



Nutrition Influence Study – Hospital Food Standards Panel Reference Group

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Overview of the Study

In our work delivering Healthwatch Staffordshire, we know from our communities that the nutritional care which patients receive whilst in hospital is of upmost importance, whether this is the provision of food or fluids on the wards, or receiving help and assistance during mealtimes. Our belief is that as consumers of hospital nutritional care, it is vital that the public have a say on the quality and their level of satisfaction towards the nutritional care which they receive during their stay in hospital.

As our Chief Executive, Jan Sensier represents Healthwatch on the Hospitals Food Standards Panel Reference Group, we were pleased to be asked to analyse and evaluate hospital user's experiences in relation to nutritional care across not just Staffordshire but the entire country. The study also aimed to identify from a patient perspective what does good look like, and what is unacceptable with reference to meals and fluid provision.

Introduction & Background Research

In recent years the quality of food and provision of fluids in hospitals has come under scrutiny, as to whether or not it is adequate to meet the nutritional demands of patients who are staying in hospital. As outlined by the Department of Health, 2005 "The public sector, including the NHS, has a Corporate Social Responsibility to offer healthy, nutritious food in its institutions and to lead by example in improving the diets of its staff and patients"

Good nutrition is fundamental to the well-being and recovery from illness or trauma. It is important to have a safe, high quality food and nutrition available for all patients, regardless of age, gender, faith or cultural/social background and ability/disability.

"A high proportion of individuals admitted to hospital are vulnerable to malnutrition. Malnutrition is common in all population and patient groups across all ages. Nationally, approximately 40% of adults admitted to hospital are undernourished and many others become so during their stay" (Stratton et al 2007).

The Council of Europe established the 10 Key Characteristics of good nutritional care in hospitals, which were designed to be implemented as good practice in all hospitals across the country. (See Appendix 1, for full list of Characteristics) The findings from this study will be used to assess whether patients who have experienced first-hand nutritional care services at Hospitals, are to a level of satisfaction and which key Characteristics are most important to them, which will influence how nutritional care services are delivered in the future.

Plan & Methodology

Understanding patient experience of hospital nutritional care services is vital to shaping and improving the provision of food, fluids and care received on the wards. This is why it is important to ensure that the methodology applied to measuring patient satisfaction is robust so that improvements can be introduced based on sound evidence. Throughout the delivery of the project ECS has at all times complied with the Data Protection Act and the MRS codes of conduct on confidentiality.

Design & Development

The plan was to complete online surveys with hospital users throughout England. The survey was designed on Survey Monkey and was intended to be delivered via online means. In order to enable both quantitative and qualitative information to be gathered, the survey was designed to include a variety of both open ended and closed questions. Predominately the closed questions comprised of a multi-choice selection of options, which could be easily themed and analysed, whereas the open ended questions enabled patients to summarise their views on nutritional care and provide relevant examples where applicable.

An initial draft survey was piloted with members of the ECS /Healthwatch Staffordshire team, and all feedback received was used to improve the survey. We decided to keep the survey short and focused, (a maximum of 7 questions was used) in order to encourage patient uptake and completion of the survey. For the final survey used in study please refer to Appendix 2.

Schedule for Delivery

Due to the limited timescales on the project, the guidelines for undertaking the study was to try and encourage as many people as possible to undertake the survey through online platforms. The survey was promoted in various ways, in order to prompt patient feedback.

Locally, Healthwatch Staffordshire promoted the survey through its website, and through social media avenues including Twitter and Facebook. The survey was emailed to all member Healthwatch Staffordshire Champion Organisations, encouraging them to partake and promote the study, the survey was also promoted in the fortnightly Healthwatch Staffordshire news bulletin, which is sent out to all individuals and members who are signed up to receive regular updates of health and social care news and project work in their local area. To encourage participation of the study from patients outside of Staffordshire, information related to the study was sent to NHS England, and was distributed to the other 151 local Healthwatch's operating throughout England which form the Healthwatch network, who in turn promoted the study on their websites and circulated information through their social media avenues.

Findings

Overview

The surveys went live from the 30th April 2014 and ran for approximately 2 weeks (the deadline for receiving feedback was the 16th May 2014 for this report). During this time we managed to complete 30 online Surveys, this was below the initial target which we had hoped for which was approximately 50 surveys, however the information collected from the 30 surveys still presented some interesting findings. We found it was much easier to encourage and prompt local feedback, rather the feedback on a national scale as we had greater control locally of where the survey was distributed to. Some of the patients who were willing to complete the survey were unable to answer every question based on prior experience alone. (See Appendix 3 – for graphical representation of data collected)

Which Hospital did patients attend?

From the 30 patients who completed the survey, 16 patients (54%) experienced nutritional care services whilst attending hospitals within Staffordshire, of these 8 patients (27%) attended the University Hospital of North Staffordshire (UHNS), 5 patients (17%) attended Stafford Hospital/Mid Staffs Hospital, and a further 3 patients (10%) attended Queens Hospital (Burton-upon-Trent). The remaining 46% of patients who completed the nutritional care survey said that they attended hospitals outside of Staffordshire, including Good Hope Hospital (Sutton Coldfield), Whipps Cross Hospital (London) and Salford Royal Hospital (Greater Manchester). A full breakdown of all the Hospitals which patients attended and experienced nutritional care services from can be seen in, Figure 1.

Figure 1 – Which Hospital did you attend?

