1. Introduction

The Trust first approved a Food and Drink Strategy in September 2015. This followed the recommendations of the Hospital Food Standards Panel’s report and was guided by the Trust’s earlier Healthy Eating Plan from 2013. This updated version has been produced to inform stakeholders of the work that has been undertaken since the first strategy and to set out future plans.

The Hospital Food Standards Panel’s report on standards for food and drink in NHS hospitals was published in August 2014. A review of progress towards compliance with the hospital food standards was published in January 2017. The reports clearly state the case for hospitals to meet the challenges of providing nutritional food to support patients’ recovery, supporting healthy food choices for staff and visitors, and including social responsibility and sustainability within food procurement. The toolkit, produced to support the development of hospital food and drink strategies, groups these challenges within the following headings:

- Nutritious Food for Patients
- Healthier Food for Staff and Visitors
- Sustainable Food for All

Report Recommendations

The original report recommended that NHS hospitals develop and maintain a food and drink strategy. This requirement has since become part of the NHS Standard Contract and is required of all NHS trusts. The report also suggested five existing food standards that should become routine practice for all hospitals. The standards fall within the three key areas highlighted above.

**Nutritious Food for Patients** - for patient catering:

- 10 Key Characteristics of Good Nutritional Care, Council of Europe and Nutrition Alliance / NHS England
- Nutrition and Hydration Digest: Improving Outcomes through Food and Beverage Services, British Dietetic Association (BDA)
- Malnutrition Universal Screening Tool MUST, British Association of Parenteral and Enteral Nutrition (BAPEN), or equivalent

**Healthier Food for Staff and Visitors** - for retail and also applied as appropriate to patient catering:


**Sustainable Food for All** - applicable for all catering:

- Government Buying Standards for Food and Catering Services, Defra

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Liverpool City Council Public Health Evidence

We have been working with Liverpool City Council’s Public Health team, who have provided further data regarding the importance of including health outcomes within food and drink strategies. Their proposal regarding the development of a Healthy Hospital Strategy for the Trust includes the following information:

- Life expectancy is lower than the England average in all but one of the local authorities in Merseyside and Cheshire. Moreover, levels of healthy life expectancy (HLE), the span of life that a person can expect to live in very good or good health, have not significantly improved over recent years. On average, men and women in Merseyside and Cheshire live around a quarter of their life in poor health (17 and 19.6 years respectively), which is slightly higher than the national average (16.1 and 19.2 years respectively). In addition, a greater proportion of people are living with a long term illness or disability than nationally (20.9% vs. 17.6%) and describe their health as bad or very bad (7.1% vs. 5.5%).

- Emergency hospital admissions for chronic ambulatory care sensitive conditions are significantly higher in Cheshire and Merseyside than England as a whole. The major causes of death across Merseyside and Cheshire are cancer, circulatory diseases and respiratory diseases. The development of all of these diseases is influenced by a wide range of lifestyle factors such as smoking, poor diet, obesity, lack of physical activity and excessive alcohol consumption.

- The Marmot Review *Fair Society, Healthy Lives* and the Due North *Report of the Inquiry on Health Equity in the North* reiterate the important part that the NHS has to play in promoting the health and wellbeing.

- The Healthy Liverpool Strategy aims to ‘shift the focus from acute, curative service delivery to also promote health and wellbeing’. It notes that ‘circulatory, respiratory and digestive illnesses are strongly linked to modifiable risk factors such as smoking, lack of exercise, harmful levels of drinking and obesity... Consequently, supporting patients to quit smoking, become more physically active, lose weight and drink less alcohol would not only improve their health but also lead to fewer hospital admissions.’
2. Governance

Internal:

The three areas outlined in the toolkit are monitored through the existing appropriate Trust group:

- **Nutritious Food for Patients**: Compliance against the patient catering standards is reported through the Nutrition Steering Group (NSG). The NSG includes representation from Hotel Services, nursing staff, dieticians and clinical education.

- **Healthier Food for Staff and Visitors**: Compliance against the staff and visitor catering standard is reported through the Health & Wellbeing Group (HWG). The HWG includes representatives from all Trust divisions and includes occupational health, communications, dieticians and staff side.

- **Sustainable Food for All**: Compliance against the sustainability aspects of the catering standard is reported through the Sustainable Development Group (SDG). The SDG includes representatives from purchasing, partner organisations and specified task groups, including Food and Environmental Management Systems. Partner organisations include soft and hard facilities management, and the University of Liverpool.

The three groups provide a wide range of internal and external stakeholders, ensuring this strategy can be fully implemented. Allocating compliance between the groups listed above also ensures appropriate expertise for each section of the strategy. For this reason, the strategy is jointly owned by the Head of Hotel Services, the Health & Wellbeing Manager and the Head of Sustainability.

The three groups report through various other Trust groups. These include Patient Experience Group (for NSG), the Healthy Hospitals Group (for HWG and SDG), Workforce Committee (for HWG) and Finance & Performance Committee (for HWG and SDG).

The groups outlined above have been instrumental in providing a wide stakeholder input into this strategy. In addition, the Trust will investigate how to engage with patient representatives and the wider community to support the aims of improving nutritional care, healthier eating and sustainable food procurement. Although patient representatives are not members of the groups listed above, they are heavily involved in patient food tasting and development; providing an opportunity to input into patient nutrition.

External:

Within the update report from January 2017 it was noted that, from February 2017, responsibility for hospital food policy transferred from the Department for Health, to NHS Improvement. The report specifically referenced a desire for further progress, in particular in encouraging adoption of healthier food and drink across hospital settings and wider use of the Department for Environment, Food and Rural Affairs’ balanced scorecard for procurement. The Trust remains a national case study for the balanced scorecard; progress against this is set out below.
3. Nutritious Food for Patients

The Hospital Food Standards Report suggested nutritious food for patients can be achieved through gap analyses against the following key standards:

- 10 Key Characteristics of Good Nutritional Care, Council of Europe and Nutrition Alliance / NHS England
- Nutrition and Hydration Digest: Improving Outcomes through Food and Beverage Services, British Dietetic Association (BDA)
- Malnutrition Universal Screening Tool (MUST), British Association of Parenteral and Enteral Nutrition (BAPEN), or equivalent
- Government Buying Standards for Food and Catering Services, Defra – key parts of this will fall under the Sustainable Food for All section.

The report identified standards aimed at:

- creating the right overall environment for good nutrition and hydration
- delivering the right nutritional content within the menu
- making sure that patients’ needs are properly identified and met.

