

SECTION 4: NHSGGC MENTAL HEALTH CATERING SERVICE

Leverndale and Dykebar Hospital

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4:1 Background

There is a clear relationship between nutritional status and patients well being.

Our role as a provider of patient meals to achieve a well nourished patient through:

- The delivery of attractive, nutritious and suitable food and fluids
- The promotion of a positive patient meal experience by all members of staff

NHSGGC Food, Fluid and Nutritional care Policy (2015)

Please use the information in this section to ensure that you are aware of all the nutritional choices are available to patients and how to help them get the best food and fluid possible.

4:2 Local Catering Contact Details

Reason for Contacting	Name / Designation	Telephone Extension/Email
Food quality; overall food service; specific concern query; immediate response required.	Catering Production Supervisors: Alex Urquhart John Williamson Stevie Walker Dykebar Chris Walker	Ext – 46412 Alex.urquhart@ggc.scot.nhs.uk John.williamson@ggc.scot.nhs.uk Stephen.walker@ggc.scot.nhs.uk Chris.walker@ggc.scot.nhs.uk
For on – going concerns regarding food quality/process	Integrated Services Manager: Sandra Barrett	Ext – 46409 Sandra.barrett@ggc.scot.nhs.uk
Extra Replacement Meals Late/Missed patient meal from 0.700 – 17.30hrs	Catering Production Supervisors	Ext – 46412
Out of Hours patient meals from	Snack Box available from Gatehouse For Dykebar and Blythswood - use ward provisions	Ext - 46618
Ordering Snacks (between 09.00-10.00 daily)	Catering Production Supervisors	Ext – 46412
Ward Provisions	See SOP 9	
Cultural and religious meals Therapeutic diets Texture Modified Diets	Catering Production Supervisors	Ext – 46412
Patient Feedback	Integrated Services Manager: Sandra Barrett	Ext – 46409 sandra.barrett@ggc.scot.nhs.uk
Staff Feedback; Board-Wide comments; suggested improvements to service	Kate Murray – Board lead for Linen Services and Catering	0141 240 9460 Kate.murray@ggc.scot.nhs.uk

4:3 Standard Menus Explained

The Catering Strategy for NHSGGC is based on a cook freeze model.

With the exception of a few bought in items such as sandwiches and meals for special diets the majority of our patient meals are made in house by NHS staff.

Patient meals are produced for all hospital sites at two NHSGGC operated Cook Freeze Production Units (CFPU's), one based at Inverclyde Royal Hospital (IRH) and a second at Royal Alexandra Hospital (RAH). Meals are cooked and then blast frozen before being transported to your hospital.

The benefits of this model include:

- Improvements in terms of quality of patient meals services in all NHSGGC hospitals.
- Consistency of meal production using standard menus.
- Up to date nutritional information about the food provided.

Menu Structure

The standard menu which is being used within NHSGGC is a 2 week menu cycle based on the following structure:




BREAKFAST	LUNCH	EVENING MEAL
Cereals or Porridge	Soup or Fruit Juice	Choice of 3 Main Courses (Min 1 Vegetarian)
Rolls or Bread	Baked Potatoes with a selection of hot or cold fillings; Salad	Choice of 2 Vegetables
Butter or Low Fat Spread	Choice of 2 Sandwiches	Choice of 2 potatoes/rice
Jam or Marmalade	Choice of 2 hot dishes served with vegetables and potatoes/rice	Range of hot or cold desserts
Fruit Juice	A selection of cold desserts	

It is important that each patient eating at mealtime knows all the choices available to them (e.g. main course, sandwiches, potatoes and vegetables) so that they can make an informed menu choice.


Menu cards should be displayed at each bed space or in dining rooms where appropriate.

Dietary codes on the Standard Menu

On the standard menu dietary codes have been applied to many of the dishes. All the dishes on the menu have been nutritionally analysed and where they have met nationally agreed criteria, they have been coded as below:

Code	Which Means;
	Suitable for Vegetarians
	These dishes contain more energy (calories) and are suitable for those with small appetites or who need to gain weight.
	These dishes have controlled amounts of fat and sugar and are suitable for people who wish to eat healthily, including those with diabetes

Whilst the codes above indicate to patients which choices may be best for their nutritional needs, it does not mean that these are the only options available. Patients may be able to choose other dishes which have not been coded depending on individual preferences and their clinical condition.