Hospital Name	No. of Responses	% of total patients interviewed
UHNS	8	27%
Stafford Hospital	5	17%
Queens Hospital	3	10%

Good Hope Hospital	2	7%
Whipps Cross Hospital	2	7%
Salford Royal Hospital	3	10%
Gloucestershire Royal Hospital	1	3%
Royal London Hospital	1	3%
Royal Orthopaedic Hospital Birmingham	1	3%
Russells Hall Hospital	1	3%
Southmead Hospital	1	3%
Guys Hospital	1	3%
Did not state	1	3%

The quality of food on the ward

When asked how satisfied patients were with the quality of food which they received on the ward of the hospitals, responses were generally mixed. Of the 29 patients who answered this question 7 patients (24%) expressed that they were 'Very Satisfied' with the provision of food on the wards. A further 6 patients (21%) said they were 'Fairly Satisfied'. 6 patients (21%) were 'Fairly Dissatisfied' and an additional 6 (21%) were 'Very Dissatisfied' with the quality of food received. The remaining 5 individuals (17%) gave a neutral answer, suggesting that the quality of food was neither positive nor negative.

When correlating patients responses of the quality of food received on the ward, to the hospital which was attended. All patients who attended Stafford, Gloucestershire Royal, Queen's and Guys Hospital's said they were either 'Very Satisfied' or 'Fairly Satisfied' with the food which they received on the ward.

In contrast patients who attended Russell Hall, Royal London, Good Hope and Southmead Hospitals were 'Fairly Dissatisfied' or 'Very Dissatisfied' with the quality of food which they received, however as only 1 - 2 Patients attended each of these hospitals, it is not possible to suggest that these results are truly representative of the quality of the food provision at these hospitals.

There were mixed responses obtained from patients who attended both UHNS and Salford Royal Hospitals regarding the quality of food which was provided at the hospital, with some patients suggesting their experiences were positive, whilst other were extremely negative. The table below provides a breakdown of the Hospital's patients attended vs Satisfaction of the food provided on the ward.

Figure 2 – Comparison of Hospital attended and Satisfaction of Quality of Food on the ward.

Hospital Name	How satisfied were patients with the quality of food on the ward?				
	Very Satisfied	Fairly Satisfied	Neutral	Fairly Dissatisfied	Very Dissatisfied
UHNS	1	0	3	1	3
Stafford Hospital	3	2	0	0	0
Queens Hospital	1	1	0	0	0
Good Hope Hospital	0	0	0	1	1
Whipps Cross Hospital	0	0	0	2	0
Salford Royal Hospital	0	2	0	0	1
Gloucestershire Royal Hospital	1	0	0	0	0
Royal London Hospital	0	0	0	1	0
Royal Orthopaedic Hospital Birmingham	0	1	0	0	0
Russells Hall Hospital	0	0	0	1	0
Southmead Hospital	0	0	0	0	1
Guys Hospital	1	0	0	0	0
Did not state	0	0	1	0	0
Total	7	6	4	6	6

The provision of fluids on the ward

Being able to easily access water and other fluids on the wards of hospitals is often a key priority of patients whilst attending hospital. Patient's satisfaction of the provision of fluids across the different hospitals was also quite mixed. Of the 30 patients surveyed 1/3 (33%) of respondents suggested that they were 'Very Satisfied' with the provision of fluids at the hospital attended. An additional 4 patients (13%) suggested they were 'Fairly Satisfied' with fluid provision. In contrast 9 patients (30%) and 2 patients (7%) answered they were 'Fairly Dissatisfied' and 'Very Dissatisfied' with the provision of fluids respectively. The remaining 5 patients (17%) gave neutral responses.

When comparing the quality of food and the provision of fluids across the different wards, it appears that greater levels of satisfaction were felt towards the provision of fluids on the wards. The average score for the positive responses for the quality of food was 6.5, whereas the average score of positive responses for the provision of fluids was 7.

Equally greater levels of dissatisfaction was felt towards the quality of food on the wards, the average negative score for the quality of food was 6, compared to the average negative score for the provision of fluids which was 5.5.

Even though the average scores for the provision of fluids was slightly more positive than those obtained for the quality of food, it is not possible to suggest there is an overall trend, as the scores are so close together.

Help and assistance given at mealtimes

Of the 30 surveys completed, 26 patients answered the question 'Were you provided with help and assistance during mealtimes. Of these, 12 patients (46%) answered 'Yes' there were provided with help and assistance. The remaining 14 patients (54%) answered 'No' indicating that no assistance was given to them to aid them during mealtimes by the nursing team.

It is possible to compare the Hospital which patients attended to whether patients were provided with help and assistance at mealtimes (Refer to Figure 3). From the data collected patients who attended, Queens Hospital, Gloucestershire Royal, Birmingham Royal Orthopaedic, and Guys Hospitals all confirmed that they were given help during mealtimes when they required it. In contrast patients' attending Good Hope, Whipps Cross, Royal London and Southmead Hospital's felt that no assistance was given to them at mealtimes. Patients attending UHNS, Stafford Hospital, and Salford Royal Hospital gave a mixed response, with individuals indicating that help and assistance was given some times but not at others.

Figure 3 – Comparison of Hospital attended vs whether patients were given help and assistance at mealtimes.

Hospital Attended	Were you provided with help and assistance at mealtimes?	
	Yes	No
UHNS	1	6
Stafford Hospital	2	1
Queens Hospital	3	0
Good Hope Hospital	0	2
Whipps Cross Hospital	0	2
Salford Royal Hospital	2	1
Gloucestershire Royal Hospital	1	0
Royal London Hospital	0	1
Royal Orthopaedic Hospital Birmingham	1	0
Russells Hall Hospital, Dudley	0	0
Southmead Hospital, Bristol	0	1
Guys Hospital	1	0
Did not state	1	0

10 Key Characteristics of Good nutritional care

When patients were asked to select their top 3 three priorities from the list of 10 Key Characteristics (see Appendix 1 for list of Characteristics) responses varied across the board from individual to

individual, however certain Characteristics were selected more than others. This can be seen in Figure 4. In total 28 out of the 30 patients completed this question.

