

# Meal Time Enter & View Visits Report

## Newham General Hospital – June 2017

### Background

Healthwatch Newham is part of a national network set up by the Health and Social Care Act of 2012 and led by Healthwatch England that aims to help local people get the best from their health and social care services. Healthwatch enables residents to contribute to the development of quality health and social care services.

Healthwatch undertake 'Enter and View' visits to health and social care services that are used by local people to talk to patients, service-users, their relatives and carers to hear their feedback about the quality of care and services.

### Introduction

In June 2017 Healthwatch Newham (HWN) delivered an Enter & View project to review the food and meal time support that was offered to patients at the Newham Hospital.

It has long been acknowledged that the quality, quantity and presentation of food and appropriate hydration in hospital plays an important part in patients' recovery.

HWN was provided with a list of wards at the hospital from which four wards were selected for the following meal time visits:

- Plashet Ward (Medical) – Lunch time visit
- East Ham ward (Surgery/Ortho/Urology) – Breakfast time visit
- Silvertown ward (OPS) – Dinner time visit
- Beckton Ward (Gynaecology) – Weekend breakfast time visit

The reviews and analysis were undertaken by a group of Healthwatch trained Enter and View volunteers and members of staff who visited the wards to observe a meal time and to talk to patients, staff, relatives and carers.

The findings of these visits and recommendations are shared with the Director of Nursing at Newham and Director of Facilities at Newham Hospital for their response. As with all Healthwatch reports, the report is then sent to our key partners, the Care Quality Commission, Newham Clinical Commissioning Group, London Borough of Newham and is available on our website and through our newsletter.

### Methodology

In preparation for these visits the Healthwatch team had several fact-finding meetings and phone calls with the Director of Nursing, Heidi Peakman, the Director of Facilities, Siobhan Bay, the ISS Catering Manager, Ulla Kamara and the Facilities Manager, Samir Ali, to agree the observational visits and find out about standard processes.

After each visit the team had a de-brief meeting and a short report was compiled.

The Director of Nursing was informed of the dates of the visits but no indication was provided about which ward and at which meal time would be visited.

Three to four HWN representatives worked together on each visit. Each team visited their allocated ward from half hour before the meal start time, through to the end of the meal time to observe the food preparation, hydration, hygiene, serving process and the support provided to patients from start to finish. Each team member was allocated a bay within the ward to closely observe a small number of patients and aimed to minimise their impact on the functioning of the ward by being as discreet as possible. The team observed the hospital's approach to hygiene and infection control.

The second part of the visit took place once the meal time was over and all trays were cleared. The team spoke to patients and their relatives and carers where appropriate. A standardised questionnaire was used to ask patients about their experience and opinions of the food, accessibility and the support receive during their stay.

The information collected at each visit has been collated by ward and summarised in the four sections as follows and, where appropriate, recommendations have been made. The final draft report was sent to the Director of Nursing to check for factual accuracy and a response to the recommendations. The final report was sent to the Care Quality Commission and Newham Clinical Commissioning Group and Health and Wellbeing Board and an electronic version is now available to the public on the Healthwatch Newham website and through the newsletter.

We would like to thank Newham Hospital staff for their time in explaining the meal time processes and responding to our report and that we could visit the wards with staff providing information about how the process worked.

**This report relates only to the service on the date of the visits, and is representative of the views of the staff, visitors and patients who the Enter and View team met with on that date.**

## Executive Summary and Overall Recommendations

We saw many examples of staff providing care and support to patients, showing kindness and patience and also checking that meal time was working well. Although we recognise that patients on the different wards will be at different stages of recovery and have different support needs, our observation and the feedback from patients lead us to make the following recommendations, to ensure the meal time process works as well as possible. We are also aware that Newham Hospital/BARTS will soon make changes to the catering and food options and we hope our recommendations will help make improvements to the experience for patients.

## Key Findings and Recommendations

As each ward is different we have specified the recommendations for each ward. Some of our observations and the feedback was consistent across all wards and we provide our comments and recommendations below.

### Protected Meal Times

Staff were aware of the process around this but we observed that some patients did not have a meal or had their meal interrupted to liaise with a doctor or have a procedure. We understand that the schedules may make it difficult to avoid meal times, but we recommend that the protected meal time process is emphasised and made clearer on the ward; that it is explained to patients and patients are offered meals or snacks if they have missed a meal or it has been interrupted.

Some hospitals have a very strict policy on Protected Meal Time and we would welcome Newham Hospital's comments on their approach.

- Review and enforce the protected meal time policy, with relevant signs made available for all three main meal times, to ensure patients are not disturbed unnecessarily and a clear notice is on the ward door to say that protected meal-time is currently in place and that this should not be disturbed, apart from when urgent medical care is needed.

### Availability of snacks, food and water

Very few patients were aware that they could request snacks between meals, fruit and additional drinks. We think this is very important, particularly if patients have missed a meal, because of the time they arrive on the ward or because they have an irregular appetite due to procedures or medication.

- Ensure that all patients are aware that they can order food and drinks between meals, including fruit.

### Cultural and dietary requirements.

Many patients said the food met their cultural or dietary requirements. However, feedback from 2 patients suggested that there should be more Halal options. 1 patient commented that there is only ever 1 meat and 1 vegetarian option so she sometimes chooses a jacket potato or salad. Whilst we appreciate that this food is available, we think the options should be increased so that food will appear appetising, that the food truly caters for people with different requirements and that patients do not have to "make do" with something they would rather not have.

