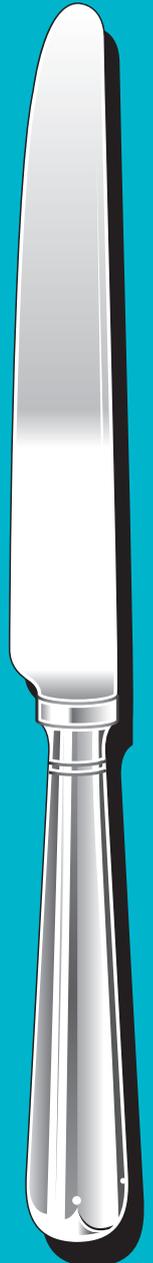
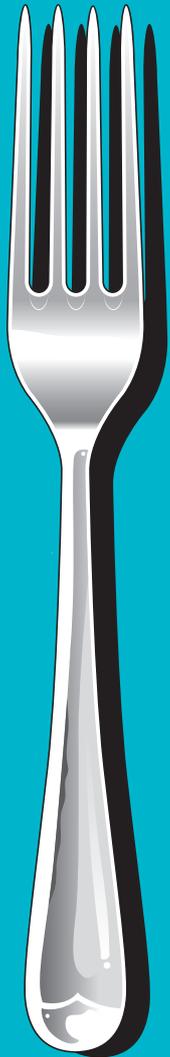
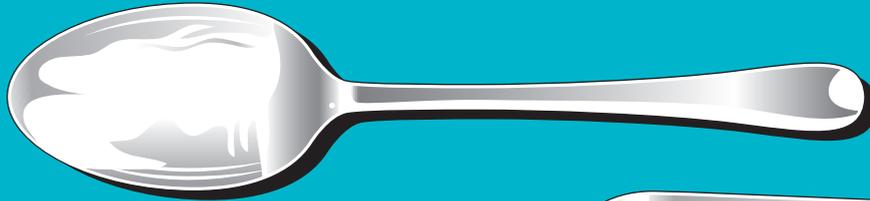




Northern Health
and Social Care Trust



Promoting Good Nutrition and
Oral Hydration in NHSCT



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FOREWORD

The Northern Health and Social Care Trust (NHSCT) has set out the context, vision, processes, enablers and action plan for Nutrition and Hydration in the **Food and Drink Strategy 2018-2021**.

Food and Drink is an important part of living, of life. In all contacts with Trust services we are committed to high quality and safe provision of, and advice on, **Nutrition and Hydration**.

This is important. In our hospitals, people who are well nourished and well hydrated recover more quickly from illness or surgery, have fewer complications and have a shorter stay. In our community settings people who are well nourished and well hydrated can live their lives more fully. As a Trust we also recognise our responsibility as an employer to support our staff, and those who visit our hospitals, to maintain a healthy lifestyle by providing and promoting healthier food choices.

This Food and Drink Strategy has been developed to embed the recommendations outlined in the Department of Health, Social Services and Public Safety (DHSSPS) document;

Promoting Good Nutrition: A Strategy for Good Nutritional Care for Adults in all Care Settings in Northern Ireland (launched by the Minister for Health in 2011) .

The DHSSPS document sets the scene by describing what good nutritional care looks like and giving direction to Health and Social Care Trusts to improve nutritional support and experiences in good nutritional care.

The Public Health Agency (PHA) produced **Nutritional guidelines and menu checklist for residential and nursing homes** (2014), which are designed to help ensure residents receive a varied diet that meets their nutritional needs in appropriate surroundings; thereby optimising health and preventing malnutrition.



