with shaped heads (e.g. star or noodle shaped) to create shapes with firm, blended food.
- Serve each food item separately on the same plate; for example, serve puréed chicken, beans, carrots and potatoes separately, not mixed together.
- Serve hot foods hot and cold foods cold.
- Taste the food before serving to make sure that it is acceptable.
- Tell residents what the meal is (particularly minced and puréed food).

For more information:


*These Texture Modified Food Images were originally developed by NAQ Nutrition for their ebook publication: Improving the Dining Experience in Residential Aged Care and have been reproduced here with permission. Visit www.naqld.org for more information.
Increasing energy and strength

**Key points:**
- Residents who are underweight, losing weight, not eating or have an illness or injury may need extra dietary care (or nutrition).
- Provide foods high in protein and energy, e.g. meat, legumes, eggs, dairy, grains, and healthy fats and oils.
- Offer these foods at every meal and snack. This can include supplements or modified recipes.

Have you noticed a resident who has:
- lost weight without trying;
- been regularly avoiding meals or leaving lots of food on their plate;
- had trouble eating because of sore teeth or poorly fitting dentures;
- been sick for a long time; or
- broken a bone?

If you are concerned about a resident, encourage them to see their GP.

**Which foods will help my resident?**

Foods high in protein and energy (kilojoules) are recommended because they can help to maintain or improve a resident’s weight, strength and independence.

**High protein foods:**
- Lean meats, poultry, fish, tofu and egg food group.
- Milk, yoghurt or cheese food group.

**High energy foods:**
- Healthy fats and oils.
- Grain (cereals) food group.
- Supplement drinks.

**Enriched milk recipe**

This is a low-cost alternative to supplement drinks. Use enriched milk any time that you would use regular milk.

**Ingredients:**
- 1 litre full cream milk
- 4 tablespoons milk powder

**Directions:**
- Pour milk into a jug. Stir milk powder in with a whisk until blended.
- Keep this enriched milk in the fridge.

*Up to 1 cup of milk powder can be added to 1 litre of milk, depending on needs and taste preference.*
### Example meal plan for residents needing EXTRA protein and energy

| Breakfast                  | • Weetbix with enriched milk  
|                           | OR  
|                           | • Eggs on toast with thick spread of margarine  
|                           | OR  
|                           | • Peanut butter or any nut paste on toast with thick spread of margarine  
|                           | OR  
|                           | • Avocado and cheese on toast  
| Morning tea               | • Greek yoghurt and fruit  
|                           | OR  
|                           | • Homemade cake served with margarine or cream  
|                           | • AND  
|                           | • Milk coffee or milk Milo made with enriched milk  
| Lunch                     | • Chicken and salad wholemeal wrap with grated cheese and extra mayonnaise  
|                           | OR  
|                           | • Pumpkin soup made with enriched milk and served with sour cream, and a bread roll with a thick spread of polyunsaturated margarine  
|                           | OR  
|                           | • Baked beans and cheese on toast with a thick spread of margarine  
| Afternoon tea             | • Cheese and crackers  
|                           | OR  
|                           | • Fruit smoothie made with enriched milk and yoghurt  
|                           | OR  
|                           | • A cup of Sustagen or other nutrition supplement  
| Dinner                    | • Shepherd’s pie with extra margarine and grated cheese on the potato  
|                           | OR  
|                           | • Tuna rissoles with bread roll and extra margarine  
|                           | OR  
|                           | • Quiche made with cheese, salad with avocado and an oil-based dressing  
| Supper                    | • Custard made with enriched milk and banana  
|                           | OR  
|                           | • Milk hot chocolate made from enriched milk  
|                           | OR  
|                           | • Rice pudding made from enriched milk  

Tips for increasing energy and strength in residents who need it

Planning and buying:
- Plan to have these residents weighed and reviewed by their GP or dietitian regularly.
- Plan protein foods, e.g. eggs, meats or dairy foods, for every meal or snack. This means each meal is more nutritious and residents don’t need to eat larger serves.
- Purchase full-cream dairy foods whenever possible (milk, cheese and yoghurt).
- Save dinner leftovers in takeaway containers for an easy lunch option.

Preparing:
- Add extra healthy oils and fats when preparing sauces or cooking meat.
- Use a thicker spread of butter/margarine on toast or sandwiches.
- Add milk powder into creamy soups, porridge and mashed potatoes.

Serving:
- Six smaller meals may suit your resident better than three larger, more filling meals.
- Provide energy-rich drinks such as milk or 100% juice instead of tea, coffee or plain water.
- Add extra dressings to salads, and healthy oils to pasta at the time of serving.
- As a resident’s appetite returns to normal when they are feeling better, you may need to increase serving size to match their increasing appetite.

Increasing energy and strength frequently asked questions:

Q: Can the resident just have soft drink and chocolates for extra energy?
A: These foods are not a good source of protein, vitamins or minerals. Better choices to help residents recover from an illness are high energy, high protein foods from the five food groups.

Q: What if my resident can’t eat dairy foods?
A: In this case, provide alternatives to dairy, such as calcium-enriched soy milk, nut milks or rice milk, and soy yoghurt and soy cheese.

Q: What if other residents want the same meals?
A: Eating an extra high protein and high energy diet is not suited to everyone and may make the management of some illnesses, such as diabetes, worse.

Q: Is this diet only for residents who are underweight?
A: Any resident, regardless of their size, may be prescribed this diet by their GP or dietitian, especially if they are losing weight without trying.

For more information:
- Dietitians Association of Australia: Find an accredited practising dietitian (https://daa.asn.au/find-an-apd/)
Food for residents who are overweight

Key points:
- Excess weight occurs when a person consumes more energy (kilojoules) than their body uses in activities and at rest.
- A balanced, healthy diet with limited discretionary foods is recommended.
- Make small, gradual changes towards healthy eating rather than restrictive dieting.

Overweight and obesity is when a person has excess body weight in the form of fat. Excess weight occurs when the energy (kilojoules) we eat from food and drink is more than the energy used by our bodies in activities and at rest.

This can happen from either eating too much food or making unhealthy food choices. Small imbalances over a long time can lead to a person becoming overweight.

Why do some people become overweight?
People make unhealthy food choices for a number of reasons – something that’s important to remember when considering how to help a resident manage their weight problem. Some factors known to increase the risk of being overweight include:

- the modern environment – easy access to unhealthy food, food marketing and less opportunities to be active
- being overweight as a child or teenager
- low levels of education and income – this can mean having less money to purchase healthy foods, and less opportunity to learn about healthy foods and how to prepare them
- homelessness or uncertain access to food. People who are unsure of where their next meal will come from may be more likely to overeat or hoard food.

What causes overeating?
- Stress and/or anxiety
- Boredom
- Habitual overeating
- Not listening to body cues when full
- Eating for comfort
- Quitting smoking
- Medication side effects
- Lack of sleep
Why is being overweight harmful?
Excess body weight is a risk factor for a number of illnesses. It also reduces the mobility of residents and their ability to maintain independence.
For supported accommodation providers this can impact on providing access to personal care services.