The report noted that the phrase ‘healthy eating’ can bring to mind a diet that is calorie restricted, and wanted to be clear that hospital food must support the health of all patients, a high proportion of whom may be at risk of or are malnourished.

Food Standards: Nutrition and Hydration Digest: Improving Outcomes through Food and Beverage Services

The Digest is an evidence-based, practical resource for all those involved in the provision and delivery of food and drink to adults in the care setting. The document is designed to be used as a reference providing:

- a source for standards, coding of food and beverages, guidance and good practice
- an evidence document for catering contract tenders and specifications
- a tool providing a common language for clinicians, caterers, industry etc.
- the definitive approach in food service in care settings for professional (and other) bodies
- a quick reference document on a multitude of food related topics

The January 2017 report, which reviewed progress since the Hospital Food Standards Panel report, noted that the Nutrition and Hydration Digest was due to be reviewed in 2017 and it is expected the reviewed document will refer to new BDA guidelines on labelling and allergens.

Within the Trust a gap analysis against The Digest has been completed and this will continue to be monitored through the Trust Nutrition Steering Group.

Reporting of nutrition related incidents

In September 2016 a nutrition category was introduced to the Trust system for reporting of incidents, the Datix system. This allows for collection of incidents relating to MUST, food and drink provision by catering or ward staff, Refeeding Syndrome and any incidents related to the provision of oral, enteral or parenteral nutrition. Previously any nutrition related incidents in the Trust were reported to the area of the hospital in which they occurred rather than being captured together in one category. This ensures it is now possible for the Nutrition Datix Group to identify trends, training or support needs and any specific areas of development required in the Trust around nutrition.
Nutrition and Hydration Manual

To support hospital staff to provide good nutritional care as per guidelines and best practice, the ward Nutrition and Hydration Manual is being updated. The manual will provide guidance and signposting for staff regarding for example, food service, food hygiene, orientation to the hospital menus, tips on supporting patients with a poor intake, Going Home Pack and Snack Box, dysphagia and mouthcare, oral nutritional supplements, enteral feeding devices and parenteral nutrition. The manual is being developed with the multidisciplinary team and is aiming for launch in 2017.

Food Standards: Screening for Malnutrition using the Malnutrition Universal Screening Tool (MUST)

It is recommended that hospital trusts use MUST or an equivalent system to screen patients for risk of or existence of malnutrition. At Royal Liverpool and Broadgreen University Hospitals the screening tool used is MUST. As part of the screening process the tool also includes a care plan of action depending on the level of risk identified.

MUST is completed by nursing staff on the Patient Electronic Notes System (PENS). The MUST form has recently been reviewed by Trust dieticians with the aim of making the process easier and quicker for staff to complete. One such improvement is the ability of the form to automatically complete aspects of screening which previously required staff to refer to paper charts, calculate the answer and then enter the information by hand.

In addition, training on how to accurately use MUST is now available on the staff online training hub. This gives staff flexibility to update their skills at a time most suitable to their schedule. Face to face local training sessions have also been completed in a variety of areas around the Trust.

Visual Menu Development

We have had visual menus since 2010. During 2016, the Trust’s Dietetics, Speech and Language Therapy, Equality and Diversity, Hotel Services and ISS worked together to update the visual menu. The menu is bespoke to the Trust and is designed to facilitate the meal ordering process for potentially vulnerable groups, including those with learning disabilities, visual impairments and language barriers.

Innovations include:

- The planned introduction of blue crockery where appropriate, which will provide a contrast for people with visual impairments enabling them to see what’s in the bowls more easily.
- Black writing on a yellow background which is recommended as easier to read.
- Placing of titles on the left hand side, so as to be easier to read.
- Use of pictures to assist with understanding. For example, the picture of a cow to represent the meal contains beef.
The Power of Three

The Power of Three is a campaign started by the Hospital Caterers Association to bring together the Hospital Caterers Association, the British Dietetic Association and the National Nurses Nutrition Group with the aim of improving nutritional outcomes for patients.

The idea of working together for the good of patient outcomes has been used in the Trust to develop initiatives such as regular ‘Power of Three’ meetings involving the Trust Quality Matron for Nutrition, Hotel Services, ISS, Dietetics, Speech and Language Therapy, St Pauls Eye Hospital representatives and Trust Learning Disabilities Team. These meetings discuss catering developments and feedback with the aim of making improvements where required.

In addition, the Trust has commenced ‘Power of Three’ meetings at ward level with the aim of improving communication and promoting best practise for ward level provision of nutrition. These meetings are attended by a range of staff such as Trust quality matron for nutrition, area matron, ward manager, healthcare staff, ward hostess, ISS supervisor, Dietetics and Speech and Language Therapy. An action plan for the ward is agreed with areas for development by the team. Some examples of developments are receiving an increase in crockery, cutlery or equipment, provision of training to increase staff knowledge and change of ward food service routine to better suit patient care.

### Patient Catering Experience Feedback

Each month, a selection of patients on all in-patient wards is asked questions about the quality of food service. The feedback is sought by both our own Hotel Services staff and also by ISS staff. Questions include:

- During your stay have you always been offered a menu to look at prior to lunch and supper each day?
- During your stay have you always received at lunch and supper your first choice of meal and sweet?
- During your stay have you always found the quality and presentation of your meals to your satisfaction?
- During your stay have you always had your water jug and glass replaced both AM and PM?
- During your stay have you been happy with the service you have received from the catering staff?
- During your stay have you always been offered a suitable snack with a drink each afternoon?
- During your stay have you always been offered a snack (e.g. biscuits, cake or toast) by nursing staff with an evening drink?

Patients’ responses and comments are shared with ward managers and reported to The Power of Three (TP3) catering meetings with a summary being sent to the Patient Experience Group for oversight. Targets are set for each question and progress is monitored. Where scores fall, both the Trust and ISS work together to focus on those areas. Following feedback on the above questions, a trial is due to take place at Broadgreen Hospital to place menu holders inside the side-rooms, to ensure that patients always have access to menus.
Learning Disabilities Work

The Learning Disabilities Team has implemented a system to ensure that the nutritional requirements of patients with learning disabilities are considered whilst they are in our care. The Learning Disabilities Team review caseloads and the ward whiteboard to review the number of relevant patients within our hospitals on a daily basis.

The Learning Disability Team then inform key staff and partners about who is on each ward each day. This includes dieticians, nutritionists, speech and language therapists, specialist nurses and ISS staff. They can then arrange to visit the patients to make sure that their requirements are being met during their hospital admission.

