

# Food and Drink Strategy



2016-2019

## Forward

**Welcome to our first Food and Drink Strategy, which outlines our ambitions over the next three years to provide high quality nutritious food and accessible drinks to our patients, staff and visitors across all our sites.**

St George's University Hospitals NHS Trust is committed to delivering excellent care. 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 recognise we have a responsibility as a healthcare organisation to support staff and visitors to maintain healthy lifestyles by providing and promoting healthier food choices. Staff that are fit and well have a positive impact on our clinical outcomes and experience of our patients. We also have a wider social responsibility as a major purchaser of food and catering services to put sustainability at the core of our service provision, including via procurement processes.

**The Department of Health's Hospital Food Standards Panel's report on standards for food and drink in NHS hospitals (2014) identified five food standards required of hospitals, which are captured within our strategy:**

- The 10 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 screening tool
- For staff and visitors catering Healthier and more sustainable Catering – Nutrition Principals (Public Health England)
- Government Buying Standards for Food and Catering Services from the Department of Environment, Food and Rural Affairs

**This strategy reviews how we currently meet these standards and identifies future priorities for improvement focusing on three key areas:**

1. Patient nutrition and hydration
2. Healthier eating for staff and visitors
3. Sustainable procurement

## INTRODUCTION

It is well known that diet significantly affects our health. This is true for undernutrition and overnutrition. Adequate nutrition and hydration is essential for general health and wellbeing, maintaining a healthy weight and to ensure adequate growth/development in children, plus to help prevent or treat a range of conditions such as wound healing, pressure ulcers and Acute Kidney Injury (AKI).

One third of patients admitted to hospital are thought to be at risk of malnutrition and one in five emergency admissions are associated with AKI. Up to 100,000 deaths in secondary care are associated with AKI, however 25-33% have the potential to be prevented (National Confidential Enquiry into Patient Outcome and Death Adding Insult to Injury 2009). Malnourished patients require nutrition support, via higher calorie and protein food/drinks or specialist feeding tubes to aid recovery from illness or surgery and reduce the risk of contracting hospital acquired infections. Modified consistency food/drink might be required for people with swallowing difficulties, which can increase the risk of malnutrition if not managed well. Estimations of the cost of malnutrition to the NHS are £19.6 Billion per annum, approximately 20% of the overall NHS budget. Improvement in nutrition and hydration standards will not only ensure cost saving but also help to reduce length of stay and increase survival rates as well as delivering a far better patient experience.

The importance of food and drink within hospitals has been recognised in a number of national reports including Hungry to be Heard (Age Concern UK 2010) and Sir Robert Francis QC Mid Staffordshire Foundation Trust Public Inquiry (2013) which detail shocking examples of poor nutritional care. The report stated nutrition and hydration should be everyone's responsibility, and that arrangements for providing food and drink to patients require constant review, monitoring and implementation.

Whilst patients often require increased calories to promote recovery from illness, staff and visitors can be affected by overnutrition due to excess calorie intakes, which can lead to overweight and obesity. Over half of the food provided in NHS hospitals is served to staff and visitors, and their nutritional needs are very different those of hospital patients. Hospitals have a role as beacons of good practice in supporting staff and visitors to make healthy food and drink choices. This is particularly the case for shift workers and those eating at unsocial hours, who can find this difficult if choice is restricted.

As a major purchaser and provider of food and catering services, the Trust has the opportunity to put sustainability at the heart of its work. This includes reducing waste, embedding high standards of farm food production and reducing the carbon footprint by making our catering contracts accessible to small UK businesses already meeting or working towards meeting these high standards.

Our Nutrition Steering Committee provides a focus for this work within the Trust and developed our "Food and Drink Strategy", with representation from Dietetics, Nursing, Medical, Speech and Language Therapy, Pharmacy, Education, Facilities and Catering Services. The strategy builds on existing work, reflecting national and local guidance priorities including the Five Year Forward View (NHSE 2014). The group is chaired by the Deputy Chief Nurse and reports to the Patient Safety and Quality Board, which is chaired by the Director of Quality Governance. Delivery of these priorities also requires a broad cross-cutting approach and this strategy should be read in conjunction with the Staff Health and Wellbeing Strategy (2017 – 2019).

**Nutrition Steering Committee Members;**

- ❖ Deputy Chief Nurse (Chair)
- ❖ Head of Nursing Quality
- ❖ Consultant Dietitian, Principal Dietitian Nutrition Team, Lead Paediatric Dietitian, Senior Community Dietitian, Catering Company Dietitian
- ❖ Senior Speech & Language Therapist
- ❖ Senior Pharmacist
- ❖ Nutrition Specialist Nurses, Paediatric Nurse Consultant
- ❖ Heads of Nursing/Matrons from each division (including Paediatrics and Community)
- ❖ Endocrinologist (Hydration lead for the Trust), Lead Gastroenterologist, Geriatrician, Paediatrician, Lead Anaesthetist/Surgeon for ERAS
- ❖ Health and wellbeing Lead
- ❖ Assistant Director Facilities
- ❖ Head of Professional Support & Development
- ❖ Senior Lecturer Kingston University and St George's University School of Nursing Faculty of Health, Social Care & Education
- ❖ Representatives from different areas (including patient representative) to present progress on priorities as per invite when appropriate

## 1. PATIENT NUTRITION AND HYDRATION

The provision of high quality nutritional care and hydration has been a long-standing aim both in the Trust and the wider community. We have a nutrition and hydration policy for adult and paediatric patients, which include specific guidance on food services and nutritional care including adherence to the food allergy labeling directives. The implementation of this is quality assessed and we actively promote staff awareness of nutrition and hydration and participate in NHS England's Nutrition & Hydration Awareness Week.