- Ensure there are sufficient options for a good choice of meals that suit patients with different cultural requirements or needs.

### Food ordering

Menus are produced which were shown to the Healthwatch staff in the pre-meetings. However, very few patients were shown a menu and most chose food that was offered from the trolley once it was on the ward. Food, nutrition and being able to make a choice is important to a patient's sense of

wellbeing and being able to partake in their own recovery. We would like to see menus introduced so that patients can actively chose meals that they find appetising on the day.

- Review the food ordering process to ensure that visual menus are made available, including in different languages and in Braille, on the ward to provide all patients with the available choice selection of meals.

#### Support and assistance

There were many examples of patients being supported and cared for and assisted to eat and drink. However, there were examples of this not being done. We recognise the wards are busy places and staff have many duties. However, we think this is an essential part of patient care and would welcome the Hospital's reassurance on this matter.

- Provide a clear red Tray policy/guidance to ensure all staff are aware of the circumstances when these are used and how and clearly identify patients who need the service, to provide a consistent approach.
- Ensure that all patients are in suitable positions for the meal and that nurses or HCA check with individual patients whether they need help with any of their items including, serving water, opening any packed food items.

#### Hand Hygiene

With the concerns about and incidences of infections, we recommend that patients are reminded to wash their hands before meals or if they are not mobile, that they are provided with hand-wipes

- Review the hand washing procedure to ensure patients are reminded and supported to do so before meals and after meals and ensure wet wipes are made available to less mobile patients.

## Plashet Ward Visit

<b>Ward Name and type</b>	Plashet Ward Medical
<b>Visits Dates and Meal Type</b>	9 <sup>th</sup> June 2017 Lunch
<b>Number of beds and bays</b>	27 beds in 4x6 bed bays plus 3 side rooms
<b>Number Patients on the ward</b>	26
<b>Patients observed</b>	25
<b>Patients interviewed</b>	8
<b>Healthwatch Representatives</b>	Kate Hennessey – Healthwatch Newham Volunteer and Projects Officer Dan Tumusiime – Healthwatch Newham Volunteer Smart Abuwa – Healthwatch Newham Volunteer Peter Landman – Healthwatch Newham Volunteer

### Ward Observation Findings

#### Protected meal time

A notice at the entrance to the ward stated there was a protected meal time between 12-2pm for lunch. We were advised that a bell rings 15 minutes before meals are served to warn staff, but we did not hear this and patients told us the bell is not always ring. Nonetheless we observed that as soon as the food trolley arrived at 12noon the ISS worker was ready to serve and nurses and Health Care Assistants (HCAs) lined up to take the meals to the patients and doctors finished their consultations with patients and left the ward as a group.

There were two exceptions to this however; one patient was having a clinical procedure when the food trolley arrived and staff continued to treat the patient whilst lunch got underway. The patient said that even though his lunch was quite cold by the time he ate it, he preferred that the procedure he was having was completed rather than pausing it, as it needed to relieve some discomfort.

The second occasion involved a patient with a red tray. The patient was being assisted to eat by a student nurse when a doctor arrived to see them. The doctor began asking questions to test their mental capacity even though the patient was eating. At one point the doctor acknowledged this saying 'Sorry, I'll let you swallow that first'. The student nurse feeding the patient, paused to let the doctor ask several questions but when the patient did not answer the doctor left. The patient declined any more of their main course and the student offered them pudding, which they had a couple of mouthfuls of before declining this too.

#### Hand hygiene

We did not see any staff encourage patients to wash their hands before or after their meals or offer help to those needing assistance. We also did not see any wet wipes/cloths being offered to immobile patients, which we understand is the part of the protocol.

#### Sitting Position

We observed some patients being lifted to upright positions for eating, however the same patient with a red tray being assisted by the student nurse mentioned above, appeared too low in their bed even after their position had been adjusted. The patient coughed a couple of times during their meal, raising the question about whether this was related to their low position.

Another red tray patient was lower down than looked comfortable for an eating position, however two separate members of staff who helped them eat did not notice or check with the patient.

**Serving and assistance**

Food was taken from the warm trolley to each patient by staff in a calm and efficient manner. However there were no plate covers, which might preserve the temperature and allay any fears patients might have about hygiene. All the meal trays were put on patients' trolleys within reach.

**Red Tray**

We observed instances of poor communication for one red tray patient who was receiving assistance in the form of spoon feeding. The patient, who looked frail and possibly also had learning difficulties needed to wait for their food to cool down, however the worker who came to check on the temperature, did not explain this to the patient and left without it being clear patient knew what was happening.

An ISS menu clerk collecting patients' orders for the evening meal, noticed the patient's untouched food. They appeared to know the patient and offered to feed them. The patient did not say anything while the clerk started feeding them. The patient's eyes were rolled upwards so they could not see when the food was coming, the clerk did not engage with the patient or tell them it was coming and the patient appeared startled with each mouthful. After 3-4 spoonfuls the clerk asked the patient if they did not like the food and without waiting for a reply, suggested they tried the pudding, fed them a couple of spoonfuls. The clerk asked the same question again, and the patient responded to say they wanted hot chocolate from a beaker on the trolley but was told it was too hot. They then asked twice for water, but were assisted to drink an orange juice that the clerk opened. It was not obvious why the worker had done this.