Figure 4 – Voting of Top Three Characteristics

List of Characteristics	Priorities in order of importance.		
	Priority 1	Priority 2	Priority 3
Characteristic 1.	6	1	2
Characteristic 2.	6	4	2
Characteristic 3.	1	2	1
Characteristic 4.	1	4	3
Characteristic 5.	3	3	3
Characteristic 6.	3	5	2
Characteristic 7.	3	1	3
Characteristic 8.	1	5	6
Characteristic 9.	2	2	3
Characteristic 10.	2	1	3

For Priority 1, the most important Characteristic to patients was between

- Characteristic 1 - Patients are screened on admission to identify the patients who are malnourished or at risk of becoming malnourished, and
- Characteristic 2 - Patients have a care plan which identifies their nutritional care needs and how they are to be met

For Priority 2, the most important Characteristic to patients was

- Characteristic 6 - Staff have the appropriate skills and competencies needed to ensure that patient's nutritional needs are met and receive regular training.

For Priority 3, the most important Characteristic to patients was

- Characteristic 8 - The hospital has a policy for food service and nutritional care which is patient centred and performance managed.

What does good hospital nutritional care look like?

When we asked participants of the survey *'What does good hospital nutritional care look like?'* A variety of suggestions were given. Most patients felt that the good nutritional care was food which was fresh, tasty, well-presented, attractive, appetising and most importantly hot. There were also several suggestions from patients that hospitals should take the needs of the individual into account through the provision of food, for example tailoring the food to meet the needs of patients who have specific dietary requirements, ethical or lifestyle choices which affect the food they eat:

“[They should make] Vegetarian and vegan foods available as well as Halal and Kosher [provisions]”

Patients felt that they should be ‘kept involved’ and be entitled to ‘have a say’ in what is offered, rather than being given other patient’s food choices, for example one patient highlighted it would be nice.

“Not have to be given someone else’s choice of food, which is not yours, e.g. the person who was using the bed the day before”

Some patients felt that improvements could be made to improve both the provision and the quality of the food offered on the wards, and felt that consistency was key to offering good nutritional care. Equally some felt that the existing menus provided on the wards were slightly outdated, and should be modernized.

“Food [should be what] we would eat out in a café or where modern people eat out, not a notional ‘English’ menu of 50 years ago”

For other responses given by patients please refer to Appendix 5

What constitutes as unacceptable hospital nutritional care?

When asked “What constitutes as unacceptable hospital nutritional care?” most patients, agreed that it was food which is poorly presented, cold, and possessed little or no nutritional content. The food and menu’s appear to be quite repetitive in nature, which leads to limited choice and greater levels of dissatisfaction with patients who have been in hospital for longer periods of time.

“Not enough choice currently at mealtimes and the menu seems to be repeated every week, so it becomes boring”

Patients stated that the staff on the wards, had a large impact on the nutritional care services which are delivered within hospital, as in many cases the hospital staff would be directly responsible for providing food for the patients. Some patients felt there was little or no engagement of staff, and believed that there was not enough members of the team to be able to help patients who required it at mealtimes, which they felt was unacceptable.

“Please ensure there is adequate staff to help feed all patients who need assistance at mealtimes”

“Patients who are unable to access their meal need help. They may be too ill or weak to reach the food, or unwrap it.” “Often [the] food is placed on a tray table and left there”

