

# Food, Fluid & Nutritional Care Policy

Author:	Practice Development Practitioner - Care Assurance
Responsible Lead Executive Director:	Executive Director of NMAHP's
Development & Approval Group or Team	Food, fluid and Nutritional Steering group
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CONSULTATION AND DISTRIBUTION RECORD		
Contributing Author /	L. King	
Authors	S. Murray	
Consultation Process / Stakeholders:	<ul> <li>FFNC Steering Group</li> <li>FFNC Operational Groups</li> <li>Dieticians Acute and Community</li> </ul>	
	<ul> <li>Specialist Dietitians Acute and Community</li> <li>Speech and Language Therapists</li> <li>Special Care Oral Health Team</li> </ul>	
Distribution:	NHS Lanarkshire website	

CHANGE RECORD				
Date	Author	Change	Version No.	
05/2019	FFN	Policy doc revised	V2	
13/01/2023	FFN	Policy document revised  Pg 6/7 Vulnerable groups. Children and young people and Older people – rewritten.  Pg 8-word change to high Muscle Tone  Pg 9 Mental III-Health some wording revised.  Pg 10-word change to where appropriate  Pg 12-word change and punctuation corrected. Where possible added  Pg14 resource implications updated  References checked and updated	V3	
20/01/2025	FFN	Pg6 Infants children and Young people Rewritten. Pg7 Breast Feeding rewritten Pg9 Dysphagia in individuals with dysphagia re worded. Pg10 Individuals with a diagnosis of Dysphagia re worded Pg11 Paediatric Yorkhill Screening Tool Info inserted P13 All dependent adults to be assessed	V4	



		P15 Ward hostess replaced by ward support staff References updated	
19/03/2025	L.King/ S Murray	Full Policy Review	V4.1
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#### 1. INTRODUCTION

NHS Lanarkshire recognises the importance and value of effective nutritional care and hydration as an essential part of clinical care, and recognises that it is an integral part of the work of many staff disciplines. Leaders within the organisation have a particular role to play in developing a positive culture regarding nutritional care and hydration with staff. NHS Lanarkshire expects the co-operation and involvement of all those working in the food chain (clinical and non-clinical) such as catering, domestic staff, medical, nursing, allied health professional, portering, procurement and managerial staff.

This policy seeks to drive the quality of and improvements in the nutrition and hydration of patients as an integral part of demonstrating the delivery of safe, effective and person-centred care. The policy applies to all patients, Paediatric and adult, in both community and hospital settings.

## 2. AIM, PURPOSE AND OUTCOMES

The purpose of this policy is to ensure the delivery of safe and effective Food, Fluid and Nutritional care. Supported by local and National Guidelines the Food, Fluid and Nutritional Care Standards (2014) and Food in Hospitals; National catering and Nutrition Specification for Food and Fluid Provision in Hospitals in Scotland (2016) will be used to guide and to assess this provision of care.

This policy aims to support all staff working within NHS Lanarkshire involved at any stage of the process in providing nutritional care to patients.

NHS Lanarkshire will ensure that all individuals at greatest risk of malnutrition (over nutrition and undernutrition) are assessed and cared for without prejudice thereby helping to improve the quality of overall clinical care.

- Patients have a good experience
- Patients maximise their nutritional status relevant to their condition
- Staff are fully engaged with improving nutritional care
- Staff have understanding of importance of nutrition and hydration in improving clinical outcomes

Giving clear instruction to health care workers on how to address food, fluid and nutritional care will achieve optimal nutritional care and hydration by:

- Providing a coordinated and whole-system approach to the delivery of food and fluid by different health professionals that views individual needs and preferences:
- i. Determining a person's preferences, food allergies and



cultural needs, defining his or her physical requirements, and then providing the person with what is needed.
ii. Following a person's progress through an illness, by responding to changing nutritional and fluid requirements.
iii. Monitoring and reassessing nutritional and hydration status at regular intervals, referring for specialist care when appropriate, and communicating with services within and across care settings.

- Recognising that ethical issues relating to feeding difficulties that may arise in disabled or cognitively impaired individuals or those at 'end of life', and that such individuals require particular consideration.
   The full facts of the situation should be understood by all involved to enable a person-centred decision about food, fluid and nutrition, including artificial and the means of delivery.
- Making staff aware of the importance of applying the food, fluid and nutritional care policy.

## 3. SCOPE

## 3.1 Who is the policy intended to benefit or Affect?

All patients receiving care within NHS Lanarkshire either as an inpatient or through community services.

#### 3.2 Who are the Stakeholders?

All NHS Lanarkshire staff with responsibilities linked to the achievement of the highest standards of food, fluid and nutritional care within NHS Lanarkshire hospitals or the community.

#### 4. PRINCIPAL CONTENT

Each NHS board has a policy, and a strategic and co-ordinated approach, to ensure that all patients receive safe, effective and person-centred nutritional care, irrespective of specialty and location (hospital or community).

NHS Lanarkshires policy on food, fluid and nutrition is that any patient suffering from, malnutrition (overnutrition, undernutrition) or dehydration will always be identified and remedial action taken to optimize the patients clinical outcome.

All vulnerable groups

- Infants, children and young people
- Mothers and breastfed Infants



- Older Adults
- Individuals with Renal Disease (kidney problems)
- Individuals with a diagnosis of Cancer
- Individuals with learning Disabilities
- Individuals with Mental Health
- Individuals with diagnosis of Dysphagia (swallowing difficulties)
- Individuals who require to be nil by mouth
- Individuals receiving Palliative Care and/or end of life care

Will receive specialist Dietetic advice and support, or support from a relevant specialist e.g. Speech and Language Therapist, Infant breast feeding team, Special Care Oral Health Team.