**Water**

With the exception of the above case, all patients had access to water which was positioned within their reach. We were advised that water jugs are changed twice a day.

**Plasnet Ward Patients Feedback Findings.** Please note, not all patients answer all the questions. This can be for a variety of reasons, such as the patient doesn't understand, doesn't want to answer or appears reluctant to answer. We do not force patients to answer.

**Number of patients interviewed: 8**

<p><b>Length of stay</b></p> <ul style="list-style-type: none"> <li>• 1 day: 1</li> <li>• 2-7 days: 4</li> <li>• 8-14 days: 3</li> </ul>	<p><b>Menus and Ordering System</b></p> <ul style="list-style-type: none"> <li>• 7 found ordering easy to use</li> <li>• 1 found it not easy, due to lack of menu</li> <li>• 8 hadn't seen a menu</li> </ul>
<p><b>Food Suitability</b></p> <ul style="list-style-type: none"> <li>• 7 Felt food was suitable for their needs</li> <li>• 7 got what they ordered</li> <li>• 1 has sometimes not received the correct food</li> <li>• 3 felt they wanted more variety</li> </ul>	<p><b>Hand Hygiene</b></p> <ul style="list-style-type: none"> <li>• 2 said they would use the sink</li> <li>• 6 said they were given chance to wash beforehand</li> </ul>
<p><b>Comfort and Food Accessibility</b></p>	<p><b>Food Quality and Portion Size</b></p>

<ul style="list-style-type: none"> <li>• 8 said help is given if needed to get into a comfortable position</li> <li>• 8 said food and drinks were within reach</li> </ul>	<ul style="list-style-type: none"> <li>• 1 patient thought the food is enough, but their family bring them food as they believe it's not.</li> <li>• 8 were happy with portion size</li> </ul>
<p><b>Snacks and Refreshments</b></p> <ul style="list-style-type: none"> <li>• 2 received an early morning drink. 6 did not)</li> <li>• 4 have received an early evening drink. 4 did not)</li> <li>• 4 were told about snacks. 4 were not</li> </ul>	<p><b>Missed Meals</b></p> <ul style="list-style-type: none"> <li>• 8 had not missed meals.</li> </ul>

### General comments

We were pleased to see the efficient way food was served and most doctors left the ward during the meal. We were concerned about the lack of care when assisting or feeding some patients.

### Recommendations

- Review and enforce the protected meal time policy, with relevant signs made available for all three main meal times, to ensure patients are not disturbed unnecessarily and a clear notice is on the ward door to say that protected meal-time is currently in place and that this should not be disturbed, apart from when urgent medical care is needed.
- Provide a clear red Tray policy/guidance to ensure all staff are aware of the circumstances when these are used and how, and clearly identify patients who need the service, to provide a consistent approach.
- Review the hand washing procedure to ensure patients are reminded and supported to do so before meals and after meals and ensure wet wipes are made available to less mobile patients.
- Ensure that all patients are in a suitable positions and that nurses or HCA check with individual patients whether they need help with any of their items including, serving water, opening any packed food items.
- Review the food ordering process to ensure that visual menus are made available, including in different languages and in Braille, on the ward to provide all patients with the available choice selection of meals.
- Ensure that all patients are aware that they can order food and drinks between meals, including fruit.

## East Ham Ward Visit

<b>Ward Name and type</b>	East Ham – Surgery/Orthopaedic/ Urology
<b>Visits Dates and Meal Type</b>	Friday 16 June 2017 – Breakfast
<b>Number of beds and bays</b>	4 bays with 5 to 6 beds plus two single occupancy isolation rooms – Total 25 beds
<b>Number Patients on the ward</b>	22
<b>Patients observed</b>	22
<b>Patients interviewed</b>	8
<b>Healthwatch Representatives</b>	Kate Hennessey – Healthwatch Newham Volunteer & Projects Officer Leonardo Greco– Healthwatch Newham Manager Dan Tumusiime – Healthwatch Newham Volunteer

### Ward Observation Findings

#### Protected meal time

The hospital advised us that a system of protected meal times was in place and we noted a sign at the ward’s entrance, stating that the protected meal times for lunch was between 12-2pm. However the times for breakfast and dinner had been left blank. There was no clear indication when breakfast would start, instead we were informed that we could expect this to be some time between 8 and 8:30am. Four patients were interrupted during their meal time for various medical reasons including distribution of medicines and discussing medical requirement with nurses. Doctors also came to one of the bays, however they only spoke with patients that had finished eating.

#### Hand hygiene

It was observed that patients were not encouraged or reminded to wash their hands and no hand wipes were available on the trays. We were advised by staff that patients are encouraged to wash their hands before meal and that wet wipes for those less mobile were available, however this was not observed during this session.

#### Sitting Position

Most patients on this ward were abled bodied. One elderly patient needed support for positioning and eating and once the red tray was delivered a nurse was at hand to support the patient into position and help them with the meal, without rushing them and ensuring the patient was satisfied before moving on.

#### Serving and assistance

Before breakfast was served, the menu clerk tended each patient asking for their lunch meal preferences, however no menus were noticed on the ward, with patients being given one or two choices each verbally.

The breakfast trolley arrived at 8:40am and serving started immediately. Breakfast consisted of porridge or cereals, toast and fruit juice. The meal was served by a food clerk with occasional support from a nurse and a Health Care Assistant (HCA) while tending to other tasks.

