Healthy Catering Guidelines
For Staff and Visitors in Healthcare Facilities
FOREWORD

As Minister for Health and Children, I am delighted to publish these Healthy Catering Guidelines, which will benefit both staff and visitors in Healthcare Facilities.

These Healthy Catering Guidelines have been developed as part of the implementation of key Departmental strategies; Building Healthier Hearts, the National Health Promotion Strategy 2000-2005 and Quality and Fairness - A Health System for You.

Unhealthy diets contribute to four of the six most important risk factors that contribute to serious diseases, including cardiovascular disease, type 2 diabetes and certain types of cancer. The four risk factors are high blood pressure, high blood cholesterol, low fruit and vegetable intake and being overweight.

Making healthy food choices easily accessible to healthcare staff and visitors can help reduce the prevalence of these risk factors and, therefore, reduce the incidence of major disease. I would like to see all Healthcare Facilities act as models of best practice and I see this initiative as a first step towards this. The next step is the development of minimum nutrition standards for patients in Acute Healthcare Facilities. These will be completed and made available later in 2004.

An assessment tool, to assist Healthcare Facilities wishing to adopt and evaluate the implementation of these guidelines, is available and will be coordinated by the Health Promoting Hospitals Network.

Caterers play an important role in facilitating staff and visitors in making healthy food choices. Together with hospital dietitians and health promotion coordinators, they can create a supportive environment for nutrition education and positive behavioural change.

I would like to thank everyone involved in developing these guidelines, particularly Community Dietitians, Hospital Dietitians, Catering Officers and all those who participated in the consultation process - your input will contribute to the successful implementation of the Guidelines.

I would encourage Catering Officers in all Healthcare Facilities to embrace, and put into practice, these Healthy Catering Guidelines to provide staff and visitors with greater opportunities to attain and sustain good health.

Micheál Martin T.D.
Minister for Health and Children
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AND HOW TO IMPLEMENT THEM

**Introduction**

Caterers in healthcare facilities play an important role in providing a variety of foods to assist their staff in making healthy food choices. They also have a role in facilitating nutrition education in collaboration with hospital dietitians and health promotion coordinators.

These guidelines are a checklist of practical, easy to implement nutrition practices which can be gradually incorporated into the existing food service.

These guidelines can be applied to all food outlets in the hospital – restaurants, coffee shops, vending machines and hospital shops.

The Healthy Catering Guidelines are the practical, catering interpretation of the Healthy Eating Guidelines. There are nine Healthy Eating Guidelines which are listed on page 7.

Each Healthy Eating Guideline is discussed and included are practical ideas for small, gradual changes in food purchasing patterns and catering practices.

Start by choosing the guideline that is most easily achievable (for example, providing more portions of fruit and vegetable choices daily) and gradually work towards implementing the catering suggestions to achieve this guideline. Then move on to the next guideline.

**Healthy Catering Working Group**

Before implementing the Healthy Catering Guidelines, you may find it useful to set up a Healthy Catering Working Group to plan and monitor the implementation of these Guidelines.

In addition to the Catering Manager and the Dietitian, members of the working group might include the following:

- A Manager, Chef, Food Purchaser, Food Service Staff Representative, Health Promotion Coordinator, Environmental Health Officer, Nurse, Union Representative or appropriate staff from other departments.

The Dietitian will have an advisory role as well as a supportive role to the Catering Manager and is an essential member of the working group.

An existing Catering Committee could form the basis for this working group.

The working group can provide valuable support, direction and ongoing motivation for the catering staff in undertaking this initiative.

Another important role for the working group could be their involvement in the development of the Food and Nutrition Policy within their Health Board, in conjunction with the Community Nutrition and Dietetic Service.

The hospital is a key health promotion arena within each Health Board and, therefore, has the opportunity to make a positive contribution towards promoting good health to its staff. Given that healthy eating is a key health behaviour, all meals and snacks in healthcare facilities should provide a healthy choice to facilitate healthy eating among staff.
THE FOOD PYRAMID

All foods can be enjoyed as part of a healthy, varied eating plan provided they are eaten in the recommended amounts. Using the Food Pyramid can help plan balanced meals (see page 5). Looking at the Food Pyramid, it is clear that most food comes from the bottom shelves, namely the bread, cereals and potato shelf and from the fruit and vegetable shelf. Smaller, but important contributions come from the milk, cheese and yogurt shelf and from the meat, fish and alternatives shelf. Foods from the small top shelf of the Food Pyramid - oils, spreadable fats, sugars, confectionery and savoury snacks can still be offered, but in limited amounts. Eating a variety of foods from the various shelves, in the amounts suggested, will provide the balance of nutrients needed each day.