The Learning Disability Team has recently developed bespoke ‘Learning Disability Awareness Foundation Level Training’ for ISS staff. This is to include our cleaners, porters and catering staff on the wards. The training highlights the importance of understanding the needs of patients with learning disabilities. The training includes nutritional considerations (see training slide below).

The training also reminds staff that they are the hospital’s eyes and ears. Processes are in place so that ISS staff can provide feedback to the Learning Disability Team. This can be done through any member of staff, although there is a dedicated patient liaison officer for ISS who aims to see all patients referred by the Learning Disability Team.

Volunteers also provide feedback to the Learning Disability Team to inform them how a patient is communicating and feeling on a daily basis.
Food Standards: 10 Key Characteristics

The ‘10 Key Characteristics’ standard offers an overarching set of principles which are useful in developing a patient-focused food and drink strategy, which this document addresses. Within the Trust a gap analysis has been completed and this will continue to be monitored through the Trust Nutrition Steering Group. The 10 key characteristics are:

i. Everyone using healthcare and care services is screened to identify those who are malnourished or at risk of becoming malnourished.

ii. Everyone using care services has a personal care support plan and where possible has had personal input, to identify their nutritional care and fluid needs and how they are to be met.

iii. The care provider must include specific guidance on food and beverage services and nutritional care in its service delivery and accountability arrangements.

iv. People using care services are involved in the planning and monitoring arrangements for food service and beverage / drinks provision.

v. An environment conducive to people enjoying their meals and being able to safely consume their food and drinks in maintained.

vi. All staff / volunteers have the appropriate skills and competencies needed to ensure that the nutritional and fluid needs of people using care services are met. All staff / volunteers receive regular training on nutritional care and management.

vii. Facilities and services are designed to be flexible and centred on the needs of the people using them.

viii. The care-providing organisation has a policy for food service and nutritional care, which is centred on the needs of the people using the service. Performance in delivering that care effectively is managed in line with local governance and regulatory frameworks.

ix. Food service and nutritional care is provided safely.

x. Everyone working in the organisation values the contribution of people using the service and all others in the successful delivery of nutritional care.

The 2014 Hospital Food Standards Report included the Royal Liverpool University Hospital as one of the case studies for best practice in addressing the requirements of the 10 Key Characteristics standard (see above).
The updated Nutrition & Hydration Manual addresses the 10 Key Characteristics and our requirement to have a policy for food service and nutritional care. The updated Nutrition and Hydration Manual will be launched shortly.

The January 2017 report, which reviewed progress since the Hospital Food Standards Panel report, found that more than 90% of hospitals are fully or partly compliant with the 10 Key Characteristics. This is reported through PLACE audits. PLACE stands for Patient-led Assessments of the Care Environment: the Trust PLACE results are set out in the Monitoring section of this strategy.

In addition to the three standards listed above, aspects of the Government Buying Standards and the Healthier and More Sustainable Catering Standard are also applicable to patient catering. An update report for the Government Buying Standards will be reported to the Sustainable Development Group and an overview report can be made available for the Nutritional Steering Group (NSG). The NSG will continue to monitor compliance against the patient meal aspects of the above standards and receive periodic updates across all 5 standards. We will work to ensure consistency of reporting of the five standards to the three groups set out earlier.

In relation to patient nutrition, the 2017 update report referenced the work led by NHS England, including:

- Commissioning good nutrition and hydration care; the Hard Truths publication, following the Francis enquiry, resulted in guidance for commissioners to address the deficit in nutrition and hydration care.
- Improving food packaging, relating to encouraging suppliers to comply with the international standard ISO 17480 for ease of opening for food and beverage packaging supplied to the NHS.
- Research and evidence for change, looking at support for eating for adult inpatients – opening packaging, spoon-feeding etc.
- Education and training mapping, including good nutrition and hydration as part of education and training for healthcare professionals.

Within our service, we already address many of these aspects. It is recommended:

- Sandwiches packets be opened and where possible should be well presented on a plate with a side salad.
- Catering and Nursing staff should open other food items as required.
- ISS are currently investigating alternative openings for sauces.
- Nursing staff support patients with feeding.
- Adaptive cutlery be used to allow patients with special requirements to feed themselves.

The Trust Quality Matron for Nutrition is currently undertaking work to capture nutrition and hydration training.

The update report also acknowledges the work led by professional and voluntary organisations, including:

- The Malnutrition Task Force (MTF)
- Last Nine Yards – Improving hospital catering at ward level
- The Power of 3 (TP3) – Working together to aid patient care

The Last Nine Yards was developed by the Hospital Caterers’ Association (HCA), in conjunction with ISS, our patient meal providers. The Trust has signed up to this initiative.
4. Healthier Food for Staff and Visitors

The Hospital Food Standards Report suggested healthier food for staff and visitors can be achieved through gap analyses against:

- Government Buying Standards for Food and Catering Services, Defra – key parts of this will fall under the Sustainable Food for All section.
- In addition, there are recognised schemes such as the relevant Responsibility Deal pledges:
  - Out of home calorie labelling
  - Calorie reduction
  - Salt reduction
  - Health at work

The Hospital Food Standards Report stated that hospitals have a role as a beacon of good practice in supporting staff to make healthier choices. It notes that this is particularly the case for shift workers and those eating at unsocial hours, who may fall victim to poor eating habits if choice is restricted.

If the NHS is to properly promote health as well as deal with ill-health, then it must look to the food it provides. For many staff, the food they eat at work makes up a substantial part of their daily diet and a healthier intake at work can make a real difference. The required standards, and other voluntary schemes, will help hospitals to maximise the potential health gain.

The report recognised that there are difficulties faced when considering food services that are not under the direct control of the hospital. This has been the case with the 2016/17 CQUIN requirements, which are set out below.

Food Standards: Government Buying Standards (GBS)

GBS are a set of standards for the procurement of a range of goods and services. The nutritional aspects of the Government Buying Standards for Food and Catering Services include:

- Promotion of a balanced diet of carbohydrates, protein, fibre, fruit and vegetables within staff restaurants.
- Specific targets for different meals.
- Practical strategies aimed at reducing salt, saturated fat and sugar intake.

A report by the Trust and ISS against these aspects has been produced and will be reported to the Sustainable Development Group.