The food clerk asked each patient for their choice, prepared the tray and served. All patients with white trays were served first in all 4 bays, once completed the clerk returned to serve the patient with a red tray. The toast had been pre-toasted and as serving breakfast took around half hour it is likely



that the last patients would have received it cold. Three patients were asleep and were not woken up for their breakfast. All trays were placed within reach however staff did not seem to check if patients needed help with their items. One of the patients struggled for a while to open a sachet of jam with no help being offered.

Once food had been served a second trolley arrived serving coffee at 9:00am. All trays were cleared by 9:30am.

### Red Tray

There was a “red tray” system in use to indicate that the patient needs assistance in eating. Yet no sign was noticed indicating the number of red trays on the ward and how they are used. There was only one patient needing support and therefore requiring a red tray.

For the one patient on this ward that seemed to require a red tray, the food clerk consulted with the nurse and HCA to check who will be supporting the patient through their meal. The nurse confirmed they will be taking up the role and had started supporting the patient within 5 minutes, shortly after completing assigning their medication.

### Water

All patients had their water jugs changed at 8:20am before breakfast arrived.

Water jugs and cups were left within reasonable reach of patients on the food tray. We did not observe however that patients who were less mobile had been offered help to drink or reach their jugs.

## East Ham Ward Patients Feedback Findings

**Patients Feedback Findings.** Please note, not all patients answer all the questions. This can be for a variety of reasons, such as the patient doesn’t understand, doesn’t want to answer or appears reluctant to answer. We do not force patients to answer.

### Number of patients interviewed: 8

<b>Length of stay</b> <ul style="list-style-type: none"> <li>1 day: 2</li> <li>2-7 days: 5</li> <li>8-or more: 1</li> </ul>	<b>Menus and Ordering System</b> <ul style="list-style-type: none"> <li>8 found ordering easy to use</li> <li>0 found it not easy</li> <li>5 hadn’t seen a menu.</li> </ul>
<b>Food Suitability</b> <ul style="list-style-type: none"> <li>6 said the food was suitable for their needs. 2 said this question was not applicable.</li> <li>5 got what they ordered</li> <li>1 has sometimes not received the correct food</li> </ul>	<b>Hand Hygiene</b> <ul style="list-style-type: none"> <li>1 said they were reminded to wash beforehand.</li> <li>1 said they were reminded in the past.</li> <li>6 said they were or did not remember being told or reminded.</li> </ul>
<b>Comfort and Food Accessibility</b> <ul style="list-style-type: none"> <li>6 said they did not need help with getting into position or eating.</li> <li>1 patient said that they do need help and get the support.</li> <li>1 patient said they needed support and did not get it.</li> <li>8 said food was within easy reach.</li> </ul>	<b>Food Quality and Portion Size</b> <ul style="list-style-type: none"> <li>8 were happy with portion size</li> <li>2 patient thinks the food is enough, but their family bring them food as they believe it’s not.</li> </ul>
<b>Snacks and Refreshments</b>	<b>Missed Meals</b>

<ul style="list-style-type: none"> <li>• 1 did received an early morning drink. 3 did not</li> <li>• 1 did received an early evening drink. 3 did not</li> <li>• 1 said they were offered drinks at different times</li> <li>• 3 were told about snacks. 2 were not</li> </ul>	<ul style="list-style-type: none"> <li>• 3 had missed meals as they were too ill to eat</li> <li>• 2 were offered food later. 1 was not.</li> </ul>
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### Recommendations

- Review and enforce the protected meal time policy, with relevant signs made available for all three main meal times, to ensure patients are not disturbed unnecessarily and a clear notice is on the ward door to say that protected meal-time is currently in place and that this should not be disturbed, apart from when urgent medical care is needed.
- Review the food ordering process to ensure that visual menus are made available, including in different languages and in Braille, on the ward to provide all patients with the available choice selection of meals.
- Review the hand washing procedure to ensure all patients are reminded to do so before meals and that less mobile patients are always given wet wipes with their trays.
- Provide a clear red Tray policy/guidance to ensure all staff are aware of the circumstances when these are used and how and clearly identify patients who need the service, to provide a consistent approach.
- Ensure that all patients are in a suitable positions and that nurses or HCA check with individual patients whether they need help with any of their items including, serving water, opening any packed food items etc.
- Review the process by which toast is served to identify alternatives that will allow all patients (including those being served last, to receive a warm toast).
- Ensure that all patients are aware that they can order food and drinks between meals, including fruit.

## Silvertown Ward Visit

<b>Ward Name and type</b>	Silvertown – Older People
<b>Visits Dates and Meal Type</b>	Friday 23 June 2017 - Dinner
<b>Number of beds and bays</b>	4 bays with 5 to 6 beds plus two single occupancy isolation rooms – Total 24 beds
<b>Number Patients on the ward</b>	15
<b>Patients observed</b>	15
<b>Patients interviewed</b>	11
<b>Healthwatch Representatives</b>	Leonardo Greco–Healthwatch Newham Manager Jim Ludlam – Healthwatch Newham Volunteer Atai Bassey – Healthwatch Newham Volunteer

### Ward Observation Findings

#### Protected meal time

A protected meal time sign was on display but did not specify times. When the bell rang at 5:20pm as the food trolley arrived, seven nurses and HCAs got involved in the food serving process except for a couple who continued administering medications.

