Healthy Food Partnership Reformulation Program: Implementation Plan

October 2020

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| 2 | E19-184399 | Adjusted dates for Wave 2 |

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# The Healthy Food Partnership Reformulation Program

In late 2015, the Australian Government established the Healthy Food Partnership (Partnership) with the aim of improving the dietary habits of Australians by making healthier food choices easier and more accessible, and by raising awareness of appropriate food choices and portion sizes.

The Partnership provides a mechanism for government, the public health sector and the food industry to cooperatively tackle obesity, encourage healthy eating and empower food manufacturers to make positive changes. The scope of work within the Partnership comprises several policy areas that consider portion size, food reformulation, food service environments and education. Initiatives under the Partnership are voluntary in nature.

The Partnership Reformulation Program (PRP) is supported by other initiatives, including the Australian Dietary Guidelines (ADGs), the Health Star Rating (HSR) system and nutrition labelling, which enable consumers to make healthy choices when purchasing and consuming food.

The Partnership is part of a wider public health program in Australia that aims to reduce risk factors for chronic disease.

The PRP builds upon current and previous work undertaken by the food industry in Australia and takes into consideration global examples of reformulation targets to assist in gauging technical feasibility. The reformulation targets apply to 80 percent of the product category by sales volume, with businesses to show effort towards reformulating the remaining 20 percent of products.

The PRP is voluntary and provides sodium, saturated fat and sugar targets for food categories that companies can work towards over a four year period. The PRP Program commenced in 2020 with the introduction of voluntary reformulation targets for 27 categories/subcategories. In 2021, the program was expanded to include a further 14 categories/subcategories. A link to the targets is available [here](https://www1.health.gov.au/internet/main/publishing.nsf/Content/reformulation-targets).

For further information on the development of the Partnership Reformulation Program and the rationale for food reformulation, see [The Evidence Informing the Approach, Draft Targets and Modelling Outcomes](https://www1.health.gov.au/internet/main/publishing.nsf/Content/reformulation-further-information).

# How the Implementation Plan should be used

This implementation plan will detail the actions the Department of Health (the Department) will take in order to successfully implement the PRP. This includes stakeholder engagement, risk management strategies – including guiding principles for reformulation, monitoring and reporting framework, and considerations for evaluation.

Responsibility for the implementation of the PRP rests with the Department.

## **Implementation guiding principles**

The following principles were considered when developing the PRP Implementation Plan:

1. Implementation must be practical, widespread, and properly resourced.
2. The PRP must include stakeholders in an ongoing process of engagement.
3. The PRP should be fully and effectively monitored and evaluated both at fixed time points and on an ongoing basis.
4. Implementation should include risk management strategies, as informed by risk analysis.

# Implementation Timeline

## **Wave 1**

| **Milestone** | **Date** |
| --- | --- |
| Targets endorsed | 14 February 2020 |
| Targets announced | April 2020 |
| Implementation plan agreed | April 2020 |
| All companies contacted and commitment obtained | By June 2020 |
| 4 year implementation period begins | 1 July 2020 |
| 2 year progress due to the Implementation Monitoring and Evaluation Reference Group (IMERG) | 30 June 2022 |
| Department to hold mid-implementation Stakeholder roundtables | August 2022 |
| 4 year progress due to the Implementation Monitoring and Evaluation Reference Group (IMERG) | 30 June 2024 |
| Commence evaluation of Partnership Reformulation Program | July – December 2024 |

## **Wave 2**

| **Milestone** | **Date** |
| --- | --- |
| Targets endorsed | 19 March 2021 |
| Targets announced | April 2021 |
| All companies contacted and commitment obtained | End June 2021 |
| 4 year implementation period begins | 1 July 2021 |
| 2 year progress due to the Implementation Monitoring and Evaluation Reference Group (IMERG) | 30 June 2023 |
| Department to hold mid-implementation Stakeholder roundtables (if required) | August 2023 |
| 4 year progress due to the Implementation Monitoring and Evaluation Reference Group (IMERG) | 30 June 2025[[1]](#footnote-1) |
| Commence evaluation of Partnership Reformulation Program, beginning with Wave 1 | December 2024 |

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# Stakeholder engagement

## **Stakeholder engagement to date**

*Summary of the Consultation Process*

The draft food reformulation targets and category definitions, supported by the PRP Rationale, were released for public consultation on 16 July – 12 November 2018.

The consultation was publicised on the Department of Health website and Twitter and Facebook accounts, and was listed on the Department’s Consultation Hub. Emails were sent to approximately 300 food companies known to have products in the food categories for which targets are proposed. Communication materials (draft newsletter article, social media posts) were shared with Executive Committee members to disperse through their networks as appropriate.

Twenty-two submissions were received in relation to the sodium (only) target categories. Thirteen submissions were received in relation to the sugars, saturated fats or multiple-nutrient target categories. A further four submissions made comments of a more general nature. Where consideration of the submissions indicated a change, beyond clarification, to the definition or to the target, a further targeted consultation was conducted relevant to those product categories.

## **Stakeholder engagement plan for implementation**

To ensure the PRP is implemented effectively, stakeholders should be fully informed of the program’s requirements and their obligations as voluntary participants.

The Partnership’s Secretariat will write/email the approximately 300 food companies who were initially identified during the consultation process. The email will:

* Provide details of the PRP;
* Include an information pack, comprising the rationale for reformulation,details of each category and targets, available reformulation guidance and the Reporting Template (in the form of an Excel spread sheet);
* Ask for a response/commitment/pledge;
* Request permission to note their company’s brand and its commitment to the PRP on the Partnership’s website;
* Request baseline data for food categories; and
* Request reports on product nutrient data and changes from participating companies every second year.