The 2017 update report noted that more than half of hospitals report they are fully compliant with the GBS. The update report notes that the GBS are ‘mandatory for central government departments and agencies, and for the NHS, and are highly recommended for other public sector bodies’ (p.8). The report also notes that the portal is being reviewed. Our catering tender was assessed against the Balanced Scorecard, which is based upon the GBS. Further information is available in the Sustainable Food for All section.
Food Standards: Healthier and More Sustainable Catering Principles

The principles provide guidance which includes important nutrition principles that can be applied to staff and visitor catering. Applying these principles will help hospitals to adjust their menus so that their customers can make healthier choices, whilst still maintaining a wide variety of options.

The 2017 update report noted that the Nutrition Principles were updated to reflect recent changes to government dietary advice and associated dietary messaging tools, together with recently published data from the National Diet and Nutrition Survey on population food consumption and nutrient intakes. The updated principles and toolkit were published in February 2017\(^3\) and includes:

- Updates from the Eatwell Guide.
- New, lower recommendations for sugar consumption, and higher recommendations for fibre intake in response to the Scientific Advisory Committee’s 2015 Carbohydrates and Health report.
- New revised advice for intakes of vitamin D in response to SACN’s Vitamin D and Health report published in July 2016.

The Trust does not directly procure food. However we did include the requirements of the Balanced Scorecard within the Hotel Services tender. The Healthier and More Sustainable Catering Principles toolkit specifically references the Government Buying Standards, on which the Balanced Scorecard is based.

In addition, the report highlighted the benefits of organisations signing up to the Responsibility Deal\(^4\), which commits organisations to taking voluntary action to improve public health through responsibilities as employers, as well as through their commercial actions and their community activities. The Trust signed up to twelve of the commitments in the Responsibility Deal, with only 24 of the 776 signatories committing to more. Of these 24, 11 are supermarkets, 5 are brewers or pub chains and the remaining are made up of large food and drink producers, such as Unilever, Nestle, PepsiCo, McCain’s and Mars. No NHS trust committed to more actions.

The Trust was one of the first NHS organisations to sign up to the Responsibility Deal, which shows that we have taken our responsibility around food procurement seriously for a number of years.

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\(^3\) https://www.gov.uk/government/publications/healthier-and-more-sustainable-catering-a-toolkit-for-serving-food-to-adults#history

\(^4\) https://responsibilitydeal.dh.gov.uk/about/
Healthy Eating Plan

The Trust prepared its first Healthy Eating Plan in August 2013. This set out the requirements to actively promote healthy eating and weight loss and to increase opportunities for participation in physical activity. The plan acknowledged that weight issues and obesity represent the greatest threat to the health and wellbeing of the country. Obesity can shorten an individual’s life expectancy by ten years and severely impacts their quality of life. The increase in the length of working lives means that these situations will have an even greater effect on organisational effectiveness unless improvements are made.

The plan committed that the Trust will use resources, including staff and premises, to actively empower all staff to promote healthy eating. There are many elements that need to be addressed to improve performance in this area. We also need to take account of good practice nationally and ensure that all elements of our organisation (occupational health, contractors, managers and hotel services) play a part in improving performance.

The plan states that the Trust will promote healthy food choices in a number of ways, including:

- Promoting healthy food choices in staff restaurants
- Ensuring that pricing and positioning of healthy food options is competitive and easily understood
- Ensuring that vending machines have a healthy food option which is affordable
- Making all food contractors aware of our stance in this area

A lot of the work that was set out in the plan has been supported through the recent CQUINs (see below). The Trust is currently preparing its next Health & Wellbeing Strategy, which will focus on staff well-being and complement the Food & Drink Strategy. A summer recipes book was developed to provide inspiration to staff.
CQUIN: Healthy food for NHS staff, visitors and patients

Since April 2016, the Trust has had to respond to a national CQUIN: Healthy food for NHS staff, visitors and patients. CQUIN stands for Commissioning for Quality and Innovation and is a payment mechanism designed to improve the performance of the NHS. We have worked with all on-site retailers to meet the requirements of the CQUIN, which become more stringent during 2017/18 and 2018/19. The requirements of the CQUIN are set out below.

NHS England states that the rationale for the CQUIN is set out in Public Health England’s report “Sugar reduction – The evidence for action” published in October 2015. This outlined the clear evidence behind focussing on improving the quality of food on offer across the country. Almost 25% of adults in England are obese, with significant numbers also being overweight. Treating obesity and its consequences alone currently costs the NHS £5.1bn every year. Sugar intakes of all population groups are above the recommend guidelines; contributing between 12 to 15% of energy. Consumption of sugar and sugar sweetened drinks tends to be highest among the most disadvantaged who also experience a higher prevalence of tooth decay and obesity and its health consequences. It is important for the NHS to start leading the way on tackling some of these issues, starting with the food and drink that is provided and promoted in hospitals.

NHS England will continue with their work at a national level with the major food suppliers on NHS premises to ensure that NHS providers are supported to take action across all food and drink outlets on their premises.

Already some of our on-site retailers have gone beyond the CQUIN requirements, with ISS and Costa only selling reduced-sugar beverages. Royal Voluntary Service (RVS) also removed all sugar-sweetened beverages, although they temporarily reintroduced them to support a trial with Liverpool City Council and the Cabinet Office (more details below).

The photos below were taken from audit for our CQUIN compliance: i.e. WH Smiths banners, sugar free drinks at Costa and fruit at RVS.

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The requirements of the CQUIN for the Trust are listed below, for information.

### 2016/17 Requirements

- a. The banning of price promotions on sugary drinks and foods high in fat, sugar or salt (HFSS).
- b. The banning of advertisements on NHS premises of sugary drinks and foods high in fat, sugar or salt (HFSS);
- c. The banning of sugary drinks and foods high in fat, sugar or salt (HFSS) from checkouts;
- d. Ensuring that healthy options are available at any point including for those staff working night shifts.

### 2017/18 Requirements

Firstly, maintaining the four changes that were required in the 2016/17 CQUIN in both 2017/18 & 2018/19. In addition:

- a. 70% of drinks lines stocked must have less than 5 grams of added sugar per 100ml. In addition to the usual definition of SSBs it also includes energy drinks, fruit juices (with added sugar content of over 5g) and milk based drinks (with sugar content of over 10grams per 100ml).
- b. 60% of confectionery and sweets do not exceed 250 kcal.
- c. At least 60% of pre-packed sandwiches and other savoury pre-packed meals (wraps, salads, pasta salads) available contain 400kcal (1680 kJ) or less per serving and do not exceed 5.0g saturated fat per 100g.