All responses for this question can be seen in Appendix 6

Appendix

Appendix 1 – 10 Characteristics of Good Nutritional Care in Hospital

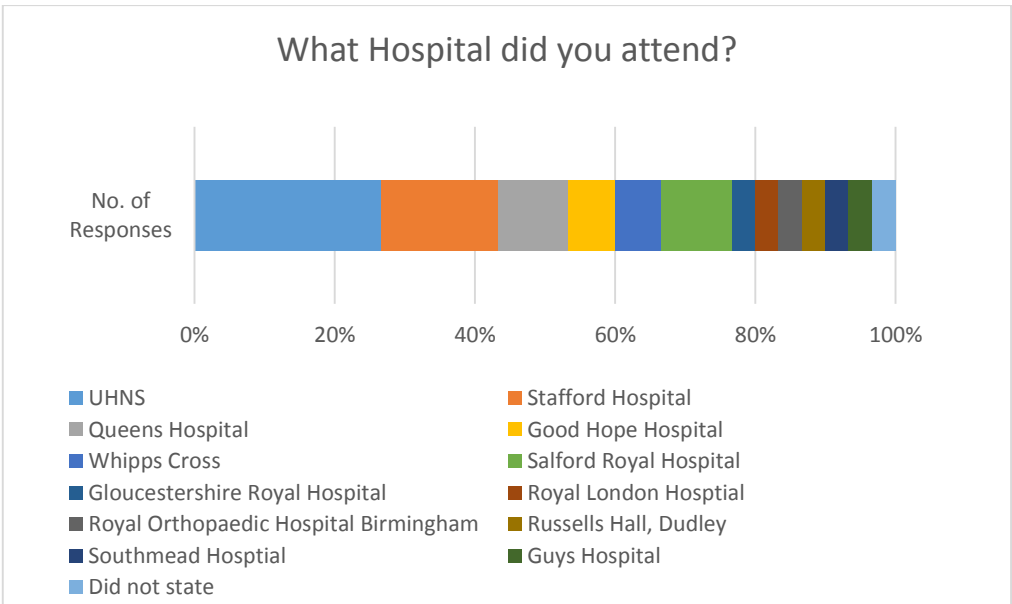
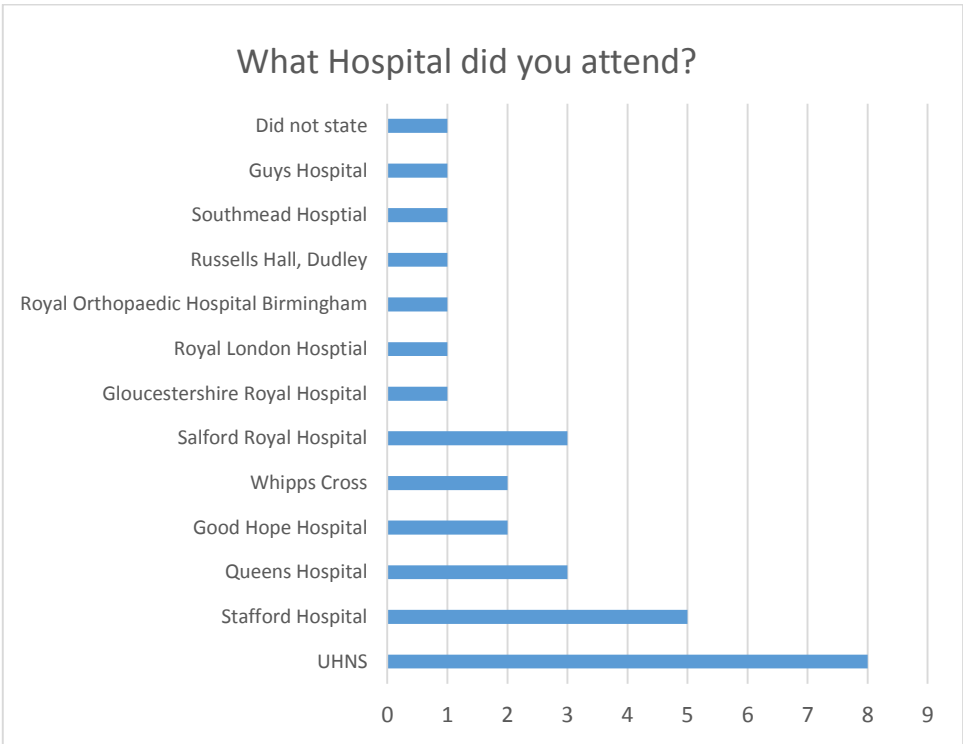
1. Patients are screened on admission to identify the patients who are malnourished or at risk of becoming malnourished
2. Patients have a care plan which identifies their nutritional care needs and how they are to be met
3. Hospitals include specific guidance on food services and nutritional care
4. Patients are involved in the planning and monitoring arrangements for food service provision
5. The ward implements Protected Mealtimes to provide an environment which enables patients to enjoy and eat their food
6. Staff have the appropriate skills and competencies needed to ensure that patient's nutritional needs are met and receive regular training.
7. Hospital facilities are designed to be flexible and patient centred with the aim of providing and delivering an excellent experience of food service and nutritional care.
8. The hospital has a policy for food service and nutritional care which is patient centred and performance managed.
9. Food service and nutritional care is delivered to the patient safely.
10. The hospital supports a team approach to nutritional care and values the contribution of all staff groups working in partnership with patients and users.

Appendix 2 - Original Survey

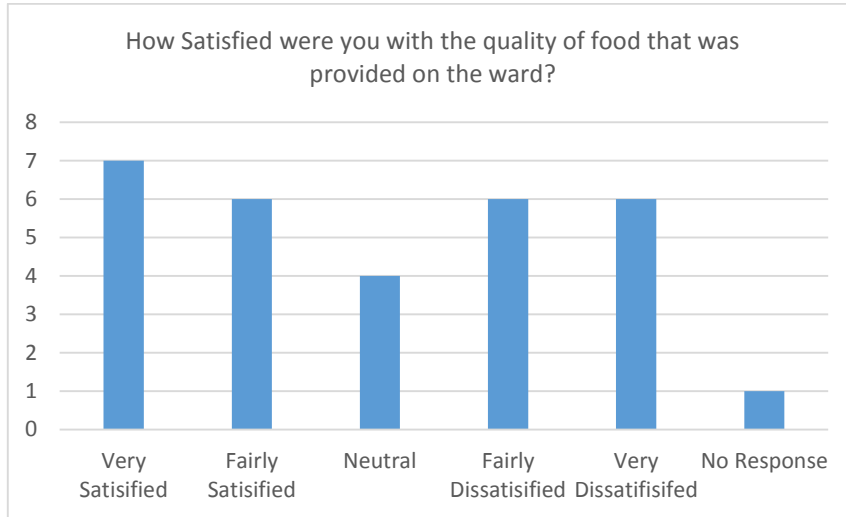
Hospital Food Influence Survey	
* 1. What hospital did you attend, and when?	
Hospital	<input type="text"/>
Year	<input type="text"/>
2. How satisfied were you with the quality of food that was provided on the ward?	
<input type="radio"/> Very Satisfied <input type="radio"/> Fairly Satisfied <input type="radio"/> Neutral <input type="radio"/> Fairly Dissatisfied <input type="radio"/> Very Dissatisfied	
3. How satisfied were you with the provision and accessibility of fluids on the ward?	
<input type="radio"/> Very Satisfied <input type="radio"/> Fairly Satisfied <input type="radio"/> Neutral <input type="radio"/> Fairly Dissatisfied <input type="radio"/> Very Dissatisfied	
4. Were you provided with help and assistance at mealtimes, if you required it?	
<input type="radio"/> Yes <input type="radio"/> No	
5. From the list of 10 Key Characteristics of good nutritional care in hospital. Please select the top 3 Characteristics which are most important to you.	
Priority 1	<input type="text"/>
Priority 2	<input type="text"/>
Priority 3	<input type="text"/>
6. In your opinion, what does good hospital nutritional care look like?	
<input type="text"/>	
7. In your opinion, what constitutes unacceptable hospital nutritional care?	
<input type="text"/>	