#### Hand hygiene

We did not observe patients being reminded to wash their hands or being provided with wet wipes. Only one patient got up from their bed to wash their hands before and after.

#### Sitting Position

The elderly patients with no visitors were helped by staff to get into a comfortable position to eat. Other elderly patients with relatives were not approached as they were being assisted by their visitors. Another patient who was physically unable to move by themselves were supported by a nurse to move from the bed to a chair for their meal time.

#### Serving and assistance

Serving food across the ward was completed by 5:40pm and all patient ate their meals leisurely and the trays were cleared by 6:15.

All food was within reach and only one patient on the ward needed help eating their meal and was supported by staff. All patients received the same meal, soup and sausages and mash which were uncovered. One patient received a green salad wrapped in cling film which was not eaten as they were having food and snacks brought in by their relatives.

In total six patients did eat either for lack of appetite or due to a procedure which prevented them from eating.

While patients ate a nurse went around the ward to check at what stage patients were with their meals, yet no particular encouragement to those who were not eating was observed.

One patient was noticed struggling to cut up their food due to a physical disability and difficulties using their hands. Half way through the meal time a nurse arrived to cut their food and then left them to eat their meal. This patient did not have a red tray.

#### Red Tray

We did not observe a red tray policy displayed anywhere on the ward.

Only one red tray was served that evening to a patient with visitors who did not have an appetite. They were not offered help or encouraged to eat. The nurses were observed monitoring how much patients had eaten.

**Water**

We observed that one patient who could not reach their water jug was only noticed after half hour of waiting. Soon as staff noticed they were provided with water. All water jugs were changed during the meal time but patients on one bay were without water for the duration of their meal.

**Silvertown Ward Patients Feedback Findings**

Please note, not all patients answer all the questions. This can be for a variety of reasons, such as the patient doesn't understand, doesn't want to answer or appears reluctant to answer. We do not force patients to answer.

**Number of patients interviewed: 11**

<p><b>Length of stay</b></p> <ul style="list-style-type: none"> <li>• 1 day: 1</li> <li>• 2-7 days: 6</li> <li>• 8-14 days: 3</li> <li>• 15-30 days: 1</li> </ul>	<p><b>Menus and Ordering System</b></p> <ul style="list-style-type: none"> <li>• 7 found the ordering system easy to use. 4 were not sure.</li> <li>• 4 saw a menu, 7 did not, of which 4 were told about options verbally</li> </ul>
<p><b>Food Suitability</b></p> <ul style="list-style-type: none"> <li>• 4 received the correct meal, 3 did not and for 3 this was not applicable.</li> <li>• 6 thought the food suited their dietary, religious or medical needs, 1 did not and 4 did not answer.</li> </ul>	<p><b>Hand Hygiene</b></p> <ul style="list-style-type: none"> <li>• 7 were not give a chance to wash their hands before meals, 3 were, 1 not applicable.</li> </ul>
<p><b>Comfort and Food Accessibility</b></p> <ul style="list-style-type: none"> <li>• 11 were given help to get into a comfortable position.</li> <li>• 8 said the food was left within reach, 3 not applicable.</li> <li>• 9 said the drinks were left within reach, 2 not applicable.</li> </ul>	<p><b>Food Quality and Portion Size</b></p> <ul style="list-style-type: none"> <li>• 7 enjoy the food and drink they receive, 2 did not and 2 not answered, of which one commented that: Stake wasn't nice/tough</li> <li>• 5 happy with portion size, 4 were not, 2 did not answer.</li> <li>• 4 said family or friends have brought them food from home. 2 sometimes. 4 said no. 1 not applicable. 1 patient that received food from relatives said it was just for variety and not to replace the hospital food.</li> </ul>
<p><b>Snacks and Refreshments</b></p> <ul style="list-style-type: none"> <li>• 2 were told snacks are available. 9 were not.</li> <li>• 3 were told hot drinks are available. 8 were not.</li> <li>• 6 received an early morning drink. 4 did not.</li> <li>• 4 received an evening drink. 6 did not.</li> </ul>	<p><b>Missed Meals</b></p> <ul style="list-style-type: none"> <li>• 1 patient missed a meal due to surgery or other procedure, 8 did not. 2 not applicable</li> <li>• 2 were offered food upon returning to the ward. 4 were not applicable.</li> </ul>

**General comments**

Overall the ward functioned well and staff appeared competent and supportive to patients. Staff got involved in meal time to make the process as quick and seamless as possible.

There seemed to be some logistical issues around serving fresh water and some patients receiving something they had not ordered.

We asked a HCA about how they dealt with issues around meal time or if patients had a complaint. HCA did not seem to be aware of a specific process, stating that they would deal with it themselves and then escalate to the nurse if they were not able to resolve the issue.

In the final comment patients said: “Staff are great”, “Food needs to be cooked properly”, “Very happy no complaints about the food”, “Would like metal cutlery, very pleased with staff support”, “Very happy with food”, “Food is satisfactory”.