**Breads, Cereals and Potatoes**

These foods form the basis of a healthy eating plan. They are high in starchy carbohydrate, low in fat, provide many essential vitamins and minerals and are filling. Wholemeal varieties of breads and wholegrain cereals provide more fibre. Fibre is important for a healthy digestive system. Offer a choice of either bread, cereals, potatoes, rice or pasta every day, at appropriate meals, to ensure staff can have the recommended **six plus servings** every day.

**Fruit and Vegetables**

Fruit and vegetables are high in fibre, vitamins and minerals. They are also low in calories and almost all are fat-free. The vitamins found in fruit and vegetables can help protect against heart disease and some cancers. Fruit makes the perfect dessert or snack food.

Try to offer a choice of two servings of fruit, fruit juice and vegetables at each meal, as appropriate, to ensure staff can have the recommended **four plus servings** every day.

**Milk, Cheese and Yogurt**

These foods provide energy, vitamins and minerals, the most important being calcium, needed for healthy bones and teeth. Offer milk, cheese and yogurt at each meal, as appropriate, to ensure staff get the **three servings** needed daily and five servings for pregnant or breastfeeding women. Low-fat varieties contain as much calcium as full-fat varieties, and can be used in cooking and offered on food service counters.

**Meat, Fish and Alternatives**

Meat, fish and alternatives (eggs, beans, peas, lentils and nuts) are a main source of protein, in addition to providing other vitamins and minerals in meals. Red meat is an important source of iron and lean choices should be offered 3-4 times per week, at main meals.

Oily fish, such as mackerel, salmon and sardines, are a good source of unsaturated fats as well as some essential fatty acids and should be eaten regularly. Fish should be offered at least twice per week (white and oily).

Vegetarian dishes which include sufficient cheese, eggs, peas, beans, lentils or nuts can provide adequate protein. (Follow the Food Pyramid on page 5 for serving sizes).

**Two servings** of meat, fish and alternatives are needed every day; these are usually served at lunch and evening meals.

**Others**

Foods from the top shelf of the Food Pyramid can be high in fat and sugar. These include spreadable fats, oils, sweets, confectionery, cakes, biscuits and high-fat savoury snack foods. It is best to offer mostly foods from the lower shelves of the Food Pyramid and only foods from the top shelf in small amounts. Where possible, offer low-fat, low-sugar alternatives. Foods cooked in oil or fat, such as fried foods and chips, are also included on the top shelf and should only be served occasionally - not more than twice per week, maximum.
WHAT IS A SERVING?

CHOOSE VERY SMALL AMOUNTS
Use oils, margarines & low-fat spreads that are labelled ‘High in Polyunsaturates’ or ‘High in Monounsaturates’ which are heart healthy. Use sparingly. Limit fried foods to not more than twice a week.

CHOOSE ANY 2
MEAT, FISH, EGGS, BEANS & PEAS
Offer lean meats or trim off fat. Offer fish at least twice a week - oily & white fish.

CHOOSE ANY 3
MILK, CHEESE & YOGURT
Offer low-fat choices frequently.

CHOOSE ANY 4+
FRUIT & VEGETABLES
Offer green leafy vegetables, orange and grapefruit and their fruit juices frequently.

CHOOSE ANY 6+
BREAD, CEREALS & POTATOES
Offer high-fibre cereals and wholemeal breads frequently.

OFFER PLENTY OF DRINKING WATER AT ALL MEALS
### WHAT’S IN A SERVING?

#### TOP SHELF
- 1 oz/30g low-fat spread
- ½ oz/15g margarine or butter
- Use oils sparingly
- Limit fried food - oven bake instead, where possible
- Offer healthy alternatives to high-fat and high-sugar snacks

#### MEAT, FISH & ALTERNATIVES
- 2 oz/60g cooked lean meat or poultry
- 3 oz/90g cooked fish
- 2 eggs (not more than 7 per week)
- 9 dessertspoons peas or beans
- 2 oz/60g cheese
- 3 oz/90g nuts

#### MEAT, CHEESE & YOGURT
- ⅓/200mls pint of milk*
- 1 carton yogurt
- Milk pudding made with ⅓ pint/200 mls pint of milk or low-fat milk
- 1 oz/30g Cheddar, Blarney or Edam
- * Offer foods made with low-fat milk regularly

#### FRUIT & VEG
- ½ glass of fruit juice (unsweetened)
- 1 medium sized fruit
- 3 dessertspoons cooked vegetables or salad
- 3 dessertspoons of cooked or tinned fruit (in unsweetened juice)
- Small bowl of homemade vegetable soup

#### BREAD, CEREAL & POTATOES
- 1 bowl of wholegrain cereal
- 1 slice of wholemeal bread
- 3 dessertspoons of pasta or rice (cooked)
- 1 medium boiled or baked potato
The following are the Healthy Eating Guidelines for the general population:

1. Eat a variety of different foods using the Food Pyramid as a guide (page 8)

2. Eat the right amount of food to be a healthy weight and include physical activity regularly (page 9)

3. Eat four or more portions of fruit and vegetables every day (page 10)

4. Eat more foods rich in starch - bread, cereals, potatoes, pasta and rice (page 12)

5. Eat more foods rich in fibre - bread and cereals (especially wholegrain), skins on potatoes, fruit and vegetables (page 13)

6. Eat fewer fats, especially saturated fats. Make lower fat choices whenever possible (page 14)

7. If you drink or eat snacks containing sugar, limit the number of times you take them throughout the day (page 16)

8. Use a variety of seasonings - try not to rely on salt to flavour foods (page 17)

9. If you drink alcohol, drink sensibly and preferably with meals (page 18)
1. EAT A VARIETY OF DIFFERENT FOODS USING THE FOOD PYRAMID AS A GUIDE

When planning menu cycles, use the Food Pyramid as a guide (see page 5). A variety of foods will help keep menu cycles interesting, whilst the Food Pyramid shows the recommended number of daily servings required for healthy eating and assists in the achievement of a healthy weight.

Recommendations for planning a varied menu:

- Devise a 3 or 4 week menu cycle to ensure variety in the menu for staff and visitors at your hospital.
- Remember to include certain key foods on a regular basis as shown on the Food Pyramid.
- Use the serving sizes table on page 6 to help control portion sizes. Remember, the 2 servings from the meat, fish and alternatives shelf can be provided by 4 oz of meat or poultry, or 6 oz of fish. Check the table for alternative protein servings for vegetarians.
- Plan the mid-day main course for each day first, then add the main course for the evening meal. Next, write in the breakfasts and then choose the appropriate desserts. Lastly, write in the accompanying vegetables.
- Keep repetition of dishes within the menu cycle to a minimum.
- Be as creative as you can within the constraints of budget, staff and kitchen equipment. A basic menu cycle, once established, needs to be revised regularly.
- Consult your staff and visitors about their favourite healthy dishes and try to incorporate some of their suggestions when planning the menu.
- Use foods in season for economy, variety and maximum nutritional value. Staff and visitors will greatly appreciate treats such as a small bowl of fresh strawberries in summertime.
2. **EAT THE RIGHT AMOUNT OF FOOD TO BE A HEALTHY WEIGHT AND BE MORE ACTIVE**

The Food Pyramid and the servings guide may also be used to provide healthy weight reducing options. To facilitate those trying to achieve or maintain a healthy weight, the following choices should also be available:

**Recommendations on eating the right amount of food:**

- Offer lean meat, fish, poultry (without skin), eggs, peas and beans. Offer fish and chicken regularly on the menu.

- Use the serving sizes table on page 6 to help control portion sizes - remember the 2 servings from the meat, fish and alternatives shelf can be provided by 4 oz meat or poultry, or 6 oz fish. Check the table for alternative protein servings for vegetarians.

- Choose a non-fat cooking method as an alternative to frying; oven-bake, grill, steam, poach, microwave or casserole. Avoid adding fat in the cooking process, where possible.

- When making sauces, choose tomato-based sauces rather than roux or cream-based sauces. If using milk or cream, use low-fat milk and lower fat cheddar cheese in sauces.

- Offer at least two choices of vegetables in addition to potato, rice or pasta. Frozen vegetables have the same nutritional content as fresh. If necessary, season vegetables lightly with some black pepper or other herbs and spices, rather than with butter or margarine or rich sauces. Offer at least one vegetable without sauce and offer sauces on the side, if possible, for vegetable dishes such as cauliflower cheese.

- Offer a wide choice of fruit and salads, both at lunch and evening meals. Offer dressings, if requested, on the side. When making coleslaw and potato salad, dress lightly with low-fat mayonnaise diluted with low-fat natural yogurt.

- Offer plain jacket potatoes (baked or boiled), or mashed potatoes, or both. When mashed potatoes are offered, avoid adding butter or margarine, instead use a little low-fat milk.

- Introduce a wide range of breads, cereals, potatoes, rice and pasta, particularly high-fibre choices which help to promote a feeling of fullness.

- Offer low-fat snack foods, such as popcorn, low-fat yogurt or fruit as a choice with other snack foods that would normally come from the top shelf of the Food Pyramid.

- Encourage regular physical activity - at least 30 minutes most days of the week - by displaying activity posters and leaflets in the hospital restaurant. Copies of the physical activity leaflet *Let it Go - Just for 30 Minutes* are available from your regional Health Promotion Department.
3. EAT FOUR OR MORE PORTIONS OF FRUIT AND VEGETABLES EVERY DAY

Fruit and vegetables are important sources of vitamins and minerals, especially A, C, E and B vitamins including folic acid. Vitamins A, C and E are antioxidant vitamins and these may help protect against heart disease and some cancers. Fruit and vegetables are also low in calories and almost all are fat-free.