Appendix 3 - Finding's Charts

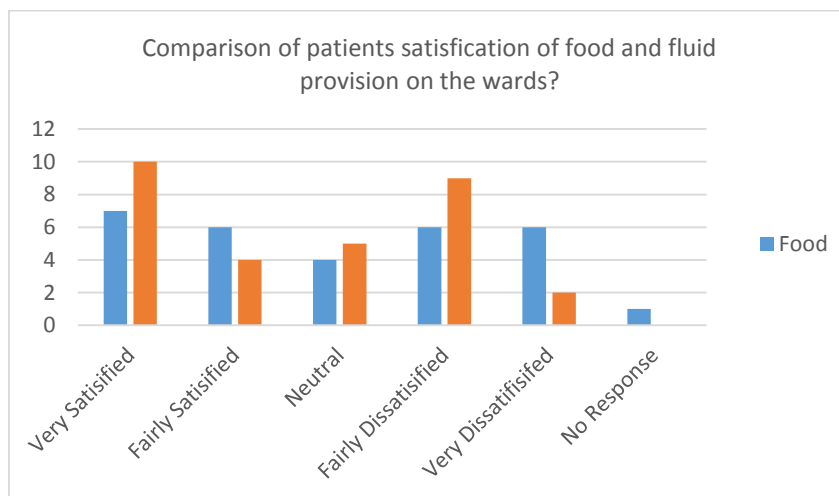
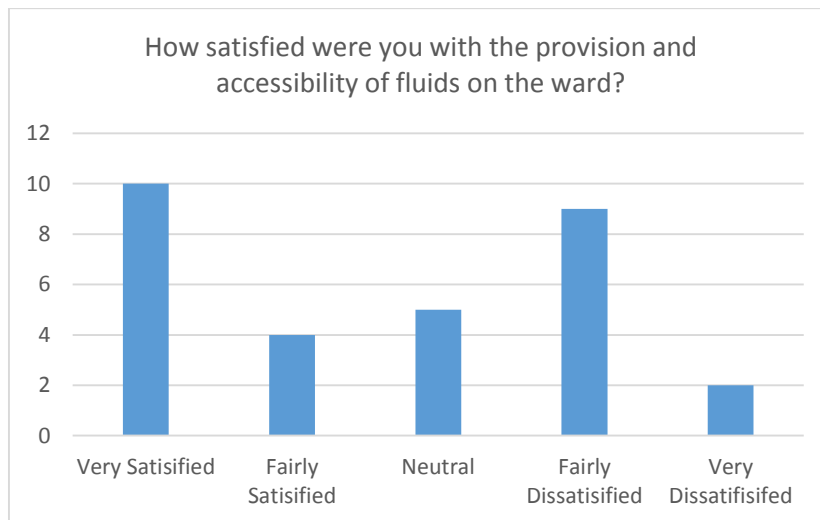
1) What hospital did you attend, and when?



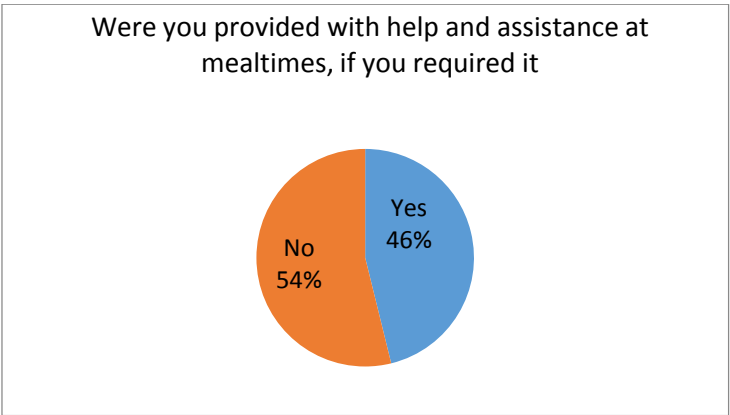
2) How satisfied were you with the quality of food that was provided on the ward?



