

Trust Board

SWH 01289 Food and Drink Strategy

The Trust's Intranet holds the current approved guidance documents.

Notice to staff using a paper copy of this document.

Staff must ensure that they are using the most up-to-date document to guide their practice and must check that the version number of the paper copy matches that of the one on the Intranet.

| | |
|---|---|
| Version | 2 |
| Job Title of Responsible Manager | Associate Director of Support Service |
| Replacing Document | Food and Drink Strategy Version 1 SWH 01289 |
| Ratifying 'Body' | Health and Wellbeing Group |
| Date Ratified | |
| Date for Review | |
| Relevant Standards: | Health and Social Care Act 2008 Regulations: Regulation 09, 10, 12. BAPEN (2013) Malnutrition Universal Screening Tool British Dietetic Association (2017) Nutrition and Hydration Digest: Improving Outcomes through Food and Beverage Services Council of Europe (2003) 10 Key Characteristics of Good Nutritional Care in Hospitals Department for Environment, Food and Rural Affairs (defra) (2017) Government Buying Standard for Food and Catering Services Department of Health (2014) The Hospital Food Standards Panel's report on standards for food and drink in NHS hospitals |

Document History

| Issue Status e.g. Draft or Final | Catalogue and Version Number | Document Title | Date | Actioned by: (Job Title or Name of Approving/ Ratifying Body) | Page/ Section/ Paragraph | Comments |
|-------------------------------------|------------------------------|----------------|--------------|---|--------------------------------|---|
| Final | 1 SWH 01289 | Food Strategy | August 2015 | Community Dietitian | New Document | |
| Final | 2 | Food Strategy | January 2018 | Community Dietitian | Throughout | Update in line with new national guidance |
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1 Introduction

South Warwickshire NHS Trusts' Food and Drink Strategy covering nutritional care, healthy eating and sustainability has been developed using the recommendations of the Hospital food Standards Panel 2014. This referenced five required national standards that must be met:

1. BAPEN: Malnutrition Universal Screening Tool
2. British Dietetic Association: Nutrition and Hydration Digest: Improving Outcomes through Food and Beverage Services
3. NHS England: 10 Key Characteristics of good nutritional care
4. Public Health England: Government Buying Standard for Food and Catering Services.
5. Public Health England: Government Buying Standard for Food and Catering Services.

Version 2 includes new Government initiatives introduced in 2017, namely Healthy Eating section of the Wellbeing CQUIN and the Sugar Reduction Pledge.

The Trusts' approach to food and health is addressed through the principles listed in section 6 and supported by 5 policy documents. These documents form the Trusts' Food Strategy. The Trust provides a service in the community as well as to hospitals, so the strategy and policy guidelines address provision across all localities.

SWFT will promote the health and well-being of patients, staff, carers and visitors through the provision of healthy and safe food and drink, and giving accurate information on food and health.

The differing requirements of healthy people and those with disease, across all age groups and cultures are taken into account through provision of a range of choices. There are two types of food and drink provided. "Healthy eating" is the everyday food and drink provided for the majority of patients, staff and visitors. "Eating for Health" is providing therapeutic food and drink tailored for the individual. (Department of Health 2014). Details can be found in the Trusts Healthy food and Drink Guidelines (SWFT 2015i – being updated 2018)

As a major purchaser and provider of food and catering services, the Trust puts sustainability at the heart of its work. (SWFT 2015ii) This includes reducing waste, ensuring that food and drink purchased meets high standards of farm and food production, reducing our carbon footprint and using local suppliers where possible (Soil Association 2017).

2 Purpose

To bring together existing Trust policies relating to food and drink, and describe how the 5 national standards relating to food and drink will be met by the Trust. (See Appendix A)

3 Audience

This document applies to all Trust staff, catering contractors and volunteers who provide food and drink, or information about it for patients, staff and visitors..

