

HOSPITAL
FOOD
STANDARDS
URGENTLY
NEEDED

Twenty years of hospital food failure

Why we need mandatory standards,
not more ineffective voluntary initiatives





Loyd Grossman OBE

Serving fresh and nutritious hospital food is vital to improving patient health, and to raising morale – amongst NHS staff, patients and their families.

My team and I worked hard for five years to improve patient meals but progress was much slower than we would have liked. Although we had a number of successes, we did not achieve the transformation which we had hoped for and which patients deserve.

While I could see what needed to be done and what could be done, our efforts were hampered by a lack of political will.

There has not yet been a noticeable change in the way hospital food is produced, prepared, cooked and served. I welcome the publication of this report and hope that it prompts government to take a new and effective approach to improving hospital food, including by requiring it to meet mandatory standards.



Albert Roux OBE

Twenty years ago I was asked to compare the standard of food served in the NHS against that served in private hospitals. I set out my conclusions in a paper, and gave a speech in Harrogate at the Hospital Caterers Association's annual convention. Some of my findings were supported by a subsequent report by the National Audit Office.

We must not think that high quality hospital food is too difficult or expensive to achieve. After all, simple food is often the best food – and buying fresh seasonal produce is cheap to buy.

If we have learned anything from the last twenty years it is that meetings, speeches and gimmicks do not work – what we need now is change to the whole hospital food system, starting with the introduction of food standards for every patient meal.



John Benson-Smith

I was involved as one of the six Leading Chefs as part of the Better Hospital Food initiative led by Loyd Grossman. The complete experience I found fascinating, joyful, inspiring, frustrating, bewildering and one which I will never forget.

During my time on the project, I visited 48 NHS hospitals throughout England and I worked with a huge cross-section of staff, and I also met with numerous patients, nurses, consultants, cleaners and loads of really great people.

My memories range from the 63 different types and styles of frozen peas used throughout the NHS ... or the London taxi driver who told me that the first meal he was served, having returned to the ward after a serious condition with his liver, was 'liver and onions', or the lovely letters I received from NHS patients who enjoyed my Chocolate & Pear Crumble which I designed and created for the NHS ... the NHS ward staff who refused to eat the patient's food ... or the very poor quality, second-grade food ingredients with little, if any, nutrients.

Hospital food does not need 'tickling' or a handful of greatly composed PR words again. It is in need of a huge re-think. The same approach, with the same ingredients cooked to the same recipe using the same methods equals the same end results.

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Summary

Low quality, unhealthy and unpopular patient meals have plagued our hospital wards for decades. In an attempt to address the problem, twenty one 'voluntary initiatives' have been launched by government since 1992. All of them have thoroughly researched the problems affecting hospital food, published recommendations and called on hospitals voluntarily to adopt them.

While there was some hope for the first of these voluntary initiatives in the early 2000s, they have failed in every case. We estimate that these initiatives have cost more than £54 million of taxpayer's money in the process¹, and they have been roundly criticised, even by the government's own advisors. Inexcusably, successive Health Ministers have persisted with this failed approach, and have continued where their predecessors left off, simply repackaging and relaunching weak, voluntary guidance.

This report records every failed hospital food initiative launched by government since 1992. It also records all other projects to improve hospital food which have been launched by organisations and individuals outside government since 1992, including by celebrity chefs, charities and health and medical organisations.

Despite the fact that some government voluntary initiatives, and all of the projects included in this report, have been successful in improving meals at a handful of hospitals, the majority of hospital food remains as bad as ever. This has been shown by recent surveys of patient meals revealing very poor quality standards.

This report reconfirms that the lavish public spending on government voluntary initiatives has failed. On behalf of the eighty nine members of the Campaign for Better Hospital Food we call on the government to follow the examples set by Scotland and Wales and set **mandatory** health and sustainability standards for hospital food in England.

Between 1992 and 2013:

- Government introduced **twenty one failed voluntary initiatives** to improve hospital food, **costing more than £54 million of taxpayers' money** - enough to pay for thirty four new hospital kitchens.²
- **Journalist and broadcaster Loyd Grossman and five different celebrity chefs** have been appointed to lead these voluntary initiatives: Albert Roux, John Benson-Smith, Mark Hix, Anton Edelmann and Heston Blumenthal.
- **Eleven different Health Secretaries** were appointed (see appendix), and stayed in the job for an average of fourteen and a half months – long enough to have introduced almost two voluntary initiatives each.
- Approximately **3,600,000,000 meals were served** to patients which did not have to meet any quality standards.³ One in every ten of these meals is estimated to have been thrown in the bin uneaten.⁴
- Government ignored at least **fourteen warnings** from government advisers, MPs, commercial caterers, and health, environmental and animal welfare organisations that voluntary initiatives to improve hospital food were failing.

Evidence of twenty years of hospital food failure

1992 to 2000: The rise of the voluntary initiative

In the 1990s, growing public disenchantment with poor hospital food forced the issue onto the government's agenda. Further investigation of the problem led to calls for an improvement to the nutritional standard of hospital food, and a recognition that patient catering has a key role to play in improving patients' experience and their recovery.

During 1992: Health of the Nation white paper is published

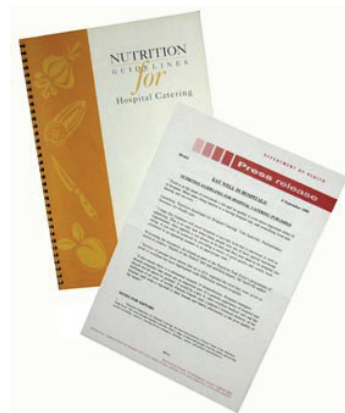
The Health of the Nation white paper, published by the Department of Health, is heralded by government as: "The central plank of health policy in England, forming the context for the planning of services provided by the NHS." The Health of the Nation identifies caterers as having an important role in providing a healthy diet. A Nutrition Taskforce is established, which in turn sets up a Hospital Catering Project Team. They start to develop Nutrition Guidelines for Hospital Catering.

During 1992: King's Fund finds poor nutrition amongst hospital patients

The King's Fund identifies poor nutrition as a problem amongst hospital patients in its extensive report: "A Positive Approach to Nutrition as Treatment".⁵

During 1995: Government launches Nutrition Guidelines for Hospital Catering

Celebrity Chef Albert Roux heads the list of supporters of the Department of Health's new Nutrition Guidelines for Hospital Catering. In his foreword, Albert Roux says, "Food should be regarded as an integral part of hospital service and treatment... Food provides us with the nutrients essential to our existence and general health... In providing comfort, food can also help to make patients feel more at home, reduce stress, and actively contribute to an ambience that can enhance the quality of medical treatment." The guidelines are largely ignored.



Department of Health's Nutrition Guidelines for Hospital Catering

During 1997: Hospital patients fail to achieve good nutrition

The Community Health Council undertakes a survey of hospital catering, and the resulting briefing⁶ examines the problems that result in some patients not eating and drinking enough when they are in hospital.

During 2000: Council of Europe reviews hospital food

The Council of Europe creates a network of national experts from eight member countries to collect information on nutrition programmes in hospitals. The aim is to review the food provided in European hospitals, highlight deficiencies and issue guidelines to improve the nutritional care and support of hospital patients. Five major problems are identified:

- lack of clearly defined responsibilities.
- lack of sufficient training.
- lack of influence on menus from the patients.
- lack of co-operation among staff groups.
- lack of involvement from the hospital management.

The committee concludes that better leadership is needed from national governments and senior management to improve the food served in hospitals, with good food championed by all staff involved in nutritional care and support, including hospital managers.⁷

A resolution on food and nutritional care in hospitals is eventually published by the Council of Europe (made up of ministers from European Union countries, including the UK) in December 2003 (see below).

2000 to 2010: Voluntary initiatives lead to a decade of hospital food failure

In the noughties, increasing concern about the quality, particularly nutritional quality, of hospital food led to the rise of the 'voluntary initiative'. These are initiatives which are launched by government to improve hospital food, but rely on hospitals voluntarily to adopt the suggested changes.

