

# **NHS FORTH VALLEY**

## **Protecting and Managing Patient Mealtimes Policy**

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<b>Author / Contact</b>	Pamela Anderson/Chris Christie Nutrition Champions Dietetic Dept, FVRH
<b>Group / Committee – Final Approval</b>	Food Fluid an Nutritional Care Steering Group, Nursing & Midwifery Policy Forum

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## Consultation and Change Record – for ALL documents

<b>Contributing Authors:</b>	Pamela Anderson, Christine Christie, Arlian Mallis, Ann Myles, Members of the Food Fluid and Nutrition Steering Group.		
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## **1. Policy statement**

NHS Forth Valley recognises the provision of high quality nutritional care is essential for the well-being of patients in hospital. The therapeutic role of food within the healing process, and systems to support food consumption, cannot be underestimated. NHS Forth Valley will therefore promote a climate and environment that supports optimum nutrition for all in-patients. This will be achieved through the implementation of protection and management of patient mealtimes.

## **2. Background**

Mealtimes provide patients with adequate nutrition as well as an opportunity to support social interaction. The therapeutic role of food within the healing process cannot be underestimated but food, even if it is of the highest quality, is only of any value if the patient actually eats it.

Clinical areas must adopt different approaches to mealtimes dependent on their patients, and these can vary both between wards and with some patients from day to day. In addition there are a number of environmental factors that may influence whether a patient eats or not.

It is the responsibility of the whole healthcare team to ensure that patients are supported to eat their meals. The Protecting and Managing Patient Mealtimes Policy seeks to provide a framework for mealtimes, placing the patient at the centre of mealtime experience.

Its purpose is to assist practitioners deliver best clinical practice for patients during mealtimes in accordance with the NHS HIS Standards on Food, Fluid and Nutritional Care (2014). The standards are based on research findings, experience and expert opinion with the aim of reducing inappropriate mealtime interruptions and improve patient care (Hospital Catering Association 2004)

## **3. Scope of the policy**

All hospital sites within NHS Forth Valley  
All in-patients  
All hospital staff  
Ward visitors

## **4. Definition of terms**

Protected meal times are periods where eating and drinking are the focus. During these times, people are able to eat and drink in a clean, quiet and safe environment. Non-essential interruptions are limited, to allow staff to provide assistance and encouragement (NHS Scotland, 2011).

## **5. Flexible/Extended visiting and mealtimes**

NHSFV acknowledge that when a family member is in hospital it can be a very stressful time and it is important for families to be close and support each other during hospital admission. Flexible visiting was introduced to NHSFV in March 2014 allowing visitors into wards during mealtimes. We recognise that being together at mealtimes is an important social activity. Visitors can offer reassurance, motivation and assist their family member at mealtimes, all of which positively impact on the amount of food consumed. They can however potentially adversely impact on mealtimes if they disturb the calm environment or their presence influences the privacy and dignity of their relative or other patients around mealtimes.

In most instances it will be appropriate for close family (maximum of 2) to be present over mealtime, however they should not actively be involved in assisting a patient without prior discussion with the Senior Charge Nurse, and agreement from the patient where possible.

There are instances when assistance from visitors is not appropriate e.g. where self management is part of the patient's rehabilitation, or if patients have a swallow problem and require assistance from trained staff (unless training has been given to family)

It is recognised that the presence of any visitors in a ward area can be off putting where dignity of the patient is concerned (including the patient's own visitors). This is particularly true when full assistance is required. Some people feel reluctant to eat when others are not eating.

It is therefore at the Senior Charge Nurse's discretion whether visitors are permitted during mealtimes depending on clinical need in their area. There will be occasions when visitors may be asked to leave the ward for short periods to ensure mealtimes are not disturbed and for patient safety.

