

HEALTHY FOOD ENVIRONMENT POLICY INDEX (FOOD-EPI) – AUSTRALIA 2022

New South Wales Government

Summary of current government policy action to 30 June 2021

Policy details

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Definitions

- **Food:** refers to food and non-alcoholic beverages. It excludes breastmilk or breastmilk substitutes.
- **Food environments:** the collective physical, economic, policy and socio-cultural surrounding, opportunities and conditions that influence people's food and beverage choices and nutritional status.
- **Government:** includes any government departments and, where appropriate, other agencies (i.e. statutory bodies such as offices, commissions, authorities, boards, councils, etc). Plans, strategies or actions by local government should not be included, although relevant information can be noted in the 'context/comments' sections.
- **Government implementation:** refers to the intentions and plans of the government and actions and policies implemented by the government as well as government funding for implementation of actions undertaken by non-governmental organisations, academic institutions, private companies (including consultants), etc.
- **Healthy/unhealthy food:** Categorisation of foods as healthy / unhealthy are in accordance with the Australian Dietary Guidelines (i.e. core and discretionary foods). Where it is not clear which category to use, categorisation of foods should be informed by rigorous criteria or the use of a nutrient profiling model.
- **Nutrients of concern:** salt (sodium), saturated fat, *trans* fat, added sugar
- **Policy actions:** A broad view of "policy" is taken so as to include all government policies, plans, strategies and activities. Only current policy actions are considered, generally defined as policy activity of the previous 12 months (except where otherwise specified). Evidence of policy implementation takes consideration of the whole policy cycle, from agenda-setting, through to policy development, implementation and monitoring. A broad view of relevant evidence was taken, so as to include, *inter alia*:
 - Evidence of commitments from leadership to explore policy options
 - Allocation of responsibility to an individual/team (documented in a work plan, appointment of new position)
 - Establishment of a steering committee, working group, expert panel, etc.
 - Review, audit or scoping study undertaken
 - Consultation processes undertaken
 - Evidence of a policy brief/proposal that has been put forward for consideration
 - Preparation of a regulatory or economic impact assessment, health impact assessment, etc.
 - Regulations / legislation / other published policy details
 - Monitoring data
 - Policy evaluation reports

Policy area: Food Labelling

Good practice statement for this domain: There is a regulatory system implemented by the government for consumer-oriented labelling on food packaging and menu boards in restaurants to enable consumers to easily make informed food choices and to prevent misleading claims

Indicators in this domain by level of government:

Policy area: Food labelling		
National	Federal	State/Territory
NAT_LABEL1: Ingredient lists/declarations		ST_LABEL1: Nutrition labelling in fast food outlets
NAT_LABEL2: Labelling added sugars		
NAT_LABEL3: Labelling fats and oils		
NAT_LABEL4: Regulatory system for health claims		
NAT_LABEL5: Regulatory system for nutrition content claims		
NAT_LABEL6: Front-of-pack nutrition labelling: healthiness indicator		
NAT_LABEL7: Front-of-pack nutrition labelling: health warnings		
NAT_LABEL8: Nutrition information on alcoholic beverages		
NAT_LABEL9: Nutrition labelling in fast food outlets		

Details on State/Territory-level indicators in this domain:

<p>ST_LABEL1 Nutrition labelling in fast food outlets</p>	
<p><i>Good practice statement</i></p> <p>Consistent, interpretive, evidence-informed nutrition labelling at point-of-purchase is applied by all major quick service restaurant chains, which clearly informs consumers regarding the energy content and nutrient quality of foods and meals on sale</p>	
<p>Definitions and scope</p>	<ul style="list-style-type: none"> • Quick service restaurants: In the Australian context this definition includes fast food chains as well as coffee, bakery and snack food chains. It may also include supermarkets where ready-to-eat foods are sold. • Labelling systems: Includes any point-of-sale (POS) nutrition information such as total kilojoules; percent daily intake; traffic light labelling; star rating, or specific amounts of nutrients of concern • Menu board includes menu information at various points of purchase, including in-store, drive-through and online purchasing • Includes endorsement schemes (e.g., accredited healthy choice symbol) on approved menu items
<p>Context</p>	<p>In each state where regulations apply (ACT, NSW, SA, VIC, QLD), chain food companies with a minimum number of outlets in the state/nationally and who sell standardised ready-to-eat food/drink items must display the kilojoule content of each standard menu item on all menus, drive through menu boards, tags and labels that display the name or price of menu items. The display must be clear and legible. The statement, “The average adult daily energy intake is 8700kJ,” must also be prominently featured. In these states (except Victoria), other chains/food outlets are allowed to provide this information on a voluntary basis, but must follow the provisions of the legislation. As a result, national companies will in some cases implement menu labelling changes in all of their stores across Australia (ref). However, there is the need for auditing in some jurisdictions for this to continue to be implemented consistently (ref).</p> <p><i>National Review of fast-food menu labelling schemes</i></p> <ul style="list-style-type: none"> • A review of the fast-food menu labelling schemes was conducted in 2018 and included 2 roundtable discussions with stakeholders. The summary report for this work is available at the Food Regulation website (ref). • Views on additional information and interpretative information were sought as part of the consultation. • In June 2018, the then Australian and New Zealand Ministerial Forum on Food Regulation agreed for further targeted consultation to be undertaken to develop policy options that aim to improve and strengthen fast food menu labelling in Australia. • Between October and December 2018, a co-design process was used to work with public health and industry stakeholders on possible solutions for five key issues: legibility; business coverage and equity; electronic menus; combination meals; multiple serve items. • In August 2019, the Forum agreed that nationally consistent menu labelling is desirable for food industry, public health organisations and government. The Forum agreed the most effective way would be to develop a food regulatory measure under the Food Standards Code, with the development of a Ministerial policy guideline in line with best practice regulation) as a first step. • Australian and New Zealand stakeholders were invited to respond to the Public Consultation Regulatory Impact Statement to inform the development of policy guidance and effective policy framework for consistent menu labelling (ref) (consultation opened 8 April and closed 3 June 2021).

	<ul style="list-style-type: none"> The consultation found that industry stakeholders did not believe the HSR system was appropriate for fast food. Some (but not all) public health organisations advocated that HSR could be adapted for fast food. Refer to pages 23-24 of consultation summary report (ref).
<p>Policy details (to 30 June 2021)</p>	<p>Food Act 2003 and Food Regulation 2015</p> <ul style="list-style-type: none"> In November 2010, NSW amended the Food Act 2003 and Food Regulation 2010 (replaced by Food Regulation 2015) to require fast food outlets to display average energy content information (expressed in kilojoules) at point of sale, as well as the reference statement, “The average adult daily energy intake is 8700 kJ.” Similar requirements for supermarkets selling standard menu items came into effect in February 2013. The requirements apply to food chains selling standard menu items with 20 or more outlets within NSW or 50 or more outlets nationally. Standard food items are defined as ready-to-eat foods (not pre-packaged), sold in single or multiple serves that are standardised for portion size and content, and shown on a menu (printed or electronic) or displayed with a price or label. Other food outlets that are not required by law to comply with the legislation are permitted to provide this information on a voluntary basis, but for the purpose of consistency for the consumer, must follow the requirements of the legislation. NSW Food Authority has developed a range of digital tools to support businesses to comply with the legislation. <p><i>Implementation</i></p> <ul style="list-style-type: none"> The NSW Food Authority evaluated implementation of the legislation from. Some of the key findings were (ref): <ul style="list-style-type: none"> Businesses understood and complied with the requirements. The majority of businesses implemented the requirements prior to them coming into effect. The regulations were managed and enforced by regulatory agencies through on-site compliance checks and checks of on-line ordering sites and printed material. The level of compliance was high with only minor issues identified in most cases. Consumers were more aware of daily energy intake and more able to nominate the correct average daily energy intake over the survey period. However, understanding of kilojoules did not change significantly. Consumers appeared to be purchasing fewer kilojoules with a 15% decrease in the average kilojoule value of a meal purchased over the survey period. NSW Health and NSW Food Authority are participating in the current national review of fast-food menu labelling schemes in Australia and New Zealand, which is being led by Queensland Health. The working group progressing this work includes Queensland Health, the Australian Government Department of Health, South Australia Health, Tasmania Department of Health and New Zealand Ministry of Primary Industries. <p>NSW Healthy Eating Active Living Strategy and the Premier’s Priority Childhood Overweight and Obesity Delivery Plan</p> <ul style="list-style-type: none"> NSW Healthy Eating and Active Living Strategy: Preventing overweight and obesity in NSW 2013-2018 and the Premier’s Priority Childhood Overweight and Obesity Delivery Plan are not withdrawn nor rescinded and are ongoing until replaced. These strategies outline the following actions: <ul style="list-style-type: none"> Continue to implement menu labelling legislation in fast food outlets and supermarkets.

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| | <ul style="list-style-type: none">- Support menu labelling with community engagement campaigns and enhance 8700 menu labelling tools to target children and families.- Monitor industry compliance with menu labelling legislation (monitoring framework). |
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NSW Health has successful working relationships with both industry and public health members in implementing this voluntary system. In Australia 23% [\(ref\)](#) of consumers are being influenced by the HSR to change their purchasing behaviour to select a healthier product and there is some evidence to suggest that products are being reformulated to reduce risk nutrients.

Policy area: Food Promotion

Good practice statement for this domain: There are comprehensive regulations to reduce the exposure of children (<18 years) to the promotion of unhealthy food and beverages (and related brands) across all media and in public spaces

Indicators in this domain by level of government:

Policy area: Food promotion		
National	Federal	State/Territory
	AUD_PROMO1: Restrict promotion of unhealthy foods in broadcast media	ST_PROMO1: Restrict exposure of children to promotion of unhealthy food in public settings
	AUD_PROMO2: Restrict promotion of unhealthy foods online	ST_PROMO2: Restrict the promotion of unhealthy foods within elite sport
	AUD_PROMO3: Restrict use of elements appealing to children on food packaging	
	AUD_PROMO4: Restrict the promotion of unhealthy foods within elite sport	

Details on State/Territory-level indicators in this domain:

<p>ST_PROMO1 Restrict exposure of children to promotion of unhealthy food in public settings</p>	
<p><i>Good practice statement</i> Effective policies are implemented by the government to restrict the exposure of children (including adolescents) to the promotion of unhealthy foods and beverages (and related brands) in public settings (e.g. outdoor and public transport advertising, community events)</p>	
<p>Definitions and scope</p>	<ul style="list-style-type: none"> • This indicator is about promotion (eg. advertising, sponsorship). Product availability (eg in canteens, vending machines) is covered in the FOOD PROVISION domain • Public settings include: public transport (train stations, bus stops etc), outdoor billboards, government buildings, areas in and around schools, preschools/ kindergartens, day-care centres, children’s health services (including primary care, maternal and child health or tertiary settings), community sport, recreation and play areas / venues/ facilities and cultural/community events where children (including adolescents) are commonly present • Includes fundraising and direct marketing in these settings • Includes restrictions on marketing in government-owned or managed facilities/venues (including within the service contracts where management is outsourced) • ‘Effective’ means that the policies are likely to reduce overall exposure of children (including adolescents) to promotion of unhealthy food and beverages and related brands • Excludes alcohol marketing restrictions • Excludes elite sport (covered in ST_PROMO2)
<p>Policy details (to 30 June 2021)</p>	<p><i>Education settings</i> Department of Education Sponsorship Policy</p> <ul style="list-style-type: none"> • The Department of Education combined the Sponsorship policy and Commercial Arrangements – School-based Activities policy into a single policy, the Sponsorship and Donations policy on 1 October 2021 (PD-2009-0399-01) (ref). This policy provides a set of commercial arrangement principles, which includes sponsorship. One of the principles is that commercial arrangements should align with relevant department policies and guidelines. For example, the Nutrition in Schools policy and the Healthy School Canteen Strategy. • Policy regarding advertising on the school perimeter was moved to the Sharing of School Facilities policy (PD-2009-0400-01-V02.0.0) (ref). This policy states the placement of advertising on school grounds inside the perimeter fence including classrooms or advertising that targets students is not permitted. Advertising on school digital signboards is also not permitted. Schools should ensure that all signage placed on a school perimeter complies with any relevant department policy, council or legal regulations. <p><i>Health services</i> NSW Health Sponsorships Policy</p> <ul style="list-style-type: none"> • The NSW Health Sponsorships Policy (PD2005_415) states that sponsorship arrangements within NSW Health, which extend to health services that children attend, should be considered in light of a number of principles including: Principle 2, that there should be no real or apparent conflict between the mission and objectives of NSW Health and those of the sponsor (ref).