What’s the best weight management approach?
‘Dieting’ and skipping meals are not effective ways of managing weight. Effective weight management requires a commitment to making small, gradual changes towards healthier eating and being physically active over time.
Healthy eating includes both having good meal habits and enjoying a wide variety of foods. If you have residents who are overweight or obese and would like to manage their weight, consider:
• limiting discretionary foods available on site
• reducing food and drink portion sizes
• encouraging residents to be more active in their everyday lives.

Goals for weight loss
Gradual weight loss is best. For some residents an initial goal of maintaining current weight and preventing further weight gain is the priority.
Progress can be measured by changes to waist circumference, how clothes fit, and how your resident feels.

The importance of sleep
Getting less than 7 hours sleep per night has been linked to weight gain. Just one or two nights of reduced sleep can make you have trouble concentrating and be irritable, moody and depressed.
Regularly sleeping less than 7 hours causes:
• an increase in hunger and appetite
• an increase in cravings for high energy comfort foods
• tiredness and lack of energy to participate in physical activity
• more fat to be stored in the body.

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Practical tips for weight management

Planning and buying

• Plan meals and snacks around the five food groups. Avoid offering unhealthy foods (e.g. cakes, biscuits, ice cream and processed meats) as regular items on the menu, which can lead to weight gain in residents over time.
• Choose reduced fat spreads and cooking sprays to reduce the amount of fat being used. (When you do buy oils, remember to choose healthier fats such as rice bran oil, olive oil, sunflower oil or canola oil.)
• Purchase reduced fat milk, cheese and yoghurt.

Preparing

• Choose healthy cooking methods such as roasting, steaming, barbequing, stewing or microwaving that use little or no added fat.
• Consider modifying recipes to add more filling foods, e.g. extra vegetables, beans and legumes. This will help residents to feel fuller for longer.
• Choose lean cuts of meat, trim any visible fat and remove the skin. Only use processed meats like sausages, ham, bacon and luncheon meats rarely or not at all.

Serving

• Use the Meal serving guide to ensure residents have half of their plate filled with vegetables and salads.
• Limit or avoid offering sugary drinks, e.g. juice, flavoured milk, hot chocolate and cordial. Choose water – it’s the healthiest option and it’s free.
• If residents request second serves at mealtime, offer non-starchy vegetables or fruit rather than an additional serve of every food group.
• Use small amounts of condiments; BBQ sauce, sweet chilli sauce and tomato sauce are high in sugar.

Weight management frequently asked questions:

Q: Is a low carbohydrate diet the key to weight management?
A: Low carbohydrate diets have gained popularity recently for weight management. One example is the Atkin’s diet. The basic concept is to eat fewer carbohydrates or starchy foods in the hope of losing weight.

The most common source of carbohydrates, or starchy foods, is grain foods such as bread, rice, pasta, oats, couscous and quinoa. Some vegetables and fruit are also a source of carbohydrates, as are processed, unhealthy cakes and biscuits.

Healthy starches or carbohydrate foods provide essential nutrients, including B vitamins and fibre, and are an important fuel for the helpful bacteria that live in our gut. In low carbohydrate diets, these benefits are being missed out on.

Of course, unhealthy carbohydrate foods such as cakes, biscuits, lollies and takeaway foods with lots of pastry are high in energy (kilojoules) because they contain lots of added sugars and fats. For this reason they are best avoided for weight loss.
It’s important to remember that the Australian Dietary Guidelines are based on evidence from thousands of studies. The best way to maintain a healthy weight is to combine a balanced diet that includes vegetables and fruits, whole grains, lean meats and alternatives, legumes, and low fat dairy products like milk, yoghurt and cheese with daily exercise.

Q: Can you gain weight from eating healthy foods?
A: Eating too much of any food, whether it’s healthy or unhealthy, can lead to weight gain. The important thing to remember is to listen to your body, only eat when you’re hungry and stop when you feel full. Be mindful of eating for other reasons, such as boredom or to avoid uncomfortable emotions like anxiety.

Coloured vegetables and salads are lower in energy (kilojoules) and packed full of nutrients and fibre to help you feel full, so these are a good choice for weight management.

Q: Is quitting sugar the answer to losing weight?
A: Sugar is found in a lot of everyday food and drinks. It can be naturally occurring, as in fruit and dairy products. It can also be added during processing, as in cakes, biscuits, pastries and sauces.

Too much added sugar in your diet can lead to tooth decay and weight gain, so it’s definitely important to avoid foods with large amounts of added sugar (e.g. soft drinks and lollies) and also foods where sugar is accompanied by lots of fats (e.g. cakes and chocolates).

Limit your intake of these discretionary foods to small amounts on special occasions to reduce your intake of added sugars, and enjoy a wide variety of foods from the five food groups in sensible portions. This will assist with weight loss and also reduce your risk of tooth decay.

For more information:
• Eat for Health: Tips for losing weight healthily
• Dietitians Association of Australia: Weight management
Vegetarian diets

Key points:

• Vegetarian diets are plant based and avoid meat products.
• People may follow a vegetarian diet for a range of health, environmental, ethical, religious or economic reasons.
• Vegetarian diets can be healthy, but they do need to be planned to make sure they aren’t low in important nutrients.

A vegetarian diet is generally based around plant foods, e.g. vegetables, legumes, fruit and grain (cereal) foods, and avoids the flesh of all animals, including fish and poultry. Vegetarian diets are usually followed in one of the following ways:

• Lacto-vegetarian diet: Dairy foods are also eaten.
• Lacto-ovo vegetarian diet: Dairy foods and eggs are also eaten.
• Vegan diet: Only plant foods are eaten.

People may follow a vegetarian diet for a range of health, environmental, ethical, religious or economic reasons. Vegetarian diets can be really healthy, but they need to be well planned to make sure all the nutrients needed by our bodies are included.

Iron deficiency

Vegetarians and vegans are at an increased risk of being iron deficient. Use the following tips to increase the absorption of iron from plant foods:

• Avoid drinking tea and coffee at mealtimes. This can block the iron in food from being absorbed into the body.
• Eat foods that contain vitamin C (e.g. tomatoes, broccoli, citrus fruits, berries, kiwi fruit, brussels sprouts and capsicum) at mealtimes. These foods will help the body to absorb more iron from foods.
• Cook vegetables to increase the amount of iron available from them.

These foods are good sources of vitamin C.
A balanced vegetarian diet
Eating a wide variety of foods is particularly important for vegetarians. Here’s a guide to vegetarian-friendly options from each of the food groups.

Vegetables and legumes/beans, and Fruit food groups
Vegetarian diets include all items in these food groups, so choose a wide variety of coloured veggies, legumes and fruit.

Grain (cereal) foods
Vegetarian diets include all items in this food group, so choose a wide variety of wholemeal and wholegrain options.

Milk, yoghurt or cheese food group
Include these items as usual for lacto and lacto-ovo vegetarian diets. For vegan diets choose from a wide range of dairy alternatives, e.g. rice, soy or nut milks.

Lean meats and poultry, fish, eggs, tofu, nuts and seeds, and legumes/beans food group
Legumes/beans (lentils, chick peas or split peas), tofu, nuts, seeds, tahini or other nut/seed pastes are all good meat alternatives. Include eggs for lacto-ovo vegetarian diets.