If required, the Partnership Secretariat will follow up with individual companies.

The Partnership’s Secretariat will maintain a record of all responses in an Excel spreadsheet, and note the participating companies (where permission is granted) on the Partnership’s website.

A series for Frequently Asked Questions targeted at stakeholders will be maintained of the Healthy Food Partnership [Website](https://www1.health.gov.au/internet/main/publishing.nsf/Content/Healthy-Food-Partnership-Home). Alternatively, stakeholders can contact the Healthy Food Partnership Secretariat at [healthyfoodpartnership@health.gov.au](mailto:healthyfoodpartnership@health.gov.au)

## **Stakeholder communication**

The Healthy Food Partnership Secretariat has developed a separate Communication Plan for the implementation of the PRP. The goal of the plan is to inform food companies that the PRP has been launched and that their participation is important, and to champion the program and its participants to the community.

Effective communication of the program will ensure food companies are aware of the PRP, encouraging participation. Awareness within the general population will also increase confidence in the benefits of food reformulation. For food companies, these are largely commercial benefits, such as participating in a program that has the endorsement of big business, and as a way of showing their commitment to producing healthier products to the public. For consumers, it is important that they are aware of the public health benefits.

Communication activities will include:

* updating the Partnership website to ensure information on the PRP is accessible to stakeholders and the general population;
* providing an electronic kit for participating food companies that includes social media assets (for company pages) and other promotional material, helping companies promote their involvement;
* a media release from Minister Colbeck to formally announce the PRP; and
* preparing an industry-specific press release to related trade media outlets to encourage participation and champion the program.

# Risk Management

## **Potential risks of nutrient reformulation**

Potential risks of a nutrient reformulation program were identified by the Reformulation Working Group and/or raised in the submissions to the public consultation. To ensure the integrity of the process, assessments of identified potential risks of the nutrient reformulation program were conducted by external technical experts and the Department as appropriate.

The [risk assessment](https://www1.health.gov.au/internet/main/publishing.nsf/Content/03BB9EB356FA47C1CA25856E001A8027/$File/Risk%20Assessment%20Report.pdf) determined that none of the potential risks preclude sodium, sugar or saturated fat reformulation as a population-level health strategy, but noted some should be monitored.

In particular, if partial potassium-based replacement of sodium were to be implemented, it would be advisable to monitor for the increased consumption of potassium which may be a risk for at-risk populations. The Department has commenced work with the Australian Bureau of Statistics (ABS) to explore ways to monitor this potential risk. Iodine intake from iodised salt, as well as total iodine intake, should also continue to be monitored, and provisions are already in place for the iodine fortification level in salt to be increased if population intakes are insufficient. In addition, the use of sugar replacers should be monitored to ensure consumption remains under the acceptable daily intake for each substance.

Future nutrition surveys and updates to food composition databases will also be considered with a view to tracking changes in food and nutrient consumption. The Department has strengthened the *Principles for Reformulation* for companies to consider to further reduce potential risks.

## **Reputational risks**

There are reputational risks to the Healthy Food Partnership. For example, there may be criticisms associated with the voluntary nature of the Partnership, or concern that the time period for change is too long. The timeframes for implementation are considered feasible and realistic, allowing companies to make gradual changes to support consumer acceptability. The Department will monitor engagement with the program and progress towards the target. If, at the end of the four-year timeframe significant progress towards the targets has not been achieved, a review will be undertaken and other options may be considered.

There is also a risk that food companies may receive negative attention for not signing up to the PRP, or failing to meet the reformulation targets within the agreed timeframes. The Department is taking following steps to mitigate this risk.

* Asking companies to commit to work towards all relevant targets, rather than individual targets.
* Recognising that formulations of international products may not be within an Australian subsidiary’s level of influence or control.
* Not reporting on the progress of the PRP at an individual company level. All reporting will be at the category/sub-category level.

However, this does not prevent other stakeholders from undertaking their own analysis and reporting on the PRP.

## **Implementation risks**

There is a risk that the PRP does not achieve meaningful reductions in sodium, saturated fat and sugar. This risks will be minimised by ensuring there are ample awareness raising activities through multiple channels to achieve a sufficient level of engagement with the program. Targets are considered feasible, having been set through analysis of the current food supply, what has been achieved internationally, and through consultation with industry. Specific actions are detailed in the PRP Communication Plan.

# Monitoring and Reporting Framework

Each target has an implementation period of four years, with reports on progress due to the Partnership Secretariat at year 2 and after year 4. Baseline data will also be required at the commencement of the PRP.

An Excel spreadsheet reporting template will be made available to industry for reporting. If companies are finding that reformulation targets cannot be met this should be noted in the report for timely consideration.

All identifiable data provided will be kept confidential. Annualised unit volume of sales will be requested to allow the Department to calculate an estimate of the reduction of each nutrient in the Australian food supply compared to the baseline. However, it is noted that some businesses will not be in a position to provide this data. The Department will consider the purchase of sales data and nutrient data as appropriate.

The Department will use the data to report on the progress of the PRP after year 2, and at the end of year 4. Final reporting for each Wave will be competed separately, with a comprehensive report prepared in 2027. Reporting will be at the category/sub-category level, and include analysis of nutrient changes at 2 and 4 years when compared to baseline. This analysis may be performed in-house, or out-sourced as appropriate.

The Partnership Secretariat will consider holding targeted stakeholder consultation at the end of years 2 and 4 to assist with evaluation. This will assist the Secretariat with identifying targets that may need to be considered for adjustment due to feasibility or food safety concerns as encountered by food companies during the implementation process.

1. Final reporting on breakfast cereals due 30 June 2026 [↑](#footnote-ref-1)