In addition **Minimum Nutritional Standards in catering for Health and Social Care** have been published by the Food Standards Agency, Safefood and the PHA and issued to Health and Social Care Trusts by the DHSSPS (launched by the Chief Medical Officer 2017)

Our Food and Drink Strategy focuses on four key areas:

- **Meeting the nutrition and hydration needs of patients and service users**
- **Offering healthier eating choices across Trust facilities for service users and staff**
- **Providing specialised nutritional care**
- **Catering Services**

I would like to acknowledge the work of the Nutrition Steering Group, namely Maire Bermingham, Assistant Director for Corporate Support Services, Suzanne Pullins, Assistant Director for Patient Safety/Quality and Experience, Jill Curry, Head of Nutrition and Dietetics Service and Jill Bradley, Lead for Allied Health Professions (AHPs) who took the principal role of editing the final version of this strategy. This is an important strategy, however it is the action plan which will be led by teams in all divisions and services across the Trust that will bring this strategic vision to a reality for frontline staff and our patients/users and their families.

Eileen Mc Eneaney - Executive Director of Nursing and User Experience



OUR VISION

To deliver excellent integrated services
in partnership with our community

OUR VALUES

In the delivery, planning and reforming of our
services we will adopt our '**CORE**' values:

- We will treat the people who use our services and our colleagues with **compassion**.
- We will display **openness** and honesty with our patients, clients and colleagues, acting with integrity, providing professional, high quality services and support.
- We will **respect** the dignity, diversity and individuality of all our patients, clients and colleagues promoting equality and addressing inequality.
- We will strive for **excellence**, as a community of leaders, through consistent delivery of services and applied learning.





INTRODUCTION

It is well known that what we eat and drink significantly affects our health and wellbeing. This is true for both malnutrition and obesity. Food provided in hospital and community settings should support the health of all patients, service users, visitors and staff. More fundamentally the food experience should be safe, positive and enjoyable.

Good nutrition and mealtime experiences are of vital importance for people recovering from illness, or for those who are at risk of malnutrition. Malnutrition and dehydration are a significant risk to older people and are associated with increased hospital admissions and mortality rates, and also contribute to the development of various co-morbidities such as impaired cognitive function, impaired immune function, reduced muscle mass contributing to falls, poor control of diabetes and hypothermia.

Shorter hospital stays are better for patients, especially older patients or those who are more susceptible to acquiring infections. When a patient is admitted to hospital there is a great deal that can be done within the hospital setting to hasten recovery with close attention to nutrition and hydration needs.

For most patients/service users, nutritional care is based on the food provided by the Trust. Some patients/service users who are malnourished will require nutritional support, which may be provided by provision of additional food and fluids. In some cases, patients/service users may also require supplementation of their nutritional consumption through the provision of oral nutritional supplements or perhaps even artificial feeding via enteral or parenteral nutrition. We know appropriate nutritional support can reduce complications and speed recovery. In addition to nutrition, adequate hydration is essential to help prevent and treat conditions such as; pressure ulcers, urinary tract infections and acute kidney injury.

At the same time, some patients/service users will be dealing with illness associated with overconsumption of food and drink. This can lead to becoming overweight or you become obese. These conditions can also affect Trust staff and the NHSCT has a responsibility to support staff (and visitors) to make healthy food and drink choices. Health and Social Care Trusts have a wider social responsibility and as a major purchaser of food and catering services, we have the opportunity to put sustainability at the core of our service provision, including via procurement processes.

Sir Robert Francis QC in his final report of the ***Mid Staffordshire Foundation Trust Public Inquiry (2013)*** detailed examples of poor nutritional care and recommended that the arrangements and best practice for providing nutrition and hydration to service users require constant review, monitoring and implementation.

The importance of good, safe nutrition in health and social care has been recognised in a number of national reports to include ***Hungry To Be Heard*** (published by Age Concern UK, 2010) which challenged hospitals to implement seven steps to end malnutrition in hospitals for elderly patients; ***NCEPOD Parental Nutrition – A Mixed Bag Report (2010)***; ***NPSA March 2012 Dysphagia Diet Food Texture Descriptors and PHA NI 2014 Nutritional Guidelines and menu checklists for Residential and Nursing Homes***.