2000

During 2000: NHS Plan sets out care plan (costing £10m), including food targets

The NHS finds that up to 40% of patients are malnourished in hospital and one in ten would have a shorter stay in hospital if the food was better.⁸ The resulting five-year NHS Plan⁹ states: "These standards are not good enough. The food is variable in quality, it is not provided in a way which is sufficiently responsive to patients, and too much of it is wasted as a result."

The NHS commits £10 million¹⁰ to achieving a plan by 2001 that includes the following targets:

- a 24-hour NHS catering service with a new NHS menu, designed by leading chefs. This was to be a minimum standard for all hospitals;
- a national franchise for NHS catering should be examined to ensure hospital food is provided by organisations with a reputation for high quality and customer satisfaction;
- half of all hospitals should have new ward housekeepers in place by 2004 to ensure that the quality, presentation and quantity of meals meet patient needs; that patients, particularly elderly people, are able to eat the meals on offer; and that the service patients receive is available round-the-clock;
- dietitians should advise and check on nutritional values in hospital food. Patients' views should be measured as part of the Performance Assessment Framework and there should be unannounced inspections of the quality of hospital food.

To this day, many of these targets remain unmet.

2001

May 2001: NHS launches Better Hospital Food initiative (costing £40m)

Little progress has been made on the voluntary targets published by the NHS over a year previously. The NHS commissions BBC Masterchef host Loyd Grossman to lead a food team for a £40m¹¹ revamp of NHS catering called the Better Hospital Food initiative. They create 300 restaurant-style recipes for use in hospitals. "It is not a gimmick, it is not a celebrity exercise," explains Loyd Grossman. His team also includes Mark Hix of The Ivy restaurant, John Benson-Smith of Hazlewood Castle, and The Savoy's Anton Edelmann. "It is not a joke, it is not trivial – it is incredibly important to a lot of people," says Grossman.

The Better Hospital Food publishes an "Initial sustainability guide".¹² The environmental suggestions it contains are very weak and the guidance is rarely used and never updated. Five years later, the Better Hospital Food initiative is scrapped (see 2006, below) as ineffective and unwieldy.

During 2001: NHS launches ‘Essence of Care’ guidance

A new programme is launched by the NHS¹³ to provide ‘Patient-focused benchmarking for health care practitioners’. The guidance is intended to help healthcare professionals to improve the quality of service in the NHS and patient experience. It does not address sustainability. On the theme of food and nutrition, it focuses on governance issues, such as hospitals having policies and training to ensure that patients are happy with their food, good records are kept of food and fluid intake, and that patients are consulted throughout. It does not seek to improve food quality, or the nutritional value of the food.

Six years after its launch, a review in the Nursing Times journal¹⁴ states that “many areas have struggled to implement this initiative efficiently or to understand it fully. An online poll conducted by Nursing Times and referred to by Hartley (2004) identified that only 46% of respondents were aware of Essence of Care and thought it was making a difference, 20% of those who took part did not understand it and a further 25% assumed it was a management initiative.”

2003

During 2003: Department for Environment, Food and Rural Affairs launches Public Sector Food Procurement Initiative (costing at least £2.5m)

In the wake of the 2001 outbreak of Foot and Mouth Disease, and in response to the Sustainable Food and Farming policy commission, the Department for Environment Food and Rural Affairs (Defra) launches the Public Sector Food Procurement Initiative (PSFPI) which lasts for six years and has a budget of around a quarter of a million pounds per year.¹⁵ Its stated aim is to put British food and farming back on its feet, and to support “a world-class sustainable farming and food sector that contributes to a better environment and healthier and prosperous communities”. It sets out to:

- Increase consumption of healthy and nutritious food.
- Improve sustainability and efficiency of production, processing and distribution.
- Increase tenders from small and local producers, and cooperation among buyers.
- Increase demand for organic food.
- Promote animal welfare.
- Create better working conditions and fair treatment for catering staff and suppliers.
- Improve data collection and measurement of performance.

Six steering groups are set up to coordinate the PSFPI, which are:

- Sustainable Procurement Task Force.
- Food Procurement Implementation Group (set up in 2003).
- Sustainable Procurement Operations Board (set up in 2006).
- Government Office of the Regions Steering Group (set up in 2005).
- PSFPI Practitioners Group (set up in 2006).
- Food Procurement Group (set up in 2006).

The programme publishes reams of ‘how to’ guides, a website, food quality standards, guidance on contract management practices, standardised contracts and food benchmarking tools. Some good work is done to help smaller farmers and suppliers get reliable public sector contracts but, over time, the financial support dwindles.

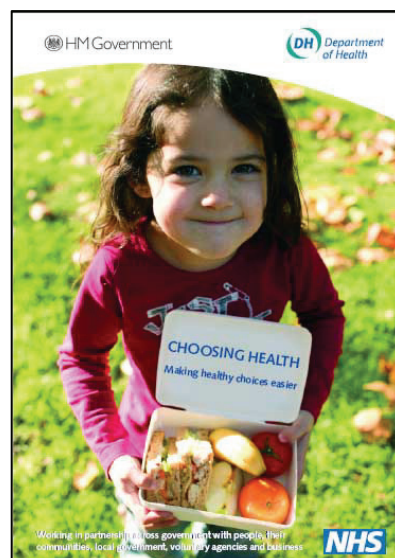
After six years, the PSFPI evaluation conducted by management consultants Deloitte (see 2008, below) concluded that “take up of the initiative was limited” and “PSFPI is not embedded in the public sector. The initiative is mothballed in 2009, to be superseded by the Healthier Food Mark (see below).

November 2003: Advisory group shows malnutrition in hospital patients persists

The Malnutrition Advisory Group publishes a report highlighting the continuing high proportion of patients malnourished in hospital.¹⁶

December 2003: Council of Europe issues resolution on hospital food

Aiming to address malnourishment among hospital patients, the Council of Europe issues a resolution on hospital food¹⁷, encouraging hospitals to identify patients at risk of malnourishment and take steps to ensure that these people eat well.¹⁸ The resolution does not address sustainability issues, nor does it deal with nutritional or food quality standards other than for people at risk of malnourishment.



Government launches Healthy Futures programme

2004

During 2004: NHS identifies hospital food as a priority for health and sustainability

The NHS funds the Sustainable Development Commission's Healthy Futures programme¹⁹ to "develop the capacity of NHS organisations to act as good corporate citizens" for sustainability, highlighting two priorities:

- food procurement in the NHS and across other public sector services
- capital developments and new building programmes in the NHS.

A draft takes three years to write, and another year elapses before it is eventually issued as a consultation document in December 2008.

The NHS also publishes a major review of its health strategy called Choosing Health: Making healthy choices easier²⁰ in which they commit to improving both the nutritional value and sustainability of hospital food. On nutrition, it says:

"Catering providers in both the public and private sector have an important role to play in influencing access to healthier foods. Public procurement of food through the NHS, the Prison Service and the Ministry of Defence offers an opportunity to demonstrate best practice. We will develop nutritional standards for all foods provided by these organisations and other public bodies – building on the work in schools. Our intention is to increase access to a range of healthier foods and will take account of the different formats of food provision – restaurant, fast food, vending, etc. This will be supported by a new Working Group and will link into the work of PSFPI led by Defra and the work of the Expert Panel on Armed Forces Feeding (EPAFF), recently set up by the Ministry of Defence. We will look at opportunities to promote this guidance into the private sector through the introduction of a national 'Healthy Eating' award. This will build on local initiatives, often promoted by environmental health, such as 'Heartbeat' awards".²¹

Nutritional standards do not emerge, but more guidance is issued and a government-run Healthier Food Mark health and sustainability award for public sector caterers is launched five years later, in 2009 (see August 2009).

2005

May 2005: Government sets up the Sustainable Procurement Task Force

The Sustainable Procurement Task Force is established in May 2005²², charged with drawing up an action plan to change sustainable public procurement so that the UK is among the leaders in the EU by 2009. It sets about writing a lot of reports.