A note about tofu
Tofu is a good meat-free source of protein and is low in unhealthy fat. When cooking with tofu, use healthy cooking techniques such as grilling, baking and stir frying. To get a crispy-style tofu without the deep frying, drain a cube of extra-firm tofu, slice, press down with paper towel to remove any extra water, season as desired, and bake in the oven until crispy.

Special-needs residents:
Vegetarian residents who require a high energy, high protein diet can be at higher risk of nutrient deficiencies. Talk to your GP or dietitian to ensure all their nutrient needs are met.
Practical tips for vegetarian diets

Planning and buying

- Consider planning a meat-free night once a week for all residents (e.g. meat-free Mondays). Vegetarian meals can be healthier, cheaper, and better for the environment.
- Plan meals to include a wide variety of meat alternatives such as eggs, legumes/beans (e.g. chickpeas, lentils or baked beans) and tofu.
- When choosing canned legumes or beans, choose the ‘reduced salt’ or ‘no added salt’ options. Make meals visually appealing by planning to include a rainbow of coloured vegetables.
- Be aware that gelatine, commonly used in dessert dishes, is an animal product and is not suitable for vegetarian diets.
- Consider purchasing vegetarian-friendly beef- and chicken-flavoured stock. These stocks are not made from animal products and can be used across both vegetarian and regular dishes.

Preparing

- Make vegetarian meals interesting by combining flavours and textures. Top a smooth curry with a sprinkle of crunchy nuts, make a wholegrain egg sandwich with crisp lettuce, and spruce up tomato-based pasta with some crispy, grilled tofu.
- Try slow-roasting vegetables. When you slow-roast food it removes water and intensifies the flavour; for example, roasting tomatoes for a pasta sauce gives the sauce a greater depth of flavour, and slow-roasting carrots increases their sweetness.
- When making a vegetarian dish, prepare a few serves extra that you can label with the date and freeze for later use.
- Be aware that people following a vegetarian diet may prefer their food to be cooked and served with separate utensils and equipment that haven’t touched meat-based dishes.

Serving

- Label vegetarian meals, especially in a bain-marie setting, so that serving staff and residents know the correct meal is being received.
- A lot of sauces and gravies are made using meat juices from a roasting pan, or from meat-based stock. Keep these gravies separate from vegetarian dishes, and labelled so they aren’t mistakenly added.

For more information:

- Nutrition Australia: Vegetarian diets FAQs [http://www.nutritionaustralia.org/national/frequently-asked-questions/vegetarian-diets]
Real-life stories from supported accommodation

Herston Lodge

If a resident wants to lose weight they usually come and talk to me (the cook) and I give them a few ideas. Soft drink is consumed a lot around here, so that’s the first thing I suggest to cut back or stop buying.

Then we talk about portion sizes with the residents. We find controlling portion size really works to help prevent residents from overeating. If they’re really hungry they can always come back and ask for seconds (which is a good opportunity to remind them about their weight loss goals!). It also reduces the amount of food left over on plates, which would otherwise be wasted.

Another thing that we discovered was that the weekend managers were providing larger portions than we did during the week. I gave them some information on what standard portion sizes should be and this has really helped.

We also make sure that we provide loads of fibrous veggies and salads at each meal so that the residents feel full without all the extra kilojoules.

After making sure that most of the menu is based on healthy foods from the five food groups, focusing on portion sizes is a sensible and balanced way to address a resident’s weight management needs. Herston Lodge are encouraging and supporting residents to take an active role in decision-making about their own health by talking to them about what they can do themselves and reminding them of their weight management goals when it comes to second servings. As with all changes, good communication with all staff is also a key to the success of this story. For more information on portion sizes have a look at the Meal serving guides.

Willow House

We have many residents with diabetes and we are always conscious about offering suitable meals for them. Breakfast used to be a nightmare because a lot of our newer residents were used to high sugar breakfast cereals and sugary juices. Then they would sprinkle even more sugar over their cereal!

Firstly, we put the sugar away at breakfast time. Then we introduced our residents to high fibre options like porridge with low fat milk. We also replaced our white bread with wholemeal bread for toast. The porridge is a real favourite in winter and in summer we offer low fat yoghurt with a sprinkle of nuts.

Willow House has made some simple swaps to cater to the needs of residents living with diabetes. Providing high fibre, wholegrain cereals and breads are a great way to maintain steady blood sugar levels and also help residents feel fuller for longer. Swaps like this are a healthier option for all residents, not just those with diabetes.

For more information on how to swap less-healthy ingredients or add goodness to your favourite meals, have a look at 3 – Healthy meal ideas and tips. If you’re looking for healthy breakfast cereal options why not try natural muesli, wheat biscuits or porridge with added seasonal fruit for flavour.
Helping residents to make healthy food choices

Accreditation
To improve the eating habits of residents, we need to look beyond the dining room to all the ways that food is a part of their lives. Food may be available to residents through on-site vending machines and kiosks, or through visitors and support services that may facilitate access to food.

Ensuring that the whole facility promotes healthy eating contributes to Standard 3.5: Health Care, where the service encourages and helps residents to maintain their physical, dental and mental health, and ensures residents have access on site to information on healthy lifestyles.

In this section there is a step-by-step guide to developing your own nutrition policy to outline how you, as a supported accommodation provider, promote healthy eating to contribute towards achieving all elements of Standard 2.1: Food and Nutrition.

Vending machines
Having a vending machine on site stocked with unhealthy, highly processed foods can send mixed messages to your residents about healthy eating and the importance of their health. Vending machines expose residents to junk food advertising and can encourage mindless purchasing.

It is possible to have a vending machine for predominantly healthy snacks, which residents can access for food outside meal times, if required. Talk to your vending machine stockist and use the lists below to swap some of the unhealthy options for healthier ones.

You don’t have to remove all of the unhealthy items; rather, aim for around 80 per cent of the machine’s contents to be healthy choices and place these items at eye level so they are more prominent to residents.

Some facilities may find non-food items such as toothpaste, toothbrushes, shower caps, soaps or shampoo a useful addition to vending machines.