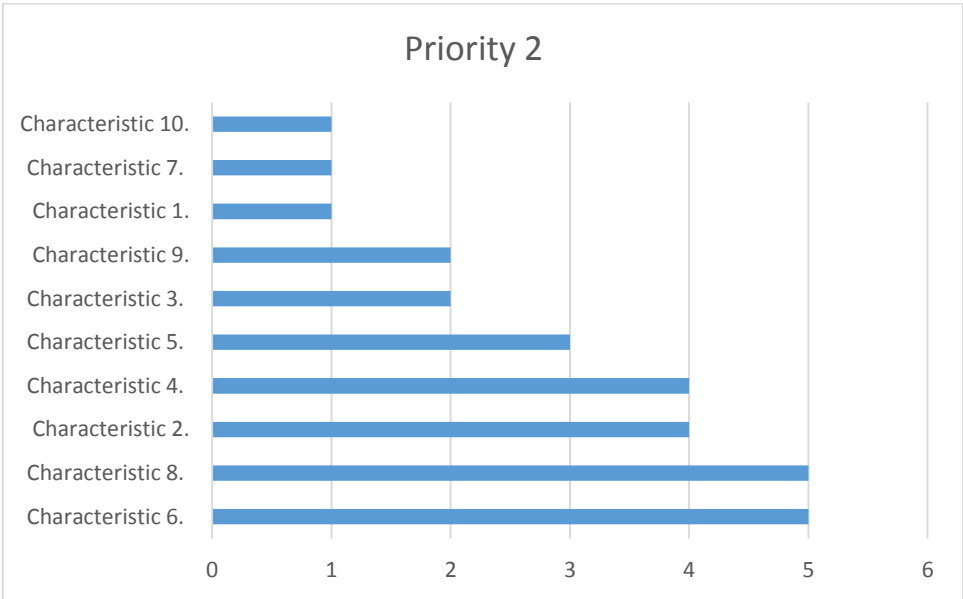
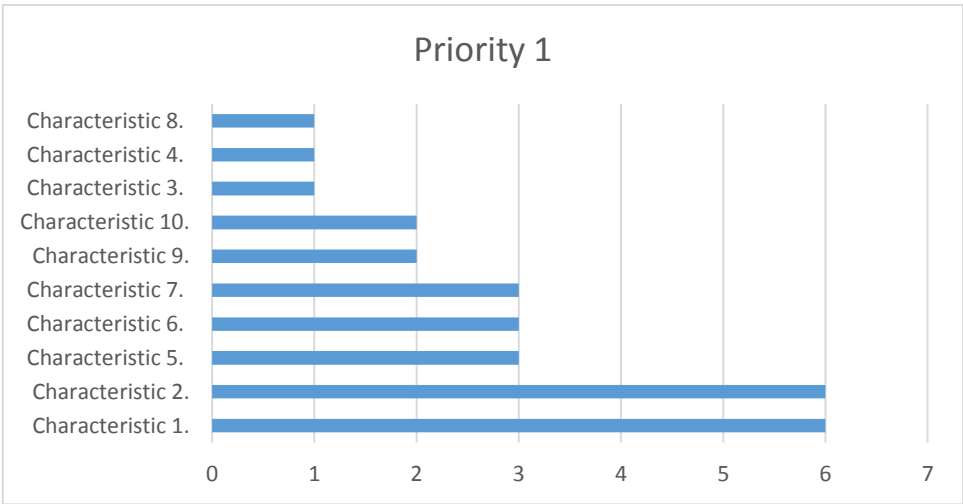
3) How satisfied were you with the provision and accessibility of fluids on the ward?

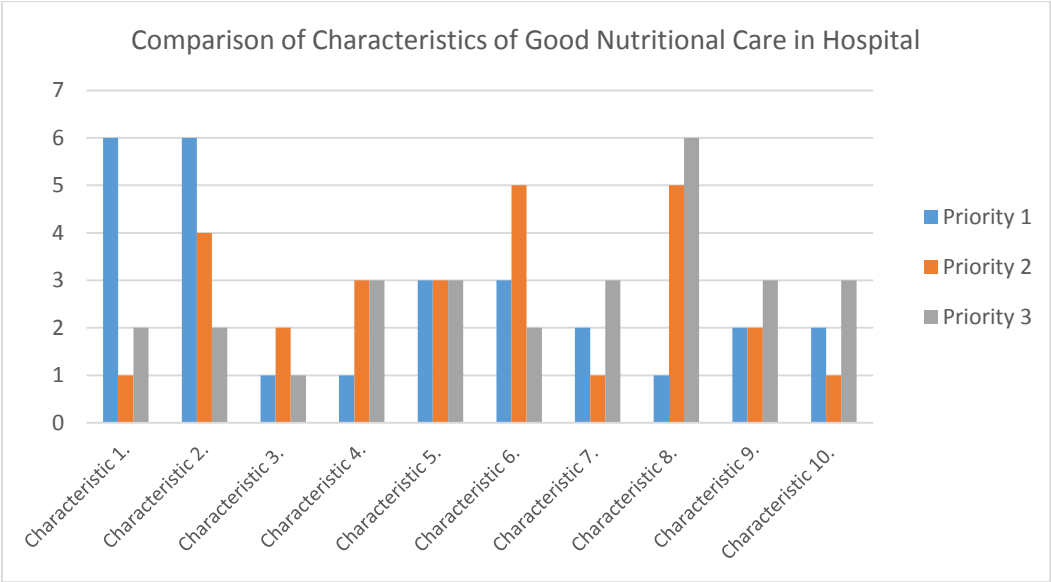
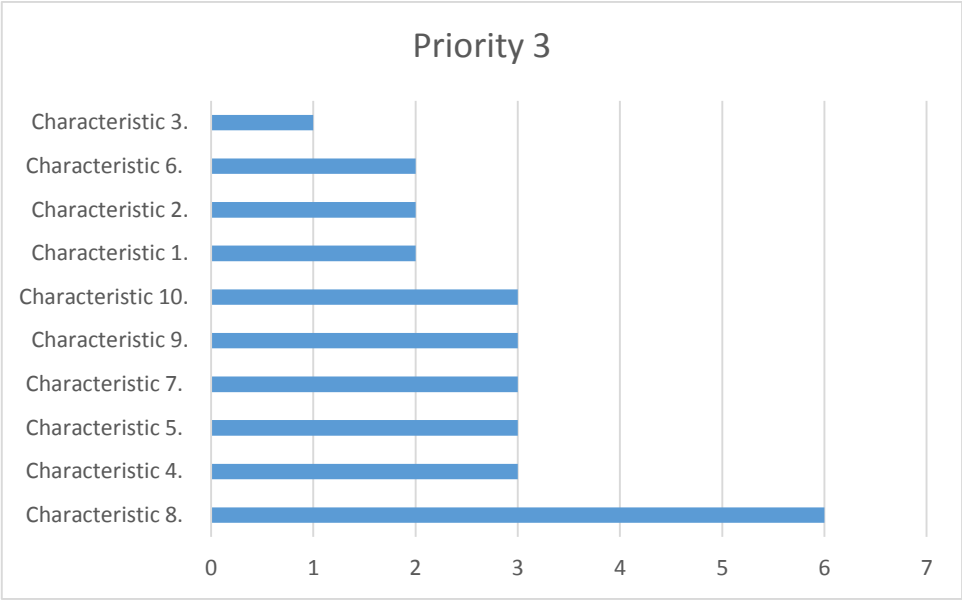


4) Were you provided with help and assistance at mealtimes, if you required it?