During 2005: Chief Medical Officer calls for healthy and sustainable food in the public sector

The government's Chief Medical Officer, Sir Liam Donaldson publishes his Annual Report for 2004: "On the State of Public Health".²³ It features a chapter entitled A Fresh Look:

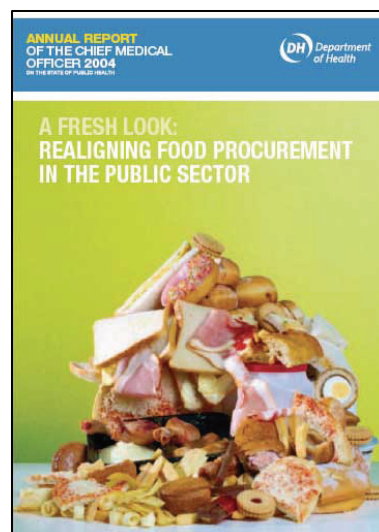
Realigning food procurement in the public sector, stating that:

- "Despite recent progress, considerable scope exists to promote healthier foods and to achieve greater sustainability in food procurement practices across the board."
- "The public sector should use its huge financial muscle as a purchaser and procurer to improve the nation's health and promote a more sustainable food chain."

Sir Liam Donaldson's excellent recommendations include:

- Government should broaden the methodology for demonstrating value for money in government procurement policy to include long term health benefits and sustainable development.
- Public sector food procurers should collaborate to agree creative specifications for contracts to supply food and catering, incorporating nutritional criteria.
- Public sector food purchasers should create local trade groups, with business support organisations and local suppliers to raise awareness of forthcoming tender and supply opportunities, building on the progress already made through the PSFPI.
- The proportion of high-quality local suppliers of food through the public sector should be increased substantially.
- Seasonality should be embraced and incorporated into supply calendars, rather than specifying a standard year-round supply.
- Public sector food buyers should be given training and guidance on the impact of food and diet on health and on the principles of sustainable purchasing.
- The Food Standards Agency's review of nutritional standards in public institutions should be used as a basis for action and the FSA should continue to track progress on reform of public sector food procurement and purchasing.

None of these are adopted by government, and no new incentives are given to caterers or NHS Trusts to take up the Chief Medical Officer's recommendations.



Chief Medical Officer calls for better public sector food.

During 2005: 65,000 people in care homes at risk of malnutrition

A report by the British Association for Parenteral and Enteral Nutrition finds that more than one-fifth of residents over 65 in UK care homes are at medium to high risk of falling victim to malnutrition, which equates to around 65,000 people.²⁴ Figures from the Commission for Social Care Inspection show that more than 2,000 care homes out of the 11,000 in England failed to meet minimum standards for meals.²⁵

2006

During 2006: MP calls for food standards for nursing homes

MP Paul Burstow tables a Private Members' Bill calling on government to introduce minimum nutritional standards for all care homes and tougher regulation via the Food Standards Agency. He describes this work as needing to "tackle the scandal that is elder abuse in our country".²⁵

March 2006: Audit Office says the UK can afford sustainable public sector food

The National Audit Office reviews public sector food procurement.²⁶ They explicitly include health and sustainability criteria and conclude that "increasing efficiency can have a positive impact on sustainability and nutrition, by enabling organisations to use cost savings in some areas to help to finance improvements in others; for example, savings resulting from better checks on goods delivered could be used to improve the quality of ingredients purchased, or improved nutritional quality could lead to reduced hospital stays and so improve the overall efficiency of NHS Trusts".

It takes a year for the Treasury to respond to the NAO report (see May 2007, below).

May 2006: Better Hospital Food initiative is scrapped

Five years after its launch (and only two months after the National Audit Office highlighted how important it is to improve the nutritional quality and sustainability of public sector food), the NHS Better Hospital Food initiative limps to a halt and is finally scrapped.²⁷

The Department of Health had set a target that all hospitals should introduce at least three new meals promoted by the initiative, but after five years the Hospital Caterers Association estimates that 25 per cent of NHS trusts had failed to introduce a single dish from the new menus, with less than half offering three of the choices.²⁷

Loyd Grossman, celebrity figurehead of the initiative, commented: "Although we made significant improvements in delivering better quality food to many hospitals, there is still a very long way to go in improving patient nutrition. The government has made no other plans for improving standards and I am extremely concerned that without a strong, and persistent, voice promoting the issue, it will slip through the cracks."²⁷

Simon Williams, policy director of the Patients Association, who sat on the Better Hospital Food Programme panel, said: "There is now nobody to drive this issue forward and in the current climate of NHS budget cuts, food and catering will be hit first which will mean a rapid decline in standards and be very bad news for patients."²⁷

June 2006: Sustainable Procurement Task Force says “it’s not difficult” to achieve sustainable procurement

The Sustainable Procurement Task Force publishes a National Action Plan²⁸ giving recommendations on how the UK government can successfully meet its target of being recognised as amongst the EU leaders in sustainable procurement by 2009. Over the year since its establishment (see above), the task force has published the following:

- UK government Sustainable Procurement Action Plan.
- Local Government Sustainable Procurement Action Plan.
- Costing the future: Securing Value for Money through Sustainable Procurement.
- SOGE (targets for Sustainable Operations on the Government Estate).
- SDiG (an assessment of Sustainable Development in government).

Sir Neville Simms, Chair of the task force, says: “This is the Sustainable Procurement Task Force plan for action. It requires determined effort from the top down throughout both central and local government, the NHS, indeed everyone who either spends money from the public purse or on behalf of the public. The message from the Task Force is simple: this is worth doing, there are clear benefits, it can be done, it is not difficult, it will not cost more in the medium term and will show real dividends in the long term.”²⁸

The action plan has simple recommendations, namely that government should:

1. Lead by example
2. Set clear priorities
3. Raise the bar
4. Build capacity
5. Remove barriers
6. Exploit opportunities

On the third point ‘raise the bar’, Sir Neville Simms’ foreword to the action plan states that “The Task Force believes that existing minimum standards for central government should be properly enforced and extended to the rest of the public sector and that further standards (both minimum and forward-looking) should be developed in the priority areas of spend it has identified.” His list of key sectors includes food. He adds, “The Task Force recommends working with suppliers to identify future needs and to phase out products and services that fall below minimum standards by 2009”.

Progress and take-up is predictably slow. By 2008 (with only a year to go until the 2009 target of the UK becoming a ‘leader’ in sustainable procurement by 2009), the Sustainable Development Commission criticises government’s performance in not meeting its own sustainability targets and calls on the government (yet again) to show leadership by setting more ambitious targets for improving sustainability on the government estate (see October 2008).

During 2006: Healthcare Commission says hospital patients need help to eat meals

In 2006 a Healthcare Commission survey of hospital inpatients in England and Wales found that, “Of those patients who needed help to eat their meals, fewer (58%) said they always received it, down from 62% in 2005. The rise in the proportion of patients saying they did not get enough help from staff to eat their meals is concerning, increasing from 18% in 2005 to 20% in 2006”.²⁹

September 2006: Age Concern shows malnutrition in hospital patients persists

The charity Age Concern publishes a major report into what they call “the scandal of malnourished older people in hospital”.³⁰ In the survey, nine out of ten nurses say they do not have time to provide the elderly with the assistance they need at mealtimes. The Age Concern report *Hungry to be Heard* contains descriptions of food trays left at the bedside, only to be removed untouched half an hour later either because the patient couldn't reach it or didn't have the ability to eat. According to Age Concern, six out of ten older people, who occupy two-thirds of hospital beds, are now at risk of malnutrition while in hospital.³¹

2007

During 2007: Royal College of Nursing launches Nutrition Now! Campaign

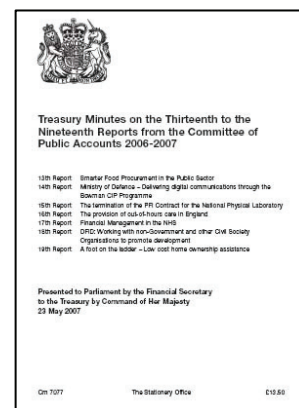
The Royal College of Nursing launches its Nutrition Now! Campaign.³² Professor Alison Kitson, Executive Director for Nursing at the Royal College of Nursing, says: “Good nutrition and hydration are vital for all of us, but they are even more important for people who are ill. Nurses really do care deeply about this but to ensure that good patient nutrition happens, it needs to be a priority for everybody in the system from the catering staff through to chief executives. Only then will nurses be able to break through the obstacles and get the time and resources to ensure better patient care. The time has come to really make this a top priority. Our campaign will highlight the need to tackle this issue and take action now”.

