# The Leeds Teaching Hospitals

# Patient Food Services at Leeds Teaching Hospitals NHS Trust (LTHT)

#### **Summary**

In our hospitals an average of 2000 lunches and 1700 evening meals are served to inpatients on a daily basis from the general menu.

All meals are delivered prepared and frozen by our supplier to a purpose-built unit at Seacroft Hospital. Menu items are picked & packed twice per day, based on menu choices made by patients themselves and dietary requirements. They are then distributed to a transfer point on each site.

Meals are heated and prepared for serving as near to the ward as possible by ward housekeeping staff, in accordance with local policies. Meals are then served to patients at ward level using the individual patient menu choice and portion size.

Snack boxes are available for patients who have missed a meal, also toast, cereals, biscuits and beverages are available at each ward for 24 hour service.

#### Meals and menus

The majority of wards have meals served at 12.00 hrs & 17.00 hrs, as these times best fit the ward routine. However, this system does provide flexibility to have staggered meal times.

In-patients are offered an extensive range of hot & cold meals both at Lunch and Evening meal service.

- **Breakfast** consists of a choice of cereals, bread, toast and preserves and is offered at the point of service.
- The menu offers 4 hot main courses both at **lunch & evening meal**, accompanied by a choice of two hot vegetable & two hot potato dishes.
- Lunch offers two hot desserts & two cold desserts; evening meal offers 4 cold desserts. Soup & orange juice are offered as a choice on the evening menu.
- The lunch & evening meal menu also offers in addition to the above, a choice of jacket potatoes with fillings, a selection of 10 sandwiches 7 cold protein main choice items and 5 salad accompaniments.

Wherever possible the patient is given an individual menu to enable them to choose their own lunch and evening meal, which consists of a range of hot and cold dishes.

Assistance is given where required to complete the menu card. Patients can choose hot or cold dishes at each meal period, or a combination of dishes at each meal period.

The general patients menu is coded with dishes suitable for: healthy eating, low fat, vegetarian, no added salt, soft food, diabetic and dishes which contain nuts.

Other menus available include:

- multi-cultural menus (Halal, Kosher, African & Caribbean dishes)
- children's menu
- gluten-free, wheat and lactose-free,
- texture-modified meals
- senior menu

# **Suppliers**

Local suppliers are used for the purchase of fresh and chilled products e.g. cooked meats, dairy Products (Leeds supplier), bread (Bradford supplier), prepared sandwiches (Huddersfield supplier).

The main supplier of frozen meals is Tillery Valley Foods based in Abertillery, Gwent. The company is the prepared foods business of Sodexo, a multi-national food services and facilities management company.

The provision of cook-freeze meals was chosen as opposed to cook-chill to provide greater assurance for food safety in the receipt and distribution of meals.

Following the launch of the Government's Better Hospital Food Programme in 2001 the Trust nutrition and dietetic teams work in partnership with suppliers to develop a varied and healthy menu choice for patients.

The consistent delivery of safe, good quality and nutritious food to patients, served at a time convenient to them is a critical part of the recovery process. The experience of the Trust's catering team, their food knowledge and nutritional understanding ensures that the Trust provides food services that as far as possible meet patients' individual requirements.

# Procurement

Leeds Teaching Hospitals NHS Trusts procures goods and services with sustainable development objectives in mind. Public procurement requirements such as value for money, efficiency, risk management and legal compliance are also fully addressed by procurement policies and procedures.

The Trust tries to ensure that goods and services purchased are manufactured, delivered, used and managed in an environmentally and socially responsible manner. Our purchasing activity contributes to sustainable development objectives by trying to maximise wider social and environmental benefits.

The current contract is due for renewal in 2011 when the market will be tested, taking into account dietary and nutritional requirements, sustainability, transport costs and local economic impact, working in partnership with other Trusts.

When the contract for frozen food was offered the new supplier had to meet the same standard of meals provided or higher than those produced in-house. Tillery Valley Foods was one of a small number of companies that put in a tender to meet the contractual specification in respect of number of meals required, technical dietary requirements, nutritional specification, and quality of food.

#### Costs

Catering expenditure (food items) to the end of November 2008 was £1.4 million. Non food expenditure to the end of November 2008 was £54k.

The annual spend on catering in the Trust is summarised in the following table:

Year	2005/06	2006/07	2007/08
Expenditure	£2.26 m	£2.22 m	£2.09 m

Average current daily costs of meals provided by the Trust's Seacroft unit are £2.92

# Nutrition

All menus are provided in accordance with national and local Nutritional Care Guidelines, Food Safety Legislation and Health Care Standards, Better Hospital Food initiative and PEAT requirements. This is supported with technical information from the supplier for each of the dishes provided to ensure minimum standards are provided on the menu.

Nutritional standards include:

- Meat-based entrees are to provide a minimum of 12g protein and 150kcals per recommended serving. Exceptions to this may occur when the base product is low in fat and served plain e.g. sliced turkey, baked fish.
- Vegetarian meals are to provide a minimum of 9/10g protein and 150kcals per recommended serving.

