



**ENGINEERING THE FUTURE**  
HCA NATIONAL CONFERENCE  
HILTON BIRMINGHAM METROPOLE  
10-11 APRIL **2014**

**‘There's a place for us’**

**Andy Jones**  
National Chair



***“The very first requirement of a hospital  
is that it should do the sick no harm”***

Florence Nightingale



**Never before have we had the chance to LEAD and SHAPE**

**So GO back and commit to this**

**Lead and shout and change**

**As Caterers - we have drive, we have** *Passion*

**They will say in years to come they changed**

**They made change happen**

**We owe them so much**



**“It’s kind of fun  
to do the impossible.”**  
Walt Disney

# Ward Service – Our Challenge – Your Responsibility



- **4 Nations – represented**

- Nations Leads
- Clinical Leads
- Professional Bodies

- **Terms of Reference**

- **Agreed CRITICAL Priorities**

- Training of Host/Hostess
- Improved and defined communications

- **Agreed Principles**

- Working collaboratively – caterers lead
- Inter-professional within the NHS
- Champions for food and drink
- UK-wide approach
- Vibrant Nutritional Steering Groups need a reporting structure
- End user involvement at an early stage
- Respect food and drink

## Focus on Patients – CARE & COMMUNICATE

- Involve
- Meet
- Communicate
- Work with Patients and Patients Associations
- 6Cs

Passion



**VT: James Martin**

## James Martin



- **Cares** and **Passionate**
- Media awareness
- Involved HCA
- Recommends that all caterers should be members of the HCA
- More than Traditional! – James now understands this!







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# **PS100 – Your Voice**

**Andrew Archer**

Cost Sector Catering & PS100 Group

SUPPORTED BY:

**apetito**

**brakes**

**DOLMIO**



**williams**

**McCain**  
What can McCain  
do for your business?

**Uncle Ben's**  
\*Treat every day

**PREMIER  
FOODS**

**Unilever  
Food  
Solutions**  
Inspiration every day

**PK** Food Concepts

**ZENITH**  
Hygiene Group Plc

**PUBLICSECTOR  
100**

HCA NATIONAL CONFERENCE **2014**

# Who are we and why do we exist?



## Our Objectives

- A lifetime nutrition plan where meals are served or funded from the public purse
- Protected meal times where meals are served or funded from the public purse





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# **Health and nutrition in the Public Sector**

**Research to simplify/demystify and increase understanding**

**Some relevant highlights**

# The two most well known illnesses associated with poor dietary habits are obesity and diabetes... a few key figures on what it costs the UK economy



## Obesity



In the UK, 30.3% of children (aged 2-15) and 62.8% of adults are overweight or obese

The forecasted cost of obesity to the NHS was £6.3bn in 2012... by 2050 it could hit £10bn

18 million sick days each year can be attributed to obesity... while the indirect cost to the economy is £2.1bn

## Diabetes



The cost of diabetes to the NHS is £9.8bn per annum. This could increase to £16.9bn over the next 25 years

No. of people with diabetes is projected to increase from 1.4m in 1996 to 2.9m by 2025

The indirect costs associated with type 2 diabetes (i.e: related to death / illness / care) is £13bn per annum

**Less than 0.5% of total government spend is dedicated to serving meals in the public sector**

**Only a fraction of overall government spend is being invested on serving food and drink in the public sector...**

**even only a marginal increase in expenditure will save a significant amount of money in the long-term by reducing the cost of diet-related illnesses to the economy and on resources such as the NHS**

In 2011, the government's public spending figure amounted to **£681.3 billion**

([ukpublicspending.co.uk](http://ukpublicspending.co.uk))

Approximately **£2 billion** a year is spent on serving food and drink in the public sector each year

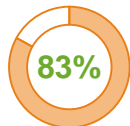
(The Food Standards Agency/Caroline Walker Trust)



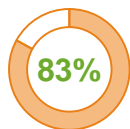
# A significant proportion of the UK population are still not aware of the link between nutritional intake and diet-related illnesses



**Obesity**  
2013



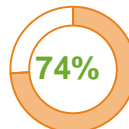
2012



**Diabetes**  
2013



2012



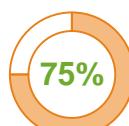
**Osteoporosis**  
2013



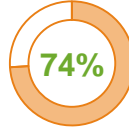
2012



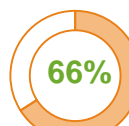
**Malnutrition**  
2013



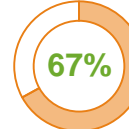
2012



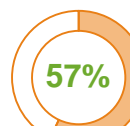
**Gut health**  
2013



2012



**Cognitive**  
2013



2012



**Hypertension**  
2013



2012





# The majority of the general public would like to see nutritional information on food served in public sector institutions published



Hospitals  
75%



Nurseries  
70%



Primary schools  
72%



Secondary schools  
69%



Colleges  
61%



Prisons  
36%



Armed forces  
54%



Social care homes  
69%



Elderly care homes  
71%



Police Force  
48%

The UK population believe it is vital that public sector organisations – particularly those looking after the most vulnerable in society – publish information on the nutritional content of meals served to those in their care.