- Sponsorship arrangements with any companies associated with the tobacco industry are prohibited. There is no explicit mention of commercial food industry sponsorship although other conflicts e.g. produce products or services that could damage health must be considered.
- Compliance with this directive is a mandatory condition for public health organisations to receive funding from NSW Health.

[National interim guide to reduce children's exposure to unhealthy food and drink promotion](#)

New South Wales has contributed to the development of a national interim guide for reducing children's exposure to unhealthy food and drink marketing. This guide was endorsed by Ministers at the August 2018 COAG Health Council meeting, noting that the guide is for voluntary use by governments ([ref](#)).

ST_PROMO2 Restrict the promotion of unhealthy foods within elite sport

Good practice statement

Effective policies are implemented by the government to ensure that professional/elite sports are not sponsored by brands associated with unhealthy foods and beverages

Definitions and scope

- This indicator is focused on promotion related to professional/elite sports only
- Sponsorship includes advertising at sporting grounds/events, naming rights of stadiums, games or series; branded merchandise, product giveaways, logos on uniforms, and exclusive sale rights of unhealthy food at events
- Excludes alcohol marketing restrictions

Policy details (to 30 June 2021)

NSW Institute of Sport (NSWIS) has commercial partnership guidelines that provide principles for who they can partner with to ensure an appropriate fit. NSWIS does not have a formal policy regarding the restriction of unhealthy foods within elite sport.

Policy area: Food Provision

Good practice statement for this domain: The government ensures that there are healthy food service policies implemented in government-funded settings to ensure that food provision encourages healthy food choices, and the government actively encourages and supports private companies to implement similar policies

Indicators in this domain by level of government:

Policy area: Food Provision		
National	Federal	State/Territory
NAT_PROV1: Healthy food policies in early childhood settings	AUD_PROV1: Healthy food policies in public sector workplaces	ST_PROV1: Healthy food policies in schools
NAT_PROV2: Healthy food policies in schools	AUD_PROV2: Support and training systems for private companies	ST_PROV2: Healthy food policies in health services (visitors and staff)
NAT_PROV3: Healthy food policies in care settings (resident/in-patient food provision)		ST_PROV3: Healthy food policies in care settings (resident/in-patient food provision)
		ST_PROV4: Healthy food policies in public sector workplaces
		ST_PROV5: Healthy food policies in community settings
		ST_PROV6: Support and training systems for public sector settings

Details on State/Territory-level indicators in this domain:

ST_PROV1 Healthy food policies in schools	
<p><i>Good practice statement</i></p> <p>The government ensures implementation of clear, consistent policies to provide and promote healthy food choices in schools, inclusive of all food service activities (canteens, food at events, fundraising, promotions, vending machines etc.)</p>	
Definitions and scope	<ul style="list-style-type: none"> • Schools include government and non-government primary and secondary schools (up to year 12) • Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices • Includes policies that relate to school breakfast programs, where the program is partly or fully funded, managed or overseen by the government • Excludes training, resources and systems that support the implementation of these policies (see ST_PROV6)
Context	<p><i>Government and non-government schools</i></p> <p>The operation of government schools is the responsibility of the relevant State/Territory Education Minister, while non-government schools (i.e. Catholic and Independent schools) are established and operate under conditions set by State/Territory government registration authorities.</p>
Policy details (to 30 June 2021)	<p>NSW Healthy Eating Active Living Strategy and the Premier’s Priority Childhood Overweight and Obesity Delivery Plan</p> <ul style="list-style-type: none"> • The NSW Healthy Eating and Active Living Strategy* and the Premier’s Priority Childhood Overweight and Obesity Delivery Plan* both commit to improving the availability of healthy food in a range of settings. New and/or enhanced areas of work relevant to this domain are: <ul style="list-style-type: none"> - Healthy physical activity and food/nutrition practices in high schools - Refresh and refine Live Life Well @ School, and Munch and Move early childhood programs in primary education and early childhood education care settings. <p><i>*The NSW Healthy Eating and Active Living Strategy 2015-2018 and the Premier’s Priority Childhood Overweight and Obesity Delivery Plan are not withdrawn nor rescinded and are ongoing until replaced.</i></p> <p><i>Early Childhood Education and Care Services</i></p> <ul style="list-style-type: none"> • Early childhood education and care services are assessed for compliance with the legislation, regulations and standards within the National Quality Framework (see ‘context’ above and the Australian Federal Government summary). Monitoring and enforcement is undertaken by the Department of Education (ref). <p><i>Department of Education Nutrition in Schools Policy</i></p> <ul style="list-style-type: none"> • All schools should promote healthy eating and good nutrition. School canteens are required to implement the NSW Healthy School Canteen Strategy (see below) that includes food and drink criteria. The Policy establishes a requirement for schools to promote and model healthy eating and good nutrition in school programs and activities (ref). • This includes the following relevant policy elements: <ul style="list-style-type: none"> - Healthy eating and good nutrition should be promoted in all school activities and programs which involve food and drinks.

- School canteens are required to implement the Healthy School Canteen Strategy. This requires school canteen menus to comprise at least three-quarters 'Everyday' foods and no more than one-quarter 'Occasional' foods. Packaged occasional foods are required to have a Health Star Rating of 3.5 or above.
- All sugar sweetened drinks as outlined in the Sugary Drinks Fact Sheet of the Healthy School Canteen Strategy are not to be sold to students.
- Where school activities involve the provision of food and drink to the wider school community, consideration should be given to promoting healthy eating.

The revised NSW Healthy School Canteen Strategy (The Strategy)

- The *Strategy* was launched in 2017 and was informed by a comprehensive evidence report and a consultation process. It is closely aligned with the Australian Dietary Guidelines concepts of core (everyday) and discretionary (occasional) foods and is complemented by the use of portion limits and the Health Star Rating System (HSR) (in place of more complex nutrition criteria) for some foods and drinks.
- All NSW government primary, secondary and central schools with canteens are required to meet the *Strategy*. The NSW Government is working closely with the Association of Independent Schools and Catholic Schools NSW, which are strongly encouraging their schools to achieve the *Strategy*.
- Extensive support mechanisms (available to both government and Independent/Catholic schools) are in place to achieve this including:
 - A Healthy Food Information Service to provide support to schools and businesses implementing the *Strategy*. This service incorporates the NSW Menu Check Service ([ref](#)) to provide free menu assessments and feedback of results and if required recommendations for schools to achieve the *Strategy*.
 - A Primary School support network, via the Health promotion teams in local health districts.
 - NSW Health partnership with a non-government organisation, Healthy Kids Association, to deliver resources and training for canteen managers, and the food industry.
 - A Healthy School Canteens website that houses information on the Healthy School Canteen Strategy for a range of audiences including canteen managers, principals and parents ([ref](#)). Including printed and online materials that provide practical advice for canteen managers.
 - An online food and drink look up tool containing around 12,000 branded and non-branded products, the NSW Health [Healthy Food Finder](#) is available for use by local teams and retailers to determine if a food or drink product is suitable for NSW school canteens.
- The NSW Government monitors each NSW Government school's achievement against the NSW Healthy School Canteen Strategy.
- The majority of government schools in NSW (95.4% at 30 June 2021, 1538 schools) have had a successful menu assessment at least once since the launch of the Strategy in 2017. Assessment is against the food and drink criteria and is undertaken by an independent organisation, results are publicly reported ([ref](#)).

ST_PROV2 Healthy food policies in health services (visitors and staff)

Good practice statement

The government ensures implementation of clear, consistent policies to provide and promote healthy food choices for visitors and staff in health service settings, inclusive of all food service activities (canteens, food at events, fundraising, promotions, vending machines etc.)

Definitions and scope

- Includes government-owned, funded health services inclusive of all food service activities (canteens, food at events, fundraising, promotions, vending machines etc.)
- Includes private businesses that are under contract by the government to provide food
- Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices
- Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier
- Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol)
- Includes modifying ingredients to make foods and drinks healthier, or changing the menu to offer healthier options

Policy details (to 30 June 2021)

The Healthy Food and Drink in NSW Health Facilities for Staff and visitors Framework (the *Framework*)

- The *Framework* ([ref](#)) replaced the previous policy (Live Life Well@health)
- NSW Health supports staff and visitors to make the healthy choice the easy choice by offering more healthy food and drink choices in its food outlets. The *Framework* was launched in June 2017, providing best-practice guidelines for NSW Health facilities to use in working towards promoting and increasing the availability of healthy food and drink options, decreasing the availability of unhealthy food and drink options including the removal of sugar-sweetened drink from sale.
- It applies to all food outlets where foods and drinks are available to staff and visitors in NSW Health facilities. Food outlets include cafes and cafeterias, kiosks and coffee carts, vending machines, convenience stores and newsagencies, other leased retail premises that sell foods or drinks, such as florists and pharmacies, and catering provided at functions, meeting and special events such as meetings with external partners or workshops.
- The *Framework* is comprised of three elements: A Food and Drink Benchmark, Local Implementation, Monitoring and Evaluation. The three elements were designed to provide clear guidance on what was required and when (i.e. phased targets) (tight), facilitate and support local flexibility to empower local implementation (loose), and state-wide annual monitoring and reporting – the ‘annual audit’ (tight).
- The Food and Drink Benchmark was informed by the evidence-base and extensive consultation. It is closely aligned with the 2013 Australian Dietary Guidelines concepts of core (everyday) and discretionary (occasional) foods, and is complemented by the use of portion limits, and the HSR (in place of more complex nutrition criteria) for applicable products ([ref](#)). The policy decisions for a cut-point of 3.5 stars ([ref](#)) and removal of sugar-sweetened drinks from sale ([ref](#)) were based on the best available evidence at the time.
- The four focus areas are based on the 4Ps of marketing (product availability, product quality, product size and marketing). Each focus area has related criteria to a) promote and increase the availability of healthy food and drink options (everyday), and b) decrease the availability of unhealthy food and drink options (occasional).

- Product availability: Everyday foods and drinks make up 75% or more of the total food and drink offering | Occasional foods and drink make up no more than 25% of the total offering AND sugar-sweetened drinks are not sold.
- Product quality: A HSR of 3.5 Stars and above applies to some Everyday foods and drinks | A HSR of 3.5 Stars and above applies to some Occasional foods and drinks.
- Product size: Portion size limits apply to some Everyday foods and drinks | Portion size limits apply to all Occasional foods and drinks.
- Marketing: Prominent locations in a food outlet, value pricing and promotional activities highlight Everyday foods and drinks | Prominent locations in a food outlet, value pricing, and promotional activities do not highlight Occasional foods and drink.

Local implementation

- The design of local implementation is based on best-practice implementation. A set of tools to support implementation included:
 - a) a NSW Health designed and developed IT system, the Population Health Intervention Management System – Nutrition (PHIMS-N) to audit food outlets, provide up-to-date food and drink information (via a web portal – the NSW Healthy Food Finder, report results, and manage information about retailers and food outlets,
 - b) training and resources,
 - c) a Healthy Food Information Service to support the *Framework* stakeholders in their implementation,
 - d) reporting and dissemination of annual audit results via a series of report cards to LHD executives, implementers and large retailers,
 - e) key communication messages, promotional materials, retail and vending contractual templates,
 - f) a network of practice to support peer-to-peer learning and provide a regular forum for LHDs to educate, learn from each other, share resources, and problem solve.
- All NSW 15 local health districts and 3 Specialty Networks carried out implementation of the *Framework*.
- NSW Health monitors the implementation of the *Framework* in food outlets by conducting a State-wide annual audit in food outlets.
- Monitoring results indicate implementation reached 927 food outlets (where food and drink practices were applicable) in 160 health facilities and impacted 76 retailers of whom 66 (87%) operated 10 or fewer food outlets (2019 data). There is evidence that health facilities throughout NSW have made strong progress towards achieving the framework goals, with some areas (such as availability of unhealthy foods) still needing improvement.
- Key results from the 2020 audit:
 - 93% of food outlets had removed sugar-sweetened drinks from sale
 - 65% of food outlets met the availability (75% healthy Everyday food/drinks) practices
 - 93% of food outlets met the quality (HSR \geq 3.5) practices
 - 91% of food outlets met the product size practices
 - 83% of food outlets met the marketing practices

ST_PROV3 Healthy food policies in care settings (resident/in-patient food provision)

Good practice statement

The government ensures implementation of clear, consistent policies to provide and promote healthy food choices in health services, aged, disability, custodial and community care settings (resident/in-patient food provision)

Definitions and scope

- Include government-funded or managed services where the government is responsible for the provision of food, including public hospitals and other in-patient health services (acute and sub-acute, including mental health services), residential care homes, aged and disability care settings, custodial care facilities, prisons and home/community care services
- Includes private businesses that are under contract by the government to provide food
- Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices
- Includes modifying ingredients to make foods and drinks healthier, or changing the menu to offer healthier options

Context

National Standards – Health services

- The Australasian Commission on Safety and Quality in Health Care (the Commission) is responsible for maintaining and implementing the National Safety and Quality Health Service (NSQHS) Standards ([ref](#)). They outline the broad, minimum standards required for accreditation; the purpose is not to prescribe the specific best practice.
- The Standards provide a nationally consistent and uniform set of measures of safety and quality for application across a wide variety of health care services. They provide a quality assurance mechanism that tests whether relevant systems are in place to ensure minimum standards of safety and quality are met.
- Action 5.27 relates to nutrition and hydration to ensure that health service organisations that admit patients overnight has systems for the preparation and distribution of food and fluids that include nutrition care plans based on current evidence and best practice ([ref](#)).
- Action 5.28 relates to nutrition and hydration to meet patients' nutritional needs and requirements; monitor the nutritional care of patients at risk; identify, and provide access to, nutritional support for patients who cannot meet either nutritional requirements with food alone; and support patients who require assistance with eating and drinking ([ref](#)).