Destructive testing of menu items is undertaken on a regular basis to ensure these dishes meet purchase specifications.

# **Patient & Carer Involvement**

As part of the planning and development of menus Trust and stakeholder representatives are involved in developing choice, high quality food and ensuring nutritional adequacy. Feedback from nursing, dietetic, ward housekeeping staff and stakeholders is taken on-board.

Other areas of feedback include: Nutritional Care steering committee, Healthcare Commission core standards assessment feedback, patients' personal comments & suggestions, Patient Environment Action Team (PEAT) inspections.

Examples where feedback has influenced food services include the provision of a menu suitable for older patients, a specification for meals where texture is modified for better patient care.

# Protected meal times/Red Tray policy

We know that up to 40% of patients are malnourished on admission and a larger percentage of patients are malnourished at discharge since their treatment often means

people prefer not to eat much, food may be unfamiliar, and sometimes extra support is needed.

This results in:

- Increased antibiotic use
- Increased post-operative complications
- Increased length of stay
- Increased mortality

National and local guidance is comprehensive, including:

- Nutrition component of Essence of care, 2003
- Protected Mealtimes Initiative NPSA, 2004
- NICE Clinical Guideline 32 (Nutrition support in adults, 2006)
- Hungry to be heard Age Concern, 2006
- Joint Action Plan for 'Improving Nutritional Care' DoH, 2007
- Guidelines for the oral nutritional support of adults LTHT, 2008

Our meal service team has identified a number of areas where there is room for improvement. Internal review shows improved performance is required in the areas assessed. There is insufficient assurance that the Trust is comprehensively complying with NICE guidance on nutritional screening assessments. We need more assurance about systems in place to enable staff to assess, plan, monitor and evaluate patients' nutrition and hydration needs.

Older people who need help with eating should be identified on admission and a system put in place to signal the need for help. For example, serving food on red – or any different colour – trays allows all staff to easily recognise who needs help at mealtimes, and does not compromise the dignity of the patient.

Nursing and nutrition teams in LTHT hospitals have identified five specific areas to focus on:

- Launch of LTHT Oral Guidelines
- Implementation of MUST (Malnutrition Universal Screening Tool)
- Appropriate use of nutritional care plans
- Implementation of red tray system
- Implementation of protected meal times

Oral Nutritional Support of Adults includes the Protected Mealtime Policy. The guidelines were written to support all professionals to provide patient centred nutritional care and treatment, during hospital treatment and on discharge.

The guidelines provide practice-based information to support clinical practice and skills to promote good standards across the Trust. It provides current evidence-based knowledge to ensure good care and provides a local framework for implementation of NICE Guidelines for Nutrition Support in Adults, 2006.

# **LTHT Protected Meal Times Policy**

- Nursing staff will make food a priority during mealtimes, providing assistance and encouraging patients to eat, being aware of how much food is eaten and identifying patients nutritionally at risk.
- Ward based teams will organise their own mealtimes to maximise the number of staff available to deliver and assist patients with food.
- Where appropriate, ward based teams will provide patients with assistance to use the toilet and/or wash their hands prior to the service of food.
- Patients will be made comfortable prior to the service of meals, with food served within a comfortable reach and patients supported by an appropriate eating position. Patients requiring assistance with food will be identified to the ward/unit team prior to the service of meals (and may have their meal served on a red tray.)
- The ward may consider closing to visitors during mealtimes, except where visitors provide assistance with feeding, but there must be a general agreed approach to mealtimes. The patient and their relatives should be made aware of the mealtime policy as soon after admission as is reasonably possible. Inclusion of this information into patient information booklets is recommended.
- Interruptions e.g. ward rounds, drug rounds, GP visits, cleaning, documentation and therapy will only occur, during mealtimes, when clinically appropriate. The ward clerk could answer all telephones during the lunch period.
- Consideration will be given to where patients sit to eat their meals, supporting the social aspects of mealtimes whilst respecting the preferences of the individual.
- Each table will be clean and suitably prepared prior to the service of food and beverages, with appropriate tablecloths, place mats, cutlery, crockery and condiments. Bed tables and eating areas should be cleared (prior to the service of food) of items not conducive to mealtimes e.g. urine bottles and used dressings.

# **Trust Commitment**

We have included support for the roll out of protected meal times the Nursing and Midwifery Business Plan for 2009/2010.

# **Releasing Time to Care - Progress and Roll Out**

The Releasing Time to Care Programme is a way of freeing nursing time to ensure good nutrition for patients and Protected Mealtimes. Currently, 29 wards are undertaking the Releasing Time to Care programme (4 pilot wards, 12 wards in cohort one, plus 13 wards in cohort 2). One pilot ward had particular success with the meals module and has sustained the changes implemented. A further 14 wards have opted to undertake the Meals Module and will begin to implement the policy in the very near future.

LTHT January 2009