## **6. Principles of protected patient meals**

*'Nothing shall be done on a ward whilst patients are having their meal'*

*Florence Nightingale (1859)*

In order to maximise the benefits to patients, from the mealtime experience, clinical staff are required to prepare themselves, the environment and their patients prior to the service of food. The following principles should be adopted in all clinical areas where patients receive food; however it is acknowledged that in a number of clinical settings essential activity will and must continue.

### **Effective implementation**

- Increased staff & visitor awareness of protected mealtimes in wards
- The patient and their relatives should be made aware of the mealtime policy as soon after admission as is reasonably possible.
- Appropriate signage which is visible for staff and visitors. Effective leadership at all levels of the organisation from Director of Nursing to the nurse in charge of the ward/unit at mealtimes.
- Co-operation with all staff groups

- Ward based teams will organise their own mealtimes, to maximise the number of staff available to deliver and assist patients with food.

### **Identify individuals**

- Patients requiring assistance with food will be identified prior to the service of meals.

### **Preparation**

- Staff will wash their hands and use appropriate protective clothing
- Each table will be clean and suitably prepared prior to the service of food. Bed tables and eating areas will be cleared of items not conducive to mealtimes.
- Where appropriate, ward based teams will provide the opportunity for patient to use toilet facilities prior to meals.
- Prior to mealtimes patient will be offered hand washing facilities.
- Patients will be positioned for safe eating.
- Equipment – adapted cutlery will be available to patients requiring this.
- Consideration will be given to where patients sit to eat their meals, whilst respecting individual preference and their clinical condition.

### **During meal times**

- Nursing staff will make food a priority during mealtimes, providing assistance in the delivery of meals to the patient, checking the correct consistency of texture modified diets, providing the patient with assistance if required and encouraging patients to eat, being aware of how much food is eaten.
- Minimise non-essential interruptions. Interruptions e.g. ward rounds, GP visits, cleaning, documentation and therapy will only occur during mealtimes when clinically appropriate.
- If the patient is required to leave the ward for tests, outpatient appointments, transfer to other wards etc, that these are arranged for out with mealtimes whenever possible.
- Ensure food and drink is within easy reach.
- Provide assistance where required (open packets, cut up food, pour drinks).
- Support people to eat and drink where required.
- Family and friends may assist if this will encourage food and fluid intake and is safe to do so.
- Patients should be able to enjoy food in a relaxed environment at their own pace, and be offered the opportunity to rest after a meal.

### **Documentation**

- Complete appropriate paperwork relating to food and fluid intake timeously, for example food record charts, fluid balance charts.
- Report to nurse in charge if very little food is taken or there are issues with swallowing.

## **7. Responsibilities**

## **Lead Nurses and Clinical Nurse Managers Responsibilities**

Managers will:

- Monitor implementation of The Protecting and Managing Patient Mealtimes Policy within their area(s) of responsibility and report this via the Clinical Quality Indicators for Food, Fluid & Nutritional Care via the Transforming Care At the Bedside (TCAB) intranet site.
- Emphasise the importance of teamwork and co-operation between different teams including catering staff and ward based teams to ensure implementation and compliance. Support Senior Charge Nurses to develop working relationships between teams of staff involved in meal service.
- Have a working knowledge of the NHS HIS Food Fluid and Nutritional Care Standards (2014) with respect to the planning and delivery of food and fluid and the impact on clinical care.

## **Senior Charge Nurse/ Nurse in Charge of the ward Responsibilities**

Where patient meals are served, teams led by the Senior Charge Nurse (SCN) will:

- Fully implement protected mealtimes in their clinical areas, supported by senior managers. Consideration should be given as to whether a written individual ward policy on Protected Patient Meals is required .
- Ensure that all nursing staff are aware of the NHS HIS Food Fluid and Nutritional Care Standards (2014) with respect to the planning and delivery of food and fluid.
- Ensure interruptions e.g. ward rounds, drug rounds, GP or other medical staff visits, cleaning and therapy will only occur in exceptional circumstances. Consider how the ward routine can be adjusted to incorporate protected mealtimes.
- Ensure staff directly involved with patients/clients at meal times avoid answering the telephones and identify a key person at meal times who is not involved in food service, to answer telephones, such as ward clerks. Ward clerks should be instructed wherever possible to advise callers of the protected mealtimes and either take a message or ask the caller to call back later, to avoid interrupting nurses involved in meal service.
- Develop an effective communication relationship with catering services that permits early identification and resolution of any problems with the supply of food and fluid to the ward. This may be via ward housekeeper or Serco helpdesk.
- Organise staff meal breaks to maximise the number of staff available to deliver and assist patients/clients with food.
- Consider where patients sit to eat their meals, whilst respecting individual preference and depending on clinical environment.

- Whilst implementing flexible visiting, consider restricting ward area to visitors during mealtimes and determining the period of restriction including enforcement of only 2 visitors per bed to minimise noise disturbance at mealtimes. Communicating with visitors when it is appropriate for them to be asked to leave the bedside area for a short while in order to maintain the privacy and/or dignity of their loved one or other patients in the adjacent area.
- Ensure visitors are not engaged in full assistance with meals without the agreement of the SCN. (The exception is in the Children's ward where there is an expectation that parents will assist their child at mealtimes without prior discussion with the SCN)
- Display appropriate signs to inform staff and visitors of the Protected Mealtimes period (adapting Healthcare Improvement Scotland "Making Meals Matter" posters to indicate the individual ward policy on Protected patient meals .).
- Ensure the ward has a system for easy identification of those patients requiring assistance at mealtimes, be it full assistance or partial. Ideally this should be at the patient's bedside in order that Serco staff, bank staff & visitors are aware of the need for assistance, positioning at mealtimes & adaptive cutlery etc. In addition signifiers on eWARD can be used where applicable.
- Communicate with the patients and their relatives to make them aware of the purpose and benefits of The Protecting and Managing Patient Mealtimes Policy.
- Communicate with medical staff and other healthcare professionals to make them aware of the purpose and benefits of The Protecting and Managing Patient Mealtimes Policy.
- Take into consideration individual preferences and cultural considerations whilst balancing the needs of all patients on the ward.
- Monitor practice during mealtimes and support staff to ensure that their practice remains consistent with the policy eg the National Patient Safety Agency advise appropriately recording of missed meals by nurses at ward level. This should be monitored by SCN as part of the policy and ensure nursing staff make appropriate amendments to the patient's plan of care.
- The protocol for the provision of therapeutic diets, meals out-with the planned menu and replacement meals will be available on each ward. Copies are also available, appropriate to acute or community setting, on the intranet: [http://intranet.fv.scot.nhs.uk/home/Depts/NutritioninHospital/nih\\_policies.asp](http://intranet.fv.scot.nhs.uk/home/Depts/NutritioninHospital/nih_policies.asp)

## **Nursing Staff Responsibilities**



Nursing staff will:

- Identify patients requiring assistance with eating and drinking prior to the service of meals
- Ensure that tables are clean, suitably prepared and clear of items not conducive to mealtimes prior to the service of food.
- Provide the opportunity for patient to use toilet facilities prior to meals.
- Provide the opportunity for patients to wash their hands prior to meals.
- Provide patients with napkins (not aprons) as appropriate.
- Wash their own hands and use appropriate protective clothing for meal service.
- Make food and fluids a priority during mealtimes, providing assistance and encouraging patients to eat, being aware of how much food is eaten and recording nutritional intake for those requiring this to be recorded
- Enable patients to eat their meals independently but offer assistance with eating and drinking if necessary (including encouraging carers to assist at mealtimes when appropriate).
- Report missed meals and/or poor fluid intake to the nurse in charge and update food record charts/Fluid balance charts as required
- Take staff meal breaks which do not coincide with patient mealtimes, to maximise the number of staff available to serve and assist patients with food during meal times.