The campaign is supported by publication of a new (and voluntary) set of ‘RCN Principles for Nutrition and Hydration’ giving advice to the nursing profession. The campaign aims to raise awareness of the importance of food and drink to patient health and to ensure that patients get good nutritional care. It runs for a year and a half (until April 2009), when it is cancelled due to lack of take-up.

May 2007: Public Accounts Committee recommends high animal welfare, fair trade and healthy eating standards in the public sector

The Public Accounts Committee meets to examine progress in improving the efficiency of procuring public sector food. They are told by officials giving evidence³³ that:

- All NHS patient menus should be approved by a qualified dietitian, with consideration given to the dietary requirements of the whole inpatient population.
- The Department of Health is committed to producing central guidelines for all food provided.
- The Food Standards Agency has begun work to develop nutrient- and food-based guidance for institutions, to contribute to the Department of Health's consultation on the National Minimum Standards and regulations for adult social care.
- Defra is encouraging public sector bodies to specify higher animal welfare standards through a new model specification clause that promotes farm assurance standards, including higher level schemes such as Freedom Foods, or equivalent. The model clause allows buyers to give a higher weighting for produce meeting higher level standards when awarding contracts, on a value for money basis.



Public Accounts Committee makes food recommendations.

All of these schemes will be voluntary, so there is no guarantee that anything will change.

The committee is also told by the NHS that “The majority of hospitals in England continue to comply with the standards set out by the Better Hospital Food Programme”.³⁴ However, this reassuring statement is clearly at odds with the finding (see above) that 25 per cent of NHS trusts had failed to introduce a single dish from the new Better Hospital Food menus, with less than half offering the target, which was three of the choices.

Helpfully, the Public Accounts Committee states that:

- Public bodies should be able to demonstrate that the animal welfare and food production practices of their suppliers adhere to the standards under which UK producers operate and satisfy themselves that enough independent spot checks and inspections are taking place.
- “Defra, together with the Office of Government Commerce and the three main food procuring departments, should work with the major food and catering firms to develop and promote improved contract management practices. These should, for example, encourage smaller, locally based, producers by breaking contracts into smaller lots, and focus on outcomes such as reducing waste or increasing healthy eating.”
- “Public sector procurers should seek to increase the proportion of food purchased from ‘Fair Trade’ sources that offer the same standard at a competitive price. In some cases fair trade products will be more expensive but departments should work with the supply chain to improve competitiveness while still securing a fair price for producers.”
- The Office of Government Commerce will have a new remit, structure and powers, set out in a paper Transforming Government Procurement, to “drive the step change needed to support better and more effective purchasing by government”.

Unhelpfully, the Public Accounts Committee recommends that government should provide yet more voluntary guidance, toolkits and workshops. This is despite the conclusion that: “The Department of Environment, Food and Rural Affairs has produced overarching guidance and toolkits on sustainable food procurement, but turning these into practical and effective contracting arrangements at the local level has proved less successful.”

October 2007: The Department of Health launches a Nutrition Action Plan

A Nutrition Action Plan from the Department of Health outlines how nutritional care and hydration can be improved in hospitals and suggests five key priority areas through which managers and staff working in health and social care can address this³⁵. Put together by a group of 25 stakeholders and civil servants, led by Ivan Lewis MP, the initiative coordinates existing nutrition initiatives and encourages everyone to work harder on them, and to raise awareness of the importance of nutrition and to think about providing more training, but without additional funds. A Nutrition Action Plan Delivery Board is commissioned to report on their progress, which sets to work in January 2008 and reports in August 2009 (see ‘August 2009’ below).

2008

August 2008: The Department of Health launches online nutrition training

In support of the Nutrition Action Plan, an online e-learning programme is launched to help nursing and other staff learn more about nutrition for hospital patients. Staff do not have to participate, there is no budget to cover staff time, and there is no integration of sustainability.³⁶

July 2008: Cabinet Office Food Matters report promises action

The Cabinet Office publishes *Food Matters: Towards a Strategy for the 21st Century*. It states that: “The public sector in England should be leading by example. More nutritious, environmentally sustainable food will be delivered through a new ‘Healthier Food Mark’ linked to standards for food served in the public sector. The standards will help in delivering better food with existing resources. The scheme will be voluntary initially and piloted within central government, HM Prison Service and NHS services. The government will then consider if compliance should be made compulsory in England for central government and for prisons. As the scheme progresses, all public bodies in England will eventually be encouraged to sign up – ensuring a minimum standard of healthier food across the public sector.”³⁷

A call is issued for hospital caterers to sign up for a pilot project, which will be run by the management consultants Deloitte.

July 2008: BBC reveals hospitals waste £1m worth of food every year

A BBC Freedom of Information request reveals “Huge differences in the way meals are controlled and the proportion of food being thrown away” in different parts of the country. Journalists calculate that the cost of the wastage could pay for 50 extra nurses.³⁸

During 2008: Which? investigates the unhealthy state of hospital food

Which? (formerly the Consumers Association) conducts an investigation and finds that in eighteen of the twenty one hospitals checked, 86% of meals contain too much salt; 67% too much saturated fat and more than half (52%) contain too much fat, tested against government health guidelines. Nikki Ratcliff, from Which?, said: “Hospitals have a responsibility to serve and promote healthy food, so the situation at the moment is farcical. Although we did find some examples of good practice, most hospitals we visited really need to raise their game.”³⁹

October 2008: Nutrition Action Plan Delivery Board reports on ‘awareness raising’

An interim report on the Department of Health’s Nutrition Action Plan⁴⁰ reports on very minor achievements. Almost everything reported as key achievements are seminars, ‘awareness raising’, articles in magazines, and meetings of stakeholder groups. It also describes a series of yet more toolkits and voluntary guidance notes and reports that some funds have been found for a “pocket guide to nutrition”, to be handed out to nurses. No evidence is presented that anything has changed as a result.

2009

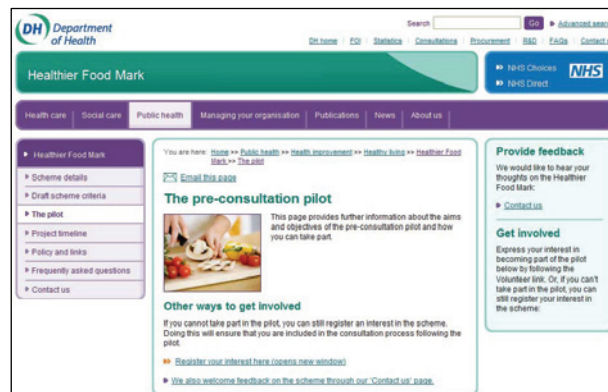
January 2009: Sustainable Development Commission urges government to show leadership

At the start of the year when the government has aimed to become an EU leader on sustainable procurement (see above), the Sustainable Development Commission⁴¹ criticises government’s performance for failing to meet its own sustainability targets. Their review, published in January 2009, states, “Although Ministers have always accepted the need to lead by example, delivery has lagged some way behind.” The report notes that some progress has been made in areas such as transport and energy efficiency, but on sustainable food procurement, it has just a few case studies to report.

January 2009: Hilary Benn sets up Council of Food Policy Advisors

Following the Food Matters strategy report, the Secretary of State for the Environment, Hilary Benn, sets up the Council of Food Policy Advisors which includes specialists in catering, training, sustainability, health and public procurement.⁴² Their remit is to:

- Provide advice on how to achieve sustainable production, distribution and consumption of food, ensuring that it is available and affordable for all sectors of society.
- Consider the effects of global trends on the above.
- Advise the Secretary of State on how to achieve the four objectives for food policy set out in the Strategy Unit's report *Food Matters: Towards a Strategy for the 21st Century*.
- Make practical policy recommendations.