Code	Which Means;
	Suitable for patients on a Level 7 Easy to Chew diet. These meals are soft ,moist and can be mashed at point of service with a fork.

Patients who require level 7 (EC) food for swallowing/chewing difficulties should **only** choose options coded as above. Other options may increase the risk of choking.

4:4 How to Order a standard Menu Meal:

It is important that every patient orders their individual preference (where clinically appropriate) no more than two meals in advance as per the HIS Food, Fluid and Nutritional Care Standards (2014)

Breakfast options are available on the ward each morning. Patients can choose from a range of options including breakfast cereals, porridge, toast and fruit juice.

For Lunch and Supper, patients are asked to choose their preferred meal choice from the menu. The information will be transferred onto a bulk meal order form and delivered to the Catering Department.

Lunch Orders	Taken the previous afternoon after Lunch Service
Supper Orders	Taken in morning of the same day following Breakfast Service

If a patient needs help choosing their meal option, it is important that staff advise the patient of all **ALL** available options including portion sizes and that the following points are considered;

- Any religious or cultural requirements
- Any allergies or requirements specific to their condition
- What the accompanying vegetable options are
- Promoting healthier options/high energy options where appropriate

Some patients may be cognitively impaired and would benefit from nursing staff choosing on their behalf, as they are unlikely to remember what they ordered and can sometimes become distressed or confused by the process of being asked to choose their meal in advance. It may suit these patients to choose at the point of service.

4:5 Extra/ Replacement Meals

Requests for extra or replacement meals or to correct a wrong delivery should be made in a timely manner – please see details in section 4.2

4:6 Late and Missed Meals

There are occasions when a patient is not available to eat their meal at the time it is being served on the ward. NHSGGC has a Late and Missed meal (SOP) to ensure patients can still receive food. Please contact the Catering Department in advance if it is known that a patient will arrive on the ward i.e. a planned admission out with meal times and a suitable option can be made available.

A late meal is defined as an unplanned requirement for a patient who has been admitted to a ward during or after a mealtime. Ward staff are requested Not to order meals unless the patient has arrived on the ward.

A missed meal is defined as a meal which a patient has been unable to take due to a clinical treatment or attendance at a clinic/diagnostic service during a planned mealtime.

To request delivery of a late meal or missed meal option please use the details in section 4.2

Options available include:-

- Breakfast
- Snack Box (containing sandwich, fruit, yogurt and a drink)
- Selection of hot plated meals (subject to availability)
- *Therapeutic or Texture Modified diets

- *Halal and Kosher Meals
- * These meals may take around 45 minutes to prepare and deliver.

4:7 Special Dietary Requirement Meals

Cultural Meal Requirements

The Catering Department are able to discuss any requests for meals made by patients from varying cultural backgrounds. They can advise on availability of special meals or suitability of our existing recipes and meals. Please contact your Catering Manager to discuss your patient's cultural needs.

Religious Meal Requirements

Kosher Meals



- Kosher meals are available for Jewish patients.
- They are purchased from an approved Kosher source and carry the Din Beth Symbol of authenticity (symbol indicated).
- The Kosher diet does not permit milk or anything containing milk to be consumed at the same time as meat or chicken (there should usually be 3 hours between meat and milk product consumption).
- Meat and milk products cannot share the same utensils and crockery. These should also be stored separately.
- Neutral products (not containing milk or meat) such as fruit and vegetables, salts, fish and eggs and other non organic food stuffs can be offered to patients to eat directly before or after meat or milk products.