### 2018/19 Requirements

Firstly, maintaining the four changes that were required in the 2016/17 CQUIN in both 2017/18 & 2018/19. In addition:

- a. 80% of drinks lines stocked must have less than 5 grams of added sugar per 100ml. In addition to the usual definition of SSBs it also includes energy drinks, fruit juices (with added sugar content of over 5g) and milk based drinks (with sugar content of over 10grams per 100ml).
- b. 80% of confectionery and sweets do not exceed 250 kcal.
- c. At least 75% of pre-packed sandwiches and other savoury pre-packed meals (wraps, salads, pasta salads) available contain 400kcal (1680 kJ) or less per serving and do not exceed 5.0g saturated fat per 100g.

We supported an Innovation Agency funding bid for Health Equalities Group in 2017 to deliver support to all Liverpool-based NHS premises in delivering and exceeding the CQUIN requirements. This would have allowed all Liverpool trusts to work towards the same requirements, thereby ensuring coherence for both visitors and retailers based within our sites. Although the feedback from the Innovation Agency was positive, the bid was unsuccessful.
Workplace Wellbeing Charter

The Trust was first accredited against the Workplace Wellbeing Charter in 2011. The Charter includes specific sections on ‘Healthy Eating at Work’ and ‘Weight Management’.

World Health Organisation Health Promoting Hospital

The Health Promoting Hospitals programme aims to:

- Improve the inter-disciplinary nature and transparency of decision-making in hospital care.
- Evaluate and compile evidence on healthy promotion activities in the health and care setting.
- Better incorporate health promotion into quality management systems at hospitals and nationally.

The Trust was an early signatory to the programme; although the WHO acknowledges that the impact of the network has been limited.

Dental Hospital work to promote low sugar

Staff at the Dental hospital have supported many events to highlight the hidden sugars within everyday food and drink. They had a table in the main foyer of the Royal for 2017 Smile Month and also attended the International Nurse’s Day Event at the Education Centre on Friday 12th May 2017.

Julie Unsworth is a Dental nurse at the Dental hospital and is also an active member of the Trust’s Health & Wellbeing Group. She said: ‘The Dental hospital has a key role in highlighting the impacts of sugar. We’ve enjoyed providing more information to staff and the public. I’m also really pleased that we’ve been able to continue to support city-wide initiatives, such as the Save Kids from Sugar campaign and the RVS trial that included their unit in the Dental hospital.’

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6 http://www.wellbeingcharter.org.uk/index.php
7 http://www.who.int/healthy_settings/types/hospitals/en/
Further Work

Sugar Tax proposals: In early 2017, the Trust formally responded to the consultation to deliver action to reduce sales of sugar-sweetened drinks on NHS premises (the sugar tax). We were one of only three northern NHS trusts that attended a face-to-face consultation event in Leeds.

The consultation looked at options to produce income from the sales of sugar-sweetened beverages from retail units within hospitals. The outcome of the consultation was that NHS England sent letters to all NHS trusts in July 2017 asking them to commit voluntarily to reduce the amount of sugar-sweetened beverages that they sell on their premises. The letter also stated that many large retailers had already signed this commitment and this includes all of the retailers who currently have premises within our hospitals.

Collaboration: Liverpool City Council’s public health department have supported the Trust with a proposal to develop a Healthy Hospital Strategy and we have shared our Food and Drink Strategy with other hospitals, to support them to develop their own.

Retailers in the main foyer: Since the last strategy was written, the sweet stall in the main foyer of the Royal has been removed and replaced with a fresh juices stall. This work was led by the Healthy Hospitals Group and was informed by the (then) upcoming CQUIN guidance. Although there were concerns raised by staff, we had also received comments that the main foyer of the hospital should not promote unhealthy foods.

Weight Loss Challenge

The Trust provides a weight loss drop-in service to staff. The weekly sessions are delivered by our Dietetic Assistant who has been trained to provide healthy eating literature, private weight and BMI monitoring and support. The sessions are encouraging and full of positive support. The leader of the programme has had wonderful feedback from people who have found her to be valuable in their journey to improve their weight and diet. Some comments are detailed below. Over 50 staff regularly attend.
WE COMMIT OUR TRUST

...to sign the declaration to show commitment to reducing unhealthy weight in our establishments, to protect the health and well-being of staff, patients and visitors, to promote the identification and treatment of malnutrition and make an economic impact on health and social care and the local economy by striving to:

- Review the provision of foods in all our settings to make healthier choices convenient and affordable
- Reduce the availability of sugary drinks
- Promote drinking water to improve hydration whilst adhering to good practice in relation to infection control
- Ensure food provided at events and meetings includes healthy provisions
- Continue to work to ensure that staff are aware of the importance of leading a healthy lifestyle and creating a culture that supports healthy weight
- Continue to promote active lifestyles that encourage staff to achieve recommended levels of exercise, and to ensure that active commuting is promoted as part of this offer
- Ensure we continue to have a Trust Food and Drink Strategy that focuses on the Hospital Food Standards Panel report, NICE guidelines and the CQUIN targets
- Share the agreement with other key stakeholders in the city including other chief executives, Liverpool City Council leaders, the city Health and Wellbeing Board and Liverpool City Council Public Health
- Monitor the progress of plans. Contribute to the organisational Health and Wellbeing Strategy, city wide Health and Wellbeing Board and national forums to highlight our commitment to improve staff, patient and visitor health and wellbeing and be a positive force in our city
- Consider how commercial partnerships with the food and drink industry may impact on messages communicated around healthy weight
- Commit to excellence of care in the identification of malnutrition using MUST and accurate use of therapeutic diets
- Work to ensure that all patients will have a MUST score within 24 hours of admission and weekly thereafter
- Commit to safe, evidence based and timely treatment of malnutrition.
- Ensure the hospital menu meets national guidelines and has provision for the range of therapeutic diets required by the Trust
**Sugary Drinks Trial**

During the summer of 2017, we hosted a fourteen week sugary drinks trial at three RVS cafes on our sites. The trial was led by the Behavioural Insights team and Liverpool City Council’s Public Health team.

The trial saw new infographics added to RVS shelves, providing a reminder of the high sugar content of certain drinks in order to support customers that wanted to make healthier choices. The idea was to see whether behaviourally informed communications could change purchasing decisions, as an alternative to removing choice.

The initial results suggest that there was a reduction in the proportion of sugary drinks sold, with no impact on total sales, suggesting that people swapped to low-sugar drinks rather than decided not to make a purchase. The full results from this trial are expected shortly. Images from the trial are below.