### **Responsibilities for all staff**

All staff will:

- Attend training in food handling as part of mandatory training ,
- Be competent in the positioning and provision of assistance to patients at mealtimes
- Discourage interruptions during meal times e.g. ward rounds, drug rounds, GP or other medical staff visits, cleaning, routine investigations and therapy.

### **8. Non-essential and essential clinical activity**

Nursing staff must ensure that delivery of essential clinical care is not compromised. Although not an exhaustive list, guidance on what constitutes **non-essential** activity would include:

- Ward rounds (where possible)

- Routine medication administration
- Routine observations of the clinically stable patient
- Routine bloods
- Routine ECGs
- Assessments and treatments by Allied Health Professionals, e.g. physiotherapy and Occupational Therapy
- Pharmacist visits to patients
- Cleaning/ bed making
- Personal care
- Non-essential transfer of patients from one clinical area to another e.g. collection & movement for outpatient appointment or transfer to other wards/hospital
- On-site training ( not pertaining to mealtimes)
- Nursing interventions eg. Wound treatment, documentation( not pertaining to mealtimes)
- Staff meal breaks.
- Answering telephone calls and non urgent queries.

Nursing staff must use clinical judgement when considering what constitutes **essential activity** for example:

- Patients that require medical assessment.
- Diagnostic tests such as CT scan, Ultrasound.
- Patients prepared for planned procedures.
- Patients requiring pain control.
- Urgent patient transfers or admissions.

## **9. Communication**

- The principles of protected mealtimes need to be established within the ward routine and structured day.
- Appropriate signage should be displayed outside the ward, to inform staff and visitors of the protected meal time periods. Ward signage is currently under review.

There is intention to include information around protected patient meals for visitors on a Welcome Board within the ward area. Healthcare Improvement Scotland “Making Meals Matter” posters can also be adapted to indicate that visitors assisting at mealtimes are welcome in the ward during meals.

- Include the principles of Protected Mealtimes into induction programmes.
- Ensure protected mealtime principles are communicated to visitors. Information is provided on the NHS Forth Valley internet web pages, in the patient menu booklet , in ward signage, and in Community hospitals via posters and “Eat Well Get Well Stay Well” leaflet
- Emphasise the importance of teamwork and co-operation between catering staff and ward based teams. (Kitchen, housekeeping and nursing staff)
- Support ward based teams in the implementation of the protected mealtimes via Food, Fluid & Nutritional Care Steering Group, Food Fluid & Nutritional Care Technical Group and the Nutrition Link Nurse network.

## **10. Supporting Information**

- NHS HIS Standards on food, Fluid and Nutritional Care (2014)
- Department of Health Essence of Care, Food and Nutrition benchmark
- Clinical Governance Support Team, Essence of Care
- Hospital Caterers Association
- Food in Hospitals, National Catering and Nutrition Specification for Food and Fluid Provision in Hospitals in Scotland

The British Dietetic Association, the Royal College of Nursing and the British Association of Parenteral and Enteral Nutrition support the concept of protected mealtimes, as does the British Society of Physicians and the British Medical Association.

## **11. References and Bibliography**

Age Concern

Hungry to be Heard; The Scandal of Malnourished older people in hospital 2006

[http://www.ageuk.org.uk/documents/en-gb/hungry\\_to\\_be\\_heard\\_inf.pdf?dtrk=true](http://www.ageuk.org.uk/documents/en-gb/hungry_to_be_heard_inf.pdf?dtrk=true)

Age UK

Still Hungry to be Heard;The scandal of people in later life becoming malnourished in hospital 2010

<http://www.ageuk.org.uk/documents/en-gb/id9489%20htbh%20report%2028ppa4.pdf?dtrk=true>