Serving

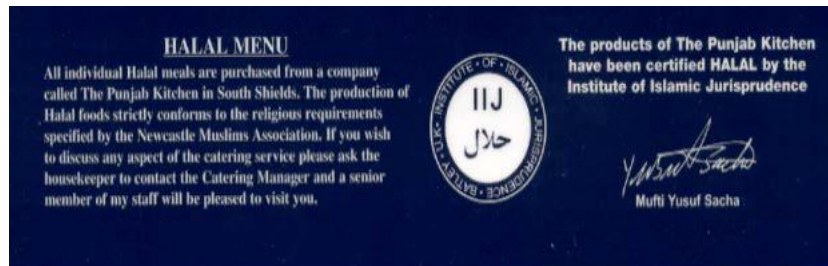
- The meal should be served in the container in which it is heated.
- The meal should not be decanted onto hospital crockery.
- The meal should be served sealed.
- If the patient has difficulty opening the meal, ask their permission before you help them.
- Disposable cups and cutlery should be supplied with the meal.
- Disposable cups should be used for all fluids.

Patients requesting a kosher meal may decide to select some of their meal items from the standard patient menu, depending on individual adherence to Jewish food laws. These should be ordered via the usual process.

Halal Meals

- Halal meals are available for Muslim patients.

- They are purchased from an approved Halal source and carry the label of authenticity indicated below:



- Food that is unlawful to consume (called Haram) are as follows;
 - Food and food products from the pig (e.g. gelatine, animal fats/emulsifiers).
 - Meat not slaughtered by proper Halal methods.
 - Blood or its by-products.
 - Shellfish or seafood without fins and scales.
 - Alcohol, as drink or in food products.

Ramadan is a festival which requires Muslims to fast from sunrise to sunset. Muslims will usually eat a heavy meal before sunrise and after sunset. Those exempt from fasting are;

- Older people and children under 12 years old.
- Pregnant, breastfeeding or menstruating women.
- Chronically ill people where fasting is physically harmful to them, e.g. people with diabetes
- Acutely unwell people.

Serving

- The meal should be served in the container in which it is heated.
- The meal should not be decanted onto hospital crockery.
- The meal should be served sealed.
- If the patient has difficulty opening the meal, ask their permission before you help them.
- Disposable cups and cutlery should be supplied with the meal.

Patients requesting a Halal meal may decide to select some of their meal items from the standard patient menu; these should be ordered via the usual process.

Sikh Meals

Sikh patients may prefer to order a vegetarian meal, arrange of which may be ordered via the standard patient menu. In some cases, Sikh patients may be vegan. There is a separate Vegan menu card which is available from the Catering Department on request.

Sikhs do not eat Halal or Kosher meals and should not be offered this option.

Hindu Meals

Hindu patients may prefer to order a vegetarian meal, arrange of which may be ordered via the standard patient menu. In some cases, Sikh patients may be vegan. There is a separate Vegan menu card which is available from the Catering Department on request.


Hindus do not eat Halal or Kosher meals and should not be offered this option.

Vegan Meals

Vegans eat a plant based diet, with nothing coming from animals – no meat, milk, eggs or honey, for example. Vegan meals can be ordered from the Catering Department using the Vegan menu.

Vegetarian Meals

Vegetarian dietary practices can vary quite considerably in terms of what foods will be eaten and what foods excluded. A hospital menu traditionally provides vegetarian Options for patients, (i.e. excludes all red meat, poultry, fish and shellfish). The cheese used in our dishes is suitable for vegetarians.

NHSGGC meals labelled  as indicated on the standard menu follow these principles. See the section in this manual on dietary codes.

Therapeutic Diets

A Therapeutic Diet is modified from a 'normal' diet and is prescribed to meet a patient's medical or special nutritional need. It is part of clinical treatment and in some cases can be the principle treatment of a condition.

NHSGGC Therapeutic Diets Menu Range

Diet	Rationale
Low Fibre/ Low Residue	Used in the treatment of bowel disorders such as IBS, inflammatory bowel disease. Options for bowel prep can be found on this menu.
Allergy Aware	For patients with an allergy or intolerance to cow's milk, eggs, nuts and/or gluten. The vegan menu can be useful to add variety if patients have milk or egg allergies
Renal	Followed by patients who require a no added salt and low potassium diet

Please Note:

- Requests for any other Therapeutic/special dietary requirement should be made by contacting the Catering Department.

Ordering of all Special Dietary Meals

All wards have a supply of menu cards to be used to order any of the meals from these special menus. These cards should be completed with the patient at the time you are ordering your meals for the ward from the standard menus. Complete a separate card for Lunch and Evening meal and return the cards with your standard menu meal ordering sheet.