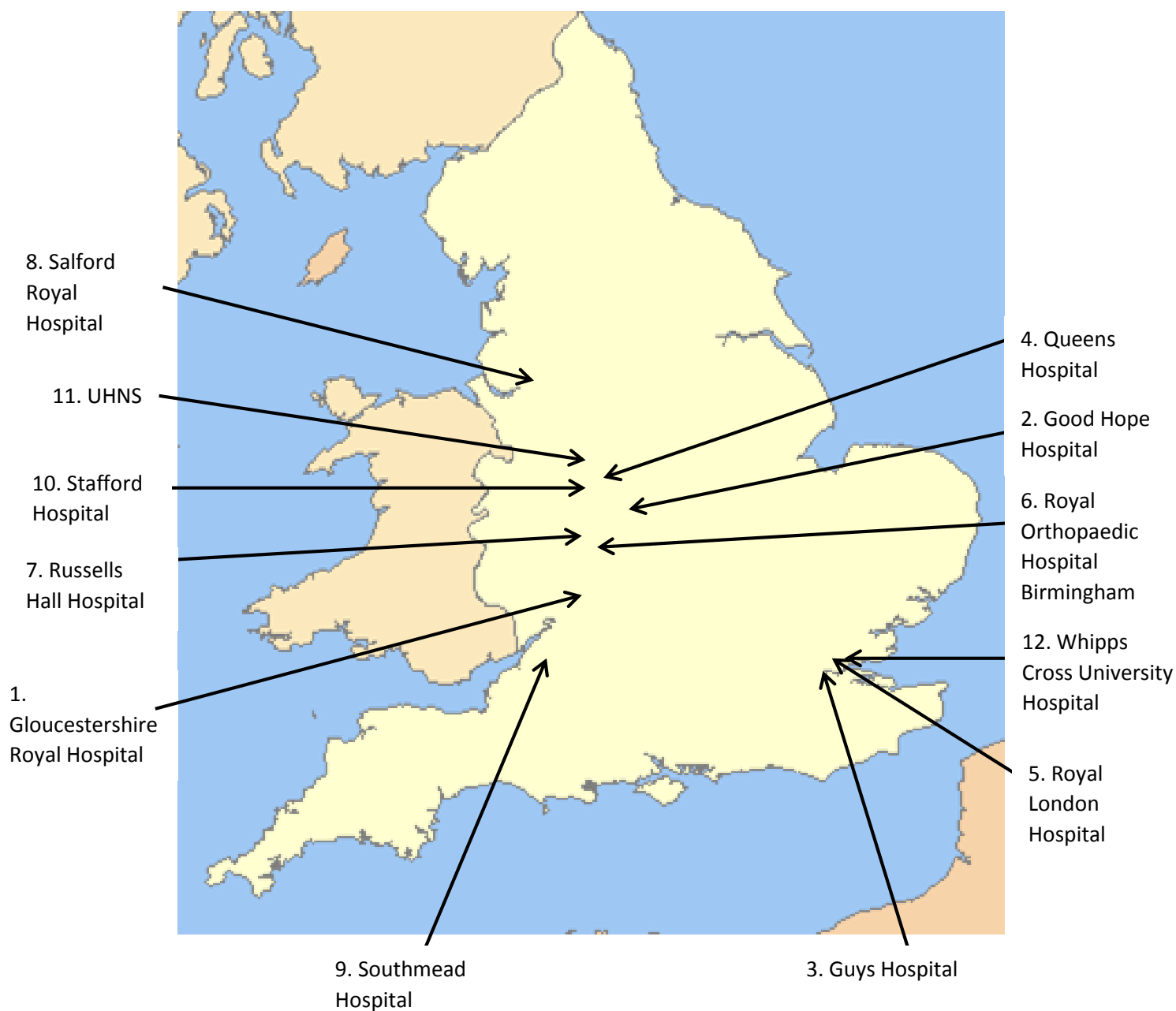


5) From the list of 10 Key Characteristics of good nutritional care in hospital. Please select the top 3 Characteristics which are most important to you.





Appendix 4 – Hospital Review



1	Gloucestershire Royal Hospital	Great Western Road, Gloucester GL1 3NN
2	Good Hope Hospital	Rectory Road, Sutton Coldfield, West Midlands B75 7RR
3	Guys Hospital	Great Maze Pond, London SE1 9RT
4	Queens Hospital	Belvedere Road, Burton-on-Trent, Staffordshire DE13 0RB
5	Royal London Hospital	Whitechapel Road, Whitechapel, London E1 1BB
6	Royal Orthopaedic Hospital Birmingham	The Woodlands, Bristol Road, Birmingham, West Midlands B31 2AP
7	Russells Hall, Dudley	Pensnett Road, Dudley, West Midlands, DY1 2HQ
8	Salford Royal Hospital	Stott Lane, Salford, Greater Manchester, M6 8HD
9	Southmead Hospital	Southmead Way, Bristol, Avon BS10 5NB
10	Stafford Hospital	Weston Road, Stafford ST16 3SA
11	UHNS	Princes Road, Stoke-on-Trent, Staffordshire ST4 7LN

1	Whipps Cross Hospital	Whipps Cross Road, London E11 1NR
2		

Appendix 5 – Responses to ‘What does good hospital nutritional care look like?’

“Well-presented, well served, of nutritional value”

“Giving patients fresh well prepared nutritional food”

“Fresh tasty variety”

“Patient centred, taking into account EVERY individual patients particular needs”

“Hot tasty nutritious meals, served with care and people helped when they need. It is not rocket science. The list above talks about plans and competencies actually it should be about people who care.”

