The Queen Elizabeth Hospital
King's Lynn
NHS Foundation Trust

FOOD & DRINK STRATEGY 2015 - 2018

DRAFT

Food and Drink Strategy

Introduction

Our diet is fundamental to our health and well-being. The Trust is committed to providing high quality care to all its patients and without question this includes the provision of nutritious, healthy food and sufficient drinks and fluids to ensure optimum nutrition and hydration.

Most poor nutrition develops in the community but once a patient is admitted there is both an opportunity and a duty for us to identify and address possible under-nutrition or over-nutrition. Malnutrition can lead to longer stays in hospital and an increased likelihood of developing complications, particularly in the case of older people where malnutrition can contribute to significant harm. Malnutrition is associated with increased mortality rates, more hospital admissions and the development of various linked conditions such as impaired cognitive function, falls, poor control of diabetes and hypothermia.

In contrast some patients will be dealing with illness associated with overconsumption of food and obesity. The Health Survey for England[1] indicated in 2010 that approximately 26% of adults fall into the obese category and excess weight is known to increase the risk of developing certain conditions such as diabetes, heart disease and cancer as well as adversely affecting a person's mental health and sense of well-being.

The importance of food and drink within hospitals has been the focus of a number of national reports. The landmark report by Age Concern in 2010, **Hungry to be Heard**[2], highlighted the problem of older people in hospital and brought to our attention the fact that 30% of people in later life enter hospital malnourished. In addition to nutrition, adequate hydration is essential to promote good health and prevent complications such as urinary tract infections, pressure ulcers and acute kidney injury.

In response to the Francis report[3] and other key reports, the Department of Health, has more recently published, The Hospital Food Standards Panel's report on **Standards for food and drink in NHS hospitals**[4]. This report sets out to improve the provision of food and drink within the NHS and in so doing, ensure that everyone has a healthier diet and that those involved in the production of meals are properly valued. It identifies five food standards which are integral to this strategy.

NHS staff can also be affected by poor nutrition. More than a third of all food provided in our hospital is served to staff and visitors and their needs are very different to those of our patients. We have a role in supporting our staff to make healthy food and drink choices and to promote a healthier lifestyle.

Hospital food should meet all these challenges. It should support and underpin the care and treatment of patients and enhance their experience as a patient. It should equally help staff and visitors to choose a healthier lifestyle. At the same time the Trust has a wider social responsibility as a major purchaser of food and a provider of catering services to ensure sustainability and support for the environment at the heart of all that it does.

Importantly our food and drink strategy must recognise that mealtimes are a social activity and that eating food should be an enjoyable and pleasurable experience.

To achieve these overall aims our 'Food and Drink Strategy' has been developed to reflect national guidance, to build on the good practice that is already in place and to set the Trust on the road to meeting the following aims:

- Improve the nutrition and hydration of all patients
- Promote healthier eating for both patients and staff
- Promote sustainability in the procurement of food and drinks

This strategy sets out the direction of travel for us to achieve these goals and provides a framework for delivery. The strategy will be supported by a detailed delivery plan and identified performance indicators to demonstrate progress.

Patient Nutrition and Hydration

The Trust commits to implementing the recommendations of the Standards for food and drink in NHS Hospitals and in doing so will work towards implementing the three key standards that apply to patient catering and nutrition:

- 10 key characteristics of good nutritional care, Nutrition Alliance[5]
- Nutrition and Hydration Digest, The British Dietetic Association [6]
- Malnutrition Universal Screening Tool or Paediatric Yorkhill Malnutrition Score (BAPEN)[7]

The focus will be on 'Eating for Health' and central to this and in accordance with the guidance, will be the assessment of patients' needs, ensuring we meet those needs, regularly evaluating the patients' plans of care and creating the optimum environment in which the best possible practice can occur. We will aim to provide the very best nutritional care, delivered with clinical expertise, compassion and humanity to enable people to stay healthy and to recover from episodes of illness.

We will build on the framework that is already in place within the organisation to support good practice:

Training Training programmes have been established and implemented to ensure all staff have the appropriate knowledge, skills and competencies to clearly assess and manage patients' nutritional needs.

Screening The use of the Malnutrition Universal Screening Tool (MUST) is in place and all patients are screened on admission and thereafter weekly to inform the patients' individualised plans of care. This assessment is further supported through a nursing risk assessment that considers other nutritional risks and preferences.

Mealtimes Protected mealtimes have been implemented in all ward areas and those patients that are at risk of malnourishment or undernourishment are high-lighted through the use of 'Blue trays' so that additional support with eating can be provided.

Alerts Display magnets are used at patients' bedsides to highlight food or fluid restrictions, particularly Nil by Mouth to ensure appropriate identification of need.

Patient centred We have a patient-centred model of nutritional support which ensures that food is provided that meets religious and cultural preferences, takes account of food allergies and sensitivities and is appropriate for those whose ability to eat may be impaired through dysphagia, cognitive impairment or other physical difficulties.

Hydration In 2014-15 we undertook developmental work to put in place clinical guidelines and a clear patient pathway to identify, prevent and manage acute kidney injury (AKI) in patients. Additional measures to reduce the risks associated with poor hydration have included the introduction of bottles of water at the bedside rather than jugs of water, red cups for patients with dementia to encourage intake, re-design of the fluid balance and intravenous fluid charts to improve fluid balance and monthly monitoring of performance to ensure compliance and best practice.

Feedback Regular feedback is received from a monthly patient catering survey on the quality and choice of food. The quality of food is also reviewed via other routes such as PLACE inspections, CQC national patient surveys, concerns and compliments submitted.

Governance The Nutrition Steering Group comprises representatives of all those involved in the planning and provision of food and fluids to patients. This group exercises leadership and governance responsibilities in relation to adherence to standards for nutritional care and hydration. Staff awareness is promoted through promotional activities and through participation in Nutrition Awareness Week.