National Standards – Aged, disability and community care services

- The Department of Health is responsible for the development of quality standards for aged care including home care, home support, flexible care and residential services. The Australian Aged Care Quality Agency is responsible for assessing aged care services against the Accreditation Standards. The Commission on Safety and Quality in Health Care (the Commission) is responsible for assessing aged care services in multipurpose sites (MPS) against the NSQHS Standards (Aged Care Module) ([ref](#)).

	<p><i>National Standards – Prison and custodial facilities</i></p> <ul style="list-style-type: none"> • Australian prisons, youth detention and custody/remand facilities are operated by the relevant State/Territory departments or bodies. The Standard Guidelines for Corrections in Australia published by the Australian Institute of Criminology (updated in 2012) and endorsed by all States and Territories were updated (2018) by the Corrective Services Administrators’ Council and released as Guiding Principles for Corrections in Australia (ref). • The Australasian Juvenile Justice Administrators ‘Juvenile Justice Standards 2009 Part 1 & 2’ (ref) have been developed to support jurisdictions to deliver services in accordance with the relevant jurisdictional legislation. These standards are broadly used by jurisdictions to monitor service quality and performance.
<p>Policy details (to 30 June 2021)</p>	<p><i>Food provision to NSW Inpatient Health Facilities.</i></p> <ul style="list-style-type: none"> • To achieve accreditation, all NSW Health Services must be able to demonstrate compliance with the National Safety and Quality Health Service (NSQHS) Standards relating to food and nutrition (Action 5.27, Action 5.28). • The menu planning and provision of food to patients in NSW Health Services is managed by experienced dietitians employed by the service in collaboration with food service providers. • In addition, the NSW Agency for Clinical Innovation (ACI) Nutrition in Hospitals Committee, under the auspices of the Nutrition and Food Committee of NSW Health, has developed a suite of Nutrition Standards (ref) for patients in NSW inpatient health facilities that align with the Australian Dietary Guidelines and Nutrient Reference Values. These standards guide the development of menu planning to ensure food provided meets nutrition requirements to support, recovery from illness, injury, or surgery. • The ACI Nutrition Standards suite is currently in the process of review with publication aimed for 2022. • The Nutrition Standards support the NSW Health framework for a strategic and coordinated approach to nutrition care for admitted patients as outlined in the Nutrition Care Policy Directive (PD2017_041) (ref) (this has been updated since the initial Policy Directive in 2011). <p><i>Prisons and custodial care</i></p> <ul style="list-style-type: none"> • NSW Corrective Services Industries (CSI) Food services is certified to the international standard ISO 9001:2015 as the model for its internal Quality Management System (QMS). In addition, CSI Food Services is HACCP (Hazard Analysis Critical Control Points) certified for the food safety program within CSI food manufacturing facilities. • Menu control planning and reviewing menus for inmate food provision is based on: <ul style="list-style-type: none"> - Australian Dietary Guidelines (2013) and focusing particularly on areas such as ‘Core Food groups’ and number of serves of core food groups - Nutrient Reference Values (2006) - Australian Guide to Healthy Eating • An external independent nutritionist review was undertaken by CSI in Oct 2020 of the CSI 4-week regular Menu Control Plan and 2-week Therapeutic Menu Control Plan. This was to assist in achieving specific targets in menu composition and to verify compliance with guidelines. The aim is to review again in 2022.

	<ul style="list-style-type: none">• Menus are reviewed regularly to address changing requirements, food acceptance, variety and updated procedures are incorporated around menu planning, menu composition, with the aim to deliver on quality, process, safety and security around meals.• NSW Healthy Prisons Framework for Action 2021-2023 is in the final draft stages. This is an initiative of Justice Health and Forensic Mental Health Network (JHFMHN).• JHFMHN <i>Network Nutrition Care Policy</i> is in development with publication aimed for 2022. The policy applies to inpatient facilities in JHFMHN.• JHFMHN <i>Policy Therapeutic Diets – Clinically Recommended</i> is under review with publication aimed for 2022.
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ST_PROV4 Healthy food policies in public sector workplaces

Good practice statement

The government ensures implementation of clear, consistent policies to provide and promote healthy food choices in public sector workplaces

Definitions and scope

- The focus of this indicator is public sector workplaces (excluding schools, hospitals, healthcare facilities etc that are covered in other indicators)
- Includes private businesses that are under contract by the government to provide food in public sector workplaces
- Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices
- Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier
- Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol)
- Includes modifying ingredients to make foods and drinks healthier, or changing the menu to offer healthier options

Policy details (to 30 June 2021)

[Get Healthy at Work \(GHaW\)](#)

- GHaW has been in operation since 2014 and is a free workplace health promotion initiative that aims to support businesses to create healthier workplace environments. The program offers free tools, resources and support to address six priority health areas including healthy eating.
- A 2018 evaluation of GHAW recommended improvements in program design and delivery in key areas including expectation management, goal setting and benefit realisation as well as tools such as knowledge sharing platforms.
- Between 1 July 2019 and 30 June 2021, 46 public sector workplaces actively participated in a plan to implement GHAW initiatives, and of those 14 public sector workplaces selected the healthy eating area for their workplace health program.

ST_PROV5 Healthy food policies in community settings

Good practice statement

The government ensures implementation of clear, consistent policies to provide and promote healthy food choices in community settings and events that are government-owned, funded or managed

Definitions and scope

- Includes food relief programs, sport and recreation facilities, parks, community events (government-owned, funded or managed)
- Excludes 'public settings' that are not funded or managed by the government
- Excludes school and early childhood settings (see ST_PROV1)
- Excludes health services (visitors and staff) (see ST_PROV2)
- Excludes in care settings (resident/in-patient food provision) (see St_PROV3)
- Excludes public sector workplaces (see (ST_PROV4)
- Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices
- Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier
- Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol)
- Includes modifying ingredients to make foods and drinks more healthy, or changing the menu to offer more healthy options

Policy details (to 30 June 2021)

Sport and recreation facilities, parks, community events (government-owned, funded or managed)

Food provision at local sporting venues is determined by local, club level decisions. There is no overarching policy regarding food provision in the sports sector.

Junior Community Sports clubs

Finish with the Right Stuff (FWRS)

- FWRS is funded by the NSW Ministry of Health ([ref](#)).
- FWRS encourages children to drink water and choose healthier food when participating in junior community sport activities.
- FWRS aims to increase the proportion of:
 - Children aged 5 to 16 years consuming water, rather than sweetened drinks, while participating in community-based sports, and
 - Community-based sport canteens providing and promoting healthy food and drink items to players and other patrons.
- Key program elements include:
 - Formal partnerships with sports codes to support promotion of the program.
 - A digital strategy with a dedicated online resource hub facilitates program delivery through a self-service digital model and social media sites (including Facebook and Instagram).
- Between October 2020 and October 2021:
 - 177 clubs and/or associations participated in the program.
 - Forty-seven per cent were from regional or rural NSW (of the clubs/associations that provided their postcode).
 - 11 sporting codes were represented.
 - Organised sport was ceased during the 2021 season due to COVID-19

ST_PROV6 Support and training systems for public sector settings

Good practice statement

The government ensures that there are good support and training systems to help schools, health services, other public sector organisations and their service providers/vendors to meet healthy food service policies and guidelines

Definitions and scope

- Includes support for schools, early childhood education services, hospitals and health settings, other public sector organisations and their service providers
- Support and training systems include guidelines, toolkits, templates (e.g. policy/guidelines or contracts), recipes and menu planning tools, expert advice, menu and product assessments, online training modules, cook/caterer/other food service staff information and training workshops or courses

Policy details (to 30 June 2021)

Healthy Food Information Service

- NSW Health has implemented a single customer-centred support service to help stakeholders including retailers, licenced canteen providers, local health districts and canteen managers to implement healthy eating policies in NSW Primary, Secondary and Central Schools (the revised Healthy School Canteen Strategy), and in NSW Health facilities (the *Framework*).
- This service will underpin the NSW Health healthy food environment policy approach and drive improvements in healthy eating-related population health outcomes.

Policy area: Food Retail

Good practice statement for this domain: The government implements policies and programs to support the availability of healthy foods and limit the availability of unhealthy foods in communities (e.g food retail outlet density and locations) and in-store (product placement)

Indicators in this domain by level of government:

Policy area: Food retail		
National	Federal	State/Territory
	AUD_RETAIL1: Remote retail store availability of healthy and unhealthy food	ST_RETAIL1: Planning policies: unhealthy food retail outlets
	AUD_RETAIL2: Availability of foods in food service outlets	ST_RETAIL2: Planning policies: healthy food retail outlets
	AUD_RETAIL3: Restriction of marketing of unhealthy food in retail outlets	ST_RETAIL3: Remote retail store availability of healthy and unhealthy foods
		ST_RETAIL4: Availability of foods in food service outlets
		ST_RETAIL5: Restriction of marketing of unhealthy food in retail outlets

Details on State/Territory-level indicators in this domain:

ST_RETAIL1 Planning policies: unhealthy food retail outlets	
<p><i>Good practice statement</i></p> <p>Planning frameworks enable the government to place limits on the density or placement of outlets selling mainly unhealthy foods by making community health and wellbeing an enforceable objective of the planning system</p>	
Definitions and scope	<ul style="list-style-type: none"> • Includes the consideration of public health in relevant Planning Acts that guide the policies, priorities and objectives to be implemented at the local government level through their planning schemes • Includes the consideration of public health in State/Territory subordinate planning instruments and policies • Includes a State/Territory guideline that sets the policy objective of considering public health when reviewing and approving food outlet planning applications • Excludes laws, policies or actions of local governments
Context	<p>National context</p> <ul style="list-style-type: none"> • In Australia, planning is a shared responsibility between state and local governments. Although there is variation in the planning policy approach, in general, state governments set overarching planning legislation and policy frameworks and standards and local governments are responsible for developing and implementing more specific municipal policies and schemes in line with these and considering planning applications.
Policy details (to 30 June 2021)	<p>There are no NSW planning policies that provide clear, explicit mechanisms for local planning provisions to place restrictions on the density or placement of retail outlets selling unhealthy foods. Attempts by local governments in NSW to place limits on the density or placement of retail outlets selling unhealthy foods are unavailable and therefore it is not possible to assess whether existing state planning frameworks and policy would be robust enough to support this.</p> <ul style="list-style-type: none"> • The NSW Government Architect’s Better Placed (ref) policy is an integrated design policy for the built environment of NSW and was released in 2017. The policy unpacks what is meant by good design. Section 1.4 – NSW priorities (page 16) states that good design can help NSW to respond to key challenges ‘...that the urban environment has a significant influence on health; a clear relation has been drawn between the built environment and chronic diseases such as overweight and obesity, type 2 diabetes and heart disease’ (NSW Health). • Better Placed describes the complex connection between health and the built environment noting that a number of interrelated factors can impact health. For example, lifestyle, community, the local economy, physical activities, and the natural and the built environment. The policy advocates that design methods and processes can help to synthesise the many factors impacting upon health and develop solutions for the built environment that incorporate cohesive, integrated and interconnected solutions to create healthier places for NSW. <p>The following information outlines some initiatives of the NSW Government that in many instances indicate a stronger focus on health as an objective of planning.</p>

Regional Growth Plans

- As part of the NSW Healthy Eating and Active Living Strategy, NSW Health has been working collaboratively with the Department of Planning and Environment to embed concepts around healthy built environments into state, regional, district and local plans. A key achievement to date has been the inclusion of key healthy built environment actions in Regional Growth Plans, District plans and local environmental planning statements.

