

Food, Fluid and Nutritional Care Policy
NHS Greater Glasgow and Clyde



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Food, Fluid and Nutritional Care Policy NHS Greater Glasgow and Clyde

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Right Meal Right Time Right Patient Policy 2013
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1. Commitment to Food & Health

1.1 Rationale for Policy

NHS Greater Glasgow & Clyde (NHSGGC) has a pivotal responsibility to promote health within its population. The relationship between a diet and health status is unequivocal. The purpose of this policy is to enable NHSGGC to discharge this responsibility through both its health improvement role and as a provider of food to patients and staff.

The Board has endorsed a policy position on food, fluid and nutrition since 1993. This policy retains key aspects of previous policies, married with the changing nutritional needs of the population; new Food, Fluid and Nutritional Care Standards (HIS 2014); more exacting expectations associated with Older People in Acute Hospital inspections.

Additional background and a summary of the nutritional challenges faced within Greater Glasgow and Clyde are described in the Nutritional Challenge in Greater Glasgow & Clyde: A Population Needs Assessment 2015 which is due for publication in Spring 2016.

1.2 Policy Statement

NHS Greater Glasgow and Clyde is committed to the continuous improvement of the diet and nutritional status of our population and will demonstrate this through the delivery of national nutritional standards, active promotion of healthy eating and through working in partnership to increase opportunities for healthy eating.

1.3 Policy Commitment

The policy requires visible commitment and leadership at all levels across the service to ensure demonstrable benefit is achieved for individual patients and at within the population. Leadership will be developed through the development and adoption of:

- A Planning and Implementation Group chaired by a Senior Board Director; NHS Greater Glasgow and Clyde Nurse Director
- Two operational implementation groups to discharge food, fluid and nutrition responsibilities in line with organisational arrangements for Acute Services and the six Health and Social Care Partnerships (Glasgow City, Inverclyde, Renfrewshire, East Renfrewshire, East Dunbarton, and West Dunbarton).
- Devolved local delivery groups linked to senior management arrangements with Acute Sectors / Directorates and Health and Social Care Partnerships. Development of general management and professional responsibilities to provide leadership for food, fluid and nutrition at all levels across the organisation.
- A framework for public and patient involvement and engagement

- Links with other partner agencies and organisations in order to influence wider policies and practice impacting on the nutritional status of the population of Greater Glasgow and Clyde.

1.4 Policy Objectives

- **Objective 1:** The promotion of a healthy and safe diet for Greater Glasgow and Clyde population
- **Objective 2:** The achievement of a well nourished patient through nutritional screening, integrated care planning and appropriate nutritional provision to meet the varying needs of all patients within Greater Glasgow and Clyde
- **Objective 3:** The availability of a healthy diet that routinely meets quality, safety, and nutritional expectations for patients, staff and visitors within NHS Greater Glasgow and Clyde
- **Objective 4:** The development and design of services to support optimum nutritional status within the population

2. Policy into Practice

2.1 Scope of the Policy

The Food, Fluid and Nutritional Care Policy will encompass all aspects of nutritional care across the various care settings in NHSGGC. It will embrace the totality of an individual's hydration and nutritional requirements.

It will also encompass action required on a population/community basis in order that individuals can achieve a healthy diet as appropriate to them.

The policy therefore incorporates:

- The role of NHS Greater Glasgow and Clyde as a community planning partner in influencing the awareness, affordability, availability, accessibility and acceptability of healthy foods and fluids for communities within GGC. Including the influencing of food provision by other agencies.
- A targeted approach to identify and address the nutritional needs of the most nutritionally vulnerable groups at a community and patient group level.
- A comprehensive and equitable approach to nutritional assessment, screening, monitoring and care planning for all in-patients and nutritionally vulnerable patients in the community.
- Development and delivery of best practice to maintain hydration and support optimum nutritional intake and mealtime experience as routine care for all inpatients.
- Provision of nutritional support for patients within hospital and community services including complex nutritional care in line with the forthcoming complex nutrition care national standards (Autumn 15).