### **Recent developments include;**

#### **Malnutrition Screening:**

- We have set a standard for screening within 24hrs of admission and 24hours of ward transfer within our recently updated Nutrition and Hydration Policy.
- Locally developed action plans indicate care required based on level of risk using MUST, iNUT (Renal), PYMS (Paediatrics) with actions to refer to our dietetic service with scores of 2 or more. Infants (<1 years old) should be assessed on age related centile charts.
- Dietitians have established mandatory practical skills based training for all nursing staff using the Simulation Centre to ensure they have the appropriate skills and competencies to enable clear identification of patient's nutritional needs.
- Dietitians contribute to various clinical staff induction training on the importance of nutritional screening.

#### **Mealtimes and hydration:**

- All patient menus meet Nutrition and Hydration Digest (British Dietetic Association) standards and ensure provision for higher protein and calorie requirements. We also cater for diversity including cultural/religious/personal preferences plus vegan menus along with coding throughout the main menu for vegetarian, healthier choice and non-gluten ingredient dishes. Additional Specialist menus are also available for a range of clinical conditions/specialist areas e.g. senior health menu, children's menu, intensive care menu, allergen free menu, chyle leak menu, renal menu and modified consistencies menus for patients with swallowing difficulties. A pictorial Menu has been developed in conjunction with the Speech and Language Therapists to assist choice for patients with communication barriers. The Paediatric Day Procedure Unit has changed from a hot lunch service to a picnic basket style meal based on feedback.
- Protected Mealtimes are enforced in clinical areas, plus a nominated ward based mealtime champion to improve co-ordination of meal services.
- Senior health wards have implemented Enhanced Mealtime Support Volunteers to assist patients eating/drinking, a yellow plate system plus a butterfly scheme for patients with dementia to identify likes and dislikes. Fortified porridge has also been implemented.
- Hospital passports and 'REACH out to me' document have implemented in some areas to highlight the needs of vulnerable patients.
- Red jug lids and red trays are used throughout the Trust for further identification of patients at risk of malnutrition/dehydration requiring assistance.
- Nutrition boards with magnets identify patients NBM or requiring textured modifications, red tray for feeding assistance, yellow plates for patients with dementia, alternative menus and other special requirements/dietary preferences.
- We have visible, clear, standardized bedside signage to alert all ward staff to patients with swallowing difficulties on adult wards (completed by speech and language therapists).

- We have established the Enhanced Recovery After Surgery (ERAS) programme in some areas including a pre-surgical Think Drink campaign.
- We have established a hydration lead for the Trust, plus AKI clinics in our acute admission units.
- Our fully established adult patient nutrition team comprises of nutrition specialist nurses, dietitians, pharmacists and gastroenterologists who assess patients requiring parenteral nutrition, complex enteral nutrition and take referrals to assess patients for placing long-term artificial feeding tubes.
- We have established a network of ward level nutrition link nurses to act as local experts in nutrition to support ward nurse understanding of nutrition and hydration processes.
- Our catering company are very proud to have a 5\* rating for food hygiene. We train Hosts/Hostesses the importance of offering patients the right menu with choice, to follow dysphagia recommendations and nutrition board information ensuring clinical safety. Ward folders contain special diets and allergen information plus a guide to patient meals and drinks in hospital.

#### **Established audits and sources of feedback:**

- Matron's Monthly Quality Audits completed on our RATE system
- Bi-annual Protected Mealtime (ProMT) and Nutrition Screening Audit
- Annual PLACE Audit
- Nutrition and Hydration Observation 'back to the floor' Spot Checks by senior leaders and dietitians
- Nutrition Team Parenteral Nutrition and Home Parenteral Nutrition Report
- Nutrition CNS annual NG audit
- Nutrition/Hydration related incidents (DATIX reporting), SI panel and M&M meeting outcome recommendations
- Trust wide Quality Assurance visits led by corporate nursing, including patient representatives, to monitor CQC Standard 14 'meeting nutrition and hydration needs' as part of wider inspections
- Complaints/complements received from patients and others using our services
- Patient catering survey
- Family and friends survey plus national inpatient surveys e.g. Picker
- NHS Choices Website (monitored by PALS)