The January 2017 update report also provided feedback on the Hospital Food Standards Panel’s 2014 recommendation that work should continue with the likes of NHS England and Defra, to make sure that the importance of hospital food is recognised for its contribution to the well-being of individuals and communities and for the benefits that this will bring to society, through increased productivity and decreased healthcare costs.

In relation to staff and visitor food and drink, it referenced the work led by the Department of Health, including:

- Using CQUIN to improve food and drink available on hospital sites (see above)
- Trial of options for healthier vending in the NHS (2014/15 trial on an NHS site)
- Food and drink sold on NHS sites (monthly working group)

There has also been work undertaken by NHS England, who have since taken the lead for the national CQUIN for NHS Staff Health and Well-being.

Public Health England is also considering how to consolidate and simplify the full suite of catering guidance and supporting tools it provides. It will be seeking feedback and comments from a wide range of organisations, including local authorities and healthier catering networks to inform this work.
5. Sustainable Food for All

Gap analysis against:

- Government Buying Standards for Food and Catering Services, Defra
- Additional recognised schemes, such as the Balanced Scorecard and the Soil Association’s Food for Life Catering Mark assurance scheme

The Nutrition Steering Group (NSG) undertakes a gap analysis against the requirements of the Government Buying Standards for Food and Catering Services (GBS) for patient catering.

The Hospital Food Standards Report stated that, as a major purchaser and provider of food and drink, hospitals have an opportunity to put sustainability at the heart of their work and ensure purchases are made with regard to their impact on the environment and wider society.

Beyond the hospital, the NHS has responsibilities as a good corporate citizen. It should purchase food and drink wisely, offering value for money, supporting the local and national economy and acting in the interests of the tax-payer. It should also have a secure and efficient supply chain and should take strong action to reduce the waste it produces. The report identified three topics to be given consideration:

- Impacts on the farm production stage: including biodiversity, use of soils and water, animal welfare, seasonality and product traceability.
- Resource efficiency throughout the supply chain: including the use of energy, water and management of waste.
- Social value: benefits realised for wider society as a result of procurement decisions, such as the use of charitable food projects that provide opportunities for patient rehabilitation.

The report concluded that the GBS was sufficiently comprehensive to be regarded as the required standard for the above topics.

Some aspects of the Food and Nutrition Digest also support a sustainable approach to catering. It is noted that Defra’s Plan for Public Procurement Balanced Scorecard and the Soil Association’s Food for Life Catering Mark provided further support, in addition to the required standards.

The Balanced Scorecard embeds the GBS’s minimum requirements whilst also providing a comprehensive list of evaluation criteria, which cover customer satisfaction and social economic value, as well as sustainability and animal welfare. It is aimed at enabling those who manage and run catering services to procure those services and manage a contract to a high standard.

The report highlights the Catering Mark – Bronze Standard as one of a number of assurance schemes that help verify compliance with the required standards. The Bronze Standard is highlighted because of the breadth of its coverage, both for nutrition and sustainability, as it incorporates several other assurance schemes and is largely in line with the GBS.
**Food Standards: Government Buying Standards**

**Defra’s Balanced Scorecard for Public Sector Food Procurement**

The Department for the Environment, Food and Rural Affairs (Defra) created the Government Buying Standards for Public Sector Food Procurement and supplemented this with its Plan for Public Sector Procurement Balanced Scorecard in summer 2014. Thanks to the expert support of Liverpool Food People, the Trust incorporated the Balanced Scorecard into our Hotel Services tender at an early stage.

At the NHS Sustainability Day Roadshow event that the Trust hosted in October 2014, both the Trust and Liverpool Food People were presenters. In addition, Defra presented an update on the Balanced Scorecard and their desire for NHS organisations to consider it within catering and catering contracts. Following this introduction, and led by the inclusion of the Scorecard within our draft tender, the Trust was invited to be a national case study for Defra and to join their Public Sector Food Procurement Steering Group.

We have provided three case studies for Defra since joining the group:

- **January 2015:** we produced a case study explaining how we included the Scorecard within the tender, what we asked of bidding companies and what wording we used. The toolkit to support the Scorecard was very long, so we developed an abridged version. We also asked bidders to respond to the Scorecard in full and gave equal weighting to all aspects of the Scorecard. This was intentional, in order to allow bidders to show where they could excel and deliver additional benefit to the Trust through the lifetime of the contract.

- **September 2015:** we informed the steering group how we had evaluated the submissions and any difficulties experienced during this. The winning bidder was not announced until after this case study had been submitted, so it focused on how the different bids responded to the requirements of the Scorecard, rather than whether any bidder had met all of the requirements.

- **September 2017:** we produced a final report which stated how the requirements of the Scorecard had been evaluated following the first year of the contract (1st April 2016 – 31st March 2017). The winning contractor, ISS, produces a national response to the Scorecard, as the majority of their purchasing and policy decisions are made at a national level. However, due to the appointment of a dedicated contract-specific Sustainability and Social Value Manager for ISS, there had been a lot of additional local work that had been undertaken. These two strands were combined for our overall evaluation and this was fed back to Defra. Defra have asked us to present at their workshop on future work for the Balanced Scorecard in October 2017.

In addition to our tender requirement to respond to the Balanced Scorecard, we also asked bidders to state how they could work towards the Soil Association’s Food for Life Served Here certification (at that time called the Food for Life Catering Mark). This was also one of the assurance schemes highlighted in the Hospital Food Standards Panel’s report. ISS achieved Bronze certification for the staff and visitor restaurants at the Royal and Broadgreen. Since then, we have been included within a Soil Association guide on how hospitals can incorporate Food for Life Served Here certification within their contracts.

The Trust has benefited greatly from the work undertaken during the catering tender and from the support of Liverpool Food People, Defra and the Soil Association. Some of this is detailed within this strategy.
The Trust continues to work closely with ISS to work towards the requirements of the tender, which incorporated the Food for Life Catering Mark and the requirements within Defra’s Balanced Scorecard for Public Sector Food Procurement.

Our tender process was shortlisted for a prestigious Procura+ award, a European award for sustainable procurement. The Trust was shortlisted amongst competitors such as the City of Copenhagen, Transport for London and a Finnish concert hall. More information on the 2016 nominations and winners can be found here:

http://procuraplus.iclei-europe.org/awards/awards-2016/

The Trust’s Head of Sustainability presented a case study about the catering tender at both CleanMed and the inaugural Agro-Eco Cities European Network conferences. More info can be found at:

http://www.cleanmedeurope.org/

Following CleanMed we were asked to submit a case study to SPHS, which brings together United Nations agencies and global health institutions committed to introducing sustainable procurement in the global health sector. The case study links our procurement work to the UN Sustainable Development Goals set out below.