4 Associated Trust Documents

| | |
|-----------|--|
| SWH 0069 | Food Hygiene Policy |
| SWH 00487 | Nutrition Screening Guideline |
| SWH 00731 | Patient Mealtime Experience Policy (incorporating red tray, protected meals) |
| SWH 00340 | Healthy food and drink guidelines for patients, staff and visitors |
| SWH 00297 | Carbon Management Policy |

5 Responsibilities/Duties

5.1 Board of Directors

The BoD is responsible for determining the governance arrangements of the Trust including effective risk management processes. It is responsible for ensuring that the necessary clinical policies, procedures and guidelines are in place to safeguard patients and reduce risk. In addition they will require assurance that clinical policies, procedures and guidelines are being implemented and monitored for effectiveness and compliance.

5.2 Chief Executive

The Chief Executive Officer (CEO) has overall responsibility for patient safety and ensuring that there are effective risk management processes within the Trust which meet all statutory requirements and adhere to guidance issued by the Department of Health.

The CEO holds each line manager accountable for meeting objectives and to work together towards meeting the objectives approved by the Board.

5.3 Director of Nursing/Medical Director

The Director of Nursing is the Executive with delegated responsibility for implementation of Governance arrangements within the Trust.

The Director of Nursing and the Medical Director are responsible for overseeing the implementation of this document.

5.4 All Staff

All staff involved in providing food and drink for patients, staff and visitors need to be aware of the Strategy and their responsibilities as set out in the associated policies.

All staff who provide information regarding food and drink for patients, staff and visitors need to be aware of the Strategy and their responsibilities as set out in the associated policies.

All staff involved in ensuring sustainable practices are followed should be aware of the Strategy and their responsibilities as set out in the associated policies.

Staff who attend the groups listed in section 7 are responsible for monitoring activity relating to this strategy.

6 Principles of the Strategy

The Trust has developed the following principles regarding food and drink. All Trust services relating to food and drink, the supporting education and promotional activities are measured against these.

6.1 Leadership for a Health Promoting Setting

Implement a food and drink strategy that addresses all aspects of a 'whole hospital approach' to food and drink, meeting local and national targets (NHS England 2017i and ii, PHE 2017) and maintaining the Soil Association standards and principles. There will be clear accountability via the Board and CEO for compliance with mandatory standards and the implementation of an action plan to make continuous improvement towards the goals of the food & drink strategy.

Work with partners including patients, carers, staff members and visitors to ensure that the food experience in our hospitals consistently supports the health and wellbeing of all.

Ensure that the rationale for this strategy and the resulting service offered is made clear through a programme of positive marketing.

6.2 Catering for Health & Sustainability

Promote the economic, social and environmental wellbeing of the local area through food procurement, in line with the Public Services (Social Value) Act. (HMSO 2012).

Ensure that all staff who are employed to purchase, prepare, cook and serve food are competent, appropriately trained and committed to provide balanced, nutritionally sound, health promoting menu choices. (SWFT 2013, SWFT 2015i, SWFT 2016, Public Health England 2017).

Specify to its Catering Service Contractor that they are to comply as a minimum, with the Government Buying Standards for food and catering (PHE 2017) and, where meals are cooked on-site or at a local hub, must achieve certification against the Food for Life Catering Mark Served Here (Soil Association 2017) at Bronze Standard or higher. The Catering Service Contractor must also meet the standards set by the Warwickshire Heartbeat Award.

6.3 Food retail and vending

Provide, support and promote high quality, healthy and safe food for patients, staff and visitors throughout all food outlets or services including vending and provision of healthy food 24/7. (SWFT 2013, SWFT 2015i).

6.4 Patient Food Experience

Ensure there is an enjoyable eating environment on wards, and offer protected meal times to ensure patients enjoy their meals without unnecessary interruption as specified in the Patient Mealtime Experience Policy. (SWFT 2016).

Ensure all patients are supported to choose appropriate meals, snacks and drinks and be given the necessary support and assistance to eat and drink to meet their varied needs. (BAPEN 2013, British Dietetic Association 2017, Council of Europe 2003).

Ensure menus are available that promote healthy options and enable patients to make appropriate choices easily while taking account of cultural and therapeutic dietary requirements (BDA 2017).