<table>
<thead>
<tr>
<th>Swap this</th>
<th>For this</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Potato crisps</td>
<td>• Tuna and crackers</td>
</tr>
<tr>
<td>• Chocolate bars</td>
<td>• Salsa and crackers</td>
</tr>
<tr>
<td>• Lollies and sweets</td>
<td>• Some flavoured rice crackers</td>
</tr>
<tr>
<td>• Sweet biscuits, slices and cakes</td>
<td>• Plain, air-popped popcorn</td>
</tr>
<tr>
<td></td>
<td>• Crispbreads, crackers, rice or corn cakes</td>
</tr>
<tr>
<td></td>
<td>(offer reduced salt where possible)</td>
</tr>
<tr>
<td></td>
<td>• Reduced fat, reduced salt re-constituted soups</td>
</tr>
<tr>
<td></td>
<td>• Reduced fat, reduced salt noodle bowls or cups</td>
</tr>
<tr>
<td></td>
<td>• Cereal-based or fruit-filled bars</td>
</tr>
<tr>
<td></td>
<td>• Dried fruit</td>
</tr>
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<td></td>
<td>• Dried fruit and Plain nuts</td>
</tr>
<tr>
<td></td>
<td>• Plain or salted, dry roasted nuts</td>
</tr>
<tr>
<td></td>
<td>• Reduced fat, plain sweet biscuits</td>
</tr>
</tbody>
</table>
Drinks

<table>
<thead>
<tr>
<th>Swap this</th>
<th>For this</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Soft drinks and flavoured mineral waters</td>
<td>• Unsweetened water (including still, sparkling, mineral and flavoured)</td>
</tr>
<tr>
<td>• Fruit drinks (less than 99% juice)</td>
<td>• Unflavoured milk</td>
</tr>
<tr>
<td>• Milk-based cold beverages with added cream, ice cream and/or confectionery</td>
<td>• Vegetable juice (unsweetened)</td>
</tr>
<tr>
<td>• Cordials</td>
<td>• Fruit juice (99–100% juice, unsweetened) – suggested serve size of up to 300ml</td>
</tr>
<tr>
<td>• Energy drinks and sports drinks</td>
<td>• Artificially sweetened soft drinks – suggested serve size of up to 600ml</td>
</tr>
<tr>
<td>• Iced teas</td>
<td>• Artificially sweetened iced tea</td>
</tr>
<tr>
<td>• Flavoured waters with added sugar</td>
<td>• Flavoured milks – suggested serve size of up to 500ml</td>
</tr>
<tr>
<td>• Hot drinks with added cream, syrups or confectionery</td>
<td>• Other milk-based drinks (e.g. milkshakes or smoothies) without added cream, ice cream or confectionery – suggested serve size of up to 500ml</td>
</tr>
<tr>
<td>• 99–100% fruit juice that is larger than 300ml</td>
<td>• Hot drinks without additional cream, syrups or confectionery</td>
</tr>
<tr>
<td>• Artificially-sweetened drinks that are larger than 600ml</td>
<td></td>
</tr>
</tbody>
</table>

Food kiosks

For small food kiosks, use the same advice as for stocking vending machines. Food kiosks mean more contact with the resident at the point of purchase, so why not try talking to them to see which healthy food items they would most prefer?

If you find the healthier food items aren’t selling as expected, consider some promotion of these foods:

- Offer taste-testing to trial new products. Ask residents for feedback on taste, suitability and suggested price.
- Promote new food choices in newsletters or posters.
- Use your existing pricing boards to advertise and highlight the new products. Consider creating your own ‘meal deals’ or ‘happy hour specials’.
- Stock healthy items at eye level on shelves, benches or cabinets.
- Stock discretionary food items on lower shelves or out of sight, as in the diagram below.

<table>
<thead>
<tr>
<th>Shelf</th>
<th>Row1</th>
<th>Row 2</th>
<th>Row 3</th>
<th>Row 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Top</td>
<td>Most healthy</td>
<td>Most healthy</td>
<td>Most healthy</td>
<td>Most healthy</td>
</tr>
<tr>
<td>Middle</td>
<td>Most healthy</td>
<td>Most healthy</td>
<td>Most healthy</td>
<td>Most healthy</td>
</tr>
<tr>
<td>Middle</td>
<td>Most healthy</td>
<td>Most healthy</td>
<td>Most healthy</td>
<td>Most healthy</td>
</tr>
<tr>
<td>Bottom</td>
<td>Least healthy</td>
<td>Least healthy</td>
<td>Least healthy</td>
<td>Least healthy</td>
</tr>
</tbody>
</table>

Healthy items, e.g. water, unflavoured milk, veggie juice and small serves of 100% fruit juice, plain popcorn, crackers, dried fruit and nuts. You could also include some artificially sweetened soft drinks and flavoured milks.

Discretionary items, e.g. soft drinks, sports drinks, chocolates, chips and lollies.
Dining rooms – providing a pleasant mealtime environment

A dining room is more than just a space to provide food and drink. The dining room is the heart of your supported accommodation facility. It offers a source of socialisation, an opportunity for staff to connect with residents, and to monitor residents’ food intake and wellbeing.

Aiming for a pleasant, relaxed dining room atmosphere can add to residents’ overall improved health and wellbeing, and also form part of **Accreditation Standard 1.B.1 Living Environment**.

What does a pleasant dining room look like?

- Colour scheme and natural lighting brighten the room.
- Small seating arrangements encourage socialisation.
- Outer tables are accessible for those with mobility aids.
- Tables are kept clear and tidy with no clutter.
- Natural lighting brightens the room.
- Bright tablecloths are neat and appealing.
- Stable and supportive chairs.
- Outer chairs are accessible for those with mobility aids, and space is provided for wheelie walker parking.
Changes you can make now

Below are some examples of how you can make your dining room a pleasant environment at varying cost investments. It’s important to discuss potential changes with residents and seek feedback on their preferences.

**Low cost**
- Arrange furniture for small groups of residents, e.g. two- to four-person tables to encourage socialisation.
- Provide a more inviting, home-like space by using clean and colourful tablecloths and well-placed table settings, e.g. cutlery and placemats.
- Provide residents with ample time to enjoy their meals without feeling ‘moved along’.
- Play background music during dining periods.
- Ensure there is enough space for residents to move around the dining room with ease. Consider whether rearranging furniture could improve this.

**Moderate cost**
- Ensure residents are comfortable during mealtimes by providing stable, supportive chairs.
- Re-paint the dining area in cheery colours to brighten the space.
- Review your lighting and window coverings; make the space bright and inviting.
- Make your dining room a cosy environment by ensuring the temperature is warm and draft free. Be aware that some older residents may feel the cold more than others.
- Consider how residents access the dining room. Ensure that the entrance is unobstructed and looks welcoming upon arrival.

**High cost**
- Use ceiling and floor surfaces that reduce noise at mealtimes.
- Re-design the working kitchen to open it up to residents. Allow them to better see how their food is made and enjoy those delicious cooking smells.
- Have an area for residents to entertain others, including family members and friends.
Promoting healthy eating to residents

Promoting healthy eating to residents can help build interest and demand for the healthy food that you’re providing on the menu, as well as influence the food and drink choices that they make outside of your facility, e.g. purchases from the local shops.

Below are just some of the ways you could promote the healthy eating message to your residents. Choose the options that suit your service best.

- **Posters**: Posters are an easy way to remind residents about key healthy eating messages. Choose good-quality posters with a simple message and lots of pictures. Place them in high-traffic areas such as the dining room, on resident fridges, or beside kiosks and vending machines. For free healthy eating posters to download or order, go to [www.eatforhealth.gov.au/guidelines](http://www.eatforhealth.gov.au/guidelines).

- **On your menu**: Display a menu board to let residents know what their meals will be for the day. Use tantalising descriptions to build enthusiasm for your healthy meals. If you offer a bain-marie style self-service, make sure you label the foods there too.

- **Talk about it**: Encourage staff and support services to talk to residents in a positive way about healthy eating. This can be done during mealtimes or at other points of contact during the day.

