



...because health matters!

Nutrition Matters

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Workplace Healthy Eating Blues

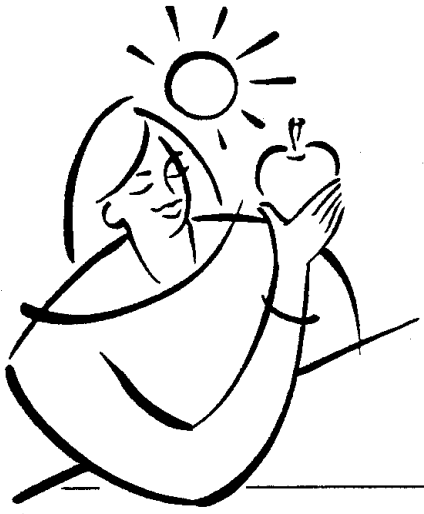
Under workplace pressures, good nutrition often gets thrown overboard. Many people skip lunch and work on through until their head aches and their vision blurs. This is no way to spend a productive afternoon. Get in the habit of taking time out for lunch.

If you do eat lunch and have food at break, how frequently do you reach for coffee, soda pop, pastries, candy bars, fast food burgers and vending machine fare? Such foods offer quick energy - a sugar blast in many cases - but often end in a slump an hour later - sending you back for another fix. A break or meal should do more than that for you. But in reality, how well does your workplace support you in making healthy food choices for maximum productivity and well-being?

To answer this question, ask yourself the following questions:

Workplace Healthy Eating Report Card

1. Does your workplace provide a clean place to sit and eat your lunch or take breaks?
2. Does your workplace provide a fridge where portable meals can be stored safely?
3. Do you have access to a microwave for heating up leftovers?
4. At meetings are small whole grain muffins, bagels, scones, tea biscuits, yogurt, fresh fruit, juice, milk or water served? To assist you in planning your catering needs, scroll down to the Healthy Choices Catering Form.
5. Are healthy choices available in the vending machines/catering trucks? These choices include juice, water, club soda, milk, pretzels, sandwiches, soup, fruit, yogurt, whole grain breads and crackers, trail mix, sunflower seeds, cheese, rice cakes.
6. If you have a cafeteria are healthy food choices available on a regular basis? These choices may include: broiled, baked, steamed, boiled, poached or stir-fried meals, pasta in vegetable sauces, vegetable soups, sandwiches made with lean meats, whole grain bread and lots of vegetables, yogurt, fresh fruit, salad dressings on the side.
7. If you eat at your work stations do you munch on fresh fruit and vegetables, whole grain crackers or rice cakes?
8. Does your workplace have a policy or guidelines about supporting healthy eating?



Healthy Choices Catering Form

Make healthy eating a part of your meeting! Use this form to help you give your meeting guests food and beverage choices they'll thank you for. Heart healthier choices are identified by the heart shaped check boxes (♥).



Select healthy choices at least 50% of the time. Try to include at least one healthy choice in each category.

Function/Event/Meeting: _____

Meeting Date: _____

Delivery Pick-up Time: _____

Location: _____

Meeting Room: _____

Contact Name: _____

Phone: _____

Number of People Attending: _____

Confirmation Date: _____

Caterer: _____

Contact Phone Number: _____

Price Quoted: _____

Purchase Order Number:

Are there any known food allergies or dietary restrictions (fish, peanuts, vegetarian, kosher, diabetic, etc.)?

Yes No Unknown

If yes, specify:

(Ask caterer to provide list of ingredients.)

Plates, cups, bowls, cutlery, serviettes to be provided by:

Caterer Meeting Host

SANDWICHES

Sandwiches for _____

Ask for:

- | | |
|--|---------------------------------------|
| <input checked="" type="checkbox"/> Whole Wheat | <input type="checkbox"/> White Bread |
| <input checked="" type="checkbox"/> Whole Grain Bagels | <input type="checkbox"/> Other Bagels |
| <input checked="" type="checkbox"/> Whole Wheat Pita | |

VEGETABLE TRAY

Ask for:

Dip made with low fat sour cream/yogurt

DESSERTS & SNACKS

Ask for:

- | | |
|--|----------------------------------|
| <input checked="" type="checkbox"/> Fruit tray | <input type="checkbox"/> Squares |
| <input checked="" type="checkbox"/> Granola Bars (lower fat) | <input type="checkbox"/> Cookies |
| <input checked="" type="checkbox"/> Muffins (lower fat) | <input type="checkbox"/> Cake |
| <input checked="" type="checkbox"/> Yogurt (2% M.F. or less) | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Cheese & Cracker tray | _____ |

See page 2 for a complete list of foods and catering information if needed.