Offer at least one variety of fruit at each meal and at least one portion of vegetables at mid-day and evening meal on your menu plan.

**One serving is:**

- ½ glass of fruit juice (unsweetened)
- 3 dessertspoons of cooked vegetables or salad
- Small bowl of home-made vegetable soup
- One medium-sized fresh fruit
- 3 dessertspoons of cooked or tinned fruit (preferably in unsweetened juice)

**Recommendations for increasing fruit and vegetable intake:**

- Offer fruit, fruit juice, cooked vegetables or a side salad with each meal, as appropriate.
- Offer citrus fruit juice at breakfast.
- Offer two vegetables or side salad choices with each main meal (in addition to a potato choice). Offer at least three dessertspoons of cooked vegetables at main meals.
- Choose a wide variety of vegetables, preferably fresh or frozen. Remember frozen vegetables have the same nutritional value as fresh.
- Offer vegetables without sauces added. Sauces can be available on the side, if requested.
- Introduce some salads without dressing (offer separately, if required). At least half of the salad choices should not have a dressing. Offer some low-fat salad dressings (see page 15).
- Offer all kinds of fruit - fresh, frozen, stewed and tinned. Choose fruit tinned in unsweetened juice rather than fruit tinned in syrup.
- Offer home-made soups regularly - and use liquidized vegetables to thicken soups.
- Offer fresh fruit such as an apple or a banana for a dessert option at main meals.
- Add fruit to custards and milk puddings.
- Offer dried fruit, such as prunes, apricots or a winter fruit salad. Dried fruit can also be used to sweeten desserts, for example, sultanas added to rice pudding and in savoury salads.
To preserve the quality and nutritional value of vegetables, use the following guidelines:

- Order regular supplies of perishable vegetables, as required, as quality and nutritional value are lost during storage. Frozen vegetables are as nutritious as fresh and there is little nutrient loss on storage.

- Prepare and cook vegetables as close as possible to service time, to reduce loss of Vitamins C and B (folate).

- Keep vegetables chilled. Avoid leaving to stand in water for long periods, if delays between preparation and cooking are inevitable.

- Cooking vegetables should result in a softened texture, but vegetables should not be overcooked.

- Large amounts of vegetables cooked in boiling water can lead to unevenly cooked vegetables - some being overcooked and others not sufficiently cooked.

- Divide and cook vegetables in small batches every 20-30 minutes to give best results.

- Keep lids on saucepans when boiling vegetables in order to preserve flavours.

- Avoid adding sodium bicarbonate (bicarbonate of soda) to any vegetable, as it causes excessive softening of the texture as well as additional losses of Vitamin C.

- Avoid ‘holding’ food as it causes deterioration of colour, flavour and texture as well as resulting in additional losses of Vitamins C and B (folate).
4. EAT MORE FOODS RICH IN STARCH
- BREAD, CEREALS, POTATOES, PASTA AND RICE

Starchy foods are high in carbohydrate, low in fat, provide many essential vitamins and minerals and are filling. Wholegrain and wholemeal varieties provide fibre. These foods should form the basis of each meal.

- Offer at least 2 servings of cereals, breads, potatoes, pasta or rice at each meal daily.

**One serving is:**
- One bowl of breakfast cereal
- One slice of bread
- Three dessertspoons of cooked pasta or rice
- One medium potato - boiled, baked or mashed

**Recommendations for increasing bread, cereals, potatoes, pasta and rice intake:**

- Always offer a choice of breakfast cereal, including high-fibre and low-sugar choices daily.
- Offer plain jacket potatoes (boiled or baked), mashed potatoes or a choice of both daily.
- Always offer a baked/boiled potato and/or boiled rice at main meals and tea if offering fried potatoes or chips.
- Mash potatoes with low-fat milk and avoid using fat (butter, margarine or oil).
- Introduce a wide variety of breads - wholegrain and white sliced pan, soda and wholemeal bread, crusty baguettes, brown rolls and pitta breads.
- Try home-made low-fat scones (using low-fat spread instead of full-fat spread) small muffins or fruit brack, as a tasty between meal snack or as an alternative to dessert.
- Offer pasta and rice regularly. Both are available in wholegrain or brown varieties.
5. **EAT MORE FOODS RICH IN FIBRE**
- BREAD, CEREALS (ESPECIALLY WHOLEGRAIN), POTATOES, FRUIT AND VEGETABLES

It is important to offer foods rich in fibre daily. There are two main types of fibre; soluble and insoluble fibre. Insoluble fibre, which is obtained mostly from wheat and some fruit and vegetables, may protect against some cancers. It also helps maintain proper bowel function thus preventing constipation. Soluble fibre, found mostly in oats, fruit and some vegetables may help control diabetes by slowing down the release of food into the intestine, thereby helping to keep the blood sugar level from rising rapidly. Soluble fibre may also help lower blood cholesterol.