A Plan for Growing Sydney ([ref](#))

- NSW Health played an active role in ensuring that concepts related to healthy food environments were incorporated into the Department of Planning and Environment's Regional Growth Plan for Sydney, *A Plan for Growing Sydney*, including:
 - Direction 3.3: 'Create Healthy Built Environments'. Three domains are identified to support human health including the following: *The built environment can provide equitable access to healthy food. For example: retaining peri-urban agricultural land as a source of easily accessed healthy food; and providing space for farmers' markets and community gardens.* This growth plan informs the development and application of plans for each of the six districts in Sydney ([ref](#)) (site currently under maintenance) (which in turn influence local planning instruments such as the Pittwater Local Environment Plan which includes references to health).
- The Greater Sydney Commission updated the Sydney Regional Plan in 2018 releasing the Metropolis of Three Cities ([ref](#)) that includes an overriding objective to integrate land use and transport planning and deliver three 30 minute cities.
- Strategy 7.1 of this plan is to deliver healthy, safe and inclusive places for people of all ages and abilities to support active, resilient and socially connected communities.
 - One action that can be undertaken to achieve this is the promotion of local access to healthy fresh food and support for local fresh food production (page 55).
 - Farmers' markets, eat streets, street verges and community gardens are also noted as infrastructure and services that can enable socially connected communities (page 55).
 - In reference to rural industries – agriculture and resources, the plan also states the importance of retaining, and where possible, to increase opportunities for agricultural and horticultural uses to keep fresh foods available locally (page 141).

The NSW Department of Planning Industry and Environment is in the process of updating the regional plans across NSW. The Greater Sydney Commission is also in the process of revising the Greater Sydney Region Plan: A Metropolis for Three Cities. NSW Health has the opportunity to provide input into these processes to ensure the built environment promotes access to healthy affordable food where people live.

ST_RETAIL2 Planning policies: healthy food retail outlets

Good practice statement

Zoning laws and related policies are implemented to encourage the availability of health food retail outlets (e.g those selling mainly fresh fruit and vegetables) and/or access to these outlets (e.g. opening hours, frequency)

Definitions and scope

- Healthy food retail outlets include produce markets, farmers' markets, greengrocers, food co-operatives
- Includes fixed or mobile outlets
- Excludes community gardens, edible urban or backyard gardens (usually regulated by local governments)
- Includes State/Territory policies to streamline and standardise planning approval processes or reduce regulatory burdens for these outlets
- Includes policies that support local governments to reduce license or permit requirements or fees to encourage the establishment of such outlets
- Includes the provision of financial grants or subsidies to outlets
- Excludes general guidelines on how to establishment and promote certain outlets
- Excludes laws, policies or actions of local governments

Context

- In Australia, planning is a shared responsibility between state and local governments. Although there is variation in the planning policy approach, in general, state governments set overarching planning legislation and policy frameworks and standards and local governments are responsible for developing and implementing more specific municipal policies and schemes in line with these and considering planning applications.

Farmers' markets

- In general, farmers' markets require approvals and permits from local councils, which will involve an application to assess issues such as use of public land, traffic and parking, amenities. There are ways that local governments could support the establishment and promote farmers' markets such as securing appropriate sites on a regular basis, waiving site fees, supporting the permit application processes, supporting marketing and engaging other community stakeholders.

Policy details (to 30 June 2021)

Healthy built environment

- Most regional plans in NSW recognise the need to protect important agricultural land from land use conflict to help keep fresh food available locally ([ref](#)).
- The Greater Sydney Region Plan: A Metropolis of Three Cities and the five district plans across greater Sydney include a strategy and actions to promote local access to healthy fresh food and to support local fresh food production (see ST_RETAIL1) ([ref](#)).

Healthy built environment guidelines for local government

- The Ministry of Health has collaborated with the Heart Foundation to produce a suite of resources and toolkits that support local councils to integrate healthy eating (and active living) built environment considerations into council strategic processes – NSW Healthy Built Environment resources ([ref](#)).
- The suite of resources include:
 - Liveability and Local Government (Embedding liveability within Councils' Strategic Planning Processes: A stakeholder guide ([ref](#)))
 - Promoting Liveability through the Integrated Planning and Reporting Framework ([ref](#)).

- Achieving liveability outcomes for your local community [\(ref\)](#).

The Healthy Built Environment Checklist

- The Healthy Built Environment Checklist [\(ref\)](#) was published by NSW Health in 2020. The checklist is a practical tool to help deliver the quality local environments needed for well-connected and liveable communities in NSW through engagement with planning and development processes.
- The checklist supports the capacity of health professionals and others to provide informed, health-focused advice on development policies, plans and proposals to promote healthy planning as a core component of good design and amenity of the built environment for people, places and public spaces.
- One of the 11 themes identified in the checklist for healthy development is healthy eating and includes key questions to consider in developing policy, plans or proposals supported by evidence and leading practice. For example, having a variety of healthy food outlets within 500m of a residential location can increase fruit and vegetable consumption. Other research suggests that each extra healthy food outlet within 800 metres of a home can help reduce obesity risks by 20 per cent.

The regional plans including the Greater Sydney Region Plan are currently being updated. NSW Health is working with the Department of Planning, Industry and Environment and the Greater Sydney Commission to integrate healthy built environment considerations into these plans.

ST_RETAIL3 Remote retail store availability of healthy and unhealthy foods

Good practice statement

The government ensures support systems are in place to encourage remote food stores to promote the in-store availability of healthy foods and to limit the in-store availability of unhealthy foods

Definitions and scope

- Remote food stores include supermarkets, convenience stores (including 'general stores' or 'milk bars'), greengrocers and other speciality food retail outlets in remote areas
- Support systems include guidelines, resources or expert support
- In-store promotion includes the use of key promotional sites such as end-of-aisle displays, checkouts and island bins as well as the use of shelf signage, floor decals or other promotional methods
- In-store availability includes reducing or increasing supply (volume) of a product such as reducing the amount of shelf-space dedicated to sugar-sweetened drinks and confectionary, or offering fresh produce in a convenience store

Policy details (to 30 June 2021)

The Food-EPI team were not aware of any NSW Government support systems encouraging the promotion of healthy foods and discouraging the availability of unhealthy foods in remote stores (eg. supermarkets, general stores).

With regard to retail environments in health facilities specifically, NSW has rolled out healthy food environment policy across NSW, including in rural and remote health facility cafes, kiosks, and vending machines; this work includes the removal of sugar-sweetened drinks from these settings. NSW was the first jurisdiction to achieve this at scale (see details in ST_PROV 2).

ST_RETAIL4 Availability of foods in food service outlets

Good practice statement

The government ensures support systems are in place to encourage food service outlets to increase the promotion and availability of healthy foods and to decrease the promotion and availability of unhealthy foods

Definitions and scope

- For this indicator, food service outlets include for-profit quick service restaurants, eat-in or take-away restaurants, pubs, clubs
- Support systems include guidelines, resources or expert support
- Includes settings such as train stations, venues, facilities or events frequented by the public
- Excludes settings owned or managed by the government (see ST_PROV2-ST_PROV5)
- Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier
- Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol)
- Includes modifying ingredients to make foods and drinks more healthy, or changing the menu to offer more healthy options

Policy details (to 30 June 2021)

NSW was the first jurisdiction to develop and implement menu board kilojoule labelling; NSW continues to lead in the national space as a key member of the working group developing a national approach (see ST_Label1).

[NSW provides the 8700kj App](#)

- The 8700kj App has been refreshed in 2021 and is maintained with updated data to provide users with access to kilojoule information regarding fast food choices ([ref](#)).

[Front of Pack labelling – Health Star Rating System \(HSR\)](#)

- NSW contributes significant investment, 16% of the overall HSR budget. NSW Health supports the HSR front-of-pack labelling system as an easy way to select healthier packaged food choices and has incorporated HSR into policies and programs in health facilities and schools.
- NSW has created and maintains electronic tools to support people implementing healthy food environments in schools and health facilities to determine the HSR of foods and drinks where this is not included on the label.

ST_RETAIL5 Restriction of marketing of unhealthy food in retail outlets

Good practice statement

Effective policies are implemented by the government to restrict the way unhealthy foods are marketed within supermarkets and other retail stores, including through restrictions on product placement in prominent in-store positions (such as checkouts and end-of-aisle displays), price discounts and sales to children

Definitions and scope

- Includes mandatory policy (i.e. legislation or regulations) or voluntary standards, codes, guidelines set by government or by industry where the government plays a role in development, monitoring, enforcement or resolving complaints
- Includes restriction of volume promotional offers such as multi-buys “3 for 2”, “buy-one-get-one-free” offers, extra free promotions e.g. “50% extra free” and fixed price savings on unhealthy foods
- Includes restriction of product placement of unhealthy foods, e.g. at aisle ends, checkouts, store entrances and online equivalents
- Includes the restriction of unhealthy foods promoted through in-store advertisement directed at children

Policy details (to 30 June 2021)

There is no state-led policy regarding restricting marketing of unhealthy food in supermarkets and other retail outlets, with the exception of food retail outlets in health-facilities (refer to ST_PROV2 for details of those).

INFRASTRUCTURE SUPPORT

Policy area: Leadership

Good practice statement for this domain: The political leadership ensures that there is strong support for the vision, planning, communication, implementation and evaluation of policies and actions to create healthy food environments, improve population nutrition, and reduce diet-related inequalities

Indicators in this domain by level of government:

Policy area: Leadership		
National	Federal	State/Territory
NAT_LEAD1: Government strategy for addressing nutrition and obesity	AUD_LEAD1: Political support for population nutrition	ST_LEAD1: Political support for population nutrition
NAT_LEAD2: Government taskforce dedicated to addressing nutrition and obesity	AUD_LEAD2: Population intake targets established	ST_LEAD2: Government strategy and related implementation plan for addressing nutrition and obesity
NAT_LEAD3: Comprehensive implementation plan linked to national needs	AUD_LEAD3: Evidence-based dietary guidelines implemented	

Details on State/Territory-level indicators in this domain:

<h3>ST_LEAD1 Political support for population nutrition</h3>	
<p><i>Good practice statement</i></p> <p>There is strong, visible, political support (at the Head of State/Cabinet level) for improving food environments, population nutrition, diet-related NCDs and their related inequalities</p>	
<p>Definitions and scope</p>	<ul style="list-style-type: none"> • Visible support includes statements of intent, election commitments, budget commitments, establishing priorities and targets, demonstration of support in the media • Documents that contain evidence of strong political support include media releases, speeches, pre-election policy papers, introduction of a bill, State-level strategic plans with targets or key performance indicators • Head of State is the Premier or the Chief Minister • Excludes health-specific strategic plans (covered in ST_LEAD2 below)
<p>Policy details (to 30 June 2021)</p>	<p>NSW Healthy Eating and Active Living Strategy 2013-2018</p> <ul style="list-style-type: none"> • The <i>Health Eating and Active Living Strategy 2013-2018</i> (ref) includes a forward by the Minister of Health – “The NSW Government is making a strategic coordinated investment across agencies and sectors to change environments and support individuals to achieve and maintain a healthy weight, throughout life.” • An updated NSW Healthy Eating Active Living Plan is currently in development. <p>Premier’s Priorities (2015-2019)</p> <ul style="list-style-type: none"> • In September 2015, Premier Mike Baird announced a renewal of the State’s Plan. Of 30 identified priorities, one was addressed at childhood obesity, with a target to <i>reduce overweight and obesity rates of children by 5% over 10 years.</i> • The Premier’s Priority built on the NSW Healthy Eating and Active Living Strategy to address overweight and obesity with at the time new or enhanced actions for children under four strategic directions: <ol style="list-style-type: none"> 1. Environments to support healthy eating and active living 2. State-wide healthy eating and active living support programs 3. Healthy Eating and active living advice as part of routine service delivery 4. Education and information to enable informed, healthy choices • During the period of the Premier’s Priority (2015-2019) significant progress was made in implementing evidence-based policies, programs and strategies to reduce childhood obesity through the Premier’s Priority Overweight and Obesity Delivery Plan. This has contributed to rates of childhood overweight and obesity stabilising in NSW; the prevalence of overweight and obesity in children has been relatively stable in NSW since 2009. <p>*The NSW Healthy Eating and Active Living Strategy 2015-2018 and the Overweight and Obesity Delivery Plan are not withdrawn nor rescinded and are ongoing until replaced. See ST_LEAD2.</p> <p>Premier’s Priorities (2019)</p> <ul style="list-style-type: none"> • The current Premier’s Priorities were announced in June 2019 (ref). Of the 14 identified priority areas listed below, the ones marked with an asterisk are more closely related to addressing the inequalities and social determinates of health that are generally associated with healthy food and drink choices at a population or sub-population level. For example, whilst overweight and obesity rates are high across all populations, some people are more affected, including Aboriginal populations, those who live outside major cities and lower socioeconomic groups. <ul style="list-style-type: none"> - Bumping up education results*

- Increasing the number of Aboriginal students attaining year 12 by 50% by 2023, while maintaining their cultural identity*
- Protecting our most vulnerable children
- Increasing permanency for children in out-of-home care
- Reducing domestic violence reoffending
- Reducing recidivism in the prison population
- Reducing homelessness*
- Improving service levels in hospitals
- Improving outpatient and community care
- Towards zero suicides
- Greener public spaces*
- Government made easy
- World class public service

NSW Budget commitments

- In 2020-21 the NSW Ministry of Health allocated \$33.8 million towards reducing the prevalence of overweight and obesity.