- **On admission**: If your service provides admission packs, consider including healthy eating information in them. When residents arrive at your facility, let them know that you provide healthy food because you value their health. Remember to ask about cultural considerations regarding food, and any food allergies.

- **Fight the boredom**: Boredom is a common factor in overeating. Try offering, or linking with support services, to provide activities for residents, e.g. art and craft, cooking groups, dancing, day trips, music, or anything that the residents enjoy. When residents find joy in other activities, they are less likely to rely as heavily on food to add interest and pleasure to their lives. See our list of ideas for active and enjoyable outings.

- **Getting active**: Increasing activity is a sure-fire way to improve sleep, mental and physical health. Try offering activities, or link with support services to provide sporting activities or walking groups to residents.

- **Grow your own**: No-dig gardens, vertical gardens, pots and hanging plants are all great ways you could grow your own veggies, herbs and fruit on site. Gardens have been shown to improve mental health, increase activity, and encourage a reconnection with food and where it comes from. Gardens have the added benefit of improving the look of an area at relatively low cost. Follow this link to get you started growing edibles, with information on growing methods, soil health and plant health: [https://www.abc.net.au/gardening/vegie-guide/](https://www.abc.net.au/gardening/vegie-guide/)

- **Your philosophy**: Let residents and visitors know that providing a healthy eating environment is part of your organisational policy and an important part of how you care for residents. See our step-by-step guide on how to write your own nutrition policy.
The healthy eating message for visitors

Providing healthy food within your supported accommodation is a great way that you can help improve the health of residents. It’s important to remember that while residents can choose to eat as they wish, they also have the right to nutritious food that maximises their health, just like everyone else. Your role is to make healthy choices easy for residents. This is in line with *The General Principles of the Guardianship and Administration Act 2000* which promotes encouraging and supporting people to achieve their maximum physical potential and maintain independence.

Sometimes visiting families, friends and services might bring unhealthy, processed food on site or take residents out to purchase these items. This is usually done with the best of intentions, as they might not have considered the long-term impact it can have on residents.

Remember that for successful change to occur, it’s important to get the support and involvement of others. Sharing easy-to-understand information is a good way to bring people along with new ideas or any changes to your service.

**For families and friends:**

- Let visiting family and friends know that your service values the health of its residents and aims to provide healthy food on site. You can do this by providing a letter advising them of your healthy eating philosophy. There is a [letter example](#) below that you can adapt to meet your service’s needs.
- Let them know how they can support their family member to have healthy eating habits. Encourage them to consider non-food related gifts or bring in more wholesome options rather than providing residents with unhealthy, processed food items. Advise them of any new hobbies or interests the resident might have and what gifts or activities might be appropriate to support them.
- Display your nutrition policy at the entrance to your facility where it’s visible to all visitors.

**For external services:**

- Provide all health and support services with a letter notifying them of your healthy eating philosophy [either in person or via email](#). There is a [letter example](#) below that you can adapt to meet your service’s needs.
- Encourage external services to plan active and healthy outings for residents. A list of cheap, fun ideas [is provided here](#).
- Share a copy of your nutrition policy with all health and support services that provide care to your residents. Share the policy with your vending machine stockist or other catering services that provide food on site.
- Display your nutrition policy at the entrance to your facility where it’s visible to all visiting services.
Example letter to communicate your service’s healthy eating philosophy to family members and friends

Date

Dear family members and friends,

We support our residents to access nutritious food that maximises their health. Healthy food plays an important role in good mental health, and in preventing and managing lifestyle diseases such as diabetes, high blood pressure and high cholesterol.

As a Level 3 supported accommodation provider, it is our responsibility to ensure residents’ daily nutrition needs are met. We do this by providing regular, healthy meals and ensuring mostly healthy food is available on site.

You can also support the health of residents in a number of ways:

- Plan active and enjoyable outings that aren’t focused around unhealthy foods. Some ideas could include a visit to a park for a walk, thrift shopping or a healthy picnic. We’ve enclosed an information sheet with some ideas for you. We’d love to hear more ideas you might already have.
- Consider bringing non-food related gifts (e.g. flowers, colouring books, magazines or a craft activity) when you visit. Is there a suitable gift that is linked to a hobby or interests that your family member/friend has?
- Limit or avoid bringing unhealthy, processed food (e.g. cakes, biscuits, soft drinks and ice cream) or takeaway foods (e.g. commercial pizzas, burgers and hot chips). These foods are best saved for celebrations or special events, as they do not provide any vitamins or minerals and often make a resident’s health issues worse.

We hope you will join us in keeping the best health interests of the residents in mind. For more information on healthy eating, visit www.eatforhealth.gov.au or talk to our office staff about the changes we’ve made to promote healthy eating.

If you have any feedback on the food that’s available to residents, please let us know!

Yours sincerely,

<insert name>
<insert supported accommodation service>
Example letter to communicate your service’s healthy eating philosophy to external services

Date

Dear <Agency Name>,

We support our residents to access nutritious food that maximises their health. Healthy food plays an important role in good mental health, and in preventing and managing lifestyle diseases such as diabetes, high blood pressure and high cholesterol.

As a Level 3 supported accommodation provider, it is our responsibility to ensure residents’ daily nutrition needs are met. We do this by providing regular, healthy meals and ensuring mostly healthy food is available on site.

You can also support the health of our residents in a number of ways:

• Limit or avoid bringing on site unhealthy, processed food (e.g. cakes, biscuits, soft drinks and ice cream) or takeaway foods (e.g. commercial pizzas, burgers and hot chips). These foods are best saved for celebrations or special events, as they do not provide any vitamins or minerals and often make a resident’s health issues worse.

• Plan active and enjoyable outings for residents that aren’t focused around unhealthy foods. Some ideas could include a visit to a park for a walk, thrift shopping or a healthy picnic. We’ve enclosed an information sheet with some with ideas for you. We’d love to hear more ideas you might already have.

We hope you will join us in keeping the best health interests of the residents in mind. For more information on healthy eating, visit www.eatforhealth.gov.au or talk to our office staff about the changes we’ve made to promote healthy eating.

Yours sincerely,

<insert name>
<insert supported accommodation service>
Ideas for active and enjoyable outings

Ditch the fish and chips and try one of these cheap, fun activities that are truly good for your health.

- Go thrift shopping and find some hidden, low-cost treasures.
- Head to your local library to stock up on reading or audio books. Local libraries often host a range of workshops, seminars, and even poetry readings.
- Head out to your nearest bay or waterway for a walk along the water.
- Visit your local swimming pool when the weather is warm.
- Check out the local art gallery or museum.
- Explore local markets.
- Take a healthy picnic along to your local park.
- Check out your local city council website for cheap activity groups such as walking, dancing or yoga.
- Try out a lawn bowls or ten-pin bowling club.
- Head along to watch your local sporting teams play.
- Join a community garden group. Your local city council should have information on what’s available in your area.
- Hire a bike and cycle around your local area. Some local councils have this service for a small fee.

Try something new today! Let us know what other great ideas you come up with.
Developing a nutrition policy

Policies are a great way to ensure that the things you value as a service, or positive changes you make, are embedded in how the organisation operates well into the future, especially when staff or management change. A written policy is also useful for accreditation.