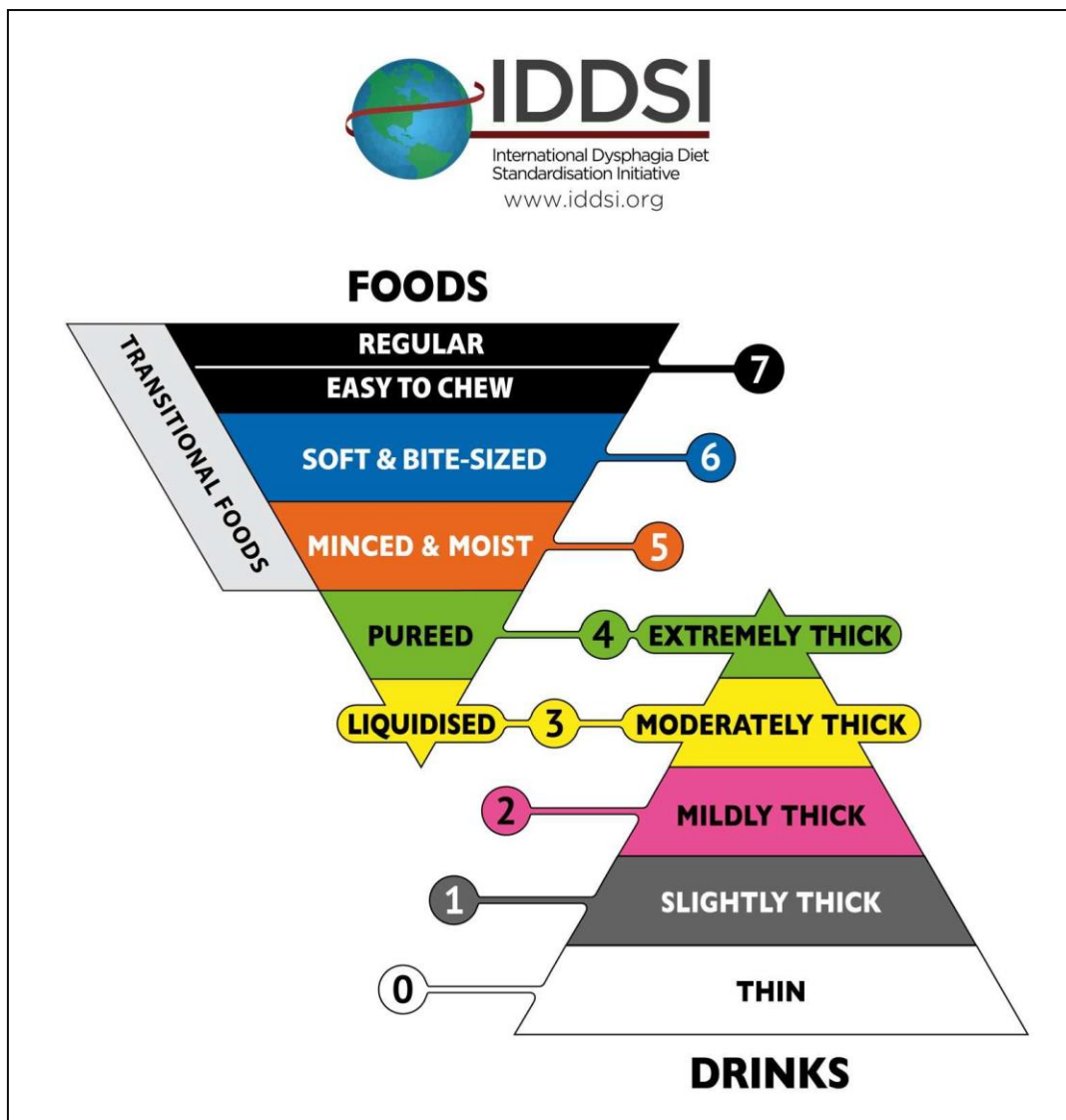
If you are running low on your supply of any of these cards, contact the Catering Department – details in section 4.2

4:8 Texture Modified Diets (TMD)

Texture Modified meals have had their normal texture altered. They are required by patients who have chewing or swallowing difficulties.