Health Star Rating system – NSW support and implementation

- NSW Health represents all Australian states and territories on the Health Star Rating Advisory Committee. The committee provides governance support to the continued implementation of the HSR system. This includes overseeing implementation of changes to the HSR Calculator, guidance materials and other outstanding changes resulting from HSR Review recommendations made in 2019.

ST_LEAD2 Government strategy and related implementation plan for addressing nutrition and obesity

Good practice statement

There is a long-term government strategy for addressing diet, nutrition, obesity and related NCDs, including prioritisation for reducing inequalities and protecting vulnerable populations. There is also a corresponding comprehensive, transparent, adequately resourced implementation plan, with annual performance and process targets, linked to state/national needs and priorities.

Definitions and scope

- The focus of this indicator is State/Territory specific strategies and plans. Federal and National strategies and plans are covered by other indicators.
- Frameworks strategies or implementation plans specify aims, objectives or targets for addressing diet, nutrition, obesity and NCDs and to reduce inequalities and protecting vulnerable populations including taking a preventive approach that addresses the social and environmental determinants of health
- Includes specific priorities for reducing inequalities for specific population groups
- Excludes priorities to reduce inequalities in secondary or tertiary prevention
- Implementation plans should be current (i.e. maintain endorsement by the current government and/or are being reported against)
- Plans should refer to actions to improve food environments (as defined in the policy domains above) and should include both policy and program strategies

Context

National Strategic Framework for Chronic Conditions

The National Strategic Framework for Chronic Conditions was published in August 2019. The framework is directed at decision and policy makers at national, state and local levels; and provides guidance for those developing and implementing policies, strategies and actions.

The Framework considers shared health determinants, risk factors and multimorbidities across a broad range of chronic conditions and provide national direction for improving chronic disease prevention and care across Australia.

The Framework moves away from a disease specific approach by recognising that there are often similar underlying principles for the prevention and management of many chronic conditions ([ref](#)).

National preventive health strategy 2021-2030

In 2019 the Australian Government announced that it would develop a National Preventive Health Strategy. The strategy aims to help Australians improve their health at all stages of life and is a 10-year long-term plan. The consultation for the draft strategy closed 19 April 2021 ([ref](#)).

This was released by the Australian Government in December 2021 ([ref](#)). It outlines the overarching, long-term approach to prevention in Australia over the next 10 years, and includes improving access to and the consumption of a healthy diet.

National obesity strategy

The Australian Government is currently working with states and territories to develop a National Obesity Strategy. Results from a national public consultation on a proposed framework and ideas to be included in a national obesity strategy report was released November 2020. A final draft strategy is due to be considered by Health Ministers in 2022 ([ref](#)).

	<p><i>Aboriginal health: Commonwealth and State Government context</i></p> <p>The Council of Australian Governments (COAG) established the National Indigenous Reform Agreement (NIRA) in 2008 and committed to a range of targets to Close The Gap in Indigenous disadvantage, including two targets specifically related to health. Underpinning NIRA are a series of national Health Plans for priority health areas including chronic disease, mental health, and social and emotional wellbeing.</p> <p><i>National Aboriginal and Torres Strait Islander Health Performance Framework report</i></p> <p>The Aboriginal and Torres Strait Islander Health Performance Framework monitors progress in Indigenous Australian health outcomes, health system performance and broader determinants of health (ref).</p> <p><i>The People of Australia – Australia’s Multicultural Policy</i></p> <p>Australia’s multicultural policy acknowledges that government services and programs must be responsive to the needs of our culturally diverse communities. It commits to an access and equity framework to ensure that the onus is on government to provide equitable services to Australians from all backgrounds. The policy aims to strengthen social cohesion through promoting belonging, respecting diversity and fostering engagement with Australian values, identity and citizenship, within the framework of Australian law (ref).</p>
<p>Policy details (to 30 June 2021)</p>	<p>NSW Healthy Eating and Active Living Strategy (HEAL) 2013-2018</p> <ul style="list-style-type: none"> • The NSW Healthy Eating and Active Living Strategy: Preventing overweight and obesity in NSW 2013-2018 is a whole of government strategy (ref). This strategy is not rescinded until replaced; an updated Plan is in development. • Objectives of HEAL include: <ul style="list-style-type: none"> - Reduce intake of energy-dense nutrient-poor food and drinks - Increase consumption of fruit and vegetables - Increase community awareness of healthy eating and physical activity as protective factors against chronic disease - Increase intake of water in preference to sugar-sweetened drinks • Strategic directions include: <ul style="list-style-type: none"> - Environments to support healthy eating and active living - State-wide healthy eating and active living support programs - Healthy eating and active living advice as part of routine service delivery - Education and information to enable informed, healthy choices (including public awareness campaigns) • Specific actions including policies and programs are outlined for each strategic direction. In the area of ‘food environments’ there are many clear, ambitious actions to increase availability and access to healthy food with multiple partners identified to support the action. • The Strategy specifies priority populations: • <i>Within NSW, there are sub-populations that warrant particular attention given their high prevalence of inadequate physical activity, unhealthy eating and higher than average rates of overweight and obesity. The NSW Government is committed to ensuring the needs of those most at risk of chronic disease are addressed by specific actions in this Strategy. These priority populations include but are not limited to the following:</i> <ul style="list-style-type: none"> - <i>Aboriginal communities;</i> - <i>Culturally and Linguistically Diverse communities;</i> - <i>Regional and remote communities; and</i>

- *Socio-economically disadvantaged communities.*

- NSW remains committed to prevention and an updated Healthy Eating Active Living Plan is in development which will form the NSW implementation approach to the National Obesity Strategy. Recommendations will be developed to align all HEAL programs to ensure they align with the NSW implementation approach and that programs align with the NSW Health vision and strategic framework.
- Policies and services to reduce childhood and stabilise adult overweight and obesity related to healthy eating will continue to include:
 - Reduce intake of unhealthy (discretionary) foods and drinks
 - Increase consumption of vegetables and fruit
 - Increase access to information and services to support behaviour change to reduce chronic disease
 - Increase water intake in preference to sugar-sweetened drinks

NSW Aboriginal Health Plan 2013-2023

- The NSW Government has developed the NSW Aboriginal Health Plan 2013-2023 in partnership with the Aboriginal Health and Medical Research Council of NSW. This high-level strategic framework articulates six key strategic directions to improve the health of Aboriginal people in NSW. It acknowledges the importance of addressing the social determinants of health and includes a commitment to reduce overweight and obesity ([ref](#)).

Example: Aboriginal communities

- The NSW government currently funds a number of targeted programs to reduce inequalities including:
 - 'Knockout Health Challenge' – a community led program which brings together Aboriginal culture and communities to improve health. The Challenge aims to engage Aboriginal communities to target nutrition, physical activity and obesity over a 10-week challenge.
 - The Go4Fun program is available to all children aged 7-13 years above a healthy weight and their families; a culturally appropriate Aboriginal Go4Fun program is available for Aboriginal families.

NSW Health vision and strategic framework (NSW Future Health Strategy 2021-2031)

- A sustainable health system that delivers outcomes that matters to patients and the community, is personalised, invests in wellness and is digitally enabled. Investing to keep people healthy to prevent ill health and tackle health inequality in our communities is an important component of a draft strategic framework to future proof the NSW health system to meet the needs of the NSW community over the next decade.
- Key focus areas as part of keeping people healthy and tackling health inequality include the first 2000 days, support for healthy ageing, prioritising programs for Aboriginal people, support for mental health and wellbeing, partnering to address the social determinants of ill health in the community, and initiatives related to the pandemic.
- This framework is under development and will be released in the coming months.

NSW Physical Activity Strategy

NSW Health indicated that the NSW Physical Activity Strategy was currently under development.

The First 2000 Days Framework

- The First 2000 Days Framework (PD2019-008) ([ref](#)) is a strategic Policy Document which outlines the importance of the first 2000 days in a child's life (from conception to age 5 years) and what action people within the NSW health System need to take to ensure that all children have the best possible start in life.
- Local health districts and Speciality Health Networks must ensure local implementation and annually report progress to the Ministry. Healthy lifestyles and nutrition are one component of the First 2000 Days Framework.

Brighter Beginnings – the first 2000 days of life

- NSW Government is committed to giving every child in NSW the best start in life.
- NSW is achieving this through a) building understanding of the importance of the first 2000 days of a child's life for health, wellbeing, education and life outcomes, b) connecting services and support across government to provide a seamless experience for families, and c) providing easy access to timely information and services for parents and carers as they make choices for their child ([ref](#)).

NSW Premier's Priorities

- The priorities represent the government's commitment to making a significant difference to enhance the quality of life for the people of NSW ([ref](#)).

NSW Implementation Plan for 2021-2022 for Closing the Gap

- The NSW Implementation Plan for 2021-2022 for Closing the Gap ([ref](#)) outlines NSW actions to achieve the July 2020 National Agreement's Priority Reforms on Closing the Gap ([ref](#)). There are five priority reforms and 17 socio-economic targets.
- Actions to Close the Gap in life expectancy within a generation, by 2031 ([ref](#)) include targeted initiatives for Aboriginal and Torres Strait Islander children, families and adults to reduce the prevalence of obesity, and prevention of childhood obesity.
- Centre for Population programs are: the NSW Knockout Health Challenge, the Get Healthy Service, Munch & Move, Live Life Well @ School, and Go4Fun (page 84).

NSW Aboriginal Health Partnership Agreement 2015-2025

- The Agreement ([ref](#)) reflects the ongoing commitment of the NSW Government through the Health portfolio to work in partnership with the Aboriginal Health & Medical Research Council of New South Wales as the peak Aboriginal health organisation in NSW representing the non-government, Aboriginal Community Controlled Health Services sector.

The NSW Plan for Healthy Culturally and Linguistically Diverse Communities 2019-2023

- This is the strategic statewide policy (PD2019-018) for meeting the health needs of culturally and linguistically diverse communities for the next five years. The Plan aims to ensure people of culturally and linguistically diverse backgrounds have equitable access to the health care services that are culturally responsive, safe and high quality.
- The Plan serves as the NSW Health multicultural plan under the NSW Multicultural Policies and Services Program ([ref](#)).

Policy area: Governance

Good practice statement for this domain: Governments have structures in place to ensure transparency and accountability, and encourage broad community participation and inclusion when formulating and implementing policies and actions to create healthy food environments, improve population nutrition, and reduce diet-related inequalities

Indicators in this domain by level of government:

Policy area: Governance		
National	Federal	State/Territory
	AUD_GOVER1: Restricting commercial influence on policy development	ST_GOVER1: Restricting commercial influence on policy development
	AUD_GOVER2: Transparency in the development of food and nutrition policies	ST_GOVER2: Transparency in the development of food and nutrition policies
	AUD_GOVER3: Assessing the potential health impacts of all policies	ST_GOVER3: Assessing the potential health impacts of all policies
	AUD_GOVER4: Government workforce to support public health nutrition	ST_GOVER4: Government workforce to support public health nutrition
	AUD_GOVER5: Independent health promotion agency	ST_GOVER5: Independent health promotion agency

Details on State/Territory-level indicators in this domain:

ST_GOVER1 Restricting commercial influence on policy development	
<p><i>Good practice statement</i></p> <p>There are robust procedures to restrict commercial influences (where they have conflicts of interest with improving population nutrition) on the development of policies related to food environments</p>	
Definitions and scope	<ul style="list-style-type: none"> • Includes government policies, guidelines, codes of conduct or other mechanisms to guide actions and decision-making by government employees, for example conflict of interest declaration procedures • Includes procedures to manage partnerships with private companies or peak bodies representing industries that are consulted for the purpose of developing policy, for example committee procedural guidelines or terms of reference • Includes publicly available, up-to-date lobbyist registers that specify the lobbying activities
Context	<p><i>National regulation reform</i></p> <p>In 2012, the then Council of Australian Governments* (COAG) agreed to a new regulatory and competition reform agenda: <i>National Compact on Regulatory and Competition Reform: Productivity Enhancing Reforms for a More Competitive Australia</i> (the Compact). The Compact builds on previous COAG agreements such as 1995 National Competition Policy and the 2006 National Reform Agenda. One aspect of this reform agenda was that all governments will establish processes to undertake best-practice regulation impact assessment to demonstrate that the benefits of regulations outweigh the costs, including having regard to the differential impact and experience of regulation on businesses (ref).</p> <p>*As of 2020 the COAG Health Council is now known as the Health Council (HC) (ref).</p>
Policy details (to 30 June 2021)	<p>NSW Government Sector Employment Act 2013 (ref)</p> <p>Part 2 of the NSW Government Sector Employment Act 2013 outlines the Ethical Framework for the Government Sector, including the Government Sector Core Values, which would apply to all public sector employees and would need to be considered in the context of conflicts of interest that have the potential to arise. One of these core values is: <i>Place the public interest over personal interest.</i></p> <p><i>Public Sector conflicts of interest policies and guidelines</i></p> <ul style="list-style-type: none"> • There are a number of general guidelines and factsheets that provide information and advice on identifying and managing actual or potential conflicts of interest in the public sector. For example: <ul style="list-style-type: none"> - The Public Service Commission has developed ‘Behaving Ethically: A guide for NSW government sector employees’ is a package of resources designed to help government sector employees better understand the obligation to act ethically and in the public interest (ref). - The NSW Government have established the Independent Commission Against Corruption (ICAC) which has a function to educate the NSW community and public. They have developed a factsheet on identifying and managing potential conflicts of interest (ref). • Government Departments and Agencies may also develop their own internal policies, such as the NSW Health Code of Conduct (PD2015-049) (ref) and NSW Health Conflicts of Interest and Gifts and Benefits policy directive (PD2015-045) (ref). • These policies are built into governance processes of committees.