**Recommendations for increasing fibre intake:**

- Gradually change to more wholegrain products. Choose wholegrain cereal products in baking, e.g. brown scones, stuffing and tarts.
- Use some wholemeal flour, to replace white flour, in cooking.
- Offer wholegrain or bran-type breakfast cereals more often instead of honey or sugar-coated cereals.
- Offer plenty of wholemeal and wholegrain breads.
- If offering biscuits, offer wholegrain, oatmeal or fruit containing varieties.
- Have good quality fresh fruit available at all meal times and offer fruit as snacks.
- Use more dried fruit. Try adding dried fruit to desserts or as part of a crunchy dessert topping.
- Use dry porridge oats or sugar-free muesli as a crumble topping.
- Offer a selection of vegetables and salads.
- Offer more jacket potatoes (baked or boiled), as most of the fibre is in the skin.
- Offer rice regularly and try brown rice.
- Try to mix wholemeal pasta with white.
- Introduce more peas, beans and lentils. They are high in fibre and they also contain protein. In main meals, some meat can be replaced with beans – e.g. kidney beans, with meat, in chilli-con-carne. Use tinned beans more often (e.g. kidney beans, butter beans, baked beans) for a convenient source of fibre.
A small amount of fat is essential for health and makes food more appetising. However, more fat is often eaten than is needed by the body and this is linked with a higher risk of heart disease and with overweight and obesity. Most fats and oils are a mixture of different types of fat. There are four main types of fat:

### Saturated Fats - generally are:
- Solid at room temperature
- Can increase the risk of heart disease
- Found in butter, lard, cheese, cream, meat fat, chicken skin, cakes, biscuits, pastry, processed meats (such as sausages) and many savoury snack foods like crisps

### Polyunsaturated Fats - generally are:
- Liquid at room temperature
- Can help protect against heart disease
- Found in vegetable oils such as sunflower, safflower, corn and soya oils and in soft polyunsaturated spreads made from these oils. Also found in oily fish like mackerel, sardines, salmon and trout

### Monounsaturated Fats - generally are:
- Liquid at room temperature
- Can help protect against heart disease
- Found in olive, peanut and rapeseed oils and soft monounsaturated spreads made from these oils

### Trans Fats - generally are:
- Solid at room temperature
- Can increase the risk of heart disease
- Found in processed foods which contain hydrogenated fats, or shortening, such as hard margarine - biscuits, cakes, pastry, crisps and in some cooking oils or fats

Remember all fats provide the same number of calories. Oils are 100% fat (including olive and sunflower oil) and all oils should be used sparingly. All types of fats, but especially saturated fats should be limited. The total amount of fat is important, so limit all types, but especially saturated fats.

Ireland has one of the highest heart disease rates in Europe - so it is particularly important to use cooking methods that are low in total fats, especially saturated fats.

### Cholesterol

Cholesterol is a fatty substance present in the blood which is essential for life. There are two types of cholesterol:
- Blood cholesterol - made in the body.
- Dietary cholesterol - found in the food we eat, such as eggs, liver and shellfish. However, the amount of cholesterol in these foods does not greatly affect the amount of cholesterol in your blood. Research shows that most saturated fats are converted to cholesterol in the body. The body can usually maintain a healthy level of cholesterol. However, too much saturated fat can lead to an increase in blood cholesterol, which can increase the risk of heart disease.
Recommendations to reduce fat intake:

• Use all spreadable fats sparingly. For sandwiches or bread, choose a monounsaturated or polyunsaturated variety. Using low-fat spreads in moderation can help reduce overall fat content.

• Offer mini-portions of low-fat spread and/or low-fat butter to staff or visitors, as appropriate.

• Try oven-baking or grilling foods instead of frying - use perforated trays or wire racks. Avoid shallow and deep frying foods, as a general rule.

• If you fry on occasions, use polyunsaturated or monounsaturated vegetable oil in small amounts instead of hard fats. Shallow fry in very little oil in preference to deep fat frying. Change all oils after 10 uses. Heat the pan first so that the oil will spread around more easily or use a pastry brush to lightly apply oil to cooking pans, baking trays or brat pans. Choose pure vegetable oil such as sunflower, corn, rapeseed or olive oil, where appropriate, but use it sparingly.

• Purchase lean meats and meat products with a high-meat content. Trim off all the visible fat before cooking.

• Meat products such as sausages and burgers, which may be high in fat, are best grilled or oven-baked on a perforated tray, as this reduces the fat content.