This Food and Drink Strategy provides a framework for nutritional care and food safety which embraces the inter-disciplinary activities contributing to the establishment and maintenance of patient/service users' and staffs' nutritional status. The Strategy identifies the processes necessary for successful delivery of good nutrition throughout the organisation.

This Strategy has been developed by the Trust Nutrition Steering Group, chaired by the Executive Director of Nursing, and provides a focus for this work within the Trust. This group reports to the Clinical Governance Group. The implementation of the Nutrition and Hydration Strategy will be supported in NHSCT by the Nutrition Steering Group; Food Matters Forum; Parental and Enteral Nutrition sub-group and Health and Wellbeing Steering Group.







MEETING THE NUTRITIONAL AND ORAL HYDRATION NEEDS OF PATIENTS AND SERVICE USERS

Our ongoing aim is to provide high quality and safe nutritional care and hydration through a multidisciplinary approach to all our patients and service users.

Nutritional screening

Nutritional screening is the first step in identifying people at risk of malnutrition. In line with the *DHSSPS Promoting Good Nutrition Strategy guidance*, adults have a Malnutrition Universal Screening Tool (MUST) assessment completed within 24 hours of admission to hospital and within 48 hours of admission to a care home, or on admission to District Nursing caseload. This ensures that a care plan is put in place to identify individual nutritional needs and outlines how these needs will be met. In the NHSCT use of MUST in hospital settings is monitored through audits completed by ward staff.

Meeting nutritional needs

Some people will have special dietary requirements relating to their clinical condition i.e. therapeutic diets. On admission to a hospital setting nutritional needs or risks will be identified and a referral will be made to Dietetic Services by nursing or medical staff .

Some people will have dysphagia (eating/drinking/swallowing difficulties) and will already have an Speech and Language Therapy (SLT) dysphagia care plan in place with recommendations for a texture modified diet. On admission to a hospital setting arrangements will be made to follow these recommendations unless referral to SLT for review assessment is indicated .

Some people may choose to adhere to particular diets which are not linked to a diagnosed clinical condition but rather are due to cultural beliefs or individual lifestyle choices eg vegetarianism. On these occasions, nursing colleagues will liaise with catering services to determine suitable options.

Mealtimes

Hospital patients are able to order from a selection of meals which are coded to assist patient choice and ensure patient safety. A range of specialist menu options are available for patients who require therapeutic diets or for those with confirmed diagnosis of food allergy. In NHSCT hospitals, day centres and residential homes, texture modified meals are available to patients/ service users with swallowing difficulties/dysphagia when specific recommendations have been made by a Speech and Language Therapist. Those who require assistance at mealtimes can be provided with appropriate aids or support from ward staff. Patients/ service users will be provided with appropriate information to support them to make safe food and drink choices. In some circumstances a patient/service user who has capacity may decide not to follow recommendations .

Priorities for this strategy period are:

- ***To continue to embed the use of MUST for all patients and service users in hospital and community settings with appropriate monitoring and review – ie MUST repeated weekly in hospital settings; monthly in care homes and every 3 months in community settings .***
- ***In hospital settings to ensure that every day, the nurse in charge will identify a nursing lead for mealtimes. This person will ensure that each patient receives the correct meal; assistance is provided as required and that patients have been encouraged to eat and drink as much of their meals and fluids, as possible. In hospital settings, all mealtimes will be supported by the Mealtimes Matter initiative and a pledge from staff to put patients first at mealtimes, and, where appropriate, John’s Campaign.(John’s Campaign is a movement to help NHS staff recognise the importance of working with family carers as equal partners in the care and support of people with a dementia who are in hospital)***
- ***To continue to monitor the effectiveness of care planning will involve the patient/ service user or their family to ensure that individual nutritional requirements are met. Patients and service users will be prepared to eat in a safe and comfortable position. This will include the washing or cleaning of their hands before eating.***
- ***In hospital settings, we will explore the role of the Volunteer Mealtime Companion***



One of our key objectives is to be recognised as a health-promoting Trust, one that makes an active contribution to promoting and improving the wider health and well-being of those we come into contact with. This includes service users, visitors and staff.