## Areas of future development priorities for this strategy period:

Priority	Responsibility	Timeframe
<b>Policy/Governance/Safety:</b>		
<ul style="list-style-type: none"> <li>✚ Continue Nutrition Strategy Steering Group meetings with newly agreed Terms of Reference.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Nutrition steering group members</li> </ul>	Quarterly from May 2017
<ul style="list-style-type: none"> <li>✚ Promote our Nutrition &amp; Hydration Policy, Nutrition Support Policy plus Food and Drink Strategy Priorities in line with Trust Strategy, as part of Nutrition &amp; Hydration week and within HCP education sessions.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Nutrition Steering Committee &amp; all Clinical Staff</li> </ul>	Ongoing
<ul style="list-style-type: none"> <li>✚ Ensure all policies involving nutrition/hydration/ERAS guidance are ratified by the nutrition steering committee.</li> </ul>	<ul style="list-style-type: none"> <li>✚ All Clinical Staff &amp; Nutrition Steering Committee</li> </ul>	Ongoing
<ul style="list-style-type: none"> <li>✚ Continue to develop our Intestinal Failure (IF) service to be formally designated as a regional IF centre for South West of London.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Nutrition Team</li> </ul>	Ongoing
<ul style="list-style-type: none"> <li>✚ Ensure senior nursing representation from all divisions at steering committee meetings in order to instill good nutritional care across the Trust.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Senior Nursing</li> </ul>	From May 2017
<ul style="list-style-type: none"> <li>✚ Ensure progress on key strategic priorities is heard by the Patient Safety and Quality Board and action required disseminated appropriately.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Deputy Chief Nurse</li> </ul>	Bi-annual
<ul style="list-style-type: none"> <li>✚ Ensure Protected Mealtimes (ProMT) and Nutrition Screening occurs to required standards in all relevant areas (including use of paediatric growth charts and nutrition care plans).</li> </ul>	<ul style="list-style-type: none"> <li>✚ All Clinical Staff</li> </ul>	By end 2017
<ul style="list-style-type: none"> <li>✚ Enforce compulsory standard for Dietitians to attend governance, care group and M&amp;M meetings in clinical specialist areas to ensure locally developed nutrition related documents/training are authorised by nutrition steering group.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Senior Nursing and Dietetics</li> </ul>	By end 2017
<ul style="list-style-type: none"> <li>✚ All Nutrition/hydration related DATIX's and audits will be discussed at nutrition steering group meetings to ensure appropriate action plans are in place for improvement/safety.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Nutrition Steering Group and DATIX/risk team</li> </ul>	By end 2017
<ul style="list-style-type: none"> <li>✚ Ensure ENFit change-over roll out is managed well across all areas.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Procurement, Medical Physics, Enteral Feeding Companies, Central Stores</li> </ul>	By end 2017
<ul style="list-style-type: none"> <li>✚ We will work towards establishing a Paediatric Nutrition Team, including Gastroenterologist, Dietitian, Specialist Nurse &amp; Pharmacist.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Paediatric senior nursing &amp; management</li> </ul>	By end 2018

<p><b>Catering:</b></p> <ul style="list-style-type: none"> <li>• Continue our partnership with catering companies to deliver high quality food for patients with adequate range to cater for specialist requirements (e.g. modified consistencies for patients with dysphagia, high calorie/protein for patients with malnutrition, food intolerances or allergies, plus vegetarian and vegan options). Formal review of hospital menus every two years.</li> <li>• Maintain feedback mechanisms from PLACE assessments focusing on our provision of hot meals 24 hours a day every day in all areas, appropriate snacks, and allergy free/gluten free meals.</li> <li>• Improve snack provision systems to enable timely and accurate delivery to patients and improve choice available.</li> <li>• Consider providing an ice-cream/milkshake/smoothie bar on children’s wards providing fresh high calorie milkshakes and using more recognisable branded items which children are more likely to accept (e.g. ice cream pots/desserts/milkshakes).</li> <li>• Bespoke meals on request, particularly for paediatric patients (e.g. promotional programme for oncology meals and ketogenic meals). Consider a cook to order menu and a weekly ‘street van’ concept for paediatric wards. Development of a specialist weaning menu for patients under 1 years of age.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Catering Company Senior Managers (including Catering Dietitian), Trust Facilities Senior Managers, Trust Dietitians Catering Sub-group, Nutrition Steering Committee, Patient feedback, Complaints Team</li> </ul>	<p>On-going</p> <p>On-going</p> <p>From March 2017</p> <p>From mid - 2017</p> <p>By end 2018</p>
<p><b>Training/education:</b></p> <ul style="list-style-type: none"> <li>• Ensure training is relevant to clinical areas and format of documentation (paper Vs electronic).</li> <li>• Review current nutrition link nurse structure and explore other options for strengthening engagement/nominating nutrition ambassadors via senior nursing to improve support to all staff for good nutrition and hydration practice. Continue to provide two educational updates per annum led by nutrition specialist nurses.</li> <li>• Increase ward level practical education to improve nutrition and dysphagia knowledge plus screening completion/accuracy ensuring appropriate action is taken. Ensuring practice nurse educators and student clinical teachers for each division are emphasising nutrition/hydration.</li> </ul>	<ul style="list-style-type: none"> <li>✚ All Staff</li> <li>✚ Senior Nursing, Head of Nursing Quality, Nutrition Specialist Nurses, Consultant Dietitian</li> <li>✚ Dietitians/Speech &amp; Language Therapists Practice Nurse Educators, Student Clinical Teachers</li> </ul>	<p>On-going</p> <p>From March 2017</p> <p>From April 2017</p>