Support rehabilitation of nutritionally 'at risk' patients and their carers while in hospital and when returning into the community, through discharge support that includes food education and cooking skills training. (BAPEN 2013, SWFT 2015i).

6.5 Staff health and Wellbeing

Support and promote health and wellbeing in the workplace by ensuring that members of staff have round-the-clock access to high quality, healthy and safe food within the hospitals.

Provide information for staff who do not work in hospitals to enable them to make health promoting choices when purchasing food or bringing it in from home. (SWFT 2015i).

Provide opportunities for staff to improve cooking skills, and to encourage them to get involved in food growing initiatives on Trust sites.

6.6 Community and Partnerships

Facilitate links with all partners who support these principles. This will include the Patients Forum, local authorities, schools and colleges, community groups and residential and nursing homes. The Trust will invite these partners to work with the Trust to achieve the targets agreed.

Develop a database of local community organisations and groups available to help vulnerable patients. To encourage members of the local community to participate in food related activities with the Trust such as gardening, dining companions, helping with volunteer run coffee shops and activities run by partners such as community cafes and food banks.

Promote social value through support for local food producers.

7 Monitoring Compliance

7.1 Food for Life Group

This group meets bi-monthly and is a partnership of Trust staff with the Soil Association, Food for Life, Commissioners (Public Health), Patient Representatives and Caterers. The group sets priorities for food work across the Trust. Outcomes are reported to the Board of Directors and shared with the groups below.

7.2 Catering Group

This group meets monthly and receives the results of monthly audits of patient meals and addresses day to day issues regarding the patient meal service.

7.3 Patient experience Group

The Patient Experience Group meets monthly and reviews the Patient Meal Time Experience Policy. This is reported by the Support Services division at Finance and

Performance meetings

7.4 Support Services Audit and Operational Governance Group

The Support Services Audit and Operational Governance group meets monthly and is responsible for reviewing work covered by the Food Hygiene Policy and compliance with mandatory standards for hospital food.

7.5 Wellbeing Group

The Wellbeing Group meets bi-monthly and reviews the Healthy Food and Drink Guidelines for patients, staff and visitors as well as activity relating to growing food. The group puts into place initiatives to improve staff wellbeing which is monitored via the Staff Survey. The group will monitor meal provision (including vending) and food growing activities.

7.6 Carbon Management Group

The Carbon Management governance structure has a number of groups that meet to address the sustainability aspects of this strategy. (A Steering Group that meets quarterly, an Engagement Group that meets monthly and a Technical group that meets monthly).

8 Incident Reporting

In the event of an incident relating to Food and Drink it will be reported via the Incident Reporting system (Datix) as described in the Incident Management Policy including the Management of Serious Incidents (SWH 00020) and the Being Open and the Duty of Candour (SWH 00356).

9 Monitoring Compliance

The Food for Life Group will ensure that the key processes set out in this document are audited. The results will be fed back via the Wellbeing Group and the Support Services Audit and Operational Governance Group. Information will also be provided in the E-pulse and food News newsletters.

Where monitoring has identified deficiencies, recommendations and an action plan will be developed to improve compliance with the document. See **Appendix A** for specific details.

10 Equality Impact Assessment

All Trust documents are required to have a preliminary Equality Impact assessment (EIA) performed on them in order to establish whether any group of people will be impacted on unfairly by the document. An EIA has been performed on this document and the outcome is shown in **Appendix B**.

11 Author

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Karen Newnan, Hotel Services Manager

12 Contributors

Members of the Food for Life and Wellbeing Groups

13 References

BAPEN (2013) Malnutrition Universal Screening Tool

British Dietetic Association (2017) Nutrition and Hydration Digest: Improving Outcomes through Food and Beverage Services

Department of Health (2014) The Hospital Food Standards Panel's report on standards for food and drink in NHS hospitals

HMSO (2012) Public Services (Social value) Act

NHS England (2015) (Accessed December 2017) 10 Key Characteristics of good nutritional care <https://www.england.nhs.uk/commissioning/nut-hyd/10-key-characteristics/>

NHS England (2017i) Action to reduce sales of sugar-sweetened drinks on NHS premises: Consultation response and next steps

NHS England (2017 ii) NHS Staff health and wellbeing: CQUIN 2017 – 19 Indicator 1 Implementation Support.

