Food and Drink Strategy
2016–2019
Foreword

As a Trust we want to deliver great care for every patient and continue to make improvements to our services. This includes our provision of nutritious food and ready access to drinks. Patients who are well-nourished and well-hydrated recover more quickly from illness or surgery, have fewer complications, and a shorter stay in hospital.

We also recognise we have a responsibility as a healthcare organisation to support visitors to the hospital and staff to maintain a healthy lifestyle by providing and promoting healthier food choices. Staff that are fit and well have a positive impact on our clinical outcomes and the experience of our patients.

Our Food and Drink Strategy has been developed by our Hotel Services User Group, our catering contractor and the Nutrition Audit and Advisory Group (NAAG), to embed the recommendations of the Hospital Food Standards Panel Report published by the Department of Health, in conjunction with Age UK, in August 2014. This report recommended the implementation of five key standards to ensure hospitals consistently deliver high quality food and drink:

- The 10 Key Characteristics of Good Nutritional Care from the Nutrition Alliance;
- Nutrition and Hydration Digest (The British Dietetic Association);
- Malnutrition Universal Screening Tool (British Association of Parenteral and Enteral Nutrition) or equivalent validated tool;
- Healthier and More Sustainable Catering – Nutrition Principles (Public Health England) for staff and visitor catering; and
- Government Buying Standards for Food and Catering Services from the Department of Environment, Food and Rural Affairs.

The Trust must comply with the mandatory Food Standards guidance as part of the legally binding NHS Standard Contract. This means our commissioners are clear what they should expect of hospital food and can hold the hospital to account if we do not measure up. The hospital will be monitored on delivering these standards through the annual Patient-Led Assessments of the Care Environment (PLACE) organised by the Health and Social Care Information Centre.

This strategy reviews how we currently meet these standards and identifies where improvements can be made and how these will be addressed in three main areas:

- meeting the nutrition and hydration needs of patients;
- healthier eating for the whole hospital community; and
- sustainable procurement of food and catering services.

Lisa Nobes
Director of Nursing
Introduction

What we eat and drink has a significant impact on our health, wellbeing and prevention of disease. This is true of under-nutrition, as well as, over-nutrition, which can lead to obesity. Food in hospital should support the health of all patients, visitors and staff. More fundamentally, the food experience should be positive and enjoyable.

Evidence both locally and nationally shows one third of hospital admissions are patients who are already at risk of malnutrition. For these patients, it is vital that additional calories and protein can be provided to meet their needs to reduce nutrition-related complications, such as pressure sores, falls, a reduced ability to fight infection and loss of muscle strength. Adequate hydration is equally essential to help prevent urinary tract infections and acute kidney injury.

Other patients may be in poor health from conditions related to obesity. It is important for these individuals that healthy eating is promoted to support making changes to their diet in the longer term.

Overweight and obesity can also affect NHS staff. The hospital has a role in providing the environment for staff to make healthier choices. This is particularly true of shift workers, who may easily develop poor eating habits if choice is restricted.

As major purchasers and providers of food and catering services, we also recognise that we have the opportunity to make sustainability a high priority in our service delivery and decision-making to support waste reduction, high standards of food production and reduction of our carbon footprint.

The strategy builds on work already undertaken by the Trust, and should be viewed with reference to existing strategies and policies:

- Nutrition Policy and Procedure for Adults, v.3, 2013;
- Health and Wellbeing Strategy, 2015; and

Implementation of the strategy will be monitored through the Nutrition Advisory and Audit Group and Hotel Services User Group through existing governance arrangements as illustrated below:
Meeting the nutrition and hydration needs of patients

The provision of high quality nutritional care and hydration through a multidisciplinary approach has been a long-standing aim both in the Trust, and the wider community.

**Nutritional screening**

Nutritional screening is the first step in identifying patients at risk of malnutrition. Patients are screened within 24 hours of admission to the hospital using the Malnutrition Screening Tool (MUST). This tool is also used in the community by health professionals, care homes and community hospitals. For children, nutritional screening is completed using PYMS (Paediatric Yorkhill Malnutrition Score). A locally developed action plan indicates the appropriate nutritional care to implement based on the level of risk. The use of MUST in the hospital is monitored through monthly audits by ward sisters and dietitians. The nutrition nurse specialist and nutrition support dietitian offer regular training to nutrition link nurses for cascade to their wards. Community dietitians deliver a rolling training programme to community staff.