“The patients are kept involved what food is being prepared for them. There should be a menu, highlighting foods nutritional values and giving recommendations specifically for the patient for example if the has low iron, then a recommendation should be for the patient to have foods which are rich in iron.”

“Nutritious and delicious, appropriate to the patients preferences and needs.”

“Well presented, tasty, at times to suit the patient not staff, hot or cold, to be eaten were the Patient wants. Every hospital should have a patient restaurant meals should only be eaten on wards if the patient cannot get to the restaurant.”

“Attractive appetising fresh food and hot where appropriate”

“The wellbeing of the patient”

“Food to be served to all patients on the ward at the same time, and within the given timescale for keeping food hot. Food to look and smell good, and be of good quality.”

“Food that is similar to that which we would eat out in a café or where modern people eat out not a notional 'English' menu of 50 years ago.”

“Staff understand the problem's patients with swallowing problems have including having PEG feeding.”

“Presentation, Nutrition.....If me states large, medium, small.....these are not delivered all the same size.”

“Meals appropriate to the needs of the patient”

“Choice of food, delivered hot and well presented. Good variety of choice to suit all tastes.”

“Provision of food that is appropriate for the patient taking into account their knowledge of what they can and cannot eat.”

“Well balanced meal, including all food groups. Options for those with special dietary needs, not just vegetarians but also regarding their medical dietary needs.”

“Being given the choice to pick you own meals and not have to be given someone else's choice of food, which is not yours. E.g. the person who was using the bed the day before could have ordered fish which you do not eat, if you are lucky the staff will try to find a different menu for you.”

“Appropriate sized portions, looks appetising and tastes decent. And well balanced i.e. not too much carbohydrate or sugary items. Plenty of fresh fruit. Suitably prepared for that particular patient. Good hydration...where a designated nurse or HCSWorker checks each patient each hour to Ma keep sure they are drinking!”

“The provision of fresh, healthy food that meets patients' nutritional needs, including need for hydration. Assistance with eating and drinking whenever it is needed.”

“A well balanced meal to suit the individual patient for their needs and diet.”

“Tempting and appropriate food including for vegetarians, served hot, e.g. not an omelette”

“A balanced diet with an element of choice.”

“Fresh food well prepared and cooked Range of options Vegetarian and vegan foods available as well as Halal and Kosher Clean plates and cutlery Staff interested and willing to listen CLEAN staff - no spotty uniforms or grubby nails.”

“It should ensure that people have choice, and that options are 'balanced'.”

Appendix 6 – Responses to ‘What constitutes as unacceptable hospital nutritional care?’

“Cheap food with no colour or taste which has little or no nutritional content”

“Pre-prepared tasteless food”

"One size fits all"

“Cold unappealing food served by people who look fed up and bored and left for people to fend for themselves.”

“Unacceptable food is unhealthy - sugary, fatty, salty foods, which is what is served at Whipps Cross. I was also a patient an RNOH and their labelling and menu is not perfect but it is a lot better than Whipps Cross's.”

“Cold, nutrient-poor, unpleasant and unsuitable for the patient”

“Cold sloppy food that you could not tell what it is by looking at it, time-scale that leave large gaps such as overnight without food, no option but to eat food when presented because there is no way to reheat it.”

“Food of poor nutritional value and limited choice”

“Bad food, no interaction from staff”

“Not enough choice currently at mealtimes and the menu seems to be repeated every week, so it becomes boring. Sauces are hardly ever served, always having to ask for them. Most importantly, please ensure there is adequate staff to help feed all patients who need assistance at mealtimes, and for that food to be served within 20 minutes, otherwise it is cold.”

“Very cheap cuts of meat and ward staff with not enough time or motivation to care fully for patient's nutrition.”

“Staff having no understanding of the extra care patients with pegs require.”

“Not look good...not right temperature...rushed and no assistance available”

“Providing pie and chips when a no solid food diet is required just because the previous occupant of the bed had ordered it the day before.”

“Limited choice served cold in an unattractive way”

“When a patient explains that the food does not agree with them only to receive a comment from a doctor to say "Well we are not here or the food are we!"”

“Patients who are unable to access their meal. They may be too ill or weak to reach the food, or unwrap it. It may be unsuitable, like too chewy or hard, or conflict with health condition.”

“Cold food which should be hot. Not a problem when I attended Queens Hospital. At a previous hospital where I was a patient the food arrived cold, the staff did microwave it to heat it up. Which meant the plate was hot and the food still cold. Nobody could understand how this happened.”

“Not enough being done to make sure that the vulnerable patient has in fact eaten AND had adequate fluids regularly. Someone on hand to help patients if necessary with their meals i.e. feed them. Open packets when necessary, explain to the patient how important it is to eat...often this is not done. Nurses not being involved enough at meal times with their patients.”

“Poor quality food, low in nutrients. Inadequate fluids. No assistance with eating and drinking.”

“Foods/ meals which do not suit the patient's diet and dislikes.”

“Food which is not appropriate and not very nice to eat. Also, food which includes more roughage”

“An unbalanced diet”

“Poor quality food, Repetitive recipes, little choice, poor presentation, disinterested staff, dirty uniforms and hands serving my food - YUK!!!!”

“Lack of choice; Poor quality meat; Not enough staff to ensure that vulnerable people are kept hydrated and are able to eat as much of their meal as they wish to.”

“Food being placed on a tray table and left there”

Bibliography

Department of Health (2005). Choosing a Better Diet: a food and health action plan.

Council of Europe (2013) 10 Key Characteristics of Good Hospital Nutritional Care in Hospital

http://www.bapen.org.uk/pdfs/coe_leaflet.pdf

(BAPEN 2007). Organisation of Food and Nutritional Support in Hospitals