Public Health England (Accessed December 2017) Government Buying Standard for Food and Catering Services.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/595129/Healthier_and_more_sustainable_GBSF_checklist.pdf

Public Health England (2014) Healthier and more sustainable catering principles – Nutrition principles

Soil Association (Accessed December 2017) Better food in hospitals

<https://www.soilassociation.org/our-campaigns/better-food/transforming-the-way-we-eat/better-food-in-hospitals/>

South Warwickshire NHS Foundation Trust (2013) SWH 0069 Food Hygiene Policy

South Warwickshire NHS Foundation Trust (2016) SWH 00731 Patient Mealtime Experience Policy (incorporating red tray, protected meals)

South Warwickshire NHS Foundation Trust (2015i) SWH 00340 Healthy food and drink guidelines for patients, staff and visitors

South Warwickshire NHS Foundation Trust (2015ii) SWH 00297 Carbon Management Policy

14 Appendices

Appendix A: Monitoring Compliance Form

Appendix B: Equality Impact Assessment

15 Appendix A: Monitoring Compliance Form

| | | |
|---------------------------|-------------------------------------|--|
| Title of Document | Food and Drink Strategy | |
| Relevant Standards | Health & Social Care Act | Other e.g. West Midlands Quality Review Service, Peer Reviews etc |
| | See section 1 | |

Monitoring/Audit Plan

| Process / minimum requirement to be audited / monitored | Lead | Tool/How | Written Reporting Frequency | Written Reporting Arrangements |
|--|-------------------------------------|--|------------------------------------|---|
| Patient meals | Facilities | Audit of meals – service, quality and timing. Also the taste, temperature & weigh portions | Quarterly | Report to each ward and Catering Group |
| Patient meal time experience | Matrons | Nurse care indicator audits. Audit of waste. | Monthly | Patient Experience Group and feedback to each ward |
| Kitchen Hygiene | Hotel Services | Audit of all kitchen areas | Annually | Report to Support Services Audit & Operational Governance Group including Health & Safety Group |
| Catering for staff and visitors | Health & Wellbeing group | Audit of availability of healthy menu and sales | 6 monthly | Report to Steering group |
| Catering for staff and visitors | Food for Life and Catering Provider | The Catering Mark Standards are audited | Annually | Report to the Steering Group |
| Waste reduction | Facilities | The amount of food returned uneaten is weighed. | 6 monthly | Report to Steering group |
| Growing Food | Health & | Check gardens to | 6 monthly | Report to Steering Group |

| | | | | |
|--|--|--|--|--|
| | Wellbeing group, Volunteers co-ordinators | ensure being tended. List of garden volunteers | | |
| <p>The above Table outlines the minimum requirements to be audited/monitored; additional audits will be commissioned in response to deficiencies identified within the service through morbidity and mortality reviews/benchmark data provided by CHKS or in response to national initiatives e.g. NICE, RCOG guidelines and CNST standards.</p> <p>Lessons learnt and action plans will be shared with all the relevant stakeholders.</p> | | | | |

| | | | | | |
|--------------|--|-------------------|--|--------------|--|
| Name: | | Job Title: | | Date: | |
|--------------|--|-------------------|--|--------------|--|

16 Appendix B: Equality Impact Assessment Form

| | |
|--|-------|
| Has an Equality Impact Assessment been carried out? | YES |
| Preliminary Stage 1 Equality Impact Assessment (must be completed if required*) | |
| What date was Stage 1 completed and published? | |
| Has a Full Assessment Stage 2 Equality Impact Assessment Tool been undertaken*? | NO-NA |
| If yes, what was the date of assessment and publication of Stage 2 and action plan? | NO |