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Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Ein cyf/Our ref: CEO.131a.0316
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Dyddiad/Date: 14 March 2016

Swyddfeydd Corfforaethol, Adeilad Ystwyth
Hafan Derwen, Parc Dewi Sant, Heol Ffynnon Job
Caerfyrddin, Sir Gaerfyrddin, SA31 3BB

Corporate Offices, Ystwyth Building
Hafan Derwen, St Davids Park, Job's Well Road,
Carmarthen, Carmarthenshire, SA31 3BB

William Powell AM
Chair
Petitions Committee
National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

Dear Mr Powell

Petition P-04-663 Food in Welsh Hospitals

Thank you for your letter dated 29 February 2016 in respect to the above. The following are the comments on behalf of Hywel Dda University Health Board and were formed from our Nutrition & Dietetics department, Nursing colleagues and the Catering team.

Firstly I think it is important to say that we were surprised to see this petition and the views expressed differ from our own and in fact what our patients generally tell us.

As a Health Board we have worked tirelessly to improve the catering and nutrition experience for our patients and in fact have seen improvements as a result of the work being driven collaboratively across the Welsh NHS catering with the All Wales Menu Framework. Welsh menus use standardised recipes with appropriate nutritional content that meet the Welsh Government catering and nutrition standards. The results of the All Wales catering survey suggest that we are getting food provision right for the majority of our patients, certainly in Hywel Dda Health Board.

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Cadeirydd / Chair
Mrs Bernardine Rees OBE

Prif Weithredwr/Chief Executive
Mr Steve Moore

Bwrdd Iechyd Prifysgol Hywel Dda yw enw gweithredol Bwrdd Iechyd Lleol Prifysgol Hywel Dda
Hywel Dda University Health Board is the operational name of Hywel Dda University Local Health Board

Mae Bwrdd Iechyd Prifysgol Hywel Dda yn amwylchedd di-fwa Hywel Dda University Health Board operates a smoke free environment

For your information the evidence from our latest patient survey in 2015, which captured the views of 235 patients is:

- Generally there was good overall satisfaction with the food and drink provided.
- Up to 86% of patients reported that they had been given a choice of food at all 3 meals.
- 86% of patients felt the number of choices were about right and
- 89 – 93% of patients felt they were served at the right times.
- 68% of patients felt that the meals were good or very good based on presentation and appearance, flavour and taste
- 73% of patients reported that they hadn't been given the wrong food that they couldn't eat because of being on a special diet with a further 16% noting this was not applicable to them and 3% no response

Whilst there is still improvement to be made you can see that local views are generally positive about our food provision, and we continue to actively work on improvements.

The All Wales Menu Framework Group report into Welsh Government on achievements and health boards are monitored through health care standards . A national approach to collating patient experience (the All Wales Catering Survey) has been instigated with the second one just completed.

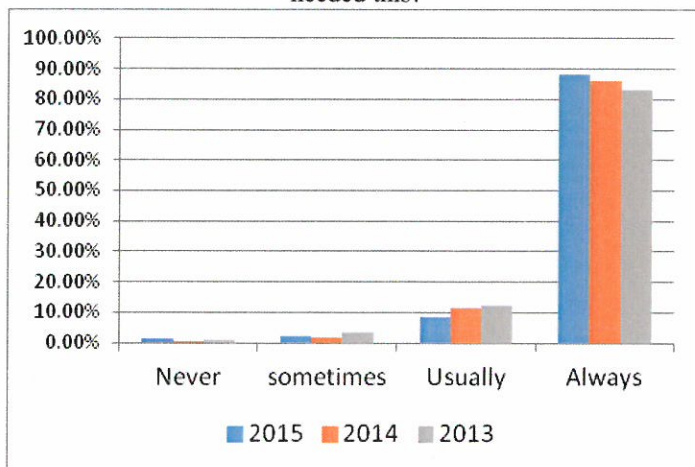
In addition the Welsh Audit office has reviewed Health Boards on their progress of the 2012 reports and our own has been approved and monitored via our Audit Risk and Assurance Committee.

For the past 7 years we have been reporting on aspects of fundamentals of care to our boards in which nutrition and hydration is a key feature. The data below is our 2015 survey results:

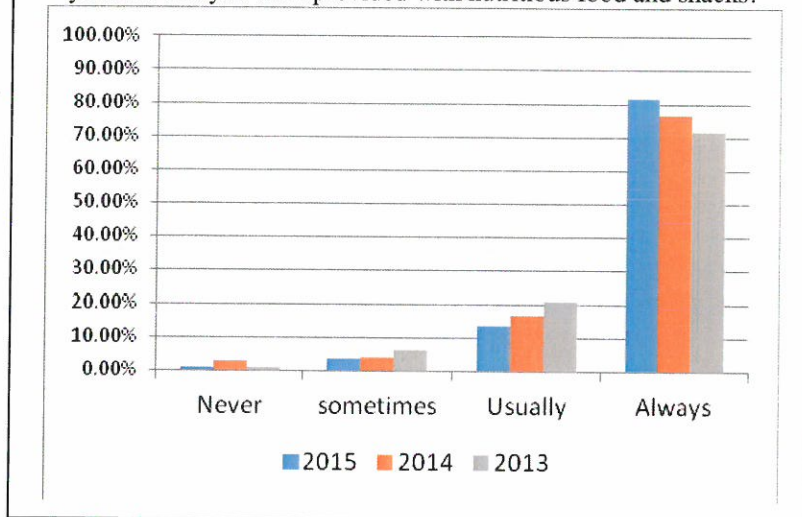
Whole UHB/ Standard 2.5 Nutrition and Hydration		2015
ALL except Maternity, neonates, LD, theatres	Patients are assisted to a suitable position to eat	100%
ALL except Maternity, neonates, LD, theatres	Prior to meal service, are bed tables and communal areas cleared and tidied prior to eating?	99%
ALL except Maternity, neonates, LD, theatres	Are patients meals placed within easy reach?	100%
Inpatient, paed, MH & LD only	Is there evidence that the systems in place to enable staff to identify patients with special eating and drinking requirements are being implemented and their effectiveness evaluated?	97%