<ul style="list-style-type: none"> <li>• Work in partnership with catering company extending host/hostess training to include clinical relevance of specialist menus/nutrition coding/dysphagia options to improve understanding and adherence.</li> <li>• Continue to teach nutrition awareness on paediatric medic rotation inductions, extending this to adult junior doctor rotation inductions.</li> <li>• Review nursing and HCA induction education to support theoretical and practical nutrition/hydration/dysphagia awareness. Continue with practical Harm Free nutrition screening education in the simulation centre and standardise all malnutrition screening training relevant to clinical areas across the Trust.</li> <li>• Dietitians and Speech Therapy sub-teams to deliver tailored nutrition and dysphagia training (e.g. during care group mandatory in-service teaching sessions) for medics, nurses, HCAs and other members of the MDT. This will be based on locally identified training need to improve nutrition and dysphagia knowledge across clinical groups.</li> <li>• Consider online training for clinical staff to ensure appropriate skills and competencies enabling clear identification of patient's nutritional needs for example: <ul style="list-style-type: none"> <li>○ Nationals Skills Academy; <a href="http://www.nsahealth.org.uk/e-learning/courses-we-offer/312-fluids-and-nutrition">http://www.nsahealth.org.uk/e-learning/courses-we-offer/312-fluids-and-nutrition</a></li> <li>○ Wessex Academic Health and Science Network; <a href="http://wessexahsn.org.uk/projects/106/older-people-s-essential-nutrition-open-resources">http://wessexahsn.org.uk/projects/106/older-people-s-essential-nutrition-open-resources</a></li> <li>○ BAPEN MUST and Essentials of Clinical Nutrition; <a href="http://www.bapen.org.uk/e-learning-portal">http://www.bapen.org.uk/e-learning-portal</a></li> <li>○ Paediatric growth charts; <a href="http://www.rcpch.ac.uk/child-health/research-projects/uk-who-growth-charts/uk-who-growth-chart-resources-0-4-years/uk-who-0#information">http://www.rcpch.ac.uk/child-health/research-projects/uk-who-growth-charts/uk-who-growth-chart-resources-0-4-years/uk-who-0#information</a></li> </ul> </li> <li>• Strengthen links with St George's University to improve student doctors knowledge of nutrition support.</li> <li>• Explore food hygiene training and awareness of good nutrition and hydration with all staff involved in food service and preparation across the Trust.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Catering company trainers &amp; Dietitians</li> <li>✚ Dietitians and FYI education co-ordinator</li> <li>✚ Dietitians, Speech &amp; Language Therapists, Learning and Development department &amp; Practice Nurse Educators</li> <li>✚ Senior Nursing/Nutrition Specialist Nurses/ Nutrition Link Nurses</li> <li>✚ Trust Education and Training Team &amp; Trust Board</li> <li>✚ Consultant Dietitian and University Medical Student Programme Director</li> <li>✚ Facilities Senior Managers &amp; Training and Education &amp; Trust Board</li> </ul>	<ul style="list-style-type: none"> <li>By mid-2017</li> <li>From August 2017</li> <li>By end 2017</li> <li>By end 2017</li> <li>By end 2017</li> <li>Expand by end 2018</li> <li>By end 2019</li> </ul>
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<p><b>Nutrition Quality Improvement Plan (QIP):</b></p> <ul style="list-style-type: none"> <li>• Ensure meal time champions are in place and protected meal times are consistent across all areas.</li> <li>• Ensure ward nutrition information and patient nutrition boards are up to date. Ensure nutrition screening and food record charts are completed to the standard required (emphasis on improving electronic charts), plus nutrition care plans/dysphagia recommendations are followed and ward provision of extra snacks and cooked breakfasts are appropriately received.</li> <li>• Ensure patients are positioned post rehab ready for meals (if rehab up to 1hr pre-meal) and educate physiotherapists around timing of prescribed supplement drinks post rehab/therapy.</li> <li>• Continue fortified porridge/custard and milkshake rounds on senior health wards and consider rolling out across all wards where appropriate.</li> <li>• Continue with our volunteer training programme for enhanced mealtime support on senior health wards and extend to all wards where appropriate. Implement a critical level of number of patients' requiring red trays before escalating to the MDT for assisting with feeding.</li> <li>• Implement Nutrition screening in outpatient clinics and endoscopy, plus develop pathways for earlier dietetic intervention.</li> <li>• Provide further feeding support adaptations including specialised cutlery and finger foods for Senior Health and Neuro/Spinal wards.</li> <li>• Ensure nutrition/dysphagia elements of the hospital passport are utilised where appropriate and that nutrition/dysphagia elements of the butterfly scheme for patients with dementia are utilised consistently, including the 'REACH out to me' document.</li> <li>• Include mini-nutrition assessments in clerking documentation prompting clinicians to raise awareness and increase identification of malnutrition for earlier treatment.</li> <li>• Improve pre-op nutrition screening / management pathways to optimise nutritional status and empower patients by including post-op nutrition and hydration guidance in patient info sheets.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Senior Nursing, Head of Nursing Quality</li> <li>✚ Senior Nursing, Dietitians, Catering Company</li> <li>✚ Physiotherapy, Dietitians and Senior Nursing</li> <li>✚ Senior Nursing, Dietitians, Catering Company</li> <li>✚ Volunteer service, Senior Nursing</li> <li>✚ Senior Nursing, Outpatient Management Team &amp; Dietitians</li> <li>✚ Occupational Therapists, Dietitians, Senior Nursing</li> <li>✚ All Clinical Staff and Dementia Specialist Nurses to lead on education where required</li> <li>✚ AMU Lead Consultant, AMU Medics (including OPAL team and STAR)</li> <li>✚ Pre-Op Clinical Specialist Nurses, Anaesthetists, Surgical Teams &amp; Dietitians</li> </ul>	<ul style="list-style-type: none"> <li>By mid-2017</li> <li>By mid-2017</li> <li>By mid-2017</li> <li>End 2017</li> <li>By end 2017</li> <li>By mid-2018</li> <li>By end 2018</li> <li>By end 2018</li> <li>By end 2018</li> <li>By end 2018</li> </ul>
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<ul style="list-style-type: none"> <li>• Support the Value Based Standards Macmillan project within the surgical division. This will involve feedback from cancer patients nationally to ensure enhanced patient centred care, specially tailored to meet patient's individual needs. This plan will also focus on a patient's pathway from pre op, with the roll out of surgery school, which will include an education session from a dietitian, through to post-operative recovery and discharge home. Its aim is to have highly skilled and educated staff delivering excellent patient centered care which empowers the patient to take control of their condition/illness and/or recovery.</li> <li>• Provide food bags for patients on discharge, where provision is not immediately available and/or Food bank vouchers referrals on DC if required.</li> <li>• Develop patient self-management leaflets for use in hospital and on D/C to empower patients to monitor use of nutritional supplement drinks and to highlight when earlier intervention might be required.</li> <li>• Enhanced Recovery After Surgery (ERAS) programme across all areas – including expanding our 'Think Drink' Pre-Op Campaign.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Macmillan Nurses, Head of Nursing Surgery, Surgical Team &amp; Dietetics</li> <li>✚ Dietitians and Discharge coordinators</li> <li>✚ Trust Board &amp; Discharge coordinators</li> <li>✚ All clinical Staff, led by Senior Nursing, Anaesthetists, Surgeons and Dietetics</li> </ul>	<p>By end 2018</p> <p>By end 2018</p> <p>By End 2018</p> <p>By end 2019</p>
<p><b>Hydration Quality Improvement Plan (QIP):</b></p> <ul style="list-style-type: none"> <li>• Promote awareness of Nutrition &amp; Hydration and Dysphagia policies to reduce the risk of dehydration/AKI/fluid overload/aspiration in adults to ensure patients receive safe adequate, safe routes of hydration and to ensure infants and children are prescribed adequate hydration based on age related requirements (prescribed by medics).</li> <li>• We will set up a campaign for AKI prevention and management, creating pathways with established AKI clinics in Acute Medical Units (AMU).</li> <li>• Consider the use of water hydrants for patients who are unable to access drinks themselves.</li> <li>• We will continue to focus on accurate completion of fluid balance charts with particular attention to improve completion on electronic systems, increasing recognition and monitoring of IV fluid dependent patients to prevent over and under hydration.</li> <li>• We will develop risk alerts and validate screening tools for specific clinical areas to highlight the importance of fluid restrictions, plus improving the recognition and monitoring of malnutrition in fluid overloaded patients.</li> </ul>	<ul style="list-style-type: none"> <li>✚ Nutrition steering committee, plus all Dietitians and Speech &amp; Language Therapists</li> <li>✚ Hydration lead for the Trust, AMU Consultants &amp; Senior Nursing</li> <li>✚ Trust Quality Board</li> <li>✚ Practice Nurse Educators, Dietetics &amp; all clinical staff</li> <li>✚ iClip team, Dietitians, Senior Nurses</li> </ul>	<p>Awareness days ongoing</p> <p>By end 2017</p> <p>By end 2017</p> <p>By end 2017</p> <p>By end 2019</p>