HEALTHIER EATING ACROSS TRUST FACILITIES FOR SERVICE USERS AND STAFF

In relation to our staff, it is our ambition to ensure that every employee will be supported to maintain and improve their health and well-being through access to healthy options at work and every employee will be expected to take reasonable steps to improve their own health and well-being.

We know that improved staff health and well-being will lead to improved patient outcomes, reduced costs, and improved service delivery for service users.

In relation to our patients it is recognised that eating a healthy diet may help patients recover more quickly. Therefore the choice of food provided will be sufficient to allow patients to make healthy eating choices consistent with medical conditions, personal choice, habits, tastes and cultural beliefs.

Delivery of objectives related to this aim will be led by the Trust's Health and Well-being Steering Group. The group provides direction and oversight for the health and well-being activities in the Trust, to ensure the Trust can evidence its progress in achieving its corporate objectives and to provide periodic reports to the Trust Board.

Priorities for this strategy period are to:

- ***Implement the Minimum Nutritional Standards for HSC staff***
- ***Engage closely with divisions and departments to encourage them to adopt and promote the standards.***
- ***Contribute to the annual review of the Trust's Health and Well-being Strategy***
- ***Review progress of Divisions against implementation of the strategy including evaluation data where available.***
- ***Review information available on Staffnet and supporting communication strategies to ensure they are up to date and reaching the widest possible audience.***
- ***Involve staff in the identification and design of other health and well-being measures related to healthier eating opportunities across our hospitals/facilities.***
- ***Offer increased opportunities for service users and staff to consume healthier nutrition and hydration options.***
- ***Engage closely with the Food Standards Agency and the Environmental Health Officers to achieve compliance with the Calore Wise project. This will provide clear communication to restaurant and coffee bar users of the kilo joules and kilo calorie information for all food items at point of service.***



SPECIALISED NUTRITIONAL CARE

In line with the Department of Health, Social Services and Public Safety (DHSSPS) **Promoting Good Nutrition Strategy Guidance** all adults will have a Malnutrition Universal Screening Tool (MUST) assessment completed e.g. within 24 hours of a hospital admission or within 48 hours of admission to a care home. This will ensure that a care plan is put in place to identify individual nutritional needs and how these will be met during their stay within a health and social care setting.

In the NHSCT the **Food First** approach is taken for those individuals identified as being at risk or having malnutrition. Food First is an approach to treating poor dietary intake and unintentional weight loss through the use of every day nourishing foods and nourishing snacks. For inpatients, Catering Services work in conjunction with Dietetic, Speech and Language Therapy (SLT) and Nursing colleagues to ensure adequate and appropriate meals and snacks are available to facilitate this approach. If nutritional requirements are still not being achieved through Food First, then oral nutritional supplements may be offered, as applicable and in consideration of pharmaceutical clinical effectiveness. Service users in the community should be advised re suitable nourishing supplements or if clinically appropriate referred to their GP for consideration re prescribed supplements.

Therapeutic or specialised dietary requirements are identified at the point of admission to services. Some people will already have care plans in place regarding a modified diet. Should an individual have a suspected eating/drinking/swallowing impairment, a referral is made to SLT who following their assessment will make recommendations in line with the NHSCT Dysphagia Management and Choking Risk Reduction Policy for Adult Patients/Service Users who have Dysphagia (Swallowing Difficulties). Where therapeutic nutritional needs are identified, a referral will be made to the Dietetic service to enable a professional assessment of these needs to be undertaken, followed by an appropriate intervention and treatment plan.

Where it is not possible to meet nutritional requirements through oral nutrition, a multidisciplinary team will determine the most appropriate administration route for nutrition. A decision to provide nutrition and hydration using alternative methods will involve the service users and/or their family/carers (as appropriate).



