

DRAFT

**NHS Greater Glasgow
and Clyde
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Board Paper No. 11/14



Board Nurse Director

National Catering and Nutritional Services Specification: Half Yearly Compliance Report (Results for July – December 2010)

1. Recommendation

2. Introduction

This report provides the Board's monitoring data on compliance with the requirements set out in the 'NHSScotland Food in Hospitals National Catering and Nutrition Specification for food and fluid in hospitals in Scotland 2008'.

3. Background

The nutritional wellbeing of the patient population in hospitals remains a priority issue for NHSScotland.

The 'Food in Hospitals National Catering and Nutrition Specification for food and fluid in hospitals in Scotland 2008' was developed to ensure that the catering and nutritional services were clear as to the requirements of the new specification.

Catering and nutritional services are an essential part of the multidisciplinary approach to tackling the issues affecting the nutritional wellbeing of the patient population.

For a definable improvement in the nutritional standards to be delivered in a consistent and effective manner it is crucial for nutrition to be embedded into everyday practice. There must be a culture of "Nutritional well-being is everybody's business", with integration of best practice into routine activities.

In November 2007, Health Facilities Scotland (HFS) was commissioned to develop a self-assessment audit tool for the NHSScotland National Catering and Nutritional Services Specification. This was developed in consultation with the HFS Catering Services Advisory Group and a range of stakeholders within NHSScotland. Trials of the system were completed in June 2009.

As part of our ongoing assessment of our compliance with the National Standards, this report represents our performance covering the periods July 2009 to December 2009, January to June 2010 and the most recent results July to December 2010.

4. Audit Findings

The table below provides details of the Board's scoring over the last 3 audit periods:

	December 2009 GG&C Board Score	June 2010 GG&C Board Score	December 2010 GG&C Board Score	December 2010 Scottish Average
Nutritional needs of population	90.7%	90.7%	93.5%	88.4%
Menu planning	75.5%	80.9%	88.2%	89.0%
Food based standards	100.0%	100%	100%	98.8%
Menu planning guidance	85.4%	87.5%	88.9%	93.3%
Therapeutic Diet Provision	54.5%	86.5%	96.2%	89%
Special & Personal Diets	92.4%	99.3%	100%	98.7%
Patient Experience	87.1%	98.5%	98.5%	96.4%
Board Score	83.1%	90.9%	94.6%	93.2%

4.2 Key Findings

The table above shows that the Board's performance has improved with each audit, which positively demonstrates our continuous quality improvement in this area.

The two standards we are yet to reach the national average score for are:

Menu Planning - NHS Scotland Average 89% - NHSGGC Average 88.2%

Menu Planning Guidance - NHS Scotland Average 93.2% NHSGGC Average 88.9%

These standards contain a range of criteria and can be summarised as:

Menu Planning – This is related to the nutritional content of menus with the aim of ensuring that patients differing dietary needs are met and catered for.

Menu Planning Guidance – This relates to the effective planning of menus.

5. Current position

▪ **Menu Planning**

The challenge for NHSGGC relates to the criteria for 'Snacks' are nutritionally defined (> 300 calories) within the specification and guidance indicates these should be available to all patients. NHSGGC interim snack policy currently provides 'snacks' only to patients who are defined as nutritionally vulnerable. The following factors have been considered in this position:

- Alternative foods are available to 'hungry' patients from ward issues e.g. toast, cereal and biscuits
- Patients who require additional meals are now catered for through late and missed meals provision
- Patients who require additional calorie dense snacks are provided for
- The majority of patients do not require calorie dense snacks

NHSGGC continues to undertake significant dialogue with Health Facilities Scotland in relation to the appropriateness and interpretation of the criteria associated with snacks.

▪ **Menu Planning Guidance**

The second challenge relates to the stage of implementation of the Board's Catering Strategy. The Catering Strategy supports the provision of a standardised Board menu (fully compliant with national specification) through the provision of in-house catering through the Central Production Units (CPU). To date meals from 3rd party meal suppliers do not conform with the Boards nutritional specification and a number of sites remain partially compliant until refurbishment of RAH CPU is completed and production for remaining sites is transferred.

Four sites are fully compliant (7 sites from 16th April) and it is anticipated all sites will achieve compliance with this criteria on full implementation of the strategy.

6. Conclusion

The Board are asked to note our ongoing improvement in relation to the compliance with the National Food in Hospital Standards and anticipate continued improvement on full implementation of the Catering Strategy.