Audit Improvements:		
<ul style="list-style-type: none"> <li>Ensure all nutrition and hydration audit results are known by the Nutrition Steering Committee with robust accountable improvement action plans if required with learning themes reviewed to take forward for Trust improvement initiatives.</li> </ul>	<ul style="list-style-type: none"> <li>All clinicians and Nutrition Strategy committee</li> </ul>	<p>Quarterly</p>
<ul style="list-style-type: none"> <li>Continue Trust wide inpatient protected meal time (ProMT) and nutrition screening audits, ensuring results are improved upon/maintained and Chief Nurse aware.</li> </ul>	<ul style="list-style-type: none"> <li>Audit team, Head of Nursing Quality, Senior Nurses and Dietitians</li> </ul>	<p>Bi-annually minimum</p>
<ul style="list-style-type: none"> <li>Continue NG tube insertion and safe to feed documentation audit with actions for improvements as required.</li> </ul>	<ul style="list-style-type: none"> <li>Nutrition Team, Nursing, iClip trainers.</li> </ul>	<p>Annual</p>
<ul style="list-style-type: none"> <li>Continue Parenteral Nutrition (PN) pharmacy reporting at Nutrition Steering committee meetings; numbers of PN patients, line infections, deaths, reasons for discontinuing PN, bag order numbers/ waste, inpatient bed days and transfers to other hospitals, caseload numbers of home PN patients - admission rates, bed days and referral sources (external/internal/palliative care), remote set ups.</li> </ul>	<ul style="list-style-type: none"> <li>Nutrition Team</li> </ul>	<p>Quarterly</p>
<ul style="list-style-type: none"> <li>Ensure Nutrition and Hydration elements of Nursing Quality Observatory Audits are mandatory monthly and that there is a process for reporting to the nutrition steering committee to review gap analyses against CQC regulation 14.</li> </ul>	<ul style="list-style-type: none"> <li>Matrons</li> </ul>	<p>Monthly</p>
<ul style="list-style-type: none"> <li>Continue with Senior Staff 'Back to floor' audits and include regular nutrition related topics.</li> </ul>	<ul style="list-style-type: none"> <li>Senior Nursing and AHP Leads</li> </ul>	<p>Quarterly</p>
<ul style="list-style-type: none"> <li>Establish annual ERAS audits across all areas, including critical care (with a particular focus on perioperative fasting).</li> </ul>	<ul style="list-style-type: none"> <li>Dietitians</li> </ul>	<p>By end 2017</p>
<ul style="list-style-type: none"> <li>Increase awareness and involvement in National and international nutrition audits.</li> </ul>	<ul style="list-style-type: none"> <li>Dietitians</li> </ul>	<p>By end 2017</p>
<ul style="list-style-type: none"> <li>Undertake Trust wide re-feeding syndrome practice audit against NICE guidelines plus commence feed/supplement prescription issue reporting/TTO monitoring at Nutrition Steering Group meetings in order to review TTO process for provision of nutrition supplement drinks and Thiamine/B-Complex on DC to reduce waste and cost.</li> </ul>	<ul style="list-style-type: none"> <li>Dietitians, Pharmacists &amp; local CCG Medicines Management</li> </ul>	<p>By end 2017</p>
<ul style="list-style-type: none"> <li>Audit patient delivery of modified consistency/dysphagia recommendations.</li> </ul>	<ul style="list-style-type: none"> <li>Speech &amp; Language Therapists</li> </ul>	<p>By end 2017</p>
<ul style="list-style-type: none"> <li>Include nutrition related questions in our patient discharge (friends and family) survey.</li> </ul>	<ul style="list-style-type: none"> <li>Trust Board, Corporate Nursing &amp; Discharge Co-ordinators</li> </ul>	<p>By end 2018</p>