### Recommendations

- Review and enforce the protected meal time policy, with relevant signs made available for all three main meal times, to ensure patients are not disturbed unnecessarily and a clear notice is on the ward door to say that protected meal-time is currently in place and that this should not be disturbed, apart from when urgent medical care is needed.
- Review the food ordering process to ensure that visual menus are made available, including in different languages and in Braille, on the ward to provide all patients with the available choice selection of meals.
- Review the hand washing procedure to ensure all patients are reminded to do so before meals and that less mobile patients are always given wet wipes with their trays
- Provide training for HCA on processes and procedures around escalating issues or complaints made by patients on the ward.
- Review the water changing process to ensure patients have fresh water during their meals.
- Ensure that all patients are aware that they can order food and drinks between meals, including fruit.

## Beckton Ward Visit

<b>Ward Name and type</b>	Gynaecology
<b>Visits Dates and Meal Type</b>	Saturday 25 June, Breakfast. Started in the first bay at 8.30.
<b>Number of beds and bays</b>	3 bays with 6 beds, with 1 isolation room
<b>Number Patients on the ward</b>	10
<b>Patients observed</b>	12 (1 was in isolation room and 1 arrived during the visit)
<b>Patients interviewed</b>	5
<b>Healthwatch Representatives</b>	Selina Rodrigues - Head of Healthwatch Newham Nicole Goodridge – Healthwatch Newham Volunteer

### Ward Observation Findings

Staff said that there were 2 Health Care Assistants (HCA) and 1 nurse on duty, although 1 Health Care Assistant had attended the Safety Huddle that morning. Staff said that patients were offered drinks “all the time” and snacks and fruit were always available although ordering meals from the kitchen had to be before 6pm. Staff gave the example of 1 patient admitted at 10pm who was offered sandwiches from the fridge. The serving kitchen was very warm, in which the sink was blocked and the fire door was left open. The staff handover from the night shift started at 8am.

### Protected meal time

There was a general notice about protected meal time on the door, but it looked as if this was on the door all the time. It was not at eye level and did not say Protected Meal Time was currently happening and should not be interrupted whilst breakfast was taking place. At 9.05am a doctor visited a patient and drew the curtains during breakfast. The patient was then asleep so we could not check how urgent the visit was, if the patient had been able or wanted to eat first or afterwards. This ward often receives patients that have just come from surgery, and it is recognised that medical staff may need to visit patients. However, we would like to check that this only happens when the procedure is urgent for patients.

### Hand hygiene

None of the patients spoken said they were given hand-wipes nor are they asked if they wish to use the sink to wash their hands. Some patients said they could walk to the sink.

### Sitting Position

All patients that were eating or had a meal served were in a sitting position.

### Serving and assistance

Health care assistants and nurses served the food and talked to patients. No patients appeared to need or when asked, said they needed assistance with eating. Staff were seen to encourage patients who were not eating, by offering alternatives. For example we saw 2 patients being asked how they liked the consistency of their porridge. Staff checked whether one patient was nil by mouth and if another was diabetic. Whilst we were with 1 patient, the HCA asked if the meal was finished and could be removed.

The staff said that 4 patients had been admitted during the night, and so these patients were probably asleep or not wishing to eat during our visit. 1 patient was admitted during our visit and we observed the nurse checking if she was able to eat and the providing a snack.

### Red Tray

There was no information about Red Trays on the ward and no patients had red trays.

### Water

Fresh water was delivered whilst we were on the ward, at approximately 9.15am. We did not observe any staff encouraging patients to drink water. All patients had water on their tables or trays

## Beckton Ward Patients Feedback Findings

**Patients Feedback Findings.** Please note, not all patients answer all the questions. This can be for a variety of reasons, such as the patient doesn't understand, doesn't want to answer or appears reluctant to answer. We do not force patients to answer.

### Number of patients interviewed: 5

<p><b>Length of stay</b></p> <ul style="list-style-type: none"> <li>1 day: 3</li> <li>2-7 days: 2</li> </ul>	<p><b>Menus and Ordering System</b></p> <ul style="list-style-type: none"> <li>4 found ordering easy to use.</li> <li>4 hadn't seen a menu, 1 did not comment.</li> </ul>
<p><b>Food Suitability</b></p> <ul style="list-style-type: none"> <li>4 said the food was suitable for their needs, but of 2 patients that require halal food, 1 said they order a jacket potato or salad if they do not want the 1 meat or 1 veg option that is available. 1 patient who requires has halal food said the food is not fresh or appetising.</li> <li>5 said they got what they ordered.</li> </ul>	<p><b>Hand Hygiene</b></p> <ul style="list-style-type: none"> <li>2 said they were able to wash their hands by using the sink</li> <li>2 said they were or did not remember being told or reminded.</li> </ul>
<p><b>Comfort and Food Accessibility</b></p> <ul style="list-style-type: none"> <li>1 said that they sometimes get help to be in a comfortable position.</li> <li>1 patient said they needed support and did not get it.</li> <li>2 said they did not need help.</li> <li>5 said the food and drinks were in easy reach.</li> </ul>	<p><b>Food Quality and Portion Size</b></p> <ul style="list-style-type: none"> <li>3 said they enjoyed the food. 1 said it's ok</li> <li>3 were happy with portion size. 1 said they didn't know.</li> <li>2 patient have been brought food by their family but this is just to add variety. .</li> </ul>
<p><b>Snacks and Refreshments</b></p> <ul style="list-style-type: none"> <li>4 did received a 6am drink (1 said this was water)</li> <li>2 received a 9pm drink (1 did not)</li> <li>No patients were told that snacks were available. 1 patient said they requested fruit and were given an apple.</li> <li>2 said they were told about hot drinks.</li> </ul>	<p><b>Missed Meals</b></p> <ul style="list-style-type: none"> <li>4 had not missed any meals</li> </ul>

### General comments

We saw staff encouraging patients to eat and offering alternatives and the atmosphere on the ward was calm. Few patients were aware of being able to ask for snacks, which was a

concern as some had recently arrived from surgery and may have missed a meal. Although patients said that the food suited their cultural requirements, we think there should be more options, so that patients feel they have a choice and do not have to “make do”.