- The safe provision of patient focused catering service for inpatients that meets the NHS Scotland Food in Hospitals national catering and nutrition specification (2008), reflects diverse cultural and therapeutic needs and achieves a high level of acceptability with patient groups.
- The provision of a retail catering service for out-patients, staff and visitors that meets nutritional standards and demonstrates commitment as an exemplar organization as detailed in NHSGGC Food Retail Policy (2014) applies to all NHS providers, and commercial or voluntary sector contractors.
- Appropriate education and development of staff to ensure the importance of FFN is recognised and embedded into routine practice and care.
- The adoption of FFN nutritional standards within partner establishments caring for NHS patients.
- Promotion of Sustainability and Social Benefit within FFN associated procurement initiatives
- Communication of FFN policy content to patients, public, staff and partners.

2.2 Core Programmes

In order to drive and co-ordinate the delivery of the objectives of the Policy, a number of core programmes have been agreed and are described below in section 2.3.

These programmes report to the Food, Fluid and Nutritional Care Planning and Implementation Group (FFN PIG). It is important to acknowledge that these programmes do not reflect the entire range of NHSGGC activity underway to improve nutrition, but rather are areas of co-ordinated effort to address key priorities.

The delivery of these programmes at the front line will determine the impact on the nutritional status of the population. The FFN PIG is required to facilitate integration across Directorate/Partnerships and functions by ensuring:

- A climate for collaborative working recognising the needs of key stakeholders including patients and families
- The necessary structures are established to support planning, monitoring, reporting and assurance at local and system-wide level
- The capability and capacity of the multi-disciplinary / multi-agency workforce is developed through training and education
- Comprehensive communication of the policy and related action is undertaken
- Service development priorities are identified by the Board and Partnerships and progressed accordingly

2.3 Core Programmes:

Objective 1: Promotion of a healthy and safe diet

Programme 1: Healthy Eating

Drivers: Supporting Health Choices (FSA 2014) / Obesity Route Map (SG 2010)/Health Promoting Health Service CEL 01(2012)

1.1 Undertake action to promote healthy eating by developing and implementing:

- Multi-agency food and health strategies (Local Authority /HSCP based)
- Sustainable food
- Community food initiatives/ Mitigating food poverty interventions
- Skill based cooking and shopping interventions

1.2 Implementing NHSGGC Maternal and Infant Feeding Strategy

- Achieving and maintaining the UNICEF Baby Friendly Award in all maternity units and across NHSGGC
- Delivering the Child and Maternal Nutrition framework actions

1.3 Development and delivery of NHSGGC Tiered Obesity Strategic Framework for Adults and Children

Objective 2: Achievement of a well nourished patient

Programme 2:

Nutritional Care Planning and provision of food and fluid for patients

Drivers: Food Fluid and Nutritional Care HIS standards 2014

Food In Hospitals: National Catering and Nutrition Specification 2008

Care of the Older People in Hospital Standards 2015

Scottish National Dementia Strategy 2013-16 (Commitment 10 and 11)

Complex Nutritional Care Draft Standards 2015

NMC Professional standards of practice and behaviour for nurses and midwives 2015

2.1 Completion of nutritional assessment and screening in hospital and community

- Initial and follow up screening with 'MUST' for Adults and 'PYMS' for Children
- Standardised nutritional assessment
- Screening for swallowing difficulties and assessment of functional impairment ('STOPSS' or similar)

2.2 Undertaking patient centred nutritional care planning as appropriate

- Documentation of a personalised nutritional profile inclusive of food preferences/ dietary requirements /additional needs
- Ongoing review and documentation of identified needs/ actions within individualised care plans including completion of food / fluid records and repeat MUST screening as required

- Referral and access to appropriate specialist services (Dietetics/Dental/Speech and Language Therapy/Occupational Therapy/Clinical Nutrition Teams)
- Completion of discharge or transfer documentation to support the transition of care
- Identification of special dietary requirements including screening and assessment for Texture Modified and Therapeutic Diets and Oral Nutrition Supplements
- Identification of appropriate assistance with eating and drinking for inpatients and advocating for appropriate assistance in community settings.