## 2. HEALTHIER EATING FOR STAFF AND VISITORS

Our overarching ambition is to be recognised as a health-promoting Trust, one that makes an active contribution to promoting and improving the wider health and wellbeing of those with whom we come into contact. The Workplace Wellbeing Charter is widely recognised as the business standard for health, safety & wellbeing across England. Our ambition is to obtain achievement level in 2017 in the charter and then reach the level of Excellence by 2019. To achieve this we will work to ensure that on site facilities provide healthy options for staff and visitors. The trust will actively promote these options in line with the charter ensuring that campaigns are clearly distinguished with different messages for staff/visitors and patient nutrition.

Our ambition for our staff is to ensure that every employee will be supported to maintain and improve their health and wellbeing and every employee will be expected to take reasonable steps to improve their health and wellbeing.

We know that improved staff health and well-being will lead to improved patient outcomes, reduced costs and improved service delivery for our patients. The Trust's "Health and Wellbeing Strategy" includes strategic objectives for healthier eating and captures the Hospital Food Standards, together with the national Health and Wellbeing CQUIN target introduced in 2016, which encourages providers to improve their role as an employer in looking after employees' health and wellbeing. Estimates from Public Health England put the cost to the NHS of staff absence due to poor health at £2.4bn a year – around £1 in every £40 of the total budget. This figure excludes the cost of agency staff to fill in gaps, as well as the cost of treatment. As well as the economic benefits that could be achieved, evidence from the staff survey and elsewhere shows that improving staff health and wellbeing will lead to higher staff engagement, better staff retention and better clinical outcomes for patients. The Five Year Forward View made a commitment 'to ensure the NHS as an employer sets a national example in the support it offers its own staff to stay healthy'.

The role of Trust Board and clinical leadership is to create an environment where health and wellbeing of staff is actively promoted and encouraged. CQUIN Indicator 1b relates to Healthy food for NHS staff, visitors and patients;

- a.) The banning of price promotions on sugary drinks and foods high in fat, sugar or salt.
- b.) The banning of advertisements on NHS premises of sugary drinks and foods high in fat, sugar or salt.
- c.) The banning of sugary drinks and foods high in fat, sugar or salt from checkouts.
- d.) Ensuring that healthy options are available at any point including for those staff working night shifts.

Delivery of objectives related to this CQUIN are led by the Trust Health and Wellbeing lead and the Staff Safety Health and Wellbeing committee, which is jointly chaired by the Director of Human Resources and Organisational Development (HR advisor to the Trust Board) and a UNISON representative. The committee includes representation from staff support services, Head of Health and Safety, Staff Counselling, Listening Into Action and Lead Occupational Health Consultant.

Campaigns need to be clearly distinguished with different messages for staff/visitors and patient nutrition, due to the high incidence of patient malnutrition in hospital, it is appropriate to provide and sell high calorie foods/drinks for patients if desired. Drinks containing sugar might be required and therefore need to be available to treat hypoglycaemia. It is important staff/visitors are guided to make an informed choice regarding healthy eating.

**The Trust partnership works with our community estate providers at Queen Mary's Hospital, St. Johns therapy centre and the Nelson Health centre and St George's University. We also operate many outlets for staff and visitor catering which include:**

- M&S Franchise – Simply Food (SSP Franchise)
- Ingredients Restaurant (in-house catering team)
- Ingredients Café LNS Wing OPD
- Whistlestop Newsagent (SSP Franchise)
- Peabody's coffee shop Atkinson Morley (branded outsourced outlet)
- Peabody's Café – Rose Centre (branded outsourced outlet)
- Vending Facilities (SGH Site – managed in-house)
- Hospitality Services (in-house provision)

**We have made major progress in establishing the requirements of the CQUIN and Hospital Food Standards; however there is still more work to do. Recent developments include:**

- Audited onsite and offsite local food outlets against a tool amended from the Hospital Environment Nutrition Scan, and the Nutrition Environment Measurement Scan.
- 'Staff Wellbeing Portal' provides healthy recipes for staff to share.
- Removal of over 75% of full sugar drinks in onsite Vending machines and replaced with low or no sugar.
- Allergen information fully available for all areas.
- Health and Wellbeing Survey distributed by champions.
- Annual patient menu tasting testing for staff and visitors.
- Dietary information displayed in retail outlets with further information available on request.
- Including promotion of Nutrition and Hydration Week for staff and visitors.
- Special events to promote staff Health and Wellbeing.
- Health and Wellbeing Champions Training with the Healthy London Partnership.
- Customer retail survey carried out and action put in place into main Ingredients restaurant.