Patients made the following comments, “Served with a smile”, “It’s ok I guess so”, “Serving is very good”.

#### **Recommendations check against other wording.**

- Review and enforce the protected meal time policy, with relevant signs made available for all three main meal times, to ensure patients are not disturbed unnecessarily and a clear notice is on the ward door to say that protected meal-time is currently in place and that this should not be disturbed, apart from when urgent medical care is needed.
- Review the hand washing procedure to ensure patients are reminded and supported to do so before meals and after meals and ensure wet wipes are made available to less mobile patients.
- Ensure that all patients are in a suitable positions and that nurses or HCA check with individual patients whether they need help with any of their items including, serving water, opening any packed food items.
- Ensure there are sufficient options for a good choice of meals that suit patients with different cultural requirements or needs.
- Review the food ordering process to ensure that visual menus are made available, including in different languages and in Braille, on the ward to provide all patients with the available choice selection of meals.
- Ensure patients are encouraged to drink water when they are being served food or are being assisted to eat.



# Newham General Hospital Response to the Meal Time Enter & View Visits Report December 2017

In June 2017 Healthwatch Newham (HWN) delivered an Enter & View project to review the food and meal time support that was offered to patients at the Newham Hospital.

It has long been acknowledged that the quality, quantity and presentation of food and appropriate hydration in hospital plays an important part in patients' recovery.

HWN was provided with a list of wards at the hospital from which four wards were selected for the following meal time visits:

- Plashet Ward (Medical) – Lunch time visit
- East Ham ward (Surgery/Ortho/Urology) – Breakfast time visit
- Silvertown ward (OPS) – Dinner time visit
- Beckton Ward (Gynaecology) – Weekend breakfast time visit.

## East Ham Ward

- Ward manger and Senior nurse ensuring that staff are aware and enforcing *protected meal time policy* have amended signs and continue to educate teams on protected meal times.
- The new provider for meals now has a selections of menus including braille to support improved food ordering processes.
- Ward manger and Senior nurse ensure that staff are aware that all patients should be offered to wash their hands before all meals.
- With the new provider for meals now in place, the nursing staff update the nutrition and hydration boards twice a day, which indicate the red trays, and as witnessed "The nurse confirmed they will be taking up the role and had started supporting the patient within 5 minutes"
- Ward manger and Senior nurse ensure that staff are aware that it is all staff responsibility to assist patients at meal times with positioning including serving of water and assisting with packed food items.
- New provider for meals - review how the toast is cooked to ensure warm toast is served.
- Information refreshed to ensure that staff are aware how to order meals, drinks and fruit outside meal hours within the new system.

## Silvertown Ward

- The comments on were mainly positive
- Protected meal times signage actioned and all members of the MDT team are aware of the process. Some challenges due to the nature of the ward.
- All areas provided with ordering details for hand wipes and on the other OPS wards; this will continue to be monitored by the Ward Manager and senior Nurse.
- Water: The new system with our new contracted provider works better as there is a clear process around replacing water jugs. Nursing staff need to be vigilant and escalate accordingly.
- Ordering process: This is led by Serco staff and is facilitated by the use of Nutrition and Hydration boards. The menus are available from Serco staff. With the new system; there are dedicated Hostesses/Hosts who take orders from the patients to allow a choice. There is a braille and alternative language menu list.

- There is a new process for ordering food and drinks in between meals which will be included in the new patient information book. In the interim, ward staff are to address this as part of the admission process.

Dementia friendly crockery and cutlery and a finger menu is being introduced by the new meal service provider.

#### **Beckton Ward**

- Safety briefing updates staff about how to encourage good nutrition support with the changes detailed below
- Laminated information signs to update all about protected meal times for breakfast, lunch and dinner with red tray information on ward
- The staff now put signs up at meal times to explain that the protected meal times is currently in place and should not be disturbed.
- Staff offer wipes/assistance, to sink for hand washing, to all patients prior to offering the meal tray
- Staff routinely ensure patients are sitting upright as was noted during the observation but have been reminded to offer help with opening any packed food items when food delivered
- Meal options will be more varied as Serco contract comes into place Nov 1 2017 with a ward host that will ensure patients are guided through their food selection and get their preferred meals, drinks and snacks during the day with the ward staff taking over at night

Staff routinely offer water and the Serco host will maintain this standard at change over.

#### **Over-arching governance**

There are on-going corporate nursing audits for protected mealtimes within the Trust audit programme. This is supplemented by local clinical Friday audits by the senior nursing team. Divisions will be expected to provide assurance on a quarterly basis on-going in relation to progress in this area. The site has a local Nutrition Action Team which meets quarterly and reports to the Trust wide group which meets bi-monthly. A new nursing Associate Director has been allocated the responsibility of overseeing this for the site in conjunction with the Chair who is a dietician.