Following the presentations at the Agro-Eco Cities conference by the Trust and our partner Liverpool Food People, Liverpool has been approved as one of the official partners in the new network, alongside Zaragoza, Bruges, Valencia and Freiburg. Further information can be found at:

http://www.agroecocities.eu/conclusions/

In addition, the Trust, together with Clatterbridge Cancer Centre and ISS, were keynote speakers at the prestigious Hospital Caterers’ Association Conference in Liverpool in April 2016. The Trust has also presented at a Sustainable Food Cities conference in Edinburgh, a Sustainable hospitals event in London and at a food event at Reasheath College in Cheshire.
ISS and the Hotel Services Contract

ISS’s new contract for Hotel Services started in April 2016. Hotel Services incorporates cleaning, portering and catering. They have undertaken many programmes to support the Trust in delivering the requirements of the tender. This has been supported by the appointment of a dedicated Sustainability and Social Value Manager for the contract, the first such contract-specific role for ISS.

ISS, in partnership with the Department for Works & Pensions, delivered a Sector Based Work Academy during which 14 individuals were provided with a bespoke training package. Working through a variety of training courses such as safeguarding, food safety and customer service, the accredited programme led to nine delegates being offered employment.

ISS continue to strengthen their ongoing partnership with the Prince’s Trust, completing two Get Into programmes in 2016. This provided 26 young local people with work experience, leading to 18 participants being offered roles within the hospital, many of whom remain strong employees within their core services.

ISS have also fund-raised for the Prince’s Trust, including two employees completing the 45-mile Palace to Palace bike ride.

Leanne Williams, the Sustainability and Social Value Manager for ISS was awarded the Patternmakers’ Guild award for Young Facilities Manager of the Year in 2017. This was a national award that recognised up-and-coming talent. Leanne received her award for her drive to enhance her community environment through her work in facilities management.

Further work

Bakery: One of the options that is being considered to deliver social value from the catering tender is a joint bakery project between the Trust, ISS and City of Liverpool College. The bakery would provide bread and bakery products to patients and retailers, and would also provide training opportunities for local students. A business case is being worked through and updates will be publicised by the Trust.

Bite Club: The Liverpool Life Sciences Accelerator is due to open later in 2017. The Accelerator will host the Liverpool School of Tropical Medicine research labs and growth space for life sciences companies. The cafe area of the Accelerator will be provided by a new local company that specialises in developing healthy salads. A trial of the salads is also planned for the staff / visitor restaurant at the Royal.

ISO 14001: In July 2017, ISS activities at Broadgreen hospital were successfully accredited to the national ISO 14001 standards. ISO 14001 is the international standard for environmental management systems and means that ISS has been independently audited against strict guidelines for energy, waste and water management and has sound systems in place to ensure that legal requirements are being managed and performance is continually improving.
Local meals / soup: As part of the catering contract, there has been a request for more local dishes. ISS are working on this and are looking to develop meals in 2018. In addition, freshly cooked soup is made each day and work is underway to identify ways to use local food and suppliers for this.

KQ Waste group / ReFood / UIA bid: The Trust has been involved with a Liverpool Knowledge Quarter food waste group since helping to set up the wider Knowledge Quarter Sustainability Network. The University of Liverpool has trialled ReFood collections, which take food waste to a site in Widnes that processes it into fertiliser and gas that is fed into the grid. From this, a working group was developed to bid for Urban Innovative Actions EU funding. The Trust was one of the key partners in the bid, which would have focused on a circular food economy within the Knowledge Quarter and would have funded our bakery proposal. Unfortunately we were unsuccessful after the second round but the group is continuing to seek other funding to progress with aspects of the bid.

Kensington Fields Community Association (KFCA) and Carillion: Alison Valentine is the Community Regeneration Manager for Carillion’s new Royal hospital construction project. Both Carillion and the Trust have been working with KFCA to support their activities with the local community; their site adjoins the Royal. Alison approached Subway to see what they did with excess food; they subsequently agreed to provide rolls to KFCA. In addition, Alison contacted Greggs Bakery and they also now offer sandwiches to KFCA that are provided to the local children who attend after-school classes and to the pensioners that attend Tuesday lunchtime club.

UN Sustainable Development Goals:

The Trust’s Sustainability Plan 2017-18 includes reference to the United Nations Sustainable Development Goals. These goals include aspects that relate to food and health. We will be further reviewing the goals throughout 2017-18.

Sustainable Fish Cities (SFC): The Trust is a signatory of the Sustainable Fish Cities Pledge, due to ISS’s commitment to only serve fish that has been certified by the Marine Stewardship Council. Due to the amount of meals served, we helped Liverpool to achieve its second SFC star.

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9 https://www.sustainweb.org/sustainablefishcity/
The 2017 update report specifically highlights the work that the Trust has done to incorporate the Balanced Scorecard within our tender. This came from the input supplied to the report by Defra and states (pages 14/15):

“In the NHS, the Royal Liverpool and Broadgreen University Hospital NHS Trust completed a tender exercise for trust-wide hotel services using the Balanced Scorecard to assess the food elements. The Trust has since been nominated for a Procura+ award for the bidding process.”

The update report also noted that the original report recognises that there are other tools and assurance schemes that can be of use in promoting excellence, adding that it is for hospitals to decide for themselves where these tools or approaches work for them. There are many tools and schemes that could apply to hospital food. Many are designed to have a wider application, such as Defra’s Balanced Scorecard and the Soil Associations’ Food for Life Scheme, which provide different means to demonstrate how their procurement has helped support or meet specific goals. These schemes and the Public Health Responsibility Deal (RD) were mentioned in the Hospital Food Standards Panel report and progress against them is tracked here. However, the report notes that it is crucial to underline that these are optional and there are many more schemes available. The NHS has a full array of catering services from on-site cooking to bought-in / delivered meals and from NHS-employed staff to contract caterers. The update report notes that all are capable of delivering excellent food; this is an important acknowledgement that bought-in meals have a role to play in patient meals.