While some policies are mandated by authorities, e.g. through accreditation standards, many organisations and services also develop their own policies, which guide decisions and actions or are statements of intended action.

Why is a nutrition policy important to supported accommodation?

Policies can shape the way supported accommodation services are run, what food is provided, how external services, staff and residents interact, and much more. Rather than strict rules or regulations for supported accommodation, a policy can help maintain a level of agreed quality, help guide decision-making, communicate the things your service values, and set expectations for staff, residents and visitors.

How to develop a nutrition policy

This section will provide a step-by-step guide on how you can create a nutrition policy for your service.

1. Getting ready

- **Make the decision:** Decide to develop or revise a nutrition policy and set a date for implementation.
- **Gain co-operation:** Think about who may be affected by the policy and who should be involved in developing the policy. You might like to organise a small working group that includes resident representatives to work on the policy development together.
- **Get informed:** Pull together all the information you need to create the policy. This can include reviewing accreditation requirements, talking to other supported accommodation providers who have developed a nutrition policy, and talking with nutrition experts, staff and residents.

2. Preparing the policy

- **Draft the policy:** Use the template and example policy to get an idea of the components you might want to include.
- **Seek feedback from key people affected by the policy:** You can do this in person by making copies of the policy available, presenting it at meetings, or emailing it to different groups. Ask specific questions like:
  - Is the wording in the policy easy to understand?
  - Is the content of the policy appropriate/timely/necessary?
Helping residents to make healthy food choices

3 Finalise the policy
- Improve the policy: Take into account all of the feedback provided on the draft policy and make a final version.
- Get it endorsed: Have the final policy endorsed by the supported accommodation’s management structure.

4 Implementing the policy
- Raise awareness: Let everyone know that you now have a nutrition policy and why. Share the policy with all residents, staff and visitors (including families, friends and services).
- Focus on staff: It may be necessary to hold a special meeting with staff to let them know what actions they can take to support the implementation of the new policy. Staff might require some extra training or equipment.
- Embed it: Make sure the policy is included in all new resident welcome packs and as a part of your orientation for new staff. Document what you have done and when. You can use this for evidence for accreditation.

5 Ensure the policy is working
- Monitor the way the policy is being implemented. Talk to residents, staff and visitors to see if the policy is achieving what you had hoped. Make and document any changes required.
- Review the policy on a regular basis. It’s important to make sure the policy remains up to date with your service’s current values, beliefs and practices, and with any accreditation requirements or food service legislation.

Adapted from Health Promoting Schools: a toolbox for creating healthy places to learn, work and play (2001).

Checklist for a good policy
- ✓ Consistent with current accreditation requirements.
- ✓ Based on information from recognised nutrition authorities.
- ✓ Developed in consultation with others, e.g. staff and residents.
- ✓ Specific and relevant to your service.
- ✓ Reviewed regularly.
- ✓ Promoted to others.

See the blank Nutrition policy template here.
Nutrition policy example

Name of supported accommodation provider: Happy Hollows Lodge
Date of policy development: 5th June, 2017
People involved in developing the policy: Jane Smith [Owner], Steve Williams [Cook] and three long-term residents
Review date: 5th June, 2018
Policy will be reviewed by: Staff and resident working group (5 people)
The policy will be located: In the office policy folder and in the foyer, on the wall.
How the policy information will be shared with staff, residents and visitors: The policy will be on display in the reception area, a copy will be shared with all external service providers, and it will be discussed at the staff meeting and also at the resident meeting.

Healthy food
Our supported accommodation service:
• has a four-week cyclical menu, based on the five food groups
• provides everyday snacks that are based on a food group, such as the Fruit, Vegetable, or Milk, yoghurt and cheese groups
• offers water as the main drink at all times. We do not provide sugary drinks like cordial, soft drinks or fruit drinks.

Resident needs
Our supported accommodation service:
• provides residents with the opportunity to participate in the menu planning process
• asks residents about, and caters for, specific cultural/religious requirements [e.g. kosher or halal foods], medical needs, allergies/intolerances or personal likes/dislikes [e.g. vegetarian foods].

Healthy environment
Our supported accommodation service:
• provides an inviting place for residents to eat
• makes sure that the vending machine stocks 80% healthy food and drink choices
• encourages external service providers to respect and support healthy eating and healthy lifestyles for our residents.

Signed: ...........................................   Signed: ...........................................
[Owner]                     [Cook]
Date: / / Date: / /
Sources of information

- Queensland Government, A Better Choice Tool Kit: Healthy vending machines

Real-life stories from supported accommodation

Tarampa Lodge

Since NDIS has come in our area we’ve had a support worker helping one of the residents to create an herb garden. The support worker has walked through each step with the participant, from garden design to shopping for the plants and equipment, to planting up the garden. The resident has now gained more confidence in gardening and is more active doing the things that he enjoys. For us, our cook can access fresh herbs every day. Now we’re going to start up a veggie garden too!

We’re also starting to find more ways that we can provide residents with the equipment and space to be more active every day. We already have a pool, basketball/tennis court and pool table and are now looking at marking out a walking track around the property so that residents can walk in a safe place. We might also try and get some exercise equipment too. That way when support services come on site it’s much easier for them to engage residents in healthy activities because we have it all here.

Fairhaven Care Centres

The residents have grown vegies on site on a few different occasions. The garden is led by the residents, so the popularity varies and we’ve seen the garden revamped quite a few times now.

The residents decide what they’d like to plant and we’ve noticed that they prefer to grow veggies that they can touch, hold and eat rather than herbs. Tomatoes, corn and pumpkins are very easy to grow and have been successful here in the past. They have been really proud to have the cooks prepare and serve ‘their’ vegies, especially when the corn gets cooked on the barbeque!

Making gardening activities and exercise equipment available are great practical ways to encourage residents to be healthier outside of the dining room and have a greater participation in community life, as outlined in The General Principles of the Guardianship and Administration Act 2000. Gardening has been shown to improve mental health, increase activity and encourage a reconnection with food and where it comes from. Have a look here for other ways to promote healthy eating to residents.
Where to get more help

How to find a dietitian

Individual residents may be able to access a dietitian under Medicare via the Chronic Disease Management scheme, using a GP referral. Encourage residents to talk to their GP for more details.

For a comprehensive menu review, contact your local Accredited Practising Dietitian (APD).

Accredited Practising Dietitians are university-qualified nutrition professionals. They undertake ongoing training to ensure that they are your most up-to-date and credible source of nutrition information. They are able to translate the latest scientific information into practical and safe nutrition advice.

Look for an APD who has experience with food services and menu review. To find one near you, head to the Dietitians Association of Australia website: https://daa.asn.au/find-an-apd/

Getting the most out of your dietitian

When enlisting the help of a dietitian:

- check what their experience is in assessing menus for accommodation services or other food services
- ask them to provide advice on seasonal menus
- ask them for suggestions or general guidelines on how to substitute menu items
- check they are available to contact for advice in the future
- consider partnering with other supported accommodation providers to see if you can receive a group discounted rate.

