

**Board Nurse Director**

**Annual Update - Food Fluid and Nutrition**

**1. Introduction**

An essential criteria within NHS Quality Improvement Scotland standards is the requirement that the Board and associated governance arrangements are routinely updated in relation to the Food, Fluid and Nutrition agenda. This paper is presented to the Board as an annual update from the Food, Fluid and Nutrition Planning and Implementation Group on this basis.

**2. Recommendation**

Board members are asked to note the Annual Update on Food, Fluid and Nutrition.

**ANNUAL UPDATE: FOOD, FLUID AND NUTRITION**

**1. Background**

The Fluid and Nutrition Planning and Implementation Group (FFN PIG) have to date prioritised the **Achievement of a Well Nourished Patient** objective within the implementation of the Board's Food, Fluid and Nutrition Policy. This paper reports progress on the implementation of Food in Hospitals (National Catering Specification) and QIS Food, Fluid and Nutritional Care Standards.

**2. Achievement of a Well Nourished Patient**

**2.1 Nutritional QIS Standards Review date**

The Quality Improvement Scotland Review of Food, Fluid and Nutrition Standards took place in June 09 and overall feedback at that time was very positive with NHSGGC demonstrating improvement against the Standards. Subsequent to the review, a detailed action plan was developed and efforts to improve against the standards have continued. A number of achievements are detailed below:

- The implementation and standardisation of complex nutritional support across all hospitals through the recruitment of additional Dietetic and Clinical Nutrition Nurses to Clinical Nutrition Teams, the review and standardisation of clinical nutrition policies/ procedures and the establishment of a clinical nutrition network to support practice development. A comprehensive 'Nutrition Manual' will be completed this financial year.
- The implementation of nutritional screening and assessment of all patients within 24 hours of admission continues to be monitored and all Acute Directorates and the Mental Health Partnership can demonstrate compliance. Within Children's services a paediatric malnutrition screening tool has been developed, validated and implemented with high levels of compliance.
- The completion of actions compliant with Safety Action Notice (2008) including procurement and maintenance of all weighing equipment in the Acute Division and Mental Health in-patient facilities.
- A detailed audit of discharge documentation has informed the development of an action plan to improve discharge advice for both carers and for further care providers.
- Implementation of the Right Patient Right Meal Right Time policy continues to be monitored and progress against key criteria continues to improve including; protected meal times, correct meal choice and assistance with eating.
- The inclusion of Nutritional Care within the core induction programme, the training of 6329 nursing staff in Nutritional Screening and the completion of Nutritional Care training by 4068 staff equivalent to a minimum of one member of staff per ward per shift trained.

- The introduction of a patient information leaflet on food in hospitals is currently being rolled out on ward admission to acute adult and mental health services. Materials for Children's Services will be complete by December.
- The ongoing review of the FFN risk register prioritised the implementation of controls in relation to the provision of Texture Modified Foods and the Board supported significant investment in this area. Controls implemented with ongoing monitoring include: Implementation of a nurse led swallowing checklist, provision of Texture Modified Meals in line with National Specifications, Nursing guidance regarding National Specifications and menu options, increased range of menu choices for Texture Modified Meals and phased implementation and training programme across all sites.

## 2.2 Food in Hospitals – National Catering and Nutrition Specification

The National Catering & Nutrition Specification and implementation of QIS FFN Standards 3, 4 and 5 significantly overlap and require Boards to implement a consistent Board wide catering policy, standardised and nutritionally analysed menus and recipes, standardised operating and communication procedures, improved menu ranges and levels of choice including special, therapeutic and personal diets and patient information.

In addition to the actions above further achievements to meet the National Catering Specification include:

- Standardisation of food and fluid items available at ward level across NHSGGC.
- Implementation of comprehensive missed meals and nutritional snacks provision on all sites.
- Site specific communication packs developed and distributed in line with rollout of the new ward based bulk regeneration catering system to Lead Nurses and ward staff outlining all service associated details such as meal ordering procedures, service arrangements and timings.
- The most significant improvement is associated with the completed roll out of an enhanced range of therapeutic and texture modified meal menus to all adult sites. Children's services are currently trialling the texture modified menus.

## 2.3 Future Developments

- A Hydration Policy has been drafted to support a standardised and multi-disciplinary approach to fluid provision and monitoring, consultation will be completed by December 10.
- The 'Food, Fluid and Nutrition Profile' (standardised patient documentation) has been reviewed to address emerging gaps and co-locate additional relevant information including food preferences / allergies, fluid intake, oral supplements, dental information and palliative care.
- In addition to the Patient Experience (Better Together) and annual Catering Satisfaction Surveys as methods of seeking patient feedback a specific Patient Engagement session is being held on 12<sup>th</sup> November to develop an objective benchmark for the patients 'Food Journey'. The session will validate an

aspirational Food journey, prioritise aspects of nutritional care and food provision and describe success. This will be used along with other feedback to focus improvements and to define patient centred outcomes and measures.

### **3 Conclusion**

Board members are asked to note the considerable range of activities underway to improve Food, Fluid and Nutritional Care within NHSGGC.

**R. Crocket and A. Baxendale**  
**26th October 2010**