## Assessment, screening and Care Planning

All inpatients, must receive a nutritional screening assessment to identify malnutrition on admission and throughout the healthcare journey.

Outpatients should also be screened for evidence of malnutrition and appropriate action taken.

The Malnutrition Universal Screening Tool (MUST) will be used in NHS Lanarkshire for screening all adult patients.

All paediatric inpatients will be screened using the Paediatric Yorkhill Malnutrition Score (PYMS) tool.

All inpatients will be re-screened at least weekly or more frequently depending on individual patient assessment.

Screening for malnutrition and the risk of malnutrition should be carried out by healthcare professionals with the appropriate skills and training

All dependent adults should have an oral health assessment carried out on admission. This identifies the current oral health status, any concerns and follow up action required, it also allows for the development of an individual care plan.

## 5. ROLES AND RESPONSIBILITIES

**The Executive Director of Nursing –** is the executive lead for this policy area and is responsible for ensuring that appropriate governance systems are in place to support the delivery of nutritional care to patients.

**Senior Managers** – (e.g. Chief Nurse/Associate Nurse Director and Chief Medic



/Associate Medical Director) are responsible for ensuring that all staff groups support and adhere to the policy and that there are appropriate resources in place to implement the key aims of the policy.

**All Medical Staff** are responsible for ensuring that patients nutritional requirements receive appropriate medical care in hospital and on discharge to community setting.

All clinicians involved in providing care should ensure that there is good communication between health and social care teams and working with the patient and carers to ensure that their wishes are appropriately incorporated into decisions about their management and care and that the patient and carers are kept fully informed.

**Operational FFNC Leads** are responsible for ensuring that the policy is monitored and that any associated governance issues are highlighted through an appropriate route.

**Senior Charge Nurses** carry the day-to-day operational responsibility for ensuring that all patients with identified nutritional care requirements, have a full holistic assessment of their needs and that the wider multidisciplinary team are able to appropriately provide management and care to the patient / client to meet these needs, based on their individual care plan.

**AHPs and Pharmacist** - To provide expert advice and support to clinical staff concerning general nutritional care, artificial nutritional support and interactions between medications and nutrients.

**Head of Catering** is responsible for ensuring that meals are provided and the food meets national standards for quality and nutritional value. This includes snacks and supplementary food where appropriate.

All Clinical Staff have a responsibility to provide management and care using the principles and care plans set out in the Nutritional Care Policy and ensure that this care is managed with the utmost respect and sensitivity.

## NHS Lanarkshire FFNC Steering Group will:

Lead a whole-system approach for the development, implementation and evaluation of the Food, Fluid and Nutritional Care policy and strategic plan, in association with operational services.

Seek advice from suitably experienced and qualified specialists and individual representatives throughout NHS Lanarkshire as necessary to ensure that:

Appropriate Policies, Protocols, Standard Operating Procedures and Risk Control Measures are established and revised in line with NHS Lanarkshire policy.

Systems are in place so that everyone in the organisation understands their role and responsibility relating to nutritional care and hydration,



ensuring the involvement of individuals and the public in planning and delivering services.

A strategic plan and local service improvement plans with targets are developed that are measurable, achievable and realistic, and will help determine priorities.

## 6. RESOURCE IMPLICATIONS

Resources to support food fluid and nutritional care come from a number of different sources:

Catering staff time – food production and ward support staff. Catering budget.

Nursing staff- time to support nutritional screening, ward preparation for meal times. assistance with dietary intake.

Speech and language therapy staff assessment and investigation, provision of advice and treatment. Support to patient, carers, staff and follow up.

Dietetic staff –assessment, provision of advice/treatment

support to patient, carers and staff and follow up.

Dental staff

Adapted

cutlery

Weighing equipment

## 7. COMMUNICATION PLAN

This policy has been adapted by the FFNC Steering Group and was adapted for public use in June 2019. This policy has been updated to V4 in 2025. This will be communicated through:

- Staff Brief
- Pulse Newspaper
- NHS Lanarkshire Intranet (First Port)
- NHS Lanarkshire Public Website

## 8. **QUALITY IMPROVEMENT** Monitoring and Review

It is the responsibility of the Food, Fluid and Nutritional Care Steering group to direct



and monitor the quality of food, fluid and nutritional care within Lanarkshire. This is achieved through a number of methods.

The Steering group periodically benchmark the standard of care against the HIS Food, Fluid and Nutritional Care Standards 2014. From this benchmarking an action plan is developed which is delegated to the local operational groups to implement and report to the FFNC group on progress achieved.

The local operational groups are chaired by senior nursing staff and have multidisciplinary representation including dietitians, speech and language therapists, catering colleagues and nursing staff. The local group address local issues as well as area wide actions highlighted by the steering group.

There are strong links between the FFNC steering group and the acute FFN and Older People in Acute Hospitals (OPAH) groups which allows the FFNC group to become aware of FFNC issues in older people's care.

The FFNC group also receives information from the patient experience survey and from the PECOS survey which gives a perspective of the quality of care from patients and relatives.

NHS Lanarkshire has adopted the Care Assurance Standards(CAS) approach to care assurance. The quality and consistency of food, fluid and nutritional care is monitored and assured through the CAS standards and Quality work undertaken in individual wards and community settings.

The FFNC steering group also reviews performance and submits an annual report on the implementation of the Food, Fluid and Nutritional Care policy and strategic plan to The Healthcare Quality Assurance and Improvement Committee



## 9. EQUALITY IMPACT ASSESSMENT

This policy meets NHS Lanarkshire's EQIA

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## 10. REFERENCES

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SIGN Guidelines (as appropriate to condition)