Other helpful contacts

**Emergency**
Police, fire and ambulance
000

**13 HEALTH**
Qualified staff will give you confidential, non-urgent health advice and assistance 24 hours a day, 7 days a week.
13 HEALTH (13 43 25 84)

**MH CALL**
Access local mental health services for information and assistance in times of mental health crisis 24 hours a day via a centralised phone number.
1300 MH CALL (1300 64 22 55)

**DVConnect**
Domestic violence hotline
1800 811 811

**Sexual assault, domestic and family violence support**
1800 737 732
Gambling helpline
1800 858 858

Alcohol and Drug Information Service
1800 177 833

Disability Services
The Queensland Government provides a range of disability support services for people with disability. Contact them for information about disability support services, how to apply, and the National Disability Insurance Scheme.
13QGOV [13 74 68]

Disabilities Information and Awareness Line – DIAL
Information on services for people with disabilities
Free call Monday to Friday, 9:00am–5:00pm
1800 177 120

Queensland Aged & Disability Advocacy Inc.
QADA provides advocacy, information and support for aged and disabled.
1800 818 338 or 3637 6000

Links
This Healthy eating in supported accommodation resource takes a 'toolkit' approach in that it summarise key points and refers to a range of other available resources and links for more information. The many resources and links that have been referred to throughout the document are listed here.

Links for 1 – Introduction to healthy eating
Residential Services Accreditation Act (2002)
Residential Services (Accreditation) Regulation 2018
Eat for Health: Australian Dietary Guidelines (2013)
www.eatforhealth.gov.au
Healthier Happier
Dietitians Association of Australia: Healthy eating
Local city councils have information on safe food, training and licensing for businesses. Contact your local city council.

Links for 2 – Menu planning
Eat for Health: Food label reading
Food Standards Australia and New Zealand (FSANZ)
www.foodstandards.gov.au
A TOOLKIT FOR HEALTHY EATING IN SUPPORTED ACCOMMODATION

Food Act and Food Standards Code

Health Star Rating System
www.healthstarrating.gov.au

Australian Government: Energy made easy

**Links for 3 – Healthy meal ideas and tips**

Grains and Legumes Nutrition Council: Legume cooking advice

Diabetes Australia: Modifying recipes

Healthier. Happier. fruit and veg seasonality calendar

**Links for 4 – Food for special needs**

**Diabetes**
Diabetes Australia

Baker IDI Heart and Diabetes Institute: Carbohydrates and Glycaemic Index (GI) fact sheet

**Mental illness and diet**
Beyond Blue: Eating Well
https://www.beyondblue.org.au/get-support/staying-well/eating-well

**Cultural and religious menu considerations**

Cultural and religious festivals and celebrations

Brisbane Hebrew Congregation: Kosher dietary laws and foods, and where to source
www.brisbanehebrewcongregation.com/about-us/kosher/

Halal Square: Halal foods and where to source

**Food allergy and intolerance**

National Allergy Strategy: All about Allergens [free online training for people working in food service]
www.foodallergytraining.org.au

Download or order free allergy and anaphylaxis posters here:
https://allergyfacts.org.au/shop/posters

Coeliac Australia

Dietitians Association of Australia (DAA): Coeliac Disease
Where to get more help

Queensland Government Department of Health: Coeliac Disease

Dietitians Association of Australia (DAA): Understanding lactose intolerance

Chewing and swallowing difficulties
Queensland Government, Nutrition Education Materials Online: Texture-modified diet and sample meal plans

Australian Standards for Texture Modified Food and Fluids [free printable poster]

Increasing energy or strength
Queensland Government: Nutrition Education Materials Online: High protein, high energy resources

Dietitians Association of Australia: Find an accredited practising dietitian
https://daa.asn.au/find-an-apd/

Food for residents who are overweight
Eat for Health: Tips for losing weight healthily

Dietitians Association of Australia: Weight management

Vegetarian diets
Dietitians Association of Australia: Vegetarian diets

Nutrition Australia: Vegetarian diets FAQs
www.nutritionaustralia.org/national/frequently-asked-questions/vegetarian-diets

Links for 5 – Helping residents to make healthy food choices
Eat for Health: Ordering healthy eating resources

ABC: The Vegie Guide
https://www.abc.net.au/gardening/vegie-guide/
7 Glossary

**Artificial or intense sweeteners:** These are substances that can replace sugar in foods or in cooking. They provide a sweet taste like sugar while having much less food energy (kilojoules). Some sweeteners are produced by nature, such as stevia. Others are produced synthetically, such as aspartame, saccharin or sucralose. Sweeteners are often found in processed ‘diet’ foods and drinks.

**Diabetes:** The build-up of sugar (glucose) in the blood. If high blood sugar levels are not treated, people with diabetes can suffer serious short-term and long-term health problems. There are two types of diabetes:
- *Type 1 diabetes* usually develops in young people, but can occur at any age. Sugar is not removed from the blood because the body stops making the hormone insulin. This type of diabetes cannot be cured or prevented and is managed by insulin injections together with a healthy diet and being physically active.
- *Type 2 diabetes* is the most common type of diabetes. Sugar is not removed from the blood quickly enough because the body does not respond to insulin and/or the body does not produce enough insulin. It can be managed with a healthy diet and regular exercise, but some people may need medication and/or insulin injections.

**Discretionary foods:** Cakes, biscuits, soft drinks, ice cream and highly processed meats are all examples of discretionary foods. They can also be called ‘junk foods’, ‘energy-dense, nutrient-poor foods’, ‘sometimes foods’ or ‘extra foods’. They are foods that don’t provide many (if any) nutrients to our bodies, other than extra fats, sugars and salt.

**Fibre:** The indigestible part of plant foods, such as vegetables, fruits, grains, beans and legumes. It is a type of carbohydrate or starch that helps keep our bowel healthy. Eating high fibre foods can help prevent constipation and help people feel fuller for longer, which can aid in weight management.

**Five food groups:** Foods are grouped into five food groups because they provide similar amounts of key nutrients in that group. The five food groups are:
- ✓ Vegetables and legumes/beans
- ✓ Fruit
- ✓ Milk, yoghurt or cheese (mostly reduced fat)
- ✓ Lean meat and poultry, fish, eggs, tofu, nuts and seeds, and legumes/beans
- ✓ Grain (cereal) foods (mostly wholegrain and high fibre varieties)

**Iron:** An important mineral which carries oxygen around the body. This is essential for providing energy for daily life. While the body can store iron, it cannot make it. You need to get iron from food. Good sources of iron include red meat, offal, whole grains (especially iron-fortified breakfast cereals), dried beans and lentils, and leafy green vegetables.

**Kilojoules (kJ):** The measure of how much energy people get from consuming a food or drink. It is normally the first item listed in the nutrition information panel on a food label. The common term for this used to be ‘calorie’, but kilojoule is the measure now accepted in Australia.