**Meeting nutritional needs**

Any special dietary requirements are established at the initial assessment on admission. Patients at high nutritional risk are offered high calorie food and drinks, their intake monitored using a food chart and they are referred to a dietitian. Those who require assistance at meal times can be provided with the appropriate aids or supported by a volunteer or ward staff. Protected mealtimes are in place on the wards to provide an environment conducive for patients to eat and enjoy their food.

For patients who are nutritionally complex, ward rounds are undertaken by the nutrition multidisciplinary team. This includes a consultant gastroenterologist, dietitian, nutrition nurse specialist, Speech and Language therapist and pharmacist who are able to provide specialist advice to medical and surgical teams on nutritional care.

**Mealtimes**

Patients currently order their meals at the point of service, however, a standard menu is available where high calorie, soft and healthier options are coded which, together with allergen guidance, can assist patient/carer choice. A range of a la carte menus is also accessible to ward staff to provide to patients requiring therapeutic diets or for those with allergen sensitivities. Modified texture meals are available where a patient may have swallowing difficulties based on the recommendations of a Speech and Language therapist. For patients who are restless at mealtimes, or who are not able to use cutlery, a finger food menu provides choices to ensure they can achieve a balanced intake.

All the menus are reviewed by Trust dietitians to ensure the nutritional requirements of patients can be met. Food audits are undertaken each month by patient and Trust representatives to assess the quality of the food and service delivery. Regular feedback is also obtained from patient surveys. Customer satisfaction is also monitored by the catering contractor and reported to the Trust monthly.
Hydration

Patients are offered a variety of fluids in drink rounds served throughout the day, as well as regularly refreshed water in jugs. Fluid intake is reviewed as part of regular care rounds. A working party has been set up to review current practice and documentation around monitoring hydration on the wards.

Areas for improvement:

- Ward staff support is not consistently available during food service to advise patients of food choices and provide direction to hostesses regarding specific dietary requirements to ensure patient safety is not compromised and enable timely meal delivery.
- The menu is not routinely seen by patients so they are not able to use the meal coding to make an informed choice to meet their individual needs.
- A meal ordering system is only available on a very limited number of wards which means that patients may not always receive their first meal choice and any dietary issues that arise cannot be resolved in advance of the food service.
- Monthly audits indicate that the implementation of nutritional care plans is not always evident for patients identified at high nutritional risk and requires improvement to meet the 90% target.
- Current practice and documentation does not always support early identification of patients who may be at risk of dehydration.
- Nutrition training is not regularly accessed by all Nutrition link nurses or ward staff in its existing format.

Actions / Priorities:

- Apply the standard ward mealtime procedure that specifies roles and responsibilities for food service and ensures appropriate ward assistance is provided to support meal service on all wards, improve patient experience and ensure patient safety.
- Improve access to menus for patients and carers to assist with food choices to meet their dietary needs.
- Include an extension of the meal ordering system across all appropriate wards as part of service requirement for future catering contractor procurement to facilitate efficient food service.
- Strengthen ward food audits by widening participation and including 7-day service to monitor the end quality of the food served.
- Continue to monitor compliance with nutritional screening and focus on improving delivery of nutritional care to patients at high risk of malnutrition.
- Roll out a new hydration assessment and monitoring tool.
- Review methods of providing nutrition training and education for staff to improve accessibility.
- Develop patient leaflets to promote self-care with nutrition and hydration both in hospital and on discharge.
Healthier eating for the whole hospital community

The Trust can play a key role in promoting good health for the wider community of visitors and staff. For many staff members the food they eat at work makes up a substantial part of their daily diet. Access to affordable, tasty, healthy food underpins the realisation of public health messages around diet and supports the individual's ability to deliver high quality clinical care.

The Trust published their Health and Wellbeing Strategy in September 2015 this includes aims to promote healthy eating across the hospital. The Health and Wellbeing Steering Group reports to the Workforce and Education Committee and is responsible for the delivery of this strategy. The group is chaired by the Occupational Health physician with representatives from Trust divisions, Human Resources, Physiotherapy, Estates and Dietetics. Staff actions groups have been set up to support a programme of health awareness campaigns and self-care.