The update report notes that the most recent PLACE assessment shows that just over half (51%) of sites use delivered meals, 33% have ‘cook-serve’ catering (where the meal is cooked from scratch on the premises) and around 10% have an on-site central production unit (where meals are prepared and then chilled or frozen for use on site or for delivery elsewhere). The remainder are a mix of services, including units where patients do all or some of the cooking. Some of the tools and assurance schemes are only relevant to some types of catering system, but all catering systems can deliver high quality, nutritious and sustainable food. The report notes that whether the service is fresh, cook-chill, cook-freeze or plated meals, the quality of product, service and communication must be of the highest level possible.

The Trust specifically tendered for a delivered meals model, as we receive positive feedback from patients for the quality and the variety of the food offered. The Balanced Scorecard and Food for Life Scheme was incorporated to encourage options that could provide delivered meal services whilst maximising the economic, social and environmental impact to the local community. We continue to work with our catering provider to ensure this aim is met.

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10 See section 6 for more information regarding PLACE.
6. Monitoring

PLACE: The Hospital Food Standards Report recommended that hospitals use the information from Patient-led Assessments of the Care Environment (PLACE) to identify areas for improvement in patient food. PLACE is the system for assessing the quality of the patient environment. It focuses on four domains, one of which is food and hydration. PLACE assessments are snapshot views of the quality of non-clinical services such as hospital food, hospital cleanliness, privacy and dignity, car parking, and general maintenance and décor. They are carried out by mixed teams of patients and staff, and include specific questions relating to the work of the Hospital Food Standards Panel as well as inspections of catering methods, choice and mealtimes and taste testing. PLACE include the following questions which do not contribute to the overall score, but provide an understanding of awareness of relevant food standards:

- Has the organisation assessed its food procurement and catering practices against the Government Buying Standards (GBS) for Food and Catering Services?
- Has the organisation considered the Soil Association Food for Life Catering Mark for its food procurement and catering practices?

The tender for the current catering contract specifically asked bidders to respond to the Balanced Scorecard, which is a successor to the Government Buying Standards. We also asked bidders to set out how they could support us to meeting the Catering Mark, since rebranded: Food for Life Served Here. The work of the current catering provider and the inclusion of the Balanced Scorecard and Catering Mark within the catering contract ensure that the Trust meets the requirements of PLACE. Further information is provided in this strategy.

The 2017 update report included a recommendation that the required standards should be monitored via annual PLACE audits, and that PLACE should be amended to include a more detailed evaluation of the taste and flavour of hospital food. As recommended, PLACE has also been amended to incorporate a more detailed evaluation of food quality. Assessors now taste every food item on offer for the meal under review, and together agree a score for taste, texture and temperature.

This means that hospitals receive clear feedback not just about the overall meal provision, but about individual dishes and food items, so that they can plan for improvement where needed. The assessment also contains a more detailed evaluation of provision for patients with specific needs, e.g. those with swallowing problems who may need foods with a modified texture, or those who cannot use cutlery who would benefit from a wider range of finger foods.

PLACE includes scores relating to food and compares individual sites to the nation average (for similar organisations). For 2017, our scores were:

<table>
<thead>
<tr>
<th></th>
<th>Royal Liverpool</th>
<th>Broadgreen</th>
<th>National Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food</td>
<td>94.68%</td>
<td>94.74%</td>
<td>89.68%</td>
</tr>
<tr>
<td>Organisation Food</td>
<td>92.03%</td>
<td>92.03%</td>
<td>88.80%</td>
</tr>
<tr>
<td>Ward Food</td>
<td>95.25%</td>
<td>96.00%</td>
<td>90.19%</td>
</tr>
</tbody>
</table>

Care Quality Commission: The CQC inpatient survey, which only applies to acute hospitals, asks questions about the quality of food, the choice of food and help with eating. Our scores, as reported publicly by the CQC, are 6.3/10, 9.1/10 and 7.1/10 respectively, all of which are rated ‘about the same’ compared with other trusts.

CQUIN: Commissioning for Quality and Innovation (CQUIN) is a system to encourage and award NHS trusts to meet specific requirements, in line with the NHS Standard Contract.
The 2017 update report stated that the Hospital Food Standards Panel’s report proposed a local CQUIN scheme to incentivise providers to review food and drink sold on hospital premises, and to restrict less healthy food and drink and promote healthier choices. The Department of Health developed a local CQUIN ‘To improve the provision for healthier food and beverage options for staff and visitors at all times of the day and night’. This was included in the NHS Standard Contract CQUIN list for 2015/16, allowing commissioners to use it. Since then, NHS England has taken this further by developing a national CQUIN. The full CQUIN for 2016/17, 2017/18 and 2018/19 is included within the Healthier Food for Staff and Visitors section above.

**NHS Standard Contract 2017/18 and 2018/19 Service Conditions:** The original panel report made four recommendations and identified five food standards that all hospitals should follow. From April 2015, these standards have been included in the NHS Standard Contract\(^{11}\) and thus are legally binding.

The requirements for Food Standards within the NHS Standard Contract for 2017/18 and 2018/19 include:

- The Provider must develop and maintain a food and drink strategy in accordance with the Hospital Food Standards Report; this strategy meets that requirement.
- The Provider must have regard to (and where mandatory, comply with) Food Standards Guidance as applicable. How we comply with the standards is set out in this strategy.
- When procuring and/or negotiating contractual arrangements through which any potential or existing tenant, sub-tenant, licensee, contractor, concessionaire or agent will be required or permitted to sell food and drink from the Provider’s Premises, the Provider must (having taken appropriate public health advice) include in those contractual arrangements terms which require the relevant party to provide and promote healthy eating and drinking options (including outside normal working hours where relevant) and to adopt the full range of mandatory requirements in Government Buying Standards; the Trust included the Balanced Scorecard in our last catering tender. The Balanced Scorecard includes all of the mandatory requirements within the Government Buying Standards and also Awards Criteria which push suppliers to exceed the minimum standards; in this way, we have exceeded this requirement.

The 2017 update report provided progress on the 2014 recommendation that all NHS hospitals develop and maintain a food and drink strategy. 2016 PLACE figures show that 84% of all NHS hospitals have a food and drink strategy in place, an increase of 19% or 213 hospitals. We have shared our first strategy with other hospital to support them in developing their own.

**NICE Quality Standard QS111 – Obesity in adults: prevention and lifestyle weight management programmes.**
In 2016 we were required to complete a baseline assessment against the NICE standards for weight management programmes. These include the provision of healthy food and drink options in vending machines, the inclusion of nutritional information on menus and that healthy food and drink choices are displayed prominently. Some of these requirements have been addressed by the Healthy Eating CQUIN.