Government prepares for Healthier Food Mark

February 2009: Government drafts Healthier Food Mark guidelines

Officials from the Department of Health and Defra get together to draft criteria for the Healthier Food Mark⁴³ which the Cabinet Office Food Matters team has directed should integrate both health and sustainability criteria. Analysis of the draft standards⁴⁴ shows that a caterer could get government endorsement and a 'gold star' even if they served:

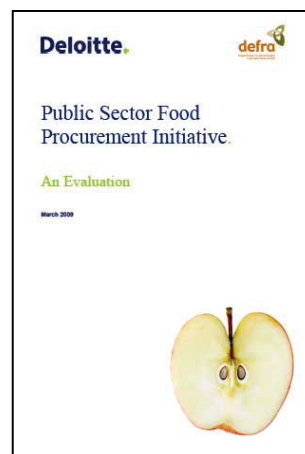
- 70% of fresh vegetables and all processed (e.g. ready-cut or frozen) vegetables produced to no recognised standard of environmental protection.
- All fruit produced to no recognised standard of environmental protection.
- No Marine Stewardship Council certified sustainable fish.
- No tea, coffee, chocolate, sugar or exotic fruit certified as fairly traded, and no implementation of a wider ethical trading policy, such as the ethical procurement guidance explored by the NHS Purchasing and Supply Agency.
- Food procured in a way that has done little or nothing to reduce the environmental impact of food transport.
- Livestock products produced to no accredited standard of animal welfare or environmental protection any higher than the current legal minimum.

There is still no indication of how government thinks this voluntary scheme will be any more successful than previous failed attempts, and there appears to be no extra money on offer.

March 2009: Public Sector Food Procurement Initiative falters

PSFPI comes to an end⁴⁵, having costed £250,000 of taxpayers' money every year, for six years. The initiative is evaluated by the management consultants Deloitte which tells Defra that:

- Take up of the initiative was limited.
- PSFPI is not embedded in the public sector.
- Buyers don't have the skills required to implement the initiative.
- The initiative relies on enthusiastic individuals for success.
- There is a perceived cost barrier.
- Caterers feel that the work is 'low priority'.
- The initiative would benefit from more visible political weight.



Deloitte evaluates Public Sector Food Procurement Initiative

Deloitte recommends to Defra that government intervention should continue because “Sustainable sourcing must become a routine part of contract drafting, not an exceptional best practice example. Achieving widespread take-up of the objectives of the PSFPI is important to generate economies of scale and deliver a sustainable market for suppliers.” In 2009, it remains unclear what has become of PSFPI, but it appears to have been mothballed, to be replaced by the Healthier Food Mark (see 2008: Cabinet Office promises better hospital food).

April 2009: Public health minister commissions sustainable food guidelines for hospitals

Following a visit to a pioneering hospital in Cornwall⁴⁶ where healthy and sustainable food are paramount, the Health Minister Ben Bradshaw commissions yet more guidelines for hospitals to improve their food. He seems unaware both that his own Department of Health is also commissioning voluntary standards for the Healthier Food Mark and that a stack of guidance already exists (see above), which is largely ignored. A committee meets several times and eventually publishes *Sustainable Food: A Guide for Hospitals*⁴⁷ which turns out the most far-reaching sustainability guidance yet seen. By December 2009, in a Sustainable Development Commission report⁴⁸, the guidelines are praised as one of only three government or voluntary sector initiatives to integrate health and sustainability.

However, like all the voluntary initiatives before, the guidelines are largely ignored.

April 2009: Royal College of Nursing Nutrition Now! campaign is scrapped

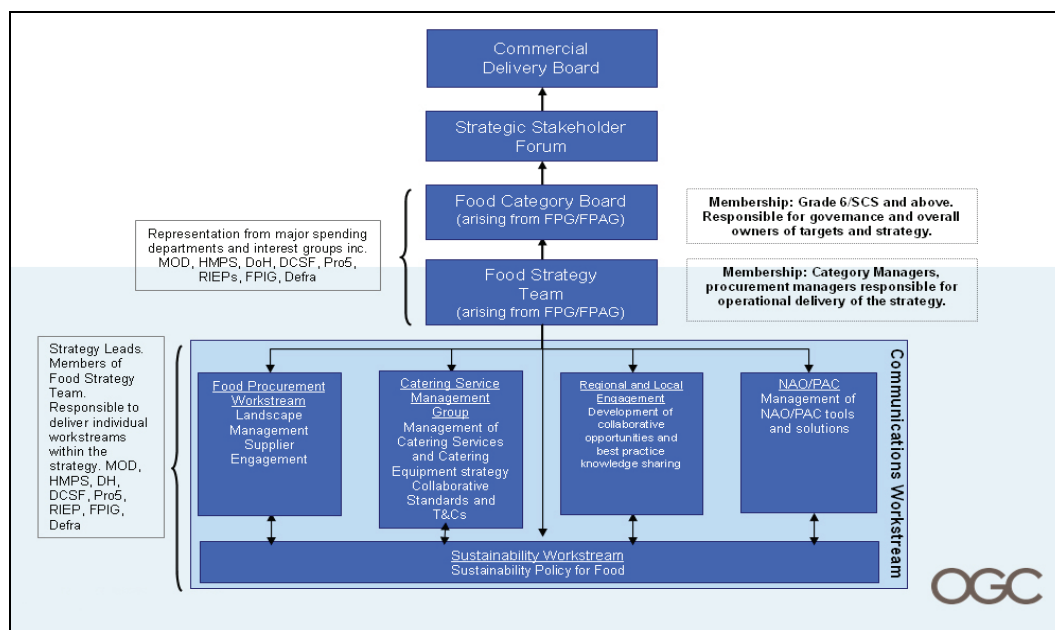
The Royal College of Nursing's Nutrition Now! campaign is cancelled due to lack of take-up.

April 2009: Office of Government Commerce launches collaborative procurement project

The Office of Government Commerce, part of the Treasury, launches a collaborative procurement initiative, the stated aim of which is to:

- Achieve minimum standards and best practice target setting.
- Implement measurement and audit of standards.
- Become the leading expert for new green approaches, technologies and recommendations.
- Improve management systems to provide targeted efficiency savings.

The following diagram for the OGC provides a glimpse of the structures designed to oversee this process, involving at least eight committees made up of senior civil servants and project officers. It seems that no new money is available to the caterers themselves to implement any recommendations or new guidance that may emerge.



Office for Government Commerce launches procurement project

Their remit includes food, catering services and catering equipment supplied to: Ministry of Defence; Prisons; Local Authorities; National Health Service (NHS – including hospitals); Education; and Distribution Hubs.

April 2009: Malnutrition in hospitals and care homes continues to rise

In answer to a parliamentary question, the Department of Health reveals that over 2,600 people have died from malnutrition in hospitals and care homes in England during the past decade.⁵⁰

The Conservatives claim that the government figures suggest an 85% increase in those being discharged from hospitals undernourished since 1997.⁵⁰ The biggest regional increases in hospital deaths from malnutrition have been in the East Midlands (55%) and the South East (27%) and the North-west (23%).