The International Dysphagia Diet Standardisation Initiative (IDDSI) is a new worldwide standard with terminology and definitions to describe texture modified foods and fluids for individuals with dysphagia.






NHSGGC has adopted the IDDSI fluid and food descriptor framework - below



Texture Modified Diets Colour Coding

The menu cards and texture modified meal labels for Levels 3, 4, 5 and 6 are colour coded using the same colour system. This helps to reduce the risk of a patient receiving the wrong meal.

It is important that the lids remain on these meals until at they are being served so that the texture can be checked with the patient's notes to confirm it is correct. Meals should not be re plated where possible – this ensures the meal still looks attractive.

IDDSI Level	Descriptor	Symbol	Ordering Information
7	Regular- Normal everyday foods of various textures, biting and chewing ability needed	-	Standard Patient Menu
7(EC)	Easy to chew- Normal everyday foods of soft/tender textures only, biting and chewing ability needed	 Easy to eat/soft	Choices indicated with symbol on standard patient menu
6	Soft and Bite-Sized- tender and moist throughout, with no thin liquid leaking or dripping from the food. Chewing ability needed		Level 6 Menu (Apetito)
5	Minced and Moist - Very soft, small moist lumps, minimal chewing ability needed		Level 5 Menu (Apetito)
4	Pureed- Smooth with no lumps, not sticky, no chewing ability needed. Can be eaten with a spoon		Level 4 Menu (Apetito)
3	Liquidised- Can be eaten with a spoon or drunk from a cup. Cannot be eaten with a fork because it slowly drips through		Level 3 menu- only soup available supplied by (Apetito)

Ordering Texture Modified Meals

All wards have a supply of menu cards to be used to order any of the meals from these special menus. These cards should be completed with the patient at the time you are ordering your meals for the ward from the standard menus. Complete a separate card for Lunch and Evening meal and return the cards with your standard menu meal ordering sheet.

If you are running low on your supply of any of these cards use the details on section 4.2 to order more

For sites using electronic ordering - the texture modified diet menus are on the tablets.

Level 7 (EC) diets

These meals are supplied by NHSGGC and coded on the standard patient menu with this symbol:



Whilst every care is taken to ensure that these meals meet the criteria for Level 7 (EC) variations in ingredients and cooking processes may mean that on occasion the meal may not meet the patients needs at that time.

Level 7 (EC) is described as:

Bite-sized pieces of 1.5 x 1.5cm for adults (the size of an adult thumbnail), to avoid choking risk.

Chewing is necessary.

Tongue strength and control are needed to move food around and to swallow. You should be able to easily cut into this texture with just the side of a fork. Press into a piece of food with your thumb in the bowl of a fork – so that your thumbnail turns white. The food should squash easily and NOT return to its original shape.

See the attached link for more detail on the testing methods.

<http://ftp.iddsi.org/Documents/Testing Methods IDDSI Framework Final 31 July2019.pdf>

Patient's abilities to manage these meals can vary from mealtime to mealtime with general fatigue and drowsiness having an effect on their ability to manage the meal safely.

If ward staff that the patient is unable to manage the meal provided, then please contact the Catering Department to order a replacement meal.

4:9 Service at Ward

The meals provided in your hospital are regenerated (reheated) from frozen. The process takes on average 90 minutes to fully heat the meals. All meals are plated as according to the information on the ward meal ordering form at point of service.

Exact meal services timings may vary from ward to ward but will be between the following times:

Breakfast Service will be provided at ward level from	08.00 am
Lunch Service will be provided at ward level from	12.00 noon
Evening Meal Service will be provided at ward level from	17.00 pm

Mealtimes can be a highlight of a patient's day and how it is served can make a big difference to the quality. Please consider the following good practice points when thinking of any improvements that could be made to your current meal service;

- Ensure protective clothing is worn by food service staff and hands are washed before, during and after service as required.
- The **mealtime coordinator** should ensure that patients are well prepared for their meal. Consider the ideal position for patients to consume their meal safely and comfortably and ensure they are given the opportunity to wash their hands or use hand wipes before the start of service.
- Where possible serve each course separately.
- Otherwise, ensure that the lid remains on the second course until the first course is finished - this maintains the temperature of the second course.
- To ensure the meal runs smoothly the designated mealtime coordinator (member of the nursing team) should take charge of coordinating the meal service.
- For patients with high energy requirements, consider serving bread and butter with soup and always use full fat milk in coffee and tea.
- Consider chopping up fruit and serving it to patients.
- Consider how patients who require assistance to eat are identified so that they get the assistance required and that their food is accurately recorded. This could be done in the nursing handover. The mealtime coordinator can then judge how many staff are required to support the mealtime.

