



# ARCBITE

Brokering Innovation Through Evidence

## Implementation of Food and Drink Strategy in an NHS hospital

### Background:

The Hospital Food Standards Panel's Report on Standards for Food and Drink in NHS hospitals (DoH, 2014) recommended all NHS hospitals develop and maintain a food and drink strategy with standards being monitored via annual Patient-led Assessments of the Care Environment (PLACE). A toolkit to support the development of a hospital food and drink strategy was produced in 2016 (DoH) from which the Figure at the bottom of this document is taken demonstrating the scope of the details to be included in the Strategy.

### What was the aim of the project?

The initial focus of implementation was provision of nutritious food for patients and healthier food for staff and visitors. Whilst hoping to improve patient experience the aim was to implement new menus and assurances of patient safety in relation to food with the objectives being

- provide menu/s which meets every patients' needs
- ensure the menu/s are accessible to all
- enable allergen information to be readily available
- improve patient experience and satisfaction, including support to feed themselves or receive aids to support them with this
- improve compliance with the standards expected in relation to nutritional value and texture modification requirements.

In relation to provision of healthier food for staff and visitors the objectives were to

- review the provision of food and drink choice within the hospital, alongside the hours of availability
- increase the choice available, including out of hours
- enable contactless payment options

### What did we do?

During the implementation process the following was achieved:-

For in-patients

- new menus, offering more choice and suitability for all
- compliance with the International Dysphagia Diet Standardisation Initiative (IDDSI)
- allergen information availability

To support patients to be independent with their intake, or receive assistance if required liaison with the Occupational Therapy service ensured adaptive cutlery and suitable non slip items were available to support patients.

Realisation that patients leave hospital, and for some their circumstances may require use of a Food Bank, collaborative work with the Macmillan Benefits Advisor supported implementation of a list of suitable food items for patients still requiring nutritional support once home to be circulated to the local Food Banks.

For staff and visitors

- new vending machines offering hot and cold drinks, snack items ranging from crisps and chocolate bars to sandwiches, salads and fruit pots are in place, with a contactless payment system allowing provision out of hours
- an increased variety of items on offer at lower prices than in the traditional vending outlets.

### How did we involve people?

Initially there was engagement of a wide staff group to develop the Food and Drink Strategy as suggested in the toolkit. Subsequently there was collaborative working with the catering service provider to develop the new menu which included

- Joint working with the estates team due to their involvement in management and delivery of catering services
- Knowledgeable clinical staff – Dietitians and Speech and Language Therapists – to ensure compliance with guidance relating to the nutritional value and suitability, in addition to texture modifications,
- Public involvement to taste the food items to be included in the menus,
- Collation of the allergen information for patient safety.

In relation to the offer for staff and visitors engagement with staff occurred to ensure the new vending machines met the requirements that had been expressed. Although visitors use these machines as well it was difficult to capture their thoughts due to the transient nature of hospital visitors.

### What we found and what does this mean?

The scope of the task was HUGE and although the information may be collated within the organisation as a whole, it was in an unrelated fashion when considering 'hydration and nutritional care'. Examples of this is data on nutritional screening may be reported to Matron, however is relevant to the estates team for PLACE submissions; involvement of the Occupational Therapist is essential to ensure the food delivered to the patient can actually be consumed by the using appropriate adaptive cutlery following a functional feeding assessment; enabling the staff working out of hours to obtain food and drink using contactless payment helps maintain engagement, but the offer must be suitable to those requiring special diets or requiring information on food allergens.

Collating information from such a wide range of departments is a challenge in itself, but then has to be reported within a governance framework. Separation of this into 'patient experience' measures and 'workforce engagement' data doesn't keep the overarching focus on food and drink as a whole, which seems essential to support the implementation of a Food and Drink Strategy.

### What Next?

Keeping food and drink, not just in relation to patients, on the agenda is paramount. Ensuring this is reported through a robust governance structure is essential and re-enforces the role of the Nutrition Steering Committee within hospitals as stated in the NICE Clinical Guideline 32: Nutrition support for adults (<https://www.nice.org.uk/guidance/cg32/chapter/1-Guidance>.)

Additional guidance and recommendations such as the NICE Quality Standard Nutrition Support in Adults (<https://www.nice.org.uk/guidance/qs24/chapter/Introduction-and-overview>) and the CQC's Regulation 14: Meeting nutritional and hydration needs (<https://www.cqc.org.uk/guidance-providers/regulation-s-enforcement/regulation-14-meeting-nutritional-hydration-needs#full-regulation>) alongside publications such as the British Dietetic Association's Nutritional and Hydration Digest (<https://www.bda.uk.com/publications/professional/NutritionHydrationDigest.pdf>) need to be understood and applied to ensure cost effectiveness in relation to the provision of food and drink for patients and for all a sense of pleasure and enjoyment in consumption of this basis human need.

### Who was involved?

- Wirral University Teaching Hospital NHS Foundation Trust, estates team providing catering services.

Propcare, estates team for The Clatterbridge Cancer Centre NHS Foundation Trust.

- The Clatterbridge Cancer Centre NHS Foundation Trust's clinical services including nursing, dietetics, speech and language therapy and occupational therapy along with the Macmillan Benefits Advisor, non clinical support services, research and governance teams.
- Patients and visitors attending Clatterbridge Cancer Centre - Wirral



## Nutritious Food for Patients



## HOSPITAL



## Sustainable Food for All



## Healthier Food for Staff and Visitors

### What is NIHR CLAHRC / ARC North West Coast?

The Applied Research Collaboration North West Coast (ARC NWC) superseded CLAHRC NWC in September 2019. It is a partnership between universities, NHS, public, etc.

Its mission is to undertake applied research to improve public health, wellbeing, quality of care & reduce health inequalities across the North West Coast region.

<https://arc-nwc.nihr.ac.uk/>