## Areas of future development priorities for this strategy period;

Priority	Responsibility	Timeframe
<p><b>Procurement:</b></p> <p>We will ensure food and drink is procured in line with the Government Buying Standard to reduce salt, saturated fat and sugar and increase consumption of fibre, fish and fruit and vegetables.</p>	<p>✚ Assistant Director Facilities &amp; Procurement Department</p>	<p>Ongoing</p>
<p><b>Informed choice to improve healthy consumption:</b></p> <p>Ensuring DOH guidance and CQIUN targets are met for healthy eating in onsite restaurants and other food outlets across all sites to allow people to make an informed choice. We will work in partnership with voluntary services and contractors, to make the healthier choice the easier choice in the staff restaurant, vending machines and on-site shops by;</p> <ul style="list-style-type: none"> <li>• Considering the dietary, cultural and religious needs of our staff and ensure there are suitable healthy choices for everyone.</li> <li>• Ensuring fruit is offered at checkouts in our on-site restaurants and banning sugary drinks and foods high in fat, sugar or salt from checkouts.</li> <li>• Using dietary coding guidance to provide easy reference information for staff and visitors within on-site restaurants and increase healthier options available plus review pricing structure to promote healthier consumption.</li> <li>• Reviewing hospitality menus' to increase our healthier range and reducing items high in fat, sugar available to order.</li> <li>• Working with the Voluntary and Charity staff visiting wards and departments to ensure healthier options on snack trolleys are available for staff/visitors.</li> <li>• Paying particular attention to the choices available to staff who work out of hours to ensure they have healthy options and consider provision of hot food 24 hours a day every day for staff and visitors at St George's and Queen Mary's Hospitals.</li> </ul>	<p>✚ Assistant Director Facilities, Restaurant Manager, Dietetic catering sub-team, Volunteer Services/Friends of St George's Charity</p>	<p>Ongoing</p> <p>By end 2016</p> <p>By end 2017</p> <p>By end 2017</p> <p>By end 2017</p> <p>By end 2018</p>

<p><b>Health promotion:</b></p> <ul style="list-style-type: none"> <li>• Healthier eating promotional events will form part of Health and Wellbeing objectives.</li> <li>• We will implement a rolling schedule of planned events to promote the importance of healthy eating including a brief of healthier eating opportunities as part of staff inductions.</li> <li>• We will use advertising campaigns for healthier eating for staff and visitors ensuring <b>banning of price promotions, free samples and adverts for sugary drinks and foods high in fat, sugar or salt for staff and visitors</b> (this does not apply for patient malnutrition campaigns). All products used for free samples or vendors promoting high-street nutrition products/supplements for staff or visitors, must be evaluated by the Consultant Dietitian and Assistant Director Facilities before authorisation.</li> </ul>	<ul style="list-style-type: none"> <li>• Health and Wellbeing lead and Champions, Facilities, Dietetics, Communications lead, Training and Education</li> </ul>	<p>Ongoing</p> <p>From mid-2017</p> <p>By end 2017</p>
<p><b>Staff engagement:</b></p> <ul style="list-style-type: none"> <li>• We will continue promotion of healthy eating and offer weight reducing sessions for staff in partnership with registered accredited weight loss providers, plus will aim to offer tailored programmes to improve understanding and consumption of healthier diets. Ensure weight loss providers are authorised by Consultant Dietitian and Assistant Director Facilities before promotion within the Trust.</li> <li>• We will involve staff in the identification and design of health and wellbeing measures related to healthier eating opportunities across the hospital; and will conduct an annual Staff Health and Wellbeing Survey to evaluate and improve.</li> </ul>	<ul style="list-style-type: none"> <li>• Health and Wellbeing lead and Champions, Facilities, Dietetics &amp; Communications lead</li> </ul>	<p>From end 2016 ongoing</p> <p>From end 2017</p>
<p><b>Audit:</b></p> <ul style="list-style-type: none"> <li>• We will audit against national guidelines twice a year for in-house food outlets and once a year for retail provider outlets against the DEFRA standard to reduce salt, saturated fat and sugar and increase consumption of fibre, fish and fruit and vegetables.</li> </ul>	<ul style="list-style-type: none"> <li>• Assistant Director Facilities</li> </ul>	<p>From mid-2017</p>



### 3. SUSTAINABLE PROCUREMENT

Our aim is to support the Department of Health (DOH) in its initiatives to raise awareness of the Government Buying Standards for food and catering services to NHS procurers in order to drive improvements in the standard of food in the NHS. The standards were developed by the DOH Department of Environment, Food and Rural Affairs (DEFRA) in 2014 and cover the following areas of sustainable procurement:

- Foods produced to higher sustainability standards –higher environmental standards, fish from sustainable sources, seasonal fresh food, animal welfare and ethical trading considerations.
- Procurement of catering operations to higher sustainability standards – including equipment, waste and energy management.

The Nutrition Steering Committee, alongside facilities and procurement department leads on the development of sustainability in food and drink; this includes carbon reduction and ensures that the Trust considers the wider impacts of purchasing decisions and that national guidance on reporting standards are met. This is overseen by NHS Supply Chain and the NHS Sustainable Procurement team, links are also made with the St George's University campus to ensure good representation across all areas.

The majority of the patient's meals are purchased from Apetito, who meet the governments buying standards for carefully sourced ingredients and support British food and the farming industry. The meals arrive frozen into the hospital and are distributed to wards for regenerating prior to a meal service. A number of suppliers are already supporting Government Buying Standards for Food sold onsite with a range of products that meet the set criteria.

We support the overarching commitment that good procurement is sustainable procurement. To back this we are undertaking a programme to engage with both suppliers and customers to raise awareness of the Government Buying Standards on food, and have committed to include information of compliant products within all future food tenders.