Healthcare Improvement Scotland  
Making Meals Matter 2011

[http://www.healthcareimprovementscotland.org/programmes/patient\\_safety/improving\\_nutritional\\_care.aspx](http://www.healthcareimprovementscotland.org/programmes/patient_safety/improving_nutritional_care.aspx)

National Patient Safety Agency

Protected mealtimes and patient safety 2007

<http://www.nrls.npsa.nhs.uk/resources/patient-safety-topics/patient-treatment-procedure/?entryid45=59806>

British Dietetic Association

BDA Nutrition & hydration digest 2012

<https://www.bda.uk.com/publications/.../NutritionHydrationDigest.pdf>

Better Hospital Food

Protected Mealtimes

RCN 2007

[http://www.rcn.org.uk/development/practice/clinical\\_governance/patient\\_focus/other\\_support/other\\_agencies](http://www.rcn.org.uk/development/practice/clinical_governance/patient_focus/other_support/other_agencies)

Food in Hospitals, National Catering and Nutrition Specification for Food and Fluid Provision in Hospitals in Scotland (2008)

<http://www.scotland.gov.uk/Publications/2008/06/24145312/0>

Food Watch

PPI Forums joining forces to tackle NHS food

National Summary

August – October 2006

[http://www.hospitalcaterers.org/documents/ppi\\_report.pdf](http://www.hospitalcaterers.org/documents/ppi_report.pdf)

From Knowing to Doing

Transforming Knowledge into practice in NHS Scotland

Implementation Plan 2006-2009

<http://www.elib.scot.nhs.uk/portal/upload/NESKnowingDoing.pdf>

National Health Service Healthcare Improvement Scotland Standards on Food, Fluid and Nutritional Care 2014

<http://www.healthcareimprovementscotland.org/default.aspx?page=11862>

## **Appendix 1 Care Standard - Mealtimes**

## Making Meals Matter

- M** Manage the environment to allow people to eat in a welcoming, clean, tidy area
- E** Ensure a relaxed atmosphere to enjoy the meal experience
- A** Assist people who require help with eating and drinking
- L** Limit non-essential interruptions to focus on providing support at mealtimes
- S** Staff and visitors recognise the importance of mealtimes as part of fundamental care



## Care Standard - Mealtimes

### Before

- Protected Mealtime posters clearly visible at entrance to ward/unit
- Ward staff should complete all tasks ready to assist
- All non-essential clinical activity should cease
- Patients should be given opportunity to visit toilet
- Patients should be in a comfortable and safe sitting position for eating/drinking- assist as necessary
- Environment should be relaxed, clean and tidy
- All patients offered hand wash/wet wipes
- Staff should wash hands and wear green aprons
- Staff should be aware of patients' needs ie adapted cutlery/ therapeutic diet /level of assistance

### During

- Right meal/right patient
- Continue to minimise non-essential interruptions
- Organise staff so they are aware of their individual role

#### Ensure patients have:

- Napkins as desired
- A fresh drink
- Correct cutlery
- Correct meal and portion size eg choice/therapeutic/small portion
- Desired condiments

#### Ensure staff:

- Give correct level of assistance ie full/cut up food/open packets
- Visually check that food is within easy reach and patient has everything they need
- Offer food nicely presented, without spillages

### After

- Clear away promptly when finished
- Offer cup of tea/coffee
- Ask – 'How was your meal?'  
– act on response
- Offer hand wash/wet wipe
- Wipe patient's table
- Where applicable complete Food Record/Fluid Balance chart accurately



Protecting & Managing Patient meals is everyone's responsibility- Nurses, AHP's, Doctors, Serco housekeeping & domestic staff all have a part to play

### **Publications in Alternative Formats**

NHS Forth Valley is happy to consider requests for publications in other language or formats such as large print

To request another language for a patient, please contact 01786 434784

For other formats contact 01324 590886, text 07990 690605, fax 01324 590867 or email [nhsfv-alternativeformats@nhs.net](mailto:nhsfv-alternativeformats@nhs.net)