There has been an internal audit by London Audit Consortium on Patient Nutrition during 2016 repeated in 2017 and the report is awaited.

Outlying trends and good performance are also discussed at the Trust wide NMAHP Leadership meeting chaired by the Chief Nurse for Barts Health.

Newham University Hospital would like to thank Healthwatch for their feedback on the enter and view visit and continues to strive to improve its performance in this area.

## Appendix 1

### Enter & View: Newham Hospital Meal Time Observations Summary

EV Rep Name		No. of Patients Observed	
Date of visit		Meal time	
Ward name		Ward type	

#### Protected Meal Time:

1. Was protected mealtime observed?			Yes / No
2. Protected meal time Planned Start:		Planned Finish	
3. Protected meal time Actual Start:		Actual Finish	
4. Was a sign/notice/barrier put up to ensure everyone aware of the restrictions?			Yes / No
Comments:			

#### Washing:

5. Did patients wash/clean their hands before eating?			Yes / No
6. If not mobile were hand wipes provided?			Yes / No
Comments (including number of patients that did not clean their hands if applicable):			

#### Sitting position:

7. Were all patients in a suitable position for eating their meal?			Yes / No
8. If yes, did patients get in position:			Aided / Unaided
Comments (including numbers, where applicable):			
9. Were those patients needing assistance helped into a suitable position to eat?			Yes / No
Comments (including numbers, where applicable):			

10. Were food trays put within reach and all sachets etc. open ready for eating?			Yes / No
Comments (including numbers, where applicable):			

#### Serving:

11. Were tray in reach & food uncovered			Yes / No
12. No. of Patients that	Ate unaided		Ate with Aide
13. Were 'red tray' patients assisted to eat and adequately supported?			Yes / No
Comments(including numbers, where applicable):			
14. Were meals substantially finished?			Yes / No
Comments (including numbers, where applicable):			

15. Were patients who were not eating or leaving a significant amount, offered help or encouragement to eat?	<b>Yes / No</b>
Comments (including numbers, where applicable):	
16. Did encouragement include offering alternatives?	<b>Yes / No</b>
Comments(including numbers, where applicable):	

17. Did monitoring of uneaten food appear to happen when meals were finished?	<b>Yes / No</b>
Comment(including numbers, where applicable):	
18. Did staff respond to any requests for help?	<b>Yes / No</b>
Comments (including numbers, where applicable):	
19. Were trays (Red and non-red) collected in a timely manner but without rushing people? Did you observe the green tick system?	<b>Yes / No</b>
Comments (including numbers, where applicable):	

**Other:**

20. Were all staff involved at meal time?	<b>Yes / No</b>
Comments (including numbers, where applicable):	
21. Was water within reach?	<b>Yes / No</b>
22. Were patients seen drinking?	<b>Yes / No</b>
23. Any other comments:	

## Appendix 2

### Enter & View: Newham Hospital Meal Time Patient Questionnaire

#### How to introduce yourself to patients

- I'm <<your name>> from Healthwatch Newham. We're an independent body that gives people the chance to say what they think about the hospital and to suggest ideas to improve services. We're completely independent of the NHS.
- We're asking people the same questions across several wards at Newham Hospital to find out what patients think about hospital food and support around mealtimes.
- We'd like to hear what you think and would be grateful if you'd answer some questions.
- We're not going to write down your name, so we can promise that whatever is said will stay anonymous – nobody will know it's come from you

EV Rep Name			
Date of visit		Meal time	
Ward name		Ward type	
Type of respondent	patient <input type="checkbox"/>	relative <input type="checkbox"/>	carer <input type="checkbox"/>

- How long have you been in hospital?  
1 day  2 to 7 days  8 to 14 days  15 to 30 days  Over 1 month
- Do you find the menus and ordering system easy to use and understand?  
yes  no
- Do you actually see a menu when ordering?  
yes  no
- Are the meals you receive the ones you asked for?  
yes  no
- Does the food & drink suit your dietary, religious or medical needs?  
yes  no  n/a

If no, why not?

- If you had specialist meals (including Asian, Afro-Caribbean, Halal, Kosher, Vegetarian), do you feel the options are suitable for your dietary, religious or medical needs?  
yes  no  n/a

If no, why not?

7. Are you given the chance to clean your hands before a meal?

yes  no

8. Are you given help if you needed it to get into a comfortable position and/or to eat?

yes  no  n/a

9. Are your meals/drinks left within reach and opened/uncovered ready for you?

Food	yes	<input type="checkbox"/>	no	<input type="checkbox"/>
Drink	yes	<input type="checkbox"/>	no	<input type="checkbox"/>

10. Do you enjoy the food and drink you have been receiving?

yes  no

Comments on food quality including temperature, taste, texture etc.

11. Are portion sizes appropriate for you?

yes  no

12. Have you been told snacks and hot drinks are available?

Snacks yes  no

Hot drinks yes  no

13. Have you been offered or served an early morning (6am) drink by the nurses?

yes  no

14. Have you been offered or served a late evening drink (9pm) by the nurses?

yes  no

15. Have your family or friends ever brought in food for you?

yes  no

If yes, why?

16. Are there any times when you have missed a meal?

yes  no

If yes, why?

17. If you were away from the ward were you offered food when you returned to the ward?

yes  no

18. Do you have anything else to say about food, drink and mealtime support at the hospital or anything else you'd like to tell Healthwatch about?