Fortijuice

NUTRICIA
Fortisip

NUTRICIA
Fortisip
Compact

Fresubini
3.2 kcal
DRINK

NUTRICIA
Forticreme
complete

Banana flavour

MIN
25 ml

3.2
kcal (13.4 kJ)/100ml

Vanilla-Caramel
Flavour



FRESENIUS
KABI

Priorities for this strategy period are to:

- **Plan and implement the regional nutritional product framework**
- **Develop proposals to implement NICE guidance which recommends the establishment of a Trust-wide Nutrition Support Team which is necessary in order to develop and support the provision of enteral and parenteral nutrition across the Trust. This team would further develop Trust guidance in relation to enteral and parenteral feeding, such as identification and management of re-feeding syndrome. The Nutrition Support Team would ensure multi-disciplinary overview of any necessary measures for the smooth transition of care.**
- **Ensure systems and guidance will be in place for appropriate and timely decisions in relation to the need for enteral and parenteral nutrition. Nutritional care will be in line with evidence-based guidelines on the safe management and administration of enteral and parenteral nutrition.**
- **Ensure, within the acute setting, Trust-wide arrangements will be in place to enable the provision of adequate nutrition and hydration for all patients/service users at all times (ie. Including out of hours).**
- **Encourage nutrition and hydration audits throughout the Trust, to identify areas where service improvement or reform may be introduced, such as enhanced recovery after surgery. Participation within national and regional campaigns and initiatives will be encouraged, such as the annual National Nutrition and Hydration week (usually in March each year).**





CATERING SERVICES

We are very proud of the fact that our hospitals and facilities have achieved a 4* to 5* food hygiene rating and the Customer Service Excellence Award.

A key objective for our Catering Services is to ensure the provision of high quality nutritional care for all service users in line with best practice. Awareness of the important role that Catering Services staff play in the delivery of nutritional care is incorporated into training provided for our staff. Catering Services must also ensure that suitable food options are available for service users from different cultures, religions and those with special allergy requirements.

Procurement and Logistic Services have awarded contracts to our food suppliers, and all new food contracts must meet certain criteria, for example, salt content. Our catering staff have also introduced a series of measures to reduce the level of salt in food, and to use healthier cooking processes and provide healthier options in our restaurants. The Calorie Wise initiative is also in place, with calorie information displayed on menus.

The Food Matters Forum involves service users and specifically focuses on ensuring that the menu and beverage quality and choice meets the needs of all patients/service users.

Priorities for this strategy period are to:

- ***Continue to ensure that the current menu and beverage quality and choice are suitable for all our patients/service users and meet the requirements for “Eating for good health” whilst in hospital in order to achieve optimum nutrition and hydration.***
- ***Focus on our provision of food snacks for service users, giving special consideration to patients/service users requiring special diets including allergy/gluten free and texture modified meals.***
- ***Use dietary coding guidance to provide information that facilitates healthy options to be chosen.***
- ***Consider the further provision of food services 24 hours a day, every day.***
- ***Continue to identify appropriate seasonal and organic produce for inclusion on menus.***
- ***Review the presentation and layout of menu formats to ensure these are working effectively for service users.***
- ***Offer increased opportunities for service users and staff to consume healthier nutrition and hydration options.***
- ***Involve patients/service users in the identification and design of healthier eating options.***
- ***Seek service users’, staffs’ and volunteers’ views and stories about their experience of nutrition and hydration.***





EDUCATION AND LEARNING

During 2017 the NHSCT has developed and launched the Food Safety and Person Centred Food Service training DVD incorporating an E Learning Assessment. A Food Allergy Policy is being developed which includes a step by step flow chart for ease of reference which will support the training video.

Dysphagia (eating/drinking/swallowing difficulties) information leaflets for NHSCT staff have been published and disseminated and there is a continuing roll out of a programme of face to face training in Dysphagia Awareness.

The Trust is committed to providing a skilled and knowledgeable workforce who have the appropriate skills and competencies to clearly identify and manage the nutrition and hydration needs of service users. Likewise through this strategy our staff will be facilitated to make healthy food choices for themselves.