Register of lobbyists

- The Lobbying of Government Officials Act 2011 No 5 establishes the NSW Electoral Commission (NSWEC) as the independent regulator of lobbyists; applies a set of ethical standards to all third-party lobbyists and other individuals and organisations that lobby Government; and enables the NSWEC to investigate alleged breaches and impose sanctions, which could result in lobbying firms being removed from the register and other organisations being placed on a watch list ([ref](#)).
- The Register of Third-Party Lobbyists is a public document that contains information about registered third-party lobbyist including the names and business details of the lobbyist, employees and those with management or financial interests, and clients of the lobbyist ([ref](#)).
- All lobbyists that lobby Government officials must comply with the requirements of the Lobbying of Government Officials (Lobbyists Code of Conduct) Regulation 2014 (current version for 1 July 2019) ([ref](#)).
- Ethical standards of conduct apply to all lobbyists, which includes lobbyists seeking a meeting to lobby NSW Government officials must disclose to the officials before the meeting the nature of the matter to be discussed. Lobbyists must disclose if they are third-party lobbyists and identify their clients. To our knowledge, lobbyists are not required to log and make public their contact with government or opposition representatives.

Declaration of political donations

- Persons and entities that make political donations in New South Wales have obligations under the *Election Funding, Expenditure and Disclosures Act 1981* (the Act). The NSW Electoral Commission (NSWEC) regulates and administers the funding and disclosure laws. Only people on the electoral roll, entities with a business number, or those whose identification has been accepted by the NSWEC can lawfully make political donations.
- A major political donor (donations of \$1,000 or more) made to a NSW political party, elected member, group, candidate, third-party campaigner or associated entity is required to lodge a disclosure within the annual disclosure period (1 July to 30 June).
- Political donations in the form of cash over \$100 were made unlawful from 1 Jan 2020 ([ref](#)).
- Political parties and other electoral participants must disclose political donations every six months ([ref](#)). The NSWEC publishes disclosures of political donations online, retains them for six years and may conduct a compliance audit.
- The commercial food industry is not one of the types of 'prohibited donors' (property developers and liquor, gambling and tobacco industry business entities).

ST_GOVER2 Transparency in the development of food and nutrition policies

Good practice statement

Policies and procedures are implemented for ensuring transparency in the development of food and nutrition policies

Definitions and scope

- Includes policies or procedures to guide the online publishing of private sector and civil society submissions to government around the development of policy and subsequent government response to these
- Includes policies or procedures that guide the use of consultation in the development of food and nutrition policy
- Includes policies or procedures to guide the online publishing of relevant scoping papers, draft and final policies

Context

National regulation reform

In 2012, the Council of Australian Governments* (COAG) agreed to a new regulatory and competition reform agenda: *National Compact on Regulatory and Competition Reform: Productivity Enhancing Reforms for a More Competitive Australia* (the Compact). The Compact builds on previous COAG agreements such as 1995 National Competition Policy and the 2006 National Reform Agenda. One aspect of this reform agenda was that all governments will establish processes to undertake best-practice regulation impact assessment to demonstrate that the benefits of regulations outweigh the costs, including having regard to the differential impact and experience of regulation on businesses ([ref](#)).

Government Information (Public Access) Act 2009 (GIPA Act) ([ref](#))

The GIPA Act (current version as of 27 March 2021) established a more open approach to gaining access to government information in NSW, and it applies to all NSW government agencies. Under the GIPA Act it is compulsory for agencies to provide information about their structure, functions and policies. Agencies are encouraged to proactively and informally release as much other information as possible. The Information and Privacy Commission NSW (IPC) oversee the GIPA Act.

The guiding principle of the GIPA Act is public interest. It is generally presumed that all government agencies will disclose or release information, unless there is an overriding public interest against doing so. There is a general public interest consideration in favour of disclosure except where there is an overriding public interest against disclosure (see Schedule 1) and excluded information of particular agencies (see Schedule 2) ([ref](#)).

*As of 2020 the COAG Health Council is now known as the Health Council (HC) ([ref](#)).

Policy details (to 30 June 2021)

[NSW Government Guide to Better Regulation](#)

- NSW has developed processes for the assessment of new policy or amendments to existing policy, outlined in the 'NSW Government Guide to Better Regulation' (Jan 2019), which states that: *'The Government is committed to consulting on all regulatory proposals. Consultation should be applied at all relevant stages of the regulatory development process'* (page 18) ([ref](#)).

[Consultancy policy](#)

- The NSW Government has developed a 'Consultation Policy' to guide this process. This policy states that: *'The Government has made a commitment to adequate and timely consultation on all regulatory proposals, in a manner which is proportionate to their significance and to the degree of stakeholder interest'* (page 4) ([ref](#)).
- The consultation policy outlines processes for consulting with the community such as identifying stakeholders, preparing discussion papers, online submission processes, hosting public forums and small group consultations, etc.

Example – 8700 menu labelling

- Guided by the Consultation Policy, wide and ongoing consultation was undertaken to develop and implement the 8700 Menu Labelling strategy. A stakeholder forum was held initially to consult with the quick service restaurant (QSR) industry, public health professionals and consumer stakeholders about how best to provide consumers with information to help them make informed choices; following this a Labelling Reference Group was set up to advise on a model and education initiatives.
- A Better Regulation Statement was prepared outlining options against the principles, and wide consultation was undertaken with sectors of industry affected. Once menu labelling was legislated, the Reference Group was made ongoing, performing an advisory and consultative role during the implementation, consumer education, and review and evaluation phases of the Menu Labelling initiative.
- The Reference Group has been on-hold while the national menu labelling program of work unfolds. As this develops, the Reference Group will be important to sense-check stakeholder views on the direction and impacts on the future direction of the NSW strategy.

ST_GOVER3 Assessing the potential health impacts of all policies

Good practice statement

There are processes (e.g. health impact assessments) to assess and consider health impacts during the development of policies that affect the healthiness of food environments and/or diet, nutrition, obesity and NCDs

Definitions and scope

- Includes policies, procedures, guidelines, tools and other resources that affect the healthiness of food environments and/or diet, nutrition, obesity and NCDs during and following implementation of all policies
- Includes the establishment of cross-department governance and coordination structures while developing policies with food-related outcomes
- Includes workforce training and other capacity building activities in healthy public policy for non-health departments (e.g. agriculture, education, communications, trade)
- Includes monitoring or reporting requirements related to health impacts for non-health departments

Context

National regulation reform

In 2012, the Council of Australian Governments* (COAG) agreed to a new regulatory and competition reform agenda: *National Compact on Regulatory and Competition Reform: Productivity Enhancing Reforms for a More Competitive Australia* (the Compact). The Compact builds on previous COAG agreements such as 1995 National Competition Policy and the 2006 National Reform Agenda. One aspect of this reform agenda was that all governments must establish processes to undertake best-practice regulation impact assessment to demonstrate that the benefits of regulations outweigh the costs, including having regard to the differential impact and experience of regulation on businesses ([ref](#)). In other words, the objective of a new or amended policy proposed must not restrict competition unless there are net benefits to the community as a whole.

*As of 2020 the COAG Health Council is now known as the Health Council (HC) ([ref](#)).

Policy details (to 30 June 2021)

NSW Government Guide to Better Regulation ([ref](#))

- It is a legislative requirement that all new and amending regulatory proposals submitted for the approval of Cabinet or the Executive Council must demonstrate the application of the Better Regulation principles. For significant proposals a Better Regulation Statement is required and must be submitted with the Cabinet Submission or Executive Council Submission. Although Portfolio Ministers are responsible for determining whether a regulatory proposal is significant, guidance for determining this includes the impact on individuals, the community, or sector(s) of the community, business (including significant compliance costs), material restriction on competition or a significant administrative cost to government.
- Better Regulation principles include.
 - The need for government action should be established, government action should only occur where it is in the public interest, that is, where the benefits outweigh the costs.
 - The objective of government action should be made clear.
 - The impact of government action should be properly understood, by considering the costs and benefits of a range of options, including non-regulatory options.
 - Government action should be effective and proportional.
 - Consultation with business, and the community, should inform regulatory development.
 - The simplification, repeal, reform, modernisation or consolidation of existing regulation should be considered.
 - Regulation should be periodically reviewed, and if necessary reformed, to ensure its continued efficiency and effectiveness.

- Government intervention may be justified to achieve social [or environmental] objectives that would not be achieved by the market, for example public health (page 10).
- The assessment of costs and benefits can include compliance costs, economic impacts, environmental impacts and social impacts. Social impacts include the quality of life, ensuring public health and safety, equity and achieving community norms (page 13).
- The NSW Guide to Better Regulation (the Guide) was updated in Jan 2019 to reflect the change in the role, and responsibility, of NSW Treasury in maintaining and monitoring, compliance with the Guide. The purpose of the Guide is to assist agencies to develop regulation, which is required, reasonable and responsive to the economic, social and environmental needs of NSW.

Health impacts during the development of policies that affect the healthiness of food environments

- See ST_Retail1 Planning policies: unhealthy food retail outlets for details of the Environmental Planning and Assessment Amendment Act 2017 No 60 ([ref](#)); NSW Better Placed policy ([ref](#)); detail on the inclusion of healthy build environment actions in Regional Growth Plans, District plans and local environmental planning statements; A Plan for Growing Sydney ([ref](#)); and, the Sydney regional Plan ([ref](#)).
- See ST_Retail2 Planning policies: healthy food retail outlets for details of Healthy built environment guidelines for local government, and the Healthy Built Environment Checklist ([ref](#)).

ST_GOVER4 Government workforce to support public health nutrition

Good practice statement

The capacity (number of staff and their capabilities) of the government's public health nutrition workforce is commensurate with the size of the food and nutrition problems of the population and government resources for health

Definitions and scope

- Estimate of the size (i.e. number of full time equivalent (FTE) persons employed) of the government's population nutrition workforce
- The workforce comprises anyone whose primary role relates to public health nutrition and who is employed full time, part time or casually by the government to perform a public health nutrition-related role. The position may be in the Department of Health, independent statutory authority/agency, other government agency/department.
- 'Public health nutrition' includes promotion of healthy eating, and policies and programs that support healthy food environments for the prevention of obesity and diet-related NCDs. The definition **excludes** all one-on-one and group-based promotion (primary care, antenatal services, maternal and child nursing services etc.), food safety, micronutrient deficiencies (e.g. folic acid fortification) and undernutrition

Policy details (to 30 June 2021)

2019/2021 Workforce to support prevention strategies

- As of January 2020, an estimated 70 FTE worked in roles to support healthy communities of which many programs had a healthy eating component. Of the 70 FTE, 8.0 were in Food Policy.
- These figures include staff working on HEAL policies and programs. They exclude Health Promotion Staff working in local health districts who implement the policies and programs, and clinical or community staff that may be supporting overweight and obesity treatment.
- There are a number of levels of organisation within NSW Health alone to consider in the FTE resource estimate:
 - NSW Ministry of Health – Centre for Population Health – policy and programs
 - Local health districts – there are 15 of these and each has a Population Health Director, a Health Promotion Director or Manager and a health promotion team of varying size. Important to note that these positions work across overweight and obesity prevention (both food and physical activity) but also tobacco control and falls prevention.
- In 2020/2021 the NSW Ministry of Health allocated \$33.8 million towards reducing the prevalence of overweight and obesity.
- NSW Health continues to lead a multi-agency approach to tackling obesity in children, families and adults.
- The NSW Government approach to supporting Healthy Eating (and Active Living) is comprehensive.
 - Programs are delivered at scale to meet state and local needs.
 - Program monitoring evaluates the impact of services to adapt and respond to community needs.
 - Food (and physical activity environments) are being changed to support people to make healthier choices.