Key priorities for 2015 -18:

1. Undertake a gap analysis of the organisation's compliance with the British Dietetic Associations' Digest Checklist to measure compliance and identify where development or remedial action may be required.

2. Continue to embed the use of MUST and PYMS as screening tools and audit compliance with the agreed standards for their use and application.

3. Monitor the effectiveness of care planning in initiating appropriate nutritional support for the patient, particularly those at risk of malnutrition or requiring specific dietary interventions.

4. Enhance support for frail elderly patients to improve nutritional intake and choice through menu design, availability of finger foods, tailored presentation of food and personal support with eating.

5. Provide further adaptations to promote better nutrition and hydration including the use of specialised cutlery and crockery and tables that match the specific patient bed or chair.

6. Audit and monitor the effectiveness of the AKI pathway to reduce the risk to patients.

7. Develop and implement a policy for food provision and nutritional care that is patient-centred and reflects the 10 characteristics of good nutritional care.

8. Assess whether the GULP Dehydration Risk tool is suitable for implementation within the organisation and if approved for use, develop and implement a roll out programme for use throughout the inpatient clinical areas.

9. Continue to audit compliance with maintaining fluid balance charts as part of the nursing metrics and as a tool to strengthen good practice.

10. Review the effectiveness of current training by monitoring audit findings and metrics and amend training programmes as required.

Healthier eating for both patients and staff

Alongside the ambition to improve the nutritional care of our patients is the complementary aim of ensuring that the Trust promotes healthy eating amongst patients, their families and staff.

We will look to support individuals in making healthier choices by the provision of healthier, tasty, affordable and sustainable options. The food and drink that is available in the hospital will support the public health message from the NHS.

Patient information is provided throughout the Trust and on the wards as a pictorial menu to help patients make appropriate choices and to improve understanding, particularly those that require a special diet due to their medical condition. We will look to strengthen this provision.

Key priorities for 2015 -18:

1. Promote the 'eatwell plate' as a guide to staff on the choice of foods, drink and snacks that are available and support healthy eating.

2. Launch the Employee Health and Wellbeing Strategy to promote healthy choices and improve staff health and wellbeing.

3. Improve the choices available to staff who work out of hours to strengthen healthy options.

4. Work with partnership and voluntary organisations to make the healthier choice the easier choice in the staff restaurant, vending machines and on-site shops.

5. Develop the newly launched 'Hub' restaurant as a centre for eating nutritious and well balanced food that is competitively priced, attractively presented, offers choice and in an atmosphere that allows the mealtime to be a moment of relaxation in a busy day.

6. Develop an implementation plan to successively introduce clear and comprehensive food labelling over the three year life of the strategy to support choice, improve understanding of nutritional content and possible allergens and recognise cultural and religious preferences.

7. Involve staff in each clinical area in identifying and designing health and wellbeing measures that can be introduced and promoted in their area to support healthier eating and lifestyles amongst their patient groups.

Sustainability in the procurement of food and drinks

We are proud of the 5* rating for food hygiene that the hospital currently holds. We comply with the Government's Buying Standards for Food and Catering services and in doing so meet the three areas of sustainable procurement:

- Foods produced to higher sustainability standards
- Foods procured and served to higher nutritional standards
- Procurement of catering operations to higher sustainability standards

Key priorities for 2015 -18:

1. Maintain compliance with the Government's Buying Standards

2. Continue to review procurement and service provision to look for further opportunities to:

   - increase seasonality of fresh food
   - improve the sourcing of food from sustainable sources
   - raise the nutritional standards of meals through reducing salt, saturated fat and sugar content
   - monitor catering operations to strengthen sustainable use of equipment, reduction in waste and energy management.

Monitoring

The Nutritional Steering Group will develop a delivery plan to ensure that we deliver the aims and objectives of our food and drink strategy and will monitor its implementation. The Nutritional Steering Group will report on a quarterly basis to the Clinical Governance Committee on progress with the delivery plan and through exception reporting should any performance indicator fail to be met after three consecutive months.

Summary

This strategy demonstrates our commitment to ensuring that the provision of food and drink is seen as an integral element of quality care and a fundamental cornerstone of our service provision. It recognises that there are areas where practice can be improved and where there are opportunities for further development. The strategy equally emphasises our duty to promote healthy lifestyles not only amongst patients but also amongst the staff caring for our patients.

We will be monitoring the delivery of our improvement priorities at our Nutritional Steering Group and will review our overall progress on annual basis, ensuring that the Strategy continues to drive improvements in the quality of our services.

References

1. Department of Health, Health Survey for England
   www.hscic.gov.uk/healthsurveyengland
2. Age UK (2010), Still hungry to be heard: the scandal of people in later life becoming malnourished in hospital, London: Age UK
3. Report into the Mid-Staffordshire NHS Foundation Trust inquiry by Robert Francis QC
   www.kingsfund.org.uk/Francis-Report
4. Department of Health, The Hospital Food Standards Panel's report on standards for food and drink in NHS hospitals, Aug 2014
   www.gov.uk/government/publications/establishing-food-standards-for-nhs-hospitals
5. 10 Key Characteristics of good nutritional care in hospitals
   www.npsa.nhs.uk/nutritionfactsheets
6. The British Dietetic Association, Nutrition and Hydration Digest Compliance Checklist
   www.bda.uk.com/publications/professional/NutritionHydrationDigest.pdf
7. British Association for Parenteral and Enteral Nutrition, Malnutrition Universal Screening Tool,
   www.bapen.org.uk/pdfs/must/must_full
8. NHS Choices, Eatwell plate
   www.nhs.uk/Livewell/Goodfood/Pages/eatwell-plate.aspx