• In general, fish, poultry and lean meats are low in fat. Offer these daily. Remove skin from poultry and avoid frying or deep-fat frying.

• Limit foods coated in breadcrumbs or batter to once or twice a week - if used, oven-bake in preference to frying.

• Limit pies or pastry foods, such as sausage rolls and vol-au-vents, to once or twice a week.

• Drain all fat off foods which are baked, fried or deep-fat fried and absorb excess oil with kitchen paper.

• Prepare dishes which combine meat and pulses (peas, beans and lentils), for example, chilli-con-carne.

• Add carrot, onions, tomatoes and other vegetables to stews and casseroles.

• Season vegetables with some black pepper or other herbs and spices rather than with butter, margarine or rich sauces. Preferably offer vegetables without sauces or serve sauces separately.

• Use low-fat milk in cooking, as appropriate. This will mean having two milk dispensing machines and buying polygals of both whole or low-fat milk. Milk suppliers will often supply a dispenser free of charge. Low-fat cheese and yogurt may also be used when cooking.

• Offer low-fat milk for teas and coffees. Offer a choice of low-fat and full-fat milk as a drink.

• When possible, offer lower-fat cheeses (Edam, Blarney, reduced-fat cheddar).

• Offer low-fat or diet yogurts as alternatives to high-fat snack foods.

• Try using low-fat yogurt, low-fat fromage frais or custard made from low-fat milk as an alternative topping to cream. Offer a choice of desserts, some without a cream-based topping.

• In dishes where oil is added, use no more than a half tablespoon of pure vegetable oil per person. Use pure vegetable oil as opposed to a blended oil.

• Reduce the amount of roux-based sauces. Try thickening with cornflour, root vegetables, flour and water mix (mixed to butter consistency) or for a better quality fat-based roux, use a little pure vegetable oil - Swiss roux.
7. IF YOU DRINK OR EAT SNACKS CONTAINING SUGAR, LIMIT THE NUMBER OF TIMES YOU TAKE THEM THROUGHOUT THE DAY

Sugar, sugary foods and drinks provide calories but often few other nutrients. Sugary snacks and drinks taken frequently throughout the day are a major contributing factor to tooth decay. Where snacks are made available to staff and visitors, offer some healthy choices.

**Recommendations for low-sugar snacks and drinks:**

- Good quality fresh fruit
- Plain popcorn
- Yogurt, petit filous or low-fat fromage frais
- Wholemeal bread spread lightly with low-fat spread
- Scones
- Breakfast cereals (which are not coated in sugar or honey)
- Dry roasted nuts - not salted variety
- Unsweetened fruit juices, water and sugar-free drinks as an alternative to drinks containing sugar

Sweets, biscuits and confectionery foods are best offered only occasionally. Try baking healthier alternatives - low in sugar and low in fat.
8. USE A VARIETY OF SEASONINGS - TRY NOT TO RELY ON SALT TO FLAVOUR FOODS

Dishes which have a variety of attractive flavours and smells are most likely to tempt taste buds and stimulate appetites. The broad range of herbs and spices available today can create a variety of interesting dishes. It is best to base meals on fresh foods as much as possible. Adding salt to food and eating foods high in salt can contribute to a raised blood pressure and to heart disease.

Recommendations on seasonings:

- Use a variety of seasonings - try not to rely on salt to flavour foods. Taste foods when cooking before adding salt.

- Limit the use of seasonings which are high in salt or sodium - for example, soy sauce.

- Use black pepper more often in cooking as an alternative to salt. Offer black pepper as an option on restaurant tables.

- Try garlic, onion or ginger to add flavour to recipes.

- Use more herbs and spices to flavour recipes. Experiment with new recipes and flavours, for example - mustard, lemon juice, cumin, mixed herbs and coriander.

- When offering salted meats such as bacon or gammon, soak and refresh before cooking.

- Prepared dried soups and sauces are high in salt. Try to offer home-made, or partially home-made, soups and sauces. Use onion, garlic and herbs or spices as an alternative flavouring to salt.

- Offer a variety of healthy snack foods such as good quality fruit and snacks with a low-salt content, such as unsalted nuts or plain popcorn.