The catering contractor provides a retail offer in the hospital restaurant, a café and vending facilities. It was awarded the Bronze Catering Mark from the Soil Association in 2015. This award focuses on limiting processed foods, trans fats and meeting basic animal welfare standards. In addition it is an opportunity to demonstrate compliance with Healthier and More Sustainable Catering – Nutrition Principles (Public Health England, 2014) including display of nutritional information, such as allergen guidance, and promotion of healthy eating.

Although healthy eating is not a priority for all individuals whilst in hospital, the standard menu indicates healthier choices including lower fat and lower sugar options, fruit-based desserts and fresh fruit.

Areas for improvement:

• Due to the constraints of the hospital site, the catering contractor’s retail outlets are located away from the majority of the hospital wards. This limits the accessibility of healthier food options for staff and visitors. Availability of food and drink is further restricted out-of-hours.

• Patients do not routinely view the hospital menu and so those requiring healthier options are unable to make an informed choice from the meal coding.

Actions / Priorities:

• Improve access to food and drink for staff and visitors at the south end of the hospital site both in the short term and in the longer term as part of the Estates Strategy.

• Promote healthier eating through health and wellbeing initiatives across the Trust.

• Continue to encourage healthier meal choices through meal deals at retail outlets and trial of healthier vending options.

• Reduce sugary foods and drinks that are available in the restaurant, cafés and vending machines.

• Improve access to the menu to enable patients to identify and choose healthier options.
Sustainable food and catering services

The Trust is committed to minimising waste and to consider whole life costs in its procurement. It has published a Sustainable Development Management Plan which meets statutory obligations whilst providing high quality patient care. The Trust’s catering contractor is required to comply with this plan through their use of the estate and must also adhere to the mandatory Government Buying Standards for Food and Catering Services.

Evidence where sustainability is considered in regular activities undertaken by the catering contractor is through the segregation of waste in the kitchen for recycling; the disposal of majority of food waste via an enzyme digester which lessens the environmental impact when compared to other methods; and regular review of plate waste so that the amounts of frequently wasted items or unpopular dishes on the menu are changed.

Priorities:

• Ensure the Trust’s catering contractor is working towards compliance with best practice within Government Buying Standards, including review of the inclusion of local small and medium sized enterprises in the existing supply chain.
• Consider alternative catering model, such as cook-freeze, as part of future procurement of catering service to support meal ordering system and to potentially reduce food waste.
<table>
<thead>
<tr>
<th>Action</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apply standard mealtime procedure on all wards</td>
<td></td>
<td></td>
<td></td>
<td>Ward sisters</td>
</tr>
<tr>
<td>Improve patient/carer access to hospital menus</td>
<td></td>
<td></td>
<td></td>
<td>Catering contractor/ward sisters</td>
</tr>
<tr>
<td>Include meal ordering system in future catering procurement</td>
<td></td>
<td></td>
<td></td>
<td>Catering contractor</td>
</tr>
<tr>
<td>Strengthen ward food audits</td>
<td></td>
<td></td>
<td></td>
<td>HSUG/Estates</td>
</tr>
<tr>
<td>Improve implementation of nutritional care plans in high risk patients</td>
<td></td>
<td></td>
<td></td>
<td>Ward sisters</td>
</tr>
<tr>
<td>Roll out hydration assessment and monitoring tool on wards</td>
<td></td>
<td></td>
<td></td>
<td>Ward sisters</td>
</tr>
<tr>
<td>Review format/delivery of nutrition training for ward staff</td>
<td></td>
<td></td>
<td></td>
<td>Dietetics</td>
</tr>
<tr>
<td>Develop patient leaflets to promote self-care</td>
<td></td>
<td></td>
<td></td>
<td>Nursing/Dietetics</td>
</tr>
<tr>
<td>Improve access to food and drink out of hours for staff and visitors</td>
<td></td>
<td></td>
<td></td>
<td>Estates</td>
</tr>
<tr>
<td>Trial healthier vending options</td>
<td></td>
<td></td>
<td></td>
<td>Catering contractor</td>
</tr>
<tr>
<td>Reduce sugary foods and drinks in retail outlets</td>
<td></td>
<td></td>
<td></td>
<td>Catering contractor</td>
</tr>
<tr>
<td>Comply with best practice Government Buying Standards</td>
<td></td>
<td></td>
<td></td>
<td>Catering contractor</td>
</tr>
</tbody>
</table>