2.3 Provision of safe and appropriate foods and fluids

- Implementation of NHSGGC Catering Strategy
- Ongoing menu planning, standard recipe development and nutritional analysis to comply with National Catering specifications
- Ongoing review of menus to reflect patterns of patient stay, patient choice, changing cultural and therapeutic needs within the population and patient/carer feedback
- Providing out of hours access to catering provision and ward provisions
- Ensuring Food Safety standards are maintained across the 'food chain'
- Standardisation of practice in relation to patient hydration
- Co-ordination of effective mealtimes between catering and ward staff

2.4 Promotion and monitoring of a positive mealtime experience for all patients

- Avoiding non essential clinical activity during mealtimes to support protected meal times through Right Meal Right Time Right Patient Policy/ 'Mealtimes Matter'
- Facilitating patient meal choice
- Standardisation, co-ordination and review of meal time operation on wards 'Mealtime Bundles / Managing Mealtimes'
- Provision of appropriate assistance to support eating and drinking at mealtimes and as required
- Encouragement of routine patient feedback and advocacy
- Routine monitoring of 'mealtimes' to ensure effective communication between wards and catering

2.5 Providing complex nutritional care support

- Standardised clinical nutrition policies, guidelines and pathways
- Access to oral nutritional support
- Access to specialist teams / enteral or parenteral nutrition services within both hospital and community settings

2.6 Liaison with Local Authority and Community Partners

- Provision of tailored FFN patient information to support healthy eating at home
- Connection with community and social care organisations to support healthy eating at home
- Influencing social care support packages for patients to promote

nutritional status

- Influencing delivery of nutritional standards in Care Homes/ Nursing Homes/ Residential Homes/ Community meal services

2.7 Provide opportunities for related Learning and Education

- Develop range of LearnPro modules for staff associated with food chain
- Influence undergraduate programmes
- Include within core induction programmes for hospital, community and rehabilitation and enablement staff

2.8 Patient Involvement and Communication

- Integrate FFN within models of patient centred care
- Routine provision of FFN patient information to all inpatients
- Provision of first line advice for 'at risk' community patients
- Promotion of interactive public facing website information and patient feedback systems on line and at ward level
- Completion and analysis of routine catering feedback data
- Develop public panel review for catering services

Objective 3: The availability of a healthy diet that routinely meets quality, safety, and nutritional expectations for patients, staff and visitors within NHS Greater Glasgow and Clyde

Programme 3:

Planning, delivery and provision of healthy food and fluids for staff, visitors and patients

Drivers: Health Promoting Health Service CEL 01/ Healthy Working Lives Award/NHSGGC Food Retail Policy

3.1 Achievement and promotion of the Healthy Living Award/ Healthy Living Award Plus with all in-house catering facilities; hospitality catering; contracted catering services and food vending providers

3.2 Achievement and promotion of the SGF Retail Gold Standard / with all in-house retail / Trolley provision and externally contracted retailers

3.3 Implementing the NHSGGC Healthy Vending Policy (Drinks/Snacks)

3.4 Providing increased access to fruit and vegetables within all sites

3.5 Provision of suitable snacks and drinks in addition to patient meals for nutritionally vulnerable patients

Objective 4: Development and design of services to support optimum nutritional status

Programme 4:

Development and redesign of services and protocols as required

Drivers: Numerous

4.1 Development and evaluation of Tiered Childhood Obesity Services

4.2 Redesign GCWMS to reflect Tiered Adult Obesity Services

4.3 Consideration of Complex Nutritional Standards

The PIG will establish a number of working groups with devolved responsibility to ensure these programmes are addressed through detailed delivery plans. The Operating Arrangements of the FFN PIG are detailed in Appendix A.

2.3 Scheme of Accountability

The Policy requires an integrated and comprehensive single system approach across NHSGGC Acute Services and Partnerships, this will be facilitated by the Food, Fluid and Nutritional Care PIG and its associated sub-structures. The Nurse Director will chair the PIG and deliver the Nutrition champion role for NHSGGC.

The Food, Fluid and Nutritional Care PIG will provide, for approval by the All Systems Directors Group, an annual delivery report based on:

- An annual workplan linked to the core programmes within the policy
- FFN risk register
- Financial framework
- Patient/ Public feedback and engagement

The PIG will have collective responsibility for the ongoing strategic development of health improvement, nutritional care and food provision across Greater Glasgow and Clyde. The PIG will facilitate the inclusion of Food, Fluid and Nutritional Care priorities within the part of the corporate planning cycle.