Due to the nature of our patient meal services being bulk batch cooked, plus the requirement to be able to offer second helpings coupled with patient appetite variance due to illness, it is inevitable we generate some level of food waste. Some patients are not able to eat at the designated meal times which can lead to a high level of waste generated. Un-served waste food is monitored each month in order for meal service to be tailored according to popularity to reduce waste. The Trust waste from patient meal service is currently 7-8% each month and we have committed to achieve a minimum of 5% waste over this strategy period.

**In order to keep waste to a minimum we have implemented a number of initiatives;**


- Reviewed all patient menus with feedback from Dietitians, Speech Therapy, patients and staff to tailor for clinical and cultural relevance plus popularity.
- Introduced an a la carte menu with state of the art microwaves (I-Wave) for plated meals in specific areas (e.g. maternity, intensive care and renal).
- Introduced smaller containers in the regeneration ovens to manage the amount of food that is sent to the wards.
- In addition to the food waste for patients; staff catering is managed by monitoring quantity purchased, cooking in smaller batches and utilising fresh cook restaurant facilities to minimise waste.
- Further to this we also have effective waste management to minimise landfill for recycling of packaging through the catering processes, including our outsourced retail providers.

**Other recent sustainable developments include;**

- Coffee grounds from bean to cup machines are now given away for staff to use on their gardens and also for the grounds and gardens on the St George's Hospital site.
- We source fair-trade and sustainable alliance products
- We introduced more effective and less energy reliant equipment in patient and visitor catering areas – including low energy regeneration ovens, beverage trolleys and other light equipment.
- We use our purchasing power to procure foods from sustainable sources. Our main food supplier Apetito UK supports the British food and farming industry and their policy is to buy from British (and Irish) sources provided it represents the best value (in terms of quality, cost, food safety and sustainability). We only use sustainable fish (Marine Stewardship Council or Marine Conservation Society) and sustainable palm oil. We procure only British milk and source meat from Red Tractor farms.
- In 2004 the catering department committed to purchasing fresh meat with Red Tractor assurance. The Red Tractor logo confirms that independent assessors have checked the meat meets comprehensive standards, from farms to fork. The standards cover traceability, food safety/hygiene, animal welfare and environmental protection.
- Since 2007 Apetito have been working to develop the UK's most sustainable and distribution system, thereby reducing and minimising the impact on the environment. They have achieved:
  - 33% reduction in carbon
  - 43% reduction in water usage
  - The returnable crate system has removed 1.2m cardboard boxes per annum
  - 50% reduction in food waste with all remaining diverted from landfill into anaerobic digestion.
  - 40% reduction on diesel usage
  - 75% reduction in Nitrous Oxide levels compared with current Euro V standard

In terms of the ambitions captured within this strategy, the Nutrition Steering Committee will ensure that decisions are made in line with the Government Buying Standards for Food and Catering Services (HMG Standards developed by Department of Environment, Food and Rural Affairs, 2014).

## Areas of future development priorities for this strategy period;

Priority	Responsibility	Timeframe
<p><b>Procurement;</b></p> <ul style="list-style-type: none"> <li>We will continue to review compliance of our supply chain against DEFRA standards annually for all in house operated food and beverage outlets in partnership with our community sites to ensure that all premises with staff, patients and visitors are reviewed and follow the same standards (where the trust is overall responsible for all the services). This is currently under review for retail areas and will be reviewed in September 2017 for the patient meals services as part of the annual menu review.</li> <li>We will continue to ensure any future staff and visitor catering /retail contracts are considered in line the standards across whole Trust Estate – acute and community provision.</li> <li>We will continue with Responsible sourcing of food including our commitment to purchasing meat with Red Tractor assurance.</li> <li>We will notify compliance with DEFRA standards to the Trust Quality Board via Steering Committee. Plus communicate our results to suppliers and customers <a href="https://www.supplychain.nhs.uk/campaigns/government-buying-standards/">https://www.supplychain.nhs.uk/campaigns/government-buying-standards/</a></li> <li>We will embed the Government Buying Standards in our procurement protocol and suppliers frameworks via NHS Procurement nationally to promote Sustainable procurement standards in all food and drink operations.</li> <li>We will continue our commitment to sustainably sourced fresh healthy food by working towards the Soil Association “Food for Life Catering Mark” accreditation.</li> </ul>	 Assistant Director Facilities & Procurement Team	<p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>From mid-2017</p> <p>By end 2019</p> <p>By end 2019</p>

<p><b>Waste Management;</b></p> <ul style="list-style-type: none"> <li>We will continue to identify and reduce sources of energy, water and food waste.</li> <li>We will aim to reduce food waste to meet 5% maximum targets by introducing more effective controls on the meal ordering processes and by working with our Catering Suppliers and Nursing staff to monitor plate waste as well as un-served waste.</li> <li>We will develop a separate food waste stream to avoid any future mixed waste concerns and assist with accurate reporting.</li> </ul>	<ul style="list-style-type: none"> <li>All Staff</li> <li>Catering company and Nursing</li> <li>Assistant Director Facilities</li> </ul>	<p>Ongoing</p> <p>By end 2018</p> <p>By end 2019</p>
<p><b>Promotion and Education;</b></p> <ul style="list-style-type: none"> <li>We will continue to replace inefficient infrastructure with modern energy efficient items.</li> <li>We will align Trust Strategy in relation to the delivery of sustainable food and catering service to the ever-changing population.</li> <li>We will continually educate staff, visitors and patients the importance of sustainable food and drink services.</li> </ul>	<ul style="list-style-type: none"> <li>Estates</li> <li>Trust Board</li> <li>Staff inductions</li> </ul>	<p>Ongoing</p> <p>By mid-2017</p> <p>By end 2018</p>