4:10 Ward Provisions

In order to have food accessible for patients at all times and to comply with the Food in Hospitals National Catering and Nutrition Specification, it is vital that all ward areas stock the list of provisions below. Please follow local processes (outlined in section 4.2) for ordering.

Item	Details	Unit Size	Pecos Code
Biscuits	Digestive	Per Packet	14520
	Rich Tea	Per Packet	44459
	Custard Cream	Per Packet	44457
Bread and Rolls	Will be supplied by Catering Department		
Low Fat Spread/ Butter/Cheese Portions	Will be supplied by Catering Department		
Preserves (jam, marmalade)	Assorted Jam Portions	1 x 192	25007
	Raspberry (No added sugar)	340 g Jar	33525
	Marmalade	1 x 192	33517
	Marmalade (No added sugar)	340 g Jar	33516
Condiments (salt, pepper, vinegar, sauces etc)	Salt	1 x 2000	33430
	Pepper	1 x 2000	33428
	Vinegar sachets	1 x 200	33508
	Salad Cream sachets	1 x 200	33504
	Brown Sauce sachets	1 x 200	33426
	Tomato Ketchup sachets	1 x 200	33507
Tea	1 Cup Teabags	1 x 440	44438
Coffee	Coffee Granules	1 x 250g	44433
	Decaffeinated Coffee	1 x 500g	44435
Hot chocolate/ malted drink (these are made with hot water not milk)	Hot Chocolate	1 x 500g	44436
	Malted Horlicks	1 x 500g	44437
Sugar	Individual portions	1 x 1000	33520
Sweetener Sachets	Individual portions	1 x 1000	33521
Milk (full fat and/or semi skimmed depending on local need)	Will be supplied by Catering Department		
Fruit Squash or Cordial (regular and no added sugar)	Lemon squash, sugar free	1 x 2ltr	39008
	Orange squash, sugar free		
	Lemon squash Orange squash	1 x 1.5ltr	39007
Cereals	Corn Flakes	1 x 500g	44461
	Rice Krispies	1 x 450g	44462
	Weetabix	1 x 12	15040
	Bran Flakes	1 x 500g	53258

Please ensure that patients are advised what is available on the ward and that they are available, where clinically appropriate, 24hrs.

4.11 Snacks for Nutritionally Vulnerable Patients

On admission to hospital all patients are nutritionally screened using the Malnutrition Universal Screening Tool ('MUST')

If a patient is found to be at medium or high risk of malnutrition (score of 1 or more on completing MUST) then snacks should be offered to raise the patients calorie intake.

Ward provisions should be used to offer a snack between meals. Please see below for some ideas.

- Offer biscuits with a cup of tea or coffee.
- Offer bread, butter and preserves between meals
- Offer bread, butter with soup at lunchtime
- Offer hot chocolate or malted milk drink at suppertime with biscuits.
- Use full cream milk in tea and coffee.

For these patients one additional snack per day per patient can be ordered from the Catering Department – see section 4.2

Order Process for Snacks

See section 4.2 for local ordering details

Conclusion

This section outlines the processes and protocols for ordering patients meals within your hospital. Please contact your local catering team if you require any further information.

4:13 References

National Health Service Greater Glasgow and Clyde (2015) Food Fluid and Nutrition Policy

Healthcare Improvement Scotland (HIS) 2014 Food Fluid and Nutritional Care in Standards Edinburgh; NHS Scotland

Health Facilities Scotland 2016 Food in Hospitals: National Catering and Nutrition Specification for Food and Fluid Provision in Hospitals in Scotland