Stephen O'Brien, shadow minister for health, said: "A healthy diet and nutritional care are absolutely crucial if patients are to make a swift recovery, yet the government is presiding over a culture of carelessness and rising deaths."⁴⁹

May 2009: Healthcare professionals condemn NHS nutrition initiatives

The 'groundbreaking' government Nutrition Action Plan (launched 2007, see above) intended to tackle malnutrition and ensure the nutritional needs of older hospital patients were met has had little impact on care, according to a joint survey by Nursing Times and Health Service Journal. Of more than 400 healthcare professionals and NHS managers responding to the survey, nearly one-quarter said the initiative had improved care 'not at all' or 'not much'.⁵⁰

When asked for their opinions on levels of nutritional care and management in the NHS, replies included 'abominable' and 'potentially lethal'. Another respondent said nutrition was 'taking a back seat' compared with other priorities. The plan also called for hospitals to set up nutrition screening groups or support teams. Just over half of respondents said this had happened at their Trust but only 37% said nutritional care was championed at board level. A spokesperson for the Department of Health said the Nutrition Action Plan Delivery Board would 'shortly' submit a final report assessing the success of the plan to ministers.⁵¹

May 2009: Largest catering company in the world supports legally binding standards

In an evidence gathering session of the Council of Food Policy Advisors, Compass Group PLC – the largest caterer in the world, says that obligatory standards are the only way to achieve lasting change to food provided in the public sector. The notes of the meeting report⁵¹: "To see change, procurers need to be mandated to adhere to national standards. Change will require clear mandatory standards, and this will ultimately bring price down through economies of scale. Food procurement hubs and combined buying will ensure that this price advantage is exploited. While the approach to procurement remains voluntary change will not be made as buyers will focus on the impact on the bottom line. There needs to be a common set of standards, which include nutrition, [as well as standards to improve the] sustainability [of hospital food]. Due to an inconsistent approach in the public sector, the changes that have been made in private sector contracts by the big eight services providers towards higher nutritional standards are not consistently reflected in public sector contracts."

June 2009: Celebrity chef Simon Rimmer asked to revamp Liverpool's hospital food

The Liverpool NHS Trust asks celebrity chef Simon Rimmer to re-vamp its hospital menus.⁵²

June 2009: Heston Blumenthal hired to sort out hospital food

Fresh from his work to upgrade the menus of the Little Chef motorway service station chain, celebrity chef Heston Blumenthal announces that he has been commissioned by government to improve hospital food.⁵³ No further details emerge until April 2010 (see below).

August 2009: Government issues tender for voluntary Healthier Food Mark pilot projects

Delayed repeatedly by challenges from industry and public interest organisations, the Officials from the Department of Health and Defra issue a tender for a person to help them manage the pilot projects for the Healthier Food Mark. It appears that the schedule has slipped by nearly a year, and the process will not be complete until late in 2010 (well after the General Election). Deloitte is awarded the contract to manage the pilot projects.

August 2009: Expert nutrition reviewers cite lack of leadership for malnutrition deaths in hospitals

After a number of lengthy delays, the Nutrition Action Plan Delivery Board publishes its progress report. It indicates that an estimated 47,800 people are likely to have died with malnutrition while in NHS hospital care during 2007.⁵⁴ In the report, the Delivery Board recommends as a key priority that the government should “clarify (nutrition) standards and strengthen inspection and regulation” to address this problem.

The Nutrition Action Plan Delivery Board’s report concludes with this recommendation: “We recommend that the government, the Department of Health, regulatory bodies, service providers, professional bodies and campaigners accept direct responsibility for ensuring that no-one’s life is unnecessarily lost, shortened or damaged because of any failure to fully consider and meet their continuing needs for, and right to, appropriate nutrition.” The government takes until February 2010 to respond.

August 2009: University researchers say hospital food is worse than prison food

Bournemouth University undertakes research into hospital food and announces that hospital food is worse than prison food.⁵⁵ The reasons, in a report called *Hungry in hospital, healthy in prison?* sound horribly familiar:

- Poor food quality and nutritional content.
- Poor food service, especially for patients without the ability to feed themselves.
- Poor staff training.

September 2009: Council of Food Policy Advisors recommends legally binding standards

The Council of Food Policy Advisors, which advises Defra and the Secretary of State for the Environment, publishes its first major report.⁵⁶ Among its three headline recommendations, the Council calls for higher health and environmental standards for public sector foods, stating that: “Mandatory food based standards should be developed for application in different settings (including hospitals, prisons, care homes, public sector canteens) based on a healthy low impact diet by 2012. The introduction of mandatory standards ensures that health and sustainability count against the bottom line and levels the playing field for contractors and procurers.”



Council of Food Policy Advisors publishes its findings

October 2009: Defra ignores recommendation to adopt legally binding standards

In its response to the Council of Food Policy Advisors, Defra ignores the recommendation to adopt mandatory health and environmental standards for public sector food.⁵⁷ It fails to mention the term mandatory at all, and simply says that “standards are important”, commercial agreements need to be consolidated, regional procurement hubs could be developed, and that training has a useful role to play.

Defra continues to champion the voluntary and flawed Healthier Food Mark, stating: “We are now aiming to simplify the mark, and are carrying out a trial to look in more detail at the various criteria which stakeholders have proposed to determine what the mark should look like, before starting the formal pilot when we seek to test organisations’ ability to comply with the Healthier Food Mark itself.”

Defra gives no indication of how this voluntary programme will be any more successful than the previously failed and expensive PSFPI and Better Hospital Food Initiatives. The only difference appears to be that this time there’s no celebrity chef.

2010 to 2013: Relying on ineffective voluntary initiatives continues

As the decade draws to a close, government seems no closer to having achieved either of its priority aims: to improve nutrition in hospitals, and to become an EU leader in sustainable procurement by the end of 2009. As the year 2010 begins, there is scant evidence that the government has learned from the plethora of failed voluntary initiatives witnessed during the lost decade of hospital food failure.

2010

February 2010: Almost 50,000 patients dying with malnutrition in the NHS

Shadow Health Minister Stephen O'Brien highlights a new Government report that reveals that almost 50,000 people a year could be dying with malnutrition in NHS hospitals in England. This is 200 times as many cases per year than the Government had previously admitted.⁵⁸

March 2010: Government advisor says hospital food standards must be made law

Professor Tim Lang, food expert and member of the Government's Council of Food Policy Advisers, announces that hospital food should be required to meet legally binding standards.⁵⁹

April 2010: Nick Herbert MP launches the Honest Food campaign

Shadow Farming Minister Nick Herbert MP launches the Honest Food campaign⁶⁰, calling for more transparency in the way that the NHS buys food. He encourages hospitals to buy more local food, so long as there is "no overall increase" in cost.

Following this announcement, Nick Herbert proposes the creation of a 'Code for Sustainable Food'⁶² which would include a 'clear, simple and workable set of standards' for public sector institutions, including hospitals, to voluntarily adopt. He promises that a Conservative government will ensure that Whitehall departments and their agencies buy more food which meets British standards of production 'wherever this can be achieved'.

Kevan Wallace, Chair of the Hospital Caterers Association, says that the plans are unrealistic, and cannot be achieved without government spending more money on hospital food.⁶¹

April 2010: Age UK funds a research project to improve the taste of hospital food and tackle malnutrition amongst patients

Age UK launches a project with the University of Reading to improve the taste of hospital food and tackle malnutrition in elderly patients.⁶² Celebrity chef Heston Blumenthal is hired as a consultant to lead the project and experiments with adding natural 'flavour enhancers', referred to as 'umami' (savory taste), to meals in order to increase their appeal and encourage patients to eat more.

Dr Lisa Methven, lead researcher at the University of Reading, explains that malnutrition among the elderly "can result in longer periods of illness, slower recovery from surgery and infection and increased mortality rates".⁶⁴

A year into the project Blumenthal concludes that popular, healthy hospital food does not need be expensive. His team found that adding seaweed to dishes enhanced its flavour and could be used as a natural alternative to salt.⁶³

May 2010: Evidence emerges that hospitals can save money by serving better food

Nottingham University Hospital Trust announces that it has made a daily saving of £2.50 per patient, as well as a reduction of 150,000 food miles a year, by switching to fresh local ingredients.⁶⁴ Trust catering manager John Hughes says that as well as cutting costs, the switch has also helped to support local suppliers and communities. Hughes believes that the NHS could save £6m a year if all hospitals in the East Midlands made the same switch, and a national saving of £400m a year if spread across the entire NHS.⁶⁵

June 2010: Joan Walley MP introduces the Public Bodies (Sustainable Food) Bill to Parliament

Joan Walley MP introduces the Public Bodies (Sustainable Food) Bill to Parliament⁶⁶, in an effort to establish mandatory health, environmental and ethical standards for food served in England's public sector institutions including hospitals. Referring to the Good Food for Our Money campaign's 2010 report "Yet more hospital failure"¹ Walley declares that legislation is needed to ensure that public sector food bought with taxpayers' money is "healthy and leads by example to protect the environment and promote ethical practice".⁶⁷

Ms Walley's Bill is supported by the world's biggest contract caterer Compass Group PLC, which stated in 2009 that mandatory public sector food standards would simplify the procurement process and bring down costs.⁵²

August 2010: Age UK continues campaign to tackle malnutrition amongst older patients

Age UK publishes *Still Hungry to be Heard*⁶⁷ which makes a number of recommendations to tackle malnutrition amongst elderly hospital patients, which is calculated to cost the NHS at least £7.3 billion every year. The report calls on government to require hospitals to record malnutrition rates, and on the Care Quality Commission (CQC) to investigate which hospitals are taking action to prevent malnutrition. It also encourages hospitals to adopt its 'seven steps for action', which include: doing more to listen to patients, their relatives and carers; encouraging ward staff to be more 'food-aware'; ensuring that patients are assessed for the signs or risk of malnourishment; introducing 'protected mealtimes'; implementing a 'red tray' system, and training volunteers where appropriate.