If you did not answer yes to the questions that pertain to your work situation and would like help to encourage your workplace to adopt these healthy eating supports please call the Peterborough County-City Health Unit and ask to speak to a public health nutritionist.

If question 7 is the only one your workplace does not comply with here is a template to help your workplace develop a Healthy Eating policy or guidelines.

TEMPLATE

Policy: Workplace Healthy Eating and Safe Food Handling Practices

 (Workplace Name) supports safe food handling practices and healthy eating, including healthy food choices, in the workplace for its members, employees, guests and community partners at meetings, workshops and events and from vending machines.

Procedure: Workplace Healthy Eating and Safe Food Handling Practices

Objective

To ensure healthy eating and safe food handling practices at all functions where food and beverage are served.

Procedure

1. The following principles are to be taken into account in the planning and delivery of activities where food and beverages are served:
 - healthy eating is based on Canada's Guidelines for Healthy Eating and Canada's Food Guide to Healthy Eating and the belief that all foods can be part of a healthy diet;
 - high standards of food preparation and food service ensures safe foods;
 - recycling and minimizing waste from food, food packaging, and disposable utensils supports a healthy environment;
 - selecting locally or provincially produced products supports the food and agricultural industries; and
 - the best responsible price that supports healthy eating.
2. Nutritious and safe food and beverage choices will be provided where food and beverages are served at work-related meetings, workshops and events.
3. Food and beverage choices that support Canada's Guidelines for Healthy eating shall be available in vending machines.
4. Staff will inquire about special dietary requirements or restrictions in advance for all meetings, workshops or events, so appropriate arrangements can be made for all participants. Choices are to include fresh fruit as an alternative dessert and fruit juice, milk, water and/or decaffeinated coffee as alternatives to coffee and pop.
5. If necessary, Public Health Nutritionists and Public Health Inspectors can provide consultation on food arrangements.

Healthy Choices Catering Form

SALADS	# Servings
<input type="checkbox"/> Tossed salad	<input type="checkbox"/>
<input type="checkbox"/> Dressing on the side	<input type="checkbox"/>
<input type="checkbox"/> Low-fat dressing	<input type="checkbox"/>
<input type="checkbox"/> Vegetable tray	<input type="checkbox"/>
<input type="checkbox"/> Dips made with low-fat yogurt/sour cream	<input type="checkbox"/>
<input type="checkbox"/> Dips made with sour cream	<input type="checkbox"/>
<input type="checkbox"/> Relish tray	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>
<hr/>	
MAIN DISHES/ENTREES	# Servings
<input type="checkbox"/> Vegetarian Lasagna	<input type="checkbox"/>
<input type="checkbox"/> Meat Lasagna	<input type="checkbox"/>
<input type="checkbox"/> Pasta with Tomato Sauce	<input type="checkbox"/>
<input type="checkbox"/> Pasta with Cream Sauce	<input type="checkbox"/>
Other _____	<input type="checkbox"/>
Total Main Dishes	<input type="checkbox"/>
<hr/>	
EXTRA ITEMS	# Servings
_____	<input type="checkbox"/>
_____	<input type="checkbox"/>
_____	<input type="checkbox"/>
_____	<input type="checkbox"/>

SOUPS	# Servings
<input type="checkbox"/> Broth-style Soups (eg. chicken noodle, beef barley, tomato)	<input type="checkbox"/>
<input type="checkbox"/> Cream-style Soups (eg. cream of mushroom)	<input type="checkbox"/>
Total Soups	<input type="checkbox"/>
<hr/>	
BEVERAGES	# Servings
<input type="checkbox"/> Ice Water	<input type="checkbox"/>
<input type="checkbox"/> Milk (2% M.F. or less)	<input type="checkbox"/>
<input type="checkbox"/> Chocolate Milk (2% M.F. or less)	<input type="checkbox"/>
<input type="checkbox"/> Juice (100%)	
<input type="checkbox"/> Individual bottles	<input type="checkbox"/>
<input type="checkbox"/> Large bottles	<input type="checkbox"/>
<input type="checkbox"/> Pop	<input type="checkbox"/>
<input type="checkbox"/> Diet Pop	<input type="checkbox"/>
<input type="checkbox"/> Coffee	<input type="checkbox"/>
<input type="checkbox"/> Decaf	<input type="checkbox"/>
<input type="checkbox"/> Tea	<input type="checkbox"/>
<input type="checkbox"/> Herbal Tea	<input type="checkbox"/>
Total Beverages	<input type="checkbox"/>
<hr/>	
<input type="checkbox"/> Creamers	<input type="checkbox"/>
<input type="checkbox"/> Milkettes	<input type="checkbox"/>
<input type="checkbox"/> Sugar	<input type="checkbox"/>
<input type="checkbox"/> Sweetener	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>