Inpatient, maternity MH, Day Units only	Are water jugs changed 3 times daily?	74%
ALL except Maternity, neonates, MH, theatres	Is fresh drinking water available for patients?	99%
ALL except neonates, MH, OPD, endoscopy, theatres	Are drinking water jugs and glasses within the patient's reach?	100%
Inpatient, ED, Maternity, MH & LD only	During a 24 hour period, are a minimum of 7 beverage rounds are carried out within your clinical area?	61%
Inpatient, ED, paed, MH & LD only	Does a Registered Nurse co-ordinate every meal time?	72%
Inpatient, ED, MH & LD only	Is there evidence that all members of the nursing team are engaged in the mealtime service?	98%
ALL except neonates, OPD, theatres	Is a range of snacks available for patients who have missed a meal or who are hungry between meals?	99%
Inpatient, ED, paed, MH & LD, endoscopy only	Is there a system in place to allow family/friends to assist with meal times?	98%
Maternity	Have all women had their Body Mass Index recorded at booking?	100%
Neonates	Is there evidence in the nursing documentation that the babies nutritional needs have been assessed within 24 hours of their admission?	100%
Neonates	Is there a system in place to allow parents to feed their babies at feeding times?	100%

Graph 7: Patient responses to: Throughout your stay, how often did you feel that you were given help with feeding and drinking if you needed this?



Graph 8: Patient responses to: Throughout your stay, how often did you feel that you were provided with nutritious food and snacks?



The petition does support the need for real focus on good nutrition as a core part of patient well being and it does reinforces the importance of the clinical link with catering with respect to considering nutrition as a treatment, which we also support.

The petition suggests that the standards of food in Welsh hospitals need to be addressed, we actively disagree with this; in Wales the catering and hospital nutrition standards are robust.

The NHS in Wales procures and provides food across its health boards for patients, visitors and staff. There have been a number of developments nationally to ensure high quality provision that meets the range of different requirements of these population groups and more joint working across food procurement and provision for patients:

1. Mandatory nutrition and catering standards for food and fluid for hospital inpatients (Welsh Government, 2011)
2. All Wales Menu Framework (AWMF) and development of standardised recipes to meet the nutrition standards (2012)
3. National Lead Dietitian role for NHS Food Procurement - development of nutrition specifications for food contracts.

The All Wales Menu Framework has achieved to date:

- Standardised nutritionally analysed menu items with recipes developed by hospital cooks and chefs from across Wales
- They use ingredients and foods that meet nutrient specifications and are bought on an all Wales contract
- A dedicated web based database accessible to all Health Boards including recipes and full nutritional analysis

- Development of nutrient specifications for All Wales contracts produced by Lead Dietitian Procurement
- Therapeutic menu coding developed to ensure appropriate use of dishes for all patients

This has resulted in a range of benefits for patient catering including reducing patient safety risk through access to the necessary nutritional and allergen information to enable safe provision of foods to patients.

With respect to catering for patients with special dietary needs, in Hywel Dda we cater for all dietary needs; our current focus is on standardising special diet menus across the Health Board to ensure all patients on the various special diets have a good and consistent level of choice, in line with the standards, and that we do have robust systems in place for meeting these specific diet needs. The catering team have information to support them with catering for patients needing special diets and this will also be under review as we standardise our approach. To enable this to work effectively we rely on good communication between nursing and catering with dietetics in a supportive role when dietary needs are more complex. Despite the ongoing development and review work there is not evidence to indicate that we are not catering appropriately for special diets in Hywel Dda Health Board, our aim is to continue to improve it though.

As a Health Board we are clear about areas requiring ongoing improvement, for example, we are currently undertaking further work on how patients are supported to make the appropriate food choices from menus at ward level with the aim of adopting a consistent process across the Health Board. We recognise that many factors including significant ward pressures impact on the priority given to supporting patient with menus and appropriate food choice. In Hywel Dda we believe that we are generally getting things right with patient meals but also are aware that we do not yet have wide snack availability so have more to do on optimising patient nutrition and to meet this aspect of the standards.

In essence we continually seek to improve our provision of food and drinks in inpatient settings and feel as passionate as the petition authors in the need for good varied hospital dietary regimes and if this petition provides more focus in this important area we would be happy to engage, but want the Petitions committee to know how much work has been undertaken over the past few years.

Yours sincerely



Steve Moore
Chief Executive