Age UK seeks to end malnutrition amongst elderly hospital patients.

October 2010: Study finds shocking levels of salt and fat in food served to children in hospital

Sustain's Good Food for Our Money campaign and Consensus Action on Salt and Health (CASH) investigate the nutritional quality of food served to children in hospital.⁶⁸ They find many examples of unhealthy meals which would be banned from being served in schools because they do not comply with mandatory nutritional standards for school lunches. In one instance, a chicken tikka masala dish contained 14 times more salt (2.20g vs. 0.15g/portion) and 8.5 times more saturated fat (6.0g vs. 0.7g/portion) than would be permitted in a similar meal in school.

The Department of Health responds to the research by stating that "tools are available to support (hospital) caterers in assessing the nutritional content of meals".⁶⁹

December 2010: Biggest NHS caterer says it will improve sustainability of its food

NHS Supply Chain publishes a report outlining its objectives for improving the sustainability of its catering, but does not require its food to meet minimum nutritional, environmental or ethical standards.⁷⁰ Primarily, the company aims to reduce packaging, increase recycling and reduce emissions from its distribution.

February 2011: Soil Association report draws public attention to the sorry state of hospital food in England

The report notes that current standards of hospital food are contributing more to a 'disease service' than a 'health service', but recognises that progress is being made in a few hospitals.⁷¹

The report recommends that hospital Trusts publish information about patient satisfaction, food budgets and any independent verification of food standards. It encourages public sector organisations, including hospitals, to voluntarily adopt food standards included in the 'Food For Life Catering Mark', and calls on patients to make more complaints about poor patient meals.

Its conclusions are based on a survey which finds that nearly two thirds (63%) of patients have food bought in to their ward for them by friends and family, over a third (35%) say they think hospital food is of an unacceptable standard and over half (53%) would not be happy serving the meals they were given to a child.

February 2011: Eminent cardiologist voices concerns about nutritional quality of patient meals

Cardiologist and anti-obesity campaigner Dr. Aseem Malhotra laments the poor nutritional quality of patient meals in England and calls for the introduction of mandatory hospital food standards.⁷² Dr Malhotra says that hospital food might be causing harm when it should be helping patients to recover. He also writes procurers of hospital food have a responsibility to lead by example because many patients are in hospital as a result of their poor diet.

Celebrity chef Jamie Oliver joins Dr Malhotra's call for action, saying "I can never understand why places that are supposed to care for people and make them well generally fail to provide the nutrients that will help the healing process. It seems completely crazy to me."⁷¹

June 2011: Government Buying Standards for public sector food are finally published

Defra publishes Government Buying Standards (GBS) for all food served in 'central government', including government departments, prisons and parts of the armed forces.⁷³



Government hails fish standard for public sector food

In a major step forward, the GBS include **mandatory** nutritional and environmental criteria including standards to limit the amount of saturated fat and salt in food and ensure that fish is sustainable. They also specify that more food should be grown to higher environmental accreditation e.g. certified to be organic. The standards also mandate that food meets UK or equivalent standards of production 'subject to no overall cost'.

GBS are welcomed as a step in the right direction and, as a result of a hard-fought campaign by a number of environmental and marine organisations, include robust criteria for fish which mirrors the standards adopted for fish served at the 2012 London and Paralympic Games. GBS will not be extended to the NHS, but are encouraged to adopt them.

Which? concludes that, while a welcome initiative, GBS are not nearly as ambitious or as far-reaching as they could be, and notes that excluding hospitals represents a missed opportunity to improve the "nutritional quality and sustainability of many people's food choices..... and set an example to food provision in other areas, showcasing best practice."⁷⁴

Which? also criticises the nutritional criteria in GBS for lacking consistency and being limited in scope. For example, it questions why GBS only require half, and not all, of meat, bread, breakfast cereals, soups, cooking sauces, ready meals and pre-packed sandwiches to meet salt reduction targets. It also questions why other key food groups have been excluded from the salt and saturated fat limits entirely.

August 2011: England lagging behind Scotland and Wales in improving hospital food

Which? publishes its 'State of Our Plates' report⁷⁵, comparing the nutritional standard and quality of public sector food served in England, Scotland, Wales and Northern Ireland.

England is found to have the worst hospital food in the UK and is criticised for not having introduced 'official standards' for patient meals. Scotland is judged to have the best hospital food, and the Scottish government is praised for having set standards for food served to both patients and their visitors.



Hospital food in Wales and Scotland is better than in England

September 2011: BBC airs James Martin's 'Operation Hospital Food'

The BBC airs a six-part TV series which details the successful changes James Martin makes to the catering at Scarborough General Hospital. Despite his achievements, the government does not propose to apply the same changes to all hospitals.⁷⁶

October 2011: Wales follows Scotland's example and introduces mandatory hospital food standards

The Welsh Government joins the Scottish Government in setting mandatory nutritional standards for patient meals.⁷⁷

After admittance, hospital patients are first screened to decide whether they are 'nutritionally at risk' or 'nutritionally well'. They are then assigned a menu which is tailored to their nutritional requirements. Meals served to nutritionally well patients meet standards designed to bolster their health e.g. limits are placed on the amount of salt and saturated fat, and nutritionally at risk patients are served food intended to boost their energy e.g. include more calories.

October 2011: Defra fails to meet Government Buying Standards

Farming Minister Jim Paice MP is criticised for failing to apply GBS to the food served at Defra, despite the fact that he had personally declared the standards to be mandatory for all government departments.⁷⁸ Figures show that Defra failed to meet a number of criteria included in GBS, including a requirement to ensure that 10% of its food meets higher environmental accreditation.⁸¹

The discovery demonstrates that mandatory standards need to be backed by independent assessment and enforcement, as is the case for school food,

October 2011: Care Quality Commission assesses prevalence of malnutrition among elderly patients

The Care Quality Commission (CQC) finds that seventeen of the hundred hospitals assessed were failing to provide food which meets patients' basic needs.⁷⁹ Their assessment finds that patients "were not given the help they needed to eat", "were interrupted during meals", that their "needswere not always assessed properly", and "were not able to clean their hands before meals".

The assessment also found that seventy three of the hospitals were meeting government expectations for food quality, but the assessments are not measured against clear criteria, including nutritional standards.



Hospital food service failing to meet patients' needs

October 2011: NHS found to waste appalling amount of food

SSentif, an independent data management and analysis specialist, analysed hospital food data from two hundred NHS Hospital and Mental Health Trusts, and found that approximately one out of ten hospital meals are thrown in the bin, producing an estimated food waste bill of more than £26 million a year.⁸⁰ Seven hospital Trusts reported that at least 20% of all meals served to patients remain untouched, with Ipswich Hospital NHS Trust wasting 29% of patient meals.

Judy Aldred, managing director of SSentif states that "with no minimum standard[s] set by government, [there are].... huge discrepancies [in the amount of waste] between organisations [hospitals]"⁸².

December 2011: Defra appoints contractors to explore how Government Buying Standards could apply to hospitals

Defra appoints public sector food consultant Bill Kirkup to identify if Government Buying Standards can be applied to hospitals, at a cost of £25,000⁸¹ (see October 2012).