Membership of the PIG will include Senior Management representation from Acute Services and Partnerships.

Two operational implementation groups will oversee the implementation of the HIS Food Fluid and Nutrition standards across both the Health and Social Care Partnerships (including Mental Health Bed-Holding responsibilities) and Acute Service responsibilities. These groups ensure delegated 'ownership' of the FFN policy and associated workplans to ensure a direct interface with general management; professional leadership and local Governance and Clinical Governance arrangements. The Integrated Joint Boards of each

HSCP have responsibility for the provision of services within their respective areas and will receive reports at agreed intervals.

The Acute operational group will provide leadership to the Clinical Nutrition sub group to ensure implementation of the forthcoming complex nutritional care standards.

In addition, a Board-wide Catering Strategy Group will be led by Director of Facilities to ensure continuous improvement in patient catering services and ongoing engagement with patients and carers.

Directors / Chief Officers are responsible for having arrangements in place within each sector or Partnership to ensure food, fluid and nutritional care issues are addressed within the context of the strategic framework developed by the PIG.

The detailed structures and membership of these groups reflect local arrangements for general management, professional leadership, care group management and site and/or facility linked organisational units and services.

2.4 Priorities

NHSGGC recognises the complexity of nutritional need within the general and patient population we serve. To date the implementation of FFN policy within NHSGGC has prioritised the most nutritionally vulnerable within our population.

Within our patient population, priority should continue to be given to patient groups who are most nutritionally vulnerable as a result of their medical condition or through longer-term dependence on hospital care and meals provided by health and or social care services. This policy recognises the need to support an enhanced focus in key clinical areas, however malnutrition and impaired eating present in all areas and the challenge within NHSGGC is to ensure wider implementation at community level is now routinely achieved. The revised FFN standards require an increased focus on discharge and transition as well as delivery across community nursing. Within NHSGGC this approach will extend to wider community multi-disciplinary teams such as Rehab and Enablement Services; Addictions; Homelessness etc

Within our communities nutritional vulnerability is largely associated with populations living in areas of high social deprivation in addition to specific groups with known nutritional challenges. Access and affordability to healthy food, along with development of practical skills remain the most important areas of development.

2.5 Patient Involvement

Commitment to facilitate the involvement of the public and patients at all levels within the Policy and associated work programmes is required. This builds on the range of public and patient involvement structures already established across the NHS system including:

- Patient Panels and Public Partnership Forum
- Ongoing patient surveys / questionnaires including Friends and Family and Patient Opinion
- Specific 'User' engagement events (including review of new menu proposals)
- Public partners programme to monitor patient meals and food retail
- Contribution of patient/ carer 'conversation models' in key clinical areas

The operational groups will undertake to assure they receive regular reports outlining patient feedback regarding FFN issues.

This policy will operate concurrently with the NHSGGC Patient Rights Act arrangements.

3. Equality Impact Assessment

In line with policy guidance the content of this policy has been considered in relation to Equality Impact and it is recognised that the content of this policy will have a different impact on different groups within our population. The approach proposed is therefore to undertake detailed Equality Impact Assessments at a work programme or service delivery level to ensure appropriate analysis and consideration of needs is undertaken in the relevant context.

Priority areas for EQIA will be routinely identified and will be undertaken at appropriate stages of development / implementation including:

- Food in hospitals menu review
- Areas of service development including; Child and Maternal Nutrition framework; weight management services
- Population Food and Health Action plans

4. Financial Framework

The PIG will retain an overview of financial monitoring for current commitments associated with the Policy and will support the Board to identify development priorities and associated financial implications within the Policy.

The financial framework will incorporate capital and revenue budgets, delivered through a matrix of nursing, catering, health improvement, planning and AHP services. Finance will include recurrent and non-recurrent provision.

Financial reports will be provided in line with NHSGGC reporting arrangements.

5. Communication and Dissemination

The FFN Policy will be located on the NHSGGC website and Intranet. An external public facing website is currently under development and will include core information on patient meals as well as wider aspects of the policy.