- Nutrition and hydration will be included in the Trust's Corporate Nursing & Midwifery Induction programme and three yearly mandatory updates.
- All staff involved in nutrition and hydration assessment and management will have this included in their departmental induction training.
- Educational opportunities will be in place for all staff who are involved in the identification, assessment, preparation and delivery of nutrition and hydration support.





LEARNING FOR IMPROVEMENT

The Trust will provide assurance for service users, staff and Trust Board through the following measures:

- Mealtime Matters audits will be carried out on a regular basis to observe mealtime services
- Information collected through complaints, compliments, focus groups, patient experience surveys and 10,000 Voices will be reviewed and improvements implemented where necessary.
- Trends of nutrition and hydration incidents will be reviewed by Divisional Governance Groups
- Incidents, (moderate and above) or Serious Adverse Incidents (SAIs) in relation to nutrition and hydration, will be investigated by the Divisional Governance Team, with lessons learned disseminated across the Trust.
- An allergens Hazard Analysis and Critical Control Point in relation to the management of the 14 key Food Allergens for patients, staff and visitors will be developed.



CONCLUSION

This Food and Drink Strategy sets out the vision for the NHSCT for the period 2018-2021. It sets out a number of key themes along with strategic priorities.

These priorities will be incorporated into a detailed action plan developed by the Nutrition Steering Group which over the period 2018-2021 will be implemented through a series of partnerships within the Trust taking account of relevant local and regional initiatives.



ANNEX 1: NUTRITIONAL AND ORAL HYDRATION PRIORITIES

Priorities for this strategy period are:

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- *In hospital settings, we will explore the role of the Volunteer Mealtime Companion*

ANNEX 2: HEALTHIER EATING FACILITIES PRIORITIES

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- *Engage closely with divisions and departments to encourage them to adopt and promote the standards.*
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- *Involve staff in the identification and design of other health and well-being measures related to healthier eating opportunities across our hospitals/facilities.*
- *Offer increased opportunities for service users and staff to consume healthier nutrition and hydration options.*
- *Engage closely with the Food Standards Agency and the Environmental Health Officers to achieve compliance with the Calore Wise project. This will provide clear communication to restaurant and coffee bar users of the the kilo joules and kilo calorie information for all food items at point of service.*

ANNEX 3: SPECIALISED NUTRITIONAL PRIORITIES

Priorities for this strategy period are to:

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- *Develop proposals to implement NICE guidance which recommends the establishment of a Trust-wide Nutrition Support Team which is necessary in order to develop and support the provision of enteral and parenteral nutrition across the Trust. This team would further develop Trust guidance in relation to enteral and parenteral feeding, such as identification and management of re-feeding syndrome. The Nutrition Support Team would ensure multi-disciplinary overview of any necessary measures for the smooth transition of care.*
- *Ensure systems and guidance will be in place for appropriate and timely decisions in relation to the need for enteral and parenteral nutrition. Nutritional care will be in line with evidence-based guidelines on the safe management and administration of enteral and parenteral nutrition.*
- *Ensure, within the acute setting, Trust-wide arrangements will be in place to enable the provision of adequate nutrition and hydration for all patients/service users at all times (ie. Including out of hours).*
- *Encourage nutrition and hydration audits throughout the Trust, to identify areas where service improvement or reform may be introduced, such as enhanced recovery after surgery. Participation within national and regional campaigns and initiatives will be encouraged, such as the annual National Nutrition and Hydration week (usually in March each year).*

ANNEX 4: CATERING SERVICES PRIORITIES

Priorities for this strategy period are to:

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- *Offer increased opportunities for service users and staff to consume healthier nutrition and hydration options.*
- *Involve patients/service users in the identification and design of healthier eating options.*
- *Seek service users’, staffs’ and volunteers’ views and stories about their experience of nutrition and hydration.*

Our Values

COMPASSION



C

OPENNESS



O

RESPECT



R

EXCELLENCE



E