December 2011: Prince Charles encourages more hospitals to improve their food

Prince Charles praises a handful of hospitals for the progress they have made in improving patient meals, but notes the need for higher quality food throughout the NHS.⁸²

During an interview with the BBC Radio 4 Today programme, Health Minister Simon Burns MP states that cost should no longer be used as an excuse for poor hospital food.⁸³ He refers to an earlier investigation by the Audit Commission²⁶ which found no correlation between the amount of money spent on public food and its quality.

January 2012: Food served at Defra better than hospital food

Defra publishes information about its catering, which shows that all the food it buys finally meets Government Buying Standards.⁸⁴ This means, for example, that all fish served to Defra employees, including Ministers, is certified to be sustainable. Government's refusal to extend GBS to hospitals means that food served at the Department is likely to be healthier, better for the environment and more ethical than food served to patients.

May 2012: New research shows hospital food to be unhealthier than fast food

Research by Sustain's Campaign for Better Hospital Food finds that many hospital meals are unhealthier than food served in fast food restaurants like McDonalds, Burger King and Kentucky Fried Chicken (KFC).⁸⁵ The analysis of twenty five hospital ready meals uncovered a number of shocking findings, including that a McDonalds Big Mac is healthier than 75% of meals served to hospital patients, and that a curry served to NHS patients had six times more fat than a KFC Zinger Burger with fries.

May 2012: Health Secretary Andrew Lansley says hospitals need to adopt Government Buying Standards

Responding to a Sun article about unhealthy hospital food, Health Secretary Andrew Lansley says that hospitals should adopt Government Buying Standards to “prompt better nutrition” for patients.⁸⁶ He announces that the Department of Health is working with Defra “on a range of projects to demonstrate precisely how buying standards in hospitals can be used...to deliver better nutrition for patients”. He also states that hospitals need to use a “personalised approach” to support progress in preventing and managing malnutrition amongst patients.⁸⁸

June 2012: The Department of Health and NHS Supply Chain establishes a £300 million fund to help the NHS to buy in bulk

NHS Supply Chain announces a joint £300 million initiative with the Department of Health, which is intended to help hospitals to buy goods, including food, in bulk.⁸⁷ It is hoped that the initiative will save money by creating economies of scale, but misses the opportunity to improve food standards,

July 2012: British Dietetic Association publishes ‘the Digest’ for patient nutrition and hydration

The British Dietetic Association (BDA) publishes formal guidelines for food and drink served in the UK, including food served to patients in hospital.⁸⁸

The BDA concludes that patients should be assigned as either ‘nutritionally vulnerable’ e.g. those who may have a poor appetite and/or an inability to eat a sufficient amount of food, or ‘nutritionally well’ e.g. those who have normal nutritional requirements and appetite.

October 2012: Government announces “new principles” for hospital food in England

Newly appointed Health Secretary, Jeremy Hunt MP, publishes eight ‘principles’ for hospital food, which are intended to clarify what patients can expect in terms of quality, nutritional content and choice.⁸⁹ They specify that hospital food should be “nutritious and appetising”, that food and drink should be available at all times and that hospitals should promote healthy diets to staff and visitors. The principles also state that hospitals should adopt Government Buying Standards ‘whenever possible’.

Jeremy Hunt also announces the creation of inspection teams to monitor the quality of patient meals. At least half the membership of these teams must comprise patients, and the results of inspections are to be published online. The move is heralded by The Sun as a victory for the Campaign for Better Hospital Food.⁹⁰

October 2012: Official figures reveal a miserly rise in spending on hospital food

Government statistics show that the average cost of feeding one patient per day has risen by only 2%, from £8.58 in 2010-11 to £8.77 in 2011-12.⁹¹ The figures also reveal significant 'regional variation in costs', with the biggest spending hospital paying £15.65 per patient per day, almost double the average expenditure.

Jeremy Hunt responds to the figures by saying "what's not clear is whether when the price drops, quality drops too. I want to find out if there is a link between what is spent and the quality of food delivered; and if not, why not".⁹⁴

October 2012: Defra publishes results of its investigation into hospital food and Government Buying Standards

Bedford, Chesterfield Royal, Darlington Memorial and Royal Surrey hospitals are selected for a pilot project to assess how easily Government Buying Standards can be adopted by hospitals.⁹² The hospitals were found to be compliant, or identified no significant obstacles for compliance, with half of the criteria included in Government Buying Standards, but faced 'challenges' in meeting the food criteria on higher environmental standards and lower salt and saturated fat targets.

The report's authors advise that Defra should promote the availability and visibility of products complying with Government Buying Standards, and revise some of the criteria so that they are more specific and easily understood.

November 2012: Hospital food found to have 'shocking' standards of animal welfare

A survey by the RSPCA and Sustain's Campaign for Better Hospital Food finds that approximately seven out of ten eggs served by English hospitals are from hens kept in cages, and approximately 80% of chicken and pork is from animals reared in conditions that do not meet RSPCA welfare standards.⁹³ The survey also identifies major regional variations in the animal welfare standards of hospital food served in England.

The Department of Health responds to the findings by saying "we want the NHS to serve food for patients that's not only tasty and nutritious, but also sourced ethically. Individual hospitals decide where they buy their food from, but we are encouraging them to adopt the government's buying standards for food".⁹⁶

December 2012: MP calls for mandatory animal welfare standards for hospital food

Neil Parish, MP for Tiverton and Honiton and Chair of the All Party Parliamentary Group for Animal Welfare, opens a Westminster Hall Debate calling for the introduction of mandatory animal welfare standards for hospital food in England.⁹⁴

Health Minister Dan Poulter MP responds to Neil Parish by saying that the government will offer hospitals extra payments if they adopt Government Buying Standards.⁹⁵

December 2012: Government spends £141,800 of taxpayers' money on Government Buying Standards

In response to a Parliamentary Question⁹⁶ by Joan Walley MP about Government Buying Standards, Defra Minister Richard Benyon MP states that the department has spent £141,800 on devising and publishing the standards, and helping public sector organisations in central government to adopt them.

January 2013: Department of Health denies mandatory hospital food standards are needed

The Department of Health responds to calls for it to introduce mandatory hospital food standards by stating "discussions have taken place on whether it would be more effective to make [hospital food] standards mandatory or for local consideration. The long-term aim is for the standards to be adopted by the NHS across the board, but this can be achieved by providing the right environment for NHS trusts to adopt them, rather than simply enforcing them as mandatory".⁹⁷

January 2013: NHS Sustainable Development Unit seeks new ways to improve sustainability of NHS, including its food

The NHS Sustainable Development Unit launches a consultation about what actions need to be taken to improve the sustainability of the NHS, including the sustainability of the food it serves to patients.⁹⁸ David Pencheon, Director of the NHS Sustainable Development Unit says "*we recognise that gradually improving efficiency alone is not enough if we are to meet climate change act targets. Transformational change is needed*".⁹⁹

February 2013: Nutrition Advocates programme launched

The Nutrition Advocates programme¹⁰⁰, which is backed by the Association of Care Catering (NACC) and the Hospital Caterers Association (HCA), aims to raise awareness of the importance of nutrition, including hydration, in all social and health care settings throughout the UK. As part of the programme, volunteer 'nutrition advocates' will be appointed from within the NHS to help monitor what patients are eating and bring about any necessary changes.

Appendix

List of Health Secretaries, 1992 to present

William Waldegrave, 2 November 1990 - 10 April 1992
Virginia Bottomley, 10 April 1992 - 5 July 1995
Stephen Dorrell, 5 July 1995 - 2 May 1997
Frank Dobson, 3 May 1997 - 11 October 1999
Alan Milburn, 11 October 1999 - 13 June 2003
John Reid, 13 June 2003 - 6 May 2005
Patricia Hewitt, 6 May 2005 - 27 June 2007
Alan Johnson, 28 June 2007 - 5 June 2009
Andy Burnham, 5 June 2009 - 11 May 2010
Andrew Lansley, 11 May 2010 - 4 September 2012
Jeremy Hunt, 4 September 2012 – incumbent

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