A detailed communication and implementation plan, linked to core work programmes has been developed and is available on the Nutrition 'micro' site NHSGGC.

The policy will be made available on request in alternative formats. Requests for alternative formats should be made to Anna.Baxendale@ggc.scot.nhs.uk

6. Evaluation

The implementation and effectiveness of the policy will be evaluated in line with the detailed work programmes, risk registers and regular reports will be submitted to the FFN FIG.

Appendix A. Food and Nutritional Care Planning and Implementation Group: Role, Remit and Membership

The role of the FFN PIG is to improve the nutritional status of the Greater Glasgow and Clyde Population, specifically addressing the needs of the most nutritionally vulnerable groups through co-operative and collaborative action. The PIG will:

- Set the overall strategic direction of travel for NHS Greater Glasgow and Clyde Food Fluid and Nutritional Care Policy
- set priorities for the implementation of NHS Greater Glasgow and Clyde Food Fluid and Nutritional Care Policy
- performance manage the implementation of the policy
- prioritise resource allocation
- report progress and keep the Planning Policy and Performance Group / NHSGGC Board appraised
- establish and influence appropriate working groups and partnerships to address the scope of the Food Fluid and Nutrition policy

Membership includes:

- NHSGGC Nurse Director (Chair)
- Director of Facilities
- Head of Health Improvement & Inequalities
- Chief Nurse North Sector Acute Services (chair Acute Operational Group)
- Director of Nursing – Health and Social care Partnerships (chair Partnership Operational Group)
- Director of Allied Health Professionals (Professional lead)
- CSM Dietetics and SLT
- FFN Practice Development Co-ordinator (s)

Public and patient representation

A process to facilitate the involvement of the public and patients at all levels within the Policy and associated work programmes has been established. This reflects the range of public and patient involvement structures being developed across the NHS system and the policy will operate concurrently with the NHSGGC PFPI Committee. Including:

- Patient Satisfaction Surveys/ Better Together/ Patient Opinion/ Patient Carer conversations
- Complaints analysis
- Specific Inclusion of Patient Representatives e.g. Option Appraisal exercise / Development Hydration policy
- Engagement events/ Focus groups with specific communities e.g. BME Menu review
- Public Partner Catering programme

Appendix B: Monitoring and Review Cycle

The planning cycle of the FFN PIG is embedded within NHSGGC Corporate Planning Process:

March	Local Development Plans Guidance linked to Corporate Planning and Priorities Guidance / FFN PIG priorities
May	Annual workplan prepared by Operational groups
June	Acute / HSCP Local Development Plans submission
September	FFN Annual report to All Systems Directors Group (annual update Operational groups)

Internal Reporting:

The FFN PIG meets quarterly, the operational groups and all subgroups provide written reports for consideration at this group. Operational Groups provide 6 monthly reports to Organisational governance arrangements. (Acute reports to Strategic Management Group / Health and Social Care Community Partnerships report to Partnership Chief Officers.

National programme reporting:

HIS Nutritional Care Standards	Self Assessment / Peer Review	TBC
Food in Hospital	Self Assessment	4 monthly
Healthy Retail CEL 01	Specific report	Annual
Older People in Acute Hospitals (OPAH)	Self Assessment/ Inspections	6 monthly/Accrued

References

- Food Fluid and Nutritional Care HIS standards 2014
- Food In Hospitals: National Catering and Nutrition Specification 2008
- Care of the Older People in Hospital Standards 2015
- Scottish National Dementia Strategy 2013-16 (Commitment 10 and 11)
- Complex Nutritional Care Draft Standards 2015
- NMC Professional standards of practice and behaviour for nurses and midwives 2015
- Managing Adult Malnutrition in the Community, May 2012, Produced by a Multi-professional Consensus panel. www.malnutritionpathway.co.uk
- NICE. Nutrition Support in adults: oral nutrition support, enteral tube feeding and parenteral nutrition. Clinical Guideline 32. 2006
- BAPEN: Malnutrition Matters: Meeting Quality Standards in Nutritional Care. 2010
- BAPEN: Combating Malnutrition, Recommendations for Action. 2012