	<ul style="list-style-type: none">- An increasing role for clinicians is being established, including training and engaging with health professionals to provide advice for families with children above a healthy weight.- Social marketing strategies support community behaviour change.
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ST_GOVER5 Independent health promotion agency

Good practice statement

There is a statutory health promotion agency in place that includes an objective to improve population nutrition, with a secure funding stream

Definitions and scope

- The focus of this indicator is on whether there is a health promotion agency established through legislation that includes an objective to improve population nutrition (as specified in relevant legislation, strategic plans or on the agency website)
- Secure funding stream involves the use of a hypothecated tax or other source of funding that can be considered relatively secure

Policy details (to 30 June 2021)

There is no statutory health promotion agency in NSW.

Policy area: Monitoring & Intelligence

Good practice statement for this domain: The government's monitoring and intelligence systems (surveillance, evaluation, research and reporting) are comprehensive and regular enough to assess the status of food environments, population nutrition and diet-related NCDs and their inequalities, and to measure progress on achieving the goals of nutrition and health plans

Indicators in this domain by level of government:

Policy area: Monitoring and intelligence		
National	Federal	State/Territory
	AUD_MONIT1: Monitoring food environments	ST_MONIT1: Monitoring population nutrition intake
	AUD_MONIT2: Monitoring population nutrition intake	ST_MONIT2: Monitoring population body weight
	AUD_MONIT3: Monitoring population body weight	ST_MONIT3: Evaluation of major nutrition-related programs and policies
	AUD_MONIT4: Evaluation of major nutrition-related programs and policies	ST_MONIT4: Research funding for obesity and NCD prevention
	AUD_MONIT5: Research funding for obesity and NCD prevention	

Details on State/Territory-level indicators in this domain:

ST_MONIT1 Monitoring population nutrition intake	
<p><i>Good practice statement</i></p> <p>There is regular monitoring of adult and childhood nutrition status and population intakes against specified intake targets or recommended daily intake levels</p>	
Definitions and scope	<ul style="list-style-type: none"> • Includes monitoring of adult and child intake in line with the Australian Dietary Guidelines • Includes monitoring of adult and child intake of nutrients of concern and non-core/discretionary foods including sugar-sweetened beverages (even if there are no clear intake targets for all of these) • 'Regular' is considered to be every five years or more frequently
Context	<p><i>National data sources</i></p> <p>With funding from the Federal Government, the Australian Bureau of Statistics conducts nationwide National Health Surveys every 3 years, and data from these surveys is available at the State/Territory level. See the Australian Federal Government summary for more information.</p>
Policy details (to 30 June 2021)	<p><i>NSW Population Health Surveys</i></p> <ul style="list-style-type: none"> • The NSW Adult Health Survey and Child Health Survey are collected through telephone surveys of about 15,000 people from all over NSW (ref). • This survey is conducted annually and captures information regarding regular consumption of fruits and vegetables, water, and sugar-sweetened drinks such as soft drink, cordials, sports drinks, energy drinks or iced teas. <p><i>NSW School Students Health Behaviours Survey</i></p> <ul style="list-style-type: none"> • The NSW School Students Health Behaviours Survey is conducted in NSW schools every 3 years to provide information about the health behaviours and attitudes of secondary school students (ref). • This survey captures information on daily intakes of fruit and vegetables, cereals, fast food, soft drink, milk, and water. <p><i>NSW Schools Physical Activity and Nutrition Survey (SPANS)</i></p> <ul style="list-style-type: none"> • The NSW SPANS was conducted in 2010 and was repeated in 2015 (ref). The 2015 iteration of SPANS surveyed a representative sample of 7,556 NSW school students in Years K, 2, 4, 6, 8 and 10. • The survey assesses food consumption including usual daily intake of: Fruit, vegetables, red meat, processed meat, milk, water, fruit juice, soft drinks, sports drinks, energy drinks, fried potato products, potato crisps and salty snacks, snack foods such as sweet and savoury biscuits, cakes, doughnuts or muesli bars, confectionery, ice-cream or ice blocks • The survey also assesses a range of food-related behaviours. <p><i>Interactive data tools</i></p> <ul style="list-style-type: none"> • NSW Health provides new interactive data tools for easier search and retrieval on key nutrition indicators (Ref). Key groupings include: <ul style="list-style-type: none"> - Fruit and vegetables: adequate consumption in secondary school students - Fruit and vegetables: number of serves consumed daily by adults - Fruit and vegetables: number of serves consumed daily by children - Fruit and vegetables: recommended daily consumption by adults

	<ul style="list-style-type: none">- Fruit and vegetables: recommended daily consumption by children- Infant feeding at discharge by type of feeding• Within each fruit and vegetable grouping there are several views, including sex, year, trends, and stacked trends. Views of infant feeding include NSW, trends, maternal country of birth group and year, and mother's Aboriginality, Local Health District year, and trends.
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ST_MONIT2 Monitoring population body weight

Good practice statement

There is regular monitoring of adult and childhood overweight and obesity prevalence using anthropometric measurements

Definitions and scope

- Anthropometric measurements include height, weight and waist circumference
- 'Regular' is considered to be every five years or more frequently

Context

With funding from the Federal Government, the Australian Bureau of Statistics conducts nationwide National Health Surveys every 3 years, and data from these surveys is available at the State/Territory level. Since 2007-08, the National Health Survey has included measured height and weight data for all ages.

Policy details (to 30 June 2021)

NSW Population Health Surveys

- The NSW Adult Health Survey and Child Health Survey ([ref](#)), are collected through telephone surveys of about 15,000 people from all over NSW. This survey is conducted annually. Adult and child rates of overweight and obesity are monitored through self-reported height, weight and waist circumference ([ref](#)).

NSW School Students Health Behaviours

- The NSW School Students Health Behaviours Survey is conducted in NSW schools every 3 years and monitors secondary school students' rates of overweight and obesity through self-reported height and weight ([ref](#)).

NSW Schools Physical Activity and Nutrition Survey (SPANS)

- The NSW SPANS was conducted in 2004, 2010 and 2015. Each iteration surveys a representative sample of approximately 8,000 NSW school students in Years K, 2, 4, 6, 8 and 10, including measuring their height, weight and waist circumference ([ref](#)).

Routine height and weight measurement

- NSW Health is implementing routine growth assessment for all children (0-16 years) who attend a NSW Health facility (inpatient, outpatient, community based health services and oral health clinics). This initiative aims to improve identification and management of children above a healthy weight ([ref](#)). This initiative is supported by:
 - The Nutrition Care Policy Directive, the Growth Assessment in Children and Weight Status Assessment in Adults guideline and the Growth Assessment and Dietary Advice in Public Oral Health Services guideline which all provide clear and consistent direction from NSW Health to services.
 - A Key Performance Indicator and target in Ministry of Health local health district/Specialty Health Network Service Performance Agreements set a clear expectation of performance.
 - Electronic health record data extracts are used for benchmarking and performance monitoring.
 - A suite of resources and training for clinicians is available with a dedicated website Healthy Kids for Professionals ([ref](#)).
 - A community of practice where clinical leaders, researchers and policymakers collaborate to support implementation and sustainability.

Online height and weight measurement tools for adults, children and teenagers

- NSW Health has a Body Mass Index (BMI) online calculator for adults to work out their BMI ([ref](#)) and provides supporting information.

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| | <ul style="list-style-type: none">• NSW Health also has an online Healthy weight calculator for children and teenagers from 2 years through to 18 years of age (ref) to provide guidance if a child is a healthy weight for their age and height, and which also provides supporting information. |
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ST_MONIT3 Evaluation of major nutrition-related programmes and policies

Good practice statement

Major nutrition-related programs and policies are regularly evaluated to assess their effectiveness and contributions to achieving the goals of the nutrition and health plans

Definitions and scope

- Includes any policies, guidelines, frameworks or tools that are used to determine the depth and type (method and reporting) of evaluation required
- Includes a comprehensive evaluation framework and plan that aligns with the key preventive health or nutrition implementation plan
- The definition of a major programs and policies is to be defined by the relevant government department
- Evaluation should be in addition to routine monitoring of progress against a project plan or program logic

Policy details (to 30 June 2021)

NSW Government Program Evaluation Guidelines

- NSW Government Program Evaluation Guidelines were published in January 2016 and provide comprehensive guidance on best practice principles to undertake program evaluations. The Guidelines explore different types of evaluation and when they are suitable, how to integrate evaluation into the program cycle, how to plan for, commission and manage and evaluation and how to utilise the findings to inform decision-making ([ref](#)).
- The NSW Government provides a range of resources and links to information to support evaluation processes on the 'Evaluation in the NSW Government' website ([ref](#)).

NSW Evaluation Toolkit

- The NSW Evaluation Toolkit provides advice and resources and outlines in detail seven steps for planning and conducting a program evaluation. It has been designed to support managers who are commissioning or managing an evaluation ([ref](#)).

Centre for program evaluation

- The [Centre for Program Evaluation](#) has been established in NSW Treasury to conduct methodologically rigorous evaluations of large and significant NSW Government programs (including process, outcome and economic components), to lead evaluation practice across NSW, and to support the NSW Government Evaluation Community of Practice ([ref](#)).

Examples of program evaluations

- The NSW Ministry of Health has conducted or commissioned evaluations of several programs. Examples of evaluations include:
 - Kilojoule menu labelling initiative ([ref](#))
 - NSW Get Healthy Information and Coaching Service. The first five years 2009 – 2013. NSW Ministry of Health & Prevention Research Collaboration: University of Sydney ([ref](#))
 - Good for Kids, Good for Life ([ref](#))
 - Munch & Move ([ref](#))
 - Live Life Well @School ([ref](#)).
 - Finish with the right stuff: program report 2014-2019 ([ref](#))

- Healthy Food and Drink in NSW Health Facilities for Staff and Visitors Framework. A comprehensive evaluation framework has been established in accordance with the NSW Government Program Evaluation Guidelines. The *Framework* evaluation was a two-year program of work that included the assessment of policy development, implementation process and impact. The Evaluation report is in progress and is expected to be finalised this year; interim results are being used to inform the ongoing implementation approach.

Monitoring Healthy Food and Drink in NSW Health Facilities for Staff and Visitors (*Framework*) implementation

- NSW Health developed an IT system to monitor implementation of the Framework in NSW Health facilities. The system, PHIMS-Nutrition, provides an easy to use and standardised approach for local health districts to monitor the progress their retailers have made towards implementation of the Framework.
- Monitoring is undertaken against the achievement of a set of key practices which are illustrative of the four Food and Drink Benchmark focus areas: availability, product quality, product size and marketing.
- The pandemic meant that the 2021 audit was conducted in a sample of food outlets across the state. Until 2021 the annual audit was state-wide and involved monitoring all applicable food outlets in NSW Health.

The results for each local health district are summarised. Report cards are provided to Executive and implementation staff in local health districts to share with their teams and local retailers. Report cards for large retailers who operate food outlets across local health districts are discussed as part of a large retailer engagement strategy.

Local implementation staff can use PHIMS-Nutrition between the annual audits (i.e. on an ad-hoc basis) to monitor local implementation in selected food outlets as part of continuous improvement.

See also ST_PROV2 and ST_RETAIL5

Monitoring Healthy School Canteen implementation (*The Strategy*)

The NSW Government monitors each NSW Government school's achievement against the *Strategy*. All eligible schools are required to submit their menu for assessment every two-years. Assessment is against the food and drink criteria and is undertaken by an independent organisation. On achievement of the menu check, canteens are given a menu check certificate that they can display in their canteen. Aggregated results are also reported on the Food Environment dashboard ([ref](#)).