To find out more about how many kilojoules adults should consume each day, visit the Eat for Health website: [https://www.eatforhealth.gov.au/eat-health-calculators](https://www.eatforhealth.gov.au/eat-health-calculators)

**Magnesium:** A mineral that is used in almost all tissues of the body, especially nerves. Most people get all the magnesium they need from food. Good sources of magnesium are leafy green vegetables, legumes (lentils, soybeans and chickpeas), nuts, seeds and whole grains, spinach and potatoes.
**Potassium:** A mineral needed for your heart, nerves and muscles to work properly. Most people get all the potassium they need from their food and drink, but having low or high potassium levels can cause serious problems. Sources of potassium are all vegetables and fruits, yoghurt, milk, nuts and seeds.

**Protein:** An essential nutrient for the human body. Proteins are one of the building blocks of body tissue. Our muscles, organs, and the immune system are made up mostly of protein. Protein in food can also serve as an energy source for the body. Protein can come from animal or plant foods such as those in the Lean meat and poultry, fish, eggs, tofu, nuts and seeds and legumes/beans food group and the Milk, yoghurt or cheese food group.

**Saturated fats** (also known as unhealthy fats): Fats found mostly in animal products (meat, chicken and dairy), coconut and palm oils, processed foods such as cakes and biscuits, and takeaway foods. It is recommended we replace saturated fat in our diet with poly and monounsaturated fats, eat less sugar and lots of whole grains to reduce our risk of developing heart disease and other blood circulation problems.

**Sugar:**
- *Added sugars:* Sugars and syrups put in foods during preparation or processing, or added at the table.
- *Naturally occurring sugars:* Sugars found naturally in foods such as fruit (fructose) and milk (lactose).

**Trans fat:** An unhealthy fat found mostly in foods that use partially hydrogenated vegetable fats, e.g. deep-fried foods and baked foods such as biscuits, cakes, pastries and buns. Some meat and dairy products also contain small amounts of naturally occurring trans fat. Eating trans fat increases your risk of developing heart disease.

**Starchy foods** (also known as carbohydrate foods): Foods found in the Vegetables and legumes/beans and Grain (cereal) food groups. They include peas, corn, potatoes, beans, pasta, rice, bread and grains. In a healthy, balanced diet, starchy foods are the main source of energy for the body.

**Unsaturated fats** (also known as healthy fats): Fats found mostly in plant foods and fish. Choosing unsaturated fats instead of saturated fats will reduce your risk of developing heart disease. There are two main types of unsaturated fats: monounsaturated and polyunsaturated fats.

**Monounsaturated fats:** Healthy, unsaturated fats found in avocados, almonds, cashews and peanuts, and in cooking oils such as canola, olive, rice bran, sesame, soybean and sunflower oils.

**Polyunsaturated fats:** Healthy, unsaturated fats of two main types:
- Omega-3 fats, which are found in fish (especially oily fish such as tuna, salmon, sardines and blue mackerel), walnuts, linseed (flaxseed), chia seeds and oils, and spreads made from canola or soybean.
- Omega-6 fats, which are found in some oils such as safflower and soybean oil, and in some nuts, including brazil nuts.

**Vitamin A:** An important vitamin for the eyes, especially for being able to see at night. It is also important for the immune system and the skin. Good sources of vitamin A include liver, kidney, eggs, milk, cheese and orange, or yellow-coloured fruit and vegetables (e.g. pumpkin, orange sweet potato and carrot).

**Vitamin B:** The B-group vitamins (B1, B2, B3, B5, B6, B7, B9 and B12) are a group of eight vitamins that our body needs to live. B vitamins help the body to use the fuel that we get from eating foods. Most of these vitamins can’t be stored by the body and have to be consumed regularly in the diet. B vitamins are found in a variety of foods such as:
- animal-based foods, including fish, meat, eggs and dairy products
- leafy green vegetables, beans and peas
- wholegrain cereals and breads that have B vitamins added to them.
**Vitamin D:** A vitamin that is important for strong bones, muscles and overall health. It is hard to get enough vitamin D from diet alone; exposure to the sun is needed for the production of vitamin D in the skin. The sun provides the best natural source of vitamin D.

**Vitamin C:** A vitamin that is important for keeping skin, bones and body tissue healthy. It also helps with wound healing and preventing infections. Vitamin C is found in many different fruits and vegetables, including citrus fruit, berries, kiwi fruit, guava, rockmelon, raw capsicum, cooked broccoli and brussels sprouts.
8 Templates

Menu template
Action plan template
Nutrition policy template
Menu self-assessment checklist template
### A TOOLKIT FOR HEALTHY EATING IN SUPPORTED ACCOMMODATION

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Action plan

Date plan developed: ____________________________________________________________

Focus area:
List the area that you’d like to work towards improving.
_________________________________________________________________________________
_________________________________________________________________________________

Strategies:
List the actions or changes that you will take to address the focus area.
1. ______________________________________________________________________________
   ______________________________________________________________________________
   ______________________________________________________________________________

Start date:  Review date:

We tried this strategy:  Yes  No

What went well: ________________________________
What could’ve gone better: ___________________________
What else we could try: ____________________________
Put this into a new action plan? ______________________

2. ______________________________________________________________________________
   ______________________________________________________________________________
   ______________________________________________________________________________

Start date:  Review date:

We tried this strategy:  Yes  No

What went well: ________________________________
What could’ve gone better: ___________________________
What else we could try: ____________________________
Put this into a new action plan? ______________________

Action plan developed by [contact person]: ________________________________
# Nutrition policy

Name of supported accommodation provider: ________________________________

Date of policy development: ________________________________

People involved in developing the policy: ________________________________

Review date: ______________________________________________________

Policy will be reviewed by: __________________________________________

The policy will be displayed: _________________________________________

How the policy information will be shared with staff, residents and visitors: __________________

## Healthy food

Our supported accommodation service:

- ________________________________________________________________
- ________________________________________________________________
- ________________________________________________________________
- ________________________________________________________________
- ________________________________________________________________

## Resident needs

Our supported accommodation service:

- ________________________________________________________________
- ________________________________________________________________
- ________________________________________________________________
- ________________________________________________________________
- ________________________________________________________________

## Healthy environment

Our supported accommodation service:

- ________________________________________________________________
- ________________________________________________________________
- ________________________________________________________________
- ________________________________________________________________
- ________________________________________________________________

Signed: ____________________________   Signed: ____________________________

(Owner)   (Cook)

Date: / /    Date: / /
Menu self-assessment checklist

This checklist can be used as a guide to help you modify your menu to meet the Australian Dietary Guidelines (2013).

Each day we offer:

☐ two pieces of fruit per resident

☐ at least two different coloured vegetables (other than white potato) at lunch AND dinner

☐ wholegrain cereal foods, such as brown rice, wholemeal pasta and wholemeal or wholegrain bread, for at least half of the grain products

☐ low fat dairy foods such as low fat yoghurt, reduced fat cheese or low fat milk

☐ snacks that include fruits, vegetables, wholegrains and low fat dairy foods

☐ lean cuts of meat when possible, or meats trimmed of their visible fat

☐ meals that are flavoured with herbs, spices, garlic, onion or lemon juice instead of salt

We rarely offer/we limit:

☐ processed meats such as sausages, ham, bacon and luncheon meats

☐ celebration foods such as cakes, biscuits, chips and ice cream

☐ sugar-sweetened soft drinks and cordials, sports and energy drinks