- Offer lemon wedges when serving fish, as an alternative to sauces.
9. IF YOU DRINK ALCOHOL, DRINK SENSIBLY AND PREFERABLY WITH MEALS

Alcohol is included in the Healthy Eating Guidelines because alcohol contributes energy. Alcohol contributes 7 calories per gram making it the second most dense source of calories or energy after fat (9 calories per gram). Carbohydrates and proteins contain 4 calories per gram. However, alcohol is not usually available in healthcare facilities for staff and visitors, therefore guidelines for alcohol intake are not included in these healthy catering guidelines.
# DAILY HEALTHY EATING PLAN

## BREAKFAST
- Wholegrain cereal with low-fat milk
- Wholemeal bread or toast
- Fruit juice or fresh fruit
- Tea or coffee
  (choice of low-fat or whole milk)

## MID MORNING
- Fruit or wholemeal bread
- Low-fat yogurt
- Tea or coffee
  (choice of low-fat or whole milk)

## MAIN MEAL
- Fish, chicken, lean meat or vegetarian alternatives (medium serving)
- Large serving of vegetables or salad
- Potato, rice or pasta
- Glass of milk or yogurt
- Fresh, cooked or tinned fruit in own juice or fruit juice
  - Tea or coffee or water
  (choice of low-fat or whole milk)

## MID AFTERNOON
- Fresh fruit
  - Tea or coffee
  (choice of low-fat or whole milk)

## TEA
- Cheese, egg, lean meat, poultry or fish (small serving)
- Large serving of raw or cooked vegetables
  - Wholemeal bread or roll
- Low-fat yogurt or glass of milk
- Fresh fruit or fruit juice
  - Tea or coffee
  (choice of low-fat or whole milk)

## SUPPER
- Wholemeal bread or scone
  - Tea or milky drink
  (choice of low-fat or whole milk)
HEALTHY CATERING CHECKLIST

Include as many of the following healthy options as possible on your daily menu:

• Chicken, fish or lean red meat dish (non fried - for example grilled, oven-baked, boiled, stewed or poached, with little or no fat added). If only one cooked choice is available, a non-fried choice should also be offered, for example, fried and grilled fish.

• Baked, boiled or mashed potatoes (without added fat), rice or pasta.

• Vegetables should be cooked in batches until just tender, with a fresh batch being available every 20-30 minutes.

• Plain vegetables with no fat or sauce made from fat.

• A salad selection or salad bar - offer at least half the salads without dressing.

• Wholemeal varieties of bread, rolls or pitta bread.

• Fresh fruit, fresh fruit salad, fruit plate or fruit juice.

• Yogurt, low-fat yogurt or diet yogurt.

• Low-fat milk.

• Water, mineral water, low-calorie or diet drinks.

• Mini-packs of low-fat polyunsaturated spread. Low-fat butter or low-fat dairy spread may also be offered.

• Black pepper mill and flavouring alternatives, such as lemon wedges. Salt substitutes contain some sodium.

FURTHER INFORMATION

A copy of 101 Square Meals is available to each hospital kitchen as a resource to provide ideas for planning low-cost, healthy nutritious meals. Contact your local Community Nutrition and Dietetic Service for a free copy.

Northern Area Health Board  Ph: 01 882 3400
South Western Area Health Board  Ph: 01 463 2800
East Coast Area Health Board  Ph: 01 274 4295
North Western Health Board  Ph: 071 985 2000
Midland Health Board  Ph: 044 84950
North Eastern Health Board  Ph: 046 907 6400
Southern Health Board  Ph: 021 492 1642
South Eastern Health Board  Ph: 056 776 1400
Mid Western Health Board  Ph: 061 483 215
Western Health Board  Ph: 091 548 335
ACKNOWLEDGEMENTS

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Thanks also to Katrina Ronis and Sharon Foley, who worked on the early draft of the Guidelines and to Deirdre McCann, Kathleen Lombard, Vera McManamon and Brian Brogan, Health Promotion Unit, Department of Health & Children.

The following people, departments and organisations were consulted as a first step:

• Department of Health and Children
  - Chief Medical Officer
  - Chief Dental Officer
  - Environmental Health Officer
  - Food Unit
  - Health Promotion Unit
  - Secondary Care - Hospital Services

• Catering Managers Association

• Food Safety Authority of Ireland

• Food Safety Promotion Board

• Irish Health Promoting Hospitals Network

• Irish Nutrition and Dietetic Institute

• Irish Heart Foundation

Thanks to all who reviewed various draft documents, especially Aoibheann O’Connor, Community Dietitian, South Western Area Health Board, and all of the Community Dietitian Managers.

Consultation Group

A national consultation meeting then took place in Dublin Castle to which Hospital Catering Officers, Hospital Dietitians and Community Dietitians were invited. Attendees included:

• Ms Geraldine Quinn, Food Safety Promotion Board, Abbey Court, Lower Abbey Street, Dublin 1
• Ms Margaret Fitzgerald, Food Safety Authority of Ireland, Irish Life Centre, Lower Abbey Street, Dublin 1
• Ms Siobhan McEvoy, Chief Environmental Health Officer, Department of Health and Children, Hawkins House, Hawkins Street, Dublin 2
• Mr Gerry Gavin, Chief Dental Officer, Department of Health and Children, Hawkins House, Hawkins Street, Dublin 2
• Ms Kara Mannion, Irish Nutrition and Dietetic Institute, Ashgrove House, Kill Avenue, Dun Laoghaire, Co Dublin
• Ms Clare Corish, 44 Dromartin Terrace, Goatstown, Dublin 14
• Ms Maura McGuinness, Cavan/Monaghan Hospital, Co Cavan
• Ms Yvonne Dowler, Longford/Westmeath General Hospitals, Mullingar, Co Westmeath
• Ms Mary Mulvihill, Longford/Westmeath General Hospitals, Mullingar, Co Westmeath
• Ms Pauline McNally, Louth/Meath Hospitals, Dublin Road, Dundalk, Co Louth
• Mr Declan Belton, Catering Manager, Naas General Hospital, Co Kildare
• Ms Mary O'Reilly, Ennis General Hospital, Ennis, Co Clare
• Ms Marge Young, Dietitian, St Vincent's Private Hospital, Herbert Avenue, Merrion Rd., Dublin 4
• Ms Noreen Ryan, St Luke's Hospital, Clonmel, Co Tipperary
• Ms Catherine Power, Catering Officer, National Rehabilitation Hospital, Rochestown Avenue, Dun Laoghaire, Co Dublin
• Ms Una Mulligan, Beaumont Hospital, Beaumont, Dublin 9
• Ms Mary McKiernan, Dietitian, Mater Misericordiae Hospital, Eccles Street, Dublin 7
• Ms Sally Ann McGrath, Tourism and Food, Dublin Institute of Technology, Cathal Brugha Street, Dublin 1
• Ms Helena McCarter, Merlin Park Regional Hospital, Galway
• Ms Peggy Lowry, St.Vincent's Hospital, Elm Park, Donnybrook, Dublin 4
• Ms Goretti Hayes, St John's Hospital, John's Street, Limerick
• Ms Kay McMullen, Catering Department, Beaumont Hospital, Beaumont, Dublin 9
• Ms Phil Gilmore, Roscommon County Hospital, Roscommon
• Ms Sinéad Feehan, Adelaide & Meath Hospital, Tallaght, Dublin 24
• Ms Marie Drew, Our Lady of Lourdes' Hospital, Drogheda, Co Louth
• Ms Maeve Doherty, Portiuncula Hospital, Co Galway
• Ms Máiréad Dobey, Merlin Park Regional Hospital, Galway
• Mr Paul Creuite, St Colmcille's Hospital, Loughlinstown, Co Dublin
• Ms Colette Cahill, Adelaide & Meath Hospital, Tallaght, Dublin 24
• Ms Marie Greene, Limerick Regional Hospital, Dooradoyle, Limerick
• Ms Phil O'Flaherty, Limerick Regional Hospital, Dooradoyle, Limerick
• Mr Paul Byrne, St James's Hospital, James's Street, Dublin 8
• Ms Geraldine O’Nolan, St Vincent's Private Hospital, Herbert Avenue, Merrion Rd., Dublin 4
• Mr Oliver Sheedy, Mater Misericordiae Hospital, Eccles Street, Dublin 7
• Ms Vivien Reid, Dietitian, St Vincent's Hospital, Elm Park, Donnybrook, Dublin 4
• Ms Mary O'Kian, Dietitian, St Colmcille's Hospital, Loughlinstown, Co Dublin
• Ms Janis Morrissey, Irish Heart Foundation, 4 Clyde Road, Dublin 4
• Ms Pat McFadden, Letterkenny General Hospital, Letterkenny, Co Donegal
• Mr John McArt, Catering Manager, Sligo General Hospital, Sligo
• Ms Maria Lordon-Dunphy, James Connolly Memorial Hospital, Blanchardstown, Dublin 15
• Ms Margaret Humphries, Cork University Hospital, Cork
• Ms Fiona Healy, Mayo General Hospital, Castlebar, Co Mayo
• Ms Phil Flood, St James's Hospital, James's Street, Dublin 8
• Ms Mary Giles-Connolly, Our Lady's Hospital, Navan, Co Meath
• Ms Patricia Farrell, Our Lady of Lourdes' Hospital, Drogheda, Co Louth
• Ms Máire Doherty, St Luke's Hospital, Kilkenney
• Ms Kirsten Doherty, Dietitian, St Vincent's Hospital, Elm Park, Donnybrook, Dublin 4
• Ms Helen Mahony, Limerick Regional Hospital, Dooradoyle, Limerick
• Ms Ann O'Riordan, Health Promoting Hospitals Network, James Connolly Memorial Hospital, Blanchardstown, Dublin 15
• Ms Marie Branigan, Nutritional Adviser for Older People, East Coast Area Health Board, Health Promotion Department, City Gate, St Augustine Street, Dublin 8
• Ms Clare Cornish, Consultant Dietitian