See also ST_PROV1 and ST_RETAIL5

ST_MONIT4 Research funding for obesity & NCD prevention

Good practice statement

Government funded research is targeted for improving food environments, reducing obesity, NCDs and their related inequalities

Definitions and scope

- Includes the clear identification of research priorities related to improving food environments, reducing obesity, NCDs and their related inequalities in health or medical research strategies or frameworks
- Includes identifying research projects conducted or commissioned by the government specifically targeting food environments, prevention of obesity or NCDs (excluding secondary or tertiary prevention)
- It is limited to research projects committed to or conducted within the last **three years**
- Excludes research grants administered by the government (including statutory agencies) to a research group where the allocation of a pool of funding was determined by an independent review panel
- Excludes routine evaluation of interventions that can be expected to be included as part of an intervention program budget (this is explored in ST_MONIT3)

Policy details (to 30 June 2021)

The Australian Prevention Partnership Centre

- The NSW Ministry of Health provides funding for The Australian Prevention Partnership Centre until 2023. The Australian Prevention Partnership Centre is a national collaboration of researchers, policy makers and practitioners who are working together to identify new ways of understanding what works and what doesn't to prevent lifestyle-related chronic health problems in Australia. The priority areas of the Prevention Centre are the main lifestyle-related determinants of chronic disease risk including diet.

NSW Health's Population Health Research Strategy (2018-2022)

- NSW Health's Population Health Research Strategy (2018-2022) provides a framework for the effective generation and use of population health research across NSW Health ([ref](#)).
- The four objectives of the Strategy are to:
 - support research that is relevant to population health policy and practice in NSW
 - improve the quality of population health research
 - increase the use of research evidence in population health policies and practice
 - strengthen population health research capability across NSW Health
- Investments in population health research include investments in research assets, priority research centres (e.g. PANORG), competitive funding schemes, collaborative research (e.g. the Australian Prevention Partnership Centre, core funding for research organisations (e.g. the Sax Institute) and commissioned research and evaluation (see list above).

Commissioned research includes:

- A rapid evidence review with a focus on obesity prevention in children and adolescents, published by the Physical Activity, Nutrition and Obesity Research Group (PANORG) at Sydney University in 2016 ([ref](#)). PANORG then published an update to the rapid evidence review in 2020 ([ref](#)).
- A rapid evidence review of barriers and enablers to the implementation of policies to increase the availability of healthy food and drinks, published by PANORG in 2019 ([ref](#)).

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| | <ul style="list-style-type: none">• The Ministry of Health commissioned The George Institute to undertake research looking at the alignment of the Health Star Rating with state-based healthy food provision policies and the Australian Dietary Guidelines (ref). |
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Policy area: Support for Communities

Good practice statement for this domain: The government provides coordinated support mechanisms and resources for community-based interventions to create healthy food environments, improved population nutrition, reductions in obesity, diet-related NCDs and their related inequalities

Indicators in this domain by level of government:

Policy area: Support for communities		
National	Federal	State/Territory
NAT_COMM1: Coordinated support for multi-faceted community-based interventions	AUD_COMM1: Implementation of social marketing campaigns	ST_COMM1: Coordinated support for multi-faceted community-based interventions
NAT_COMM2: Food and nutrition in education curricula		ST_COMM2: Implementation of social marketing campaigns
		ST_COMM3: Food and nutrition in education curricula

Details on State/Territory-level indicators in this domain:

<p>ST_COMM1 Coordinated support for multi-faceted community-based interventions</p>	
<p><i>Good practice statement</i></p> <p>The government has put in place mechanisms to provide broad and coordinated support for creating and maintaining healthy food environments at the community level across multiple settings</p>	
<p>Definitions and scope</p>	<ul style="list-style-type: none"> • Community settings include workplaces, sporting clubs, recreation centres and groups (e.g. art, music, dance and drama; scouts and guides), youth groups, cultural and religious community groups, community centres and neighbourhood houses, service clubs, men’s sheds, community groups involved in gardens or sustainable living, community markets and events, church and other nongovernment groups who provide support to others • Includes comprehensive and flexible resources, guidelines and frameworks, expertise and workforce training to support implementation of community-based interventions • Includes the establishment of workforce networks for collaboration, shared learning and support across settings • Includes recognition or award-based programs to encourage implementation • Excludes specific support for healthy food provision in schools, hospitals and other government settings (this is covered in the Food Provision and Food Retail domains) • Excludes the implementation of programs that focus on one-on-one or group-based nutrition education or health promotion
<p>Policy details (to 30 June 2021)</p>	<p><i>NSW Centre for Population Health</i></p> <ul style="list-style-type: none"> • The NSW Centre for Population Health in the NSW Ministry of Health, reporting to the NSW Chief Health Officer includes two branches that work together to manage and deliver Healthy Eating and Active Living policy and programs – Population Health Strategic Programs (policy) Branch and Prevention Programs Branch. • The objectives of the program delivery teams in the two Branches are to: <ul style="list-style-type: none"> - Manage the planning, implementation, support and evaluation of priority state-wide preventive health programs. - Report on outcomes of NSW priority-funded preventive health programs, including economic analyses. - Facilitate preventive health research and knowledge translation into policy and practice. - Support the NSW Local Health District-based health promotion workforce to deliver key state-wide preventive health programs. - Provide high level evidence-based advice to the Ministry of Health on matters relating to delivery of preventive health programs and strategies. • The major components reach into education, workplace and community settings. The overarching areas for community-based intervention include: <ul style="list-style-type: none"> - Programs across a range of children’s settings, including early childhood education, primary and secondary schools and junior sports. - A program of work to support children and families above a healthy weight (Healthy Kids for Professionals and Go4Fun) - Get Healthy Information and Coaching Service, a free telephone- based coaching service to help individuals achieve and maintain a healthy weight; including new programs with a priority population focus, the Get Healthy in Pregnancy and Aboriginal Get Healthy programs. - Programs for older adults, including active and healthy ageing and falls prevention programs (ref).

Data and Evaluation team

- The Data and Evaluation team works across the branches to support new and innovative projects and ensure systems and mechanisms to evaluate programs are in place, and outcomes reported and disseminated.

Advisory Committee

- An external Advisory Committee provides strategic advice to the Centre for Population Health. This includes representation from local health districts, Universities and the NSW Health Promotion Leadership Group.
- The Advisory Committee is currently under review and will be reconvened. A primary purpose of the committee will be to guide the future direction of Centre for Population Health programs.

Secondary schools

- A secondary schools whole-of-school healthy eating active living program is in development and being codesigned by the Centre for Population Health (NSW Ministry of Health) and NSW Department of Education.
- The NSW Healthy School Canteen Strategy covers both Primary, Secondary and Central public schools, and targeted support for implementation in Secondary schools has been provided over the past four years to increase reach to over 95% of all public schools.

Out of School Hours care (OOSH)

- The NSW Health Healthy Eating active Living website includes ([ref](#)) the Eat Smart Play Smart manual which supports services to meet the National Quality Standards that relate to healthy eating and physical activity, training modules based on the manual and four brief videos showing recipe preparation in an Out of School Hours Care Centre.

Young people / children

- Young People's Active Travel initiative ([ref](#)) Children's Active Travel for primary schools ([ref](#)) includes the NSW Active Travel Charter for Children which identifies the many health, social and environmental benefits of children's active travel and strategies to increase children's active travel, it includes resources and support to encourage active travel.

Aboriginal Go4Fun program

- Aboriginal Go4Fun ([ref](#)) was developed in partnership with Aboriginal communities and is delivered by local Aboriginal organisations together with NSW Health. The program encourages the whole community to join in and it's run by qualified health and community professionals including Aboriginal support staff and includes traditional Indigenous games and tailored resources. Aboriginal Go4Fun takes place after school once a week for ten weeks, during school terms.

Healthy and Active for Life Online

- Healthy and Active for Life Online ([ref](#)) is a free program for adults in NSW who are aged 60 years and older (and also supports Aboriginal people aged 45 years and older). The program supports older adults to be more active and make healthier choices around food and drink.
- The Active and Healthy website ([ref](#)) helps older adults find an exercise program in their local area and provides information and tools that can assist them to increase physical activity.

Front of Pack labelling – Health Star Rating System (HSR)

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| | <ul style="list-style-type: none">• NSW contributes significant investment, 16% of the overall HSR budget. NSW Health supports the HSR front-of-pack labelling system as an easy way to select healthier packaged food choices and has incorporated HSR into policies and programs in health facilities and schools. NSW has created and maintains electronic tools to support people implementing healthy food environments in schools and health facilities to determine the HSR of foods and drinks where this is not included on the label. |
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ST_COMM2 Implementation of social marketing campaigns

Good practice statement

The government implements evidence-informed public awareness, informational and social marketing campaigns across a range of broadcast and non-broadcast media to promote healthy eating

Definitions and scope

- Includes television, radio, news media, web-based (including websites and social media), billboards and posters, etc (see examples in the Food promotion domain)
- Evidence-informed includes the use of peer-reviewed literature in the design and implementation of the campaign, the use of an existing successful campaign that has been evaluated, or the co-design and testing of campaign messages with the target audience(s)
- Includes campaigns that focus on promoting the intake of specific foods (e.g. fruit and vegetables, water), reducing intake of nutrients of concern, or supporting the public to make healthy choices (e.g. use of front-of-pack nutrition labels)
- Includes campaigns that are embedded within and complemented by broader policies and programs

Policy details (to 30 June 2021)

- The NSW Government provides evidence based social marketing activities to foster healthy eating and active living among the people of NSW.
- Evidence-informed communications may involve the use of peer-reviewed literature in the design and implementation of a social marketing campaign, the use of an existing successful campaign that has been evaluated, or the co-design and testing of campaign messages with the target audience(s), in line with the current Premier's Priority on Customer Service. NSW Health utilises a range of social marketing and communications activities to foster people's awareness of the benefits of healthy eating and active living and their adoption of these behaviours.
- Social marketing and communications activities may include messaging that focuses on promoting the intake of specific foods (e.g. fruit and vegetables, water), reducing intake of nutrients of concern, or supporting the public to make healthy choices (e.g. use of front-of-pack nutrition labels)

8700 app

- The 8700 app ([ref](#)) is supported by NSW Health to promote NSW menu labelling laws by helping consumers understand how to interpret kilojoule information on packaged products and ready-to-eat meals to help them maintain a healthy weight and balance energy intake with physical activity.
- The 8700kj App has been refreshed in 2021 and is maintained with updated data to provide users with access to kilojoule information regarding fast food choices ([ref](#)). This initiative continues to support consumers to identify low kilojoule choices.

Healthy Eating and Active Living ([ref](#))

- The Healthy Eating and Active Living website provides current, evidence-based information about healthy eating and active living to the people of NSW. Customer awareness of the website is supported by ongoing social media output that delivers inclusive, accessible healthy eating and active living messaging.

ST_COMM3 Food and nutrition in education curricula

Good practice statement

The government provides guidance and support to educators for the inclusion of food and nutrition curricula for preschool, primary and secondary school children

Definitions and scope

- Includes food and nutrition as a priority/focus area of the curriculum as a stand-alone component or embedded within other curriculum areas
- Includes the provision of training, resources, guidelines or expert support to educators to support them in educating students
- Includes government-funded education programs on healthy eating or growing and preparing food (e.g. kitchen garden programs)
- Includes government-supported programs that encourage healthy eating in the education setting (e.g. fruit and vegetable snack and water breaks)

Context

National Curriculum

Australia transitioned to a new national curriculum in 2015. The national curriculum is currently undergoing a review which is due to be completed by the end of 2021 with a revised Australian Curriculum to be released in 2022 ([ref](#)). The national curriculum incorporates food and nutrition as a focus area within the Health and Physical Education and Science and Technology Learning Areas. The Australian Curriculum Assessment and Reporting Authority is responsible for the development of the national curriculum and national assessment of student progress.

Policy details (to 30 June 2021)

Live Life Well @ School

- The Live Life Well @ School program is a joint initiative of the NSW Health, Centre for Population Health and the NSW Department of Education, Catholic Schools NSW and the Association of Independent Schools of NSW to increase the support for 'whole of school' physical activity and nutrition initiatives in NSW primary schools ([ref](#)).
- The program provides professional learning for teachers, delivered by the Department of Education and the Association of Independent Schools of NSW with support from Local Health Districts to support improve the knowledge and confidence of teachers in teaching nutrition and movement as part of the NSW K to 6 Personal Development, Health and Physical Education (PDHPE) Curriculum.
- Local health districts provide ongoing support to Live Life Well @ School via site visits, phone calls and email follow ups, and provide teachers with resources to support integration of health education in the curriculum, as well as providing small funding grants to schools.
- 83% of NSW primary schools have participated in training with 73% of schools adopting eight of the 11 program practices.

Secondary schools

- A secondary schools whole-of-school healthy eating active living program is in development and being codesigned by the Centre for Population Health (NSW Ministry of Health) and NSW Department of Education.
- The NSW Healthy School Canteen Strategy covers both Primary, Secondary and Central public schools, and targeted support for implementation in Secondary schools has been provided over the past four years to increase reach to over 95% of all public schools