# The general public is dissatisfied with the standard, quality and nutritional value of food being served to patients in hospitals



**57%**

Nutritional information about food served in hospitals is “*poor*” or “*very poor*”

**31%**

Healthiness of the food served in hospitals as either “*poor*” or “*very poor*”

**40%**

Quality of the food served in hospitals is either “*poor*” or “*very poor*”

**32%**

Describe the freshness of the food served in hospitals as either “*poor*” or “*very poor*”

**41%**

Think the range of food offered on hospitals menus to be either “*poor*” or “*very poor*”



**32%**

Unhappy with the portion sizes of food in hospital, describing it as “*poor*” or “*very poor*”

**28%**

Ability of hospitals to offer food for specific dietary requirements is “*poor*” or “*very poor*”

**41%**

Unsatisfied with the tastiness of food served in hospitals, calling it either “*poor*” or “*very poor*”

**22%**

Suitability of the time that food is served in hospitals is either “*poor*” or “*very poor*”

**34%**

Do not believe food is served at the right temperature at hospitals, calling it “*poor*” or “*very poor*”



Meal-times are a crucial part of the recovery process in hospitals – both in terms of nutritional intake, and food being served at the right time, at the right temperature and suitable for the needs of the specific patient.

These figures indicate that *the public believe that the government is failing to provide the basic elements of care* to those who are recovering from an illness and who need it the most.



# Raising Awareness





## Progress in the last 3 years

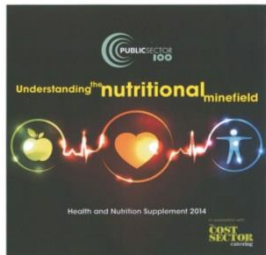
- School Food Plan – UIFSM
- AgeUK – lead on Hospital Food Standards Panel

## What we'd like to see in the next 3 years

- Positive actions from the Hospital Food Standards Panel
- Review into food standards in UK Care homes
- Extension of UIFSM...



# What Next?



**Distributed with Cost  
Sector April issue and  
by email to 80,000  
Public Sector catering  
contacts**



**PS100  
Forum  
24<sup>th</sup> April 2014**



**PS100  
Health & Nutrition  
Award  
24<sup>th</sup> April 2014**



**HOTEL YMPIA**  
EXCEL LONDON  
28<sup>th</sup> APRIL – 1<sup>st</sup> MAY 2014

**PS100 day  
(1<sup>st</sup> May)  
CSC Live @  
Hotelympia**



**FOR MORE INFO, TO SIGN UP FOR EVENTS  
OR TO DOWNLOAD THE FULL RESEARCH:**

**W: [costsectorcatering.co.uk/ps100](http://costsectorcatering.co.uk/ps100)**

**E: [andrewa@dewred.co.uk](mailto:andrewa@dewred.co.uk)**

# What Can You Do

- Adopt The **HCA Healthcare Food & Beverage Service Standards**
- Communicate and share
- Involve **ALL** – ‘Power of 3’
- Review and challenge the **NORM**
- **RESPOND**
- Do not allow the word **IMPOSSIBLE**





## Hospital Food Panel

- Do not reinvent the wheel (rolling pin!!)
- If asked for information – please respond
- Recommends all caterers should be members of HCA
- MUST cover all systems and offers
- Use CQUIN
- IT CAN WORK AND MUST WORK – Ongoing and ALL 4 Nations can use

**LET PATIENTS AND CATERERS LEAD - NOT POLITICIANS**



## PLACE/CQC

- We made changes but need to make more
- Developing links with HEALTHWATCH
- Working with CQC on questions to focus on the offers
- Review of Standard - HCA involved
- Involve the HCA in Audits?





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**NOW FOR A GAME WITH A TWIST**

Now you know so SORT IT!!

## HCA - National Response

- Protected Mealtimes MUST BE Mandatory
- **FOCUS** on **PATIENT** – Eating for Good Health
- Staff and Visitors – Healthy Eating
- Nutritional and Product Standards
- Minimum Food Costs
- Packaging
- Reviewing the rules – Modernising for the Future



# We ARE LEADING

- You have done this – **THANK YOU**
- Parliamentary support
- Media perception changed towards us – POSITIVE – BUT!!
- FRANCIS / BERWICK – We must DELIVER
- CQC In Patient Survey – Challenge 3% +

**“There is nothing impossible to him who will try.” [Alexander the Great]**



# **VT: Nutrition Hydration Week**



**ANY QUESTIONS?**

**I HAVE ONE PLEA / REQUEST**  
**IT IS YOUR SERVICE TO LEAD AND SHAPE**  
**We need you to LEAD IT**



***“It always seems **impossible**  
until its done.”***

Nelson Mandela



# VT: Empathy The Human Connection to Patient Care

**LINK:**

[http://www.youtube.com/watch?v=cDDWvj\\_q-o8&feature=youtube\\_gdata\\_player](http://www.youtube.com/watch?v=cDDWvj_q-o8&feature=youtube_gdata_player)