

Date: 03/09/2014

FREEDOM OF INFORMATION ACT 2000 - Ref: FOI/011772

With reference to your FOI request in connection with 'Patient Association - Nutrition and hydration' please see response below.

Please note that attachments are not on the website for a copy of this information e-mail FOI@dgh.nhs.uk quoting the FOI reference number and the information will be forwarded to you.

Policy and governance

1. Confirm or deny whether you have the following policies: (Please submit copies)

Nutrition and hydration policy?

Not a specific policy however this is covered within the following policies & guidelines (attached):
Healthy Eating Policy, Policy Guidelines for Nutritional Screening, Fluid Balance Standard Operating Procedure, Protected Mealtime & Red Tray Policy, numerous guidelines for enteral nutrition (attached).

Protected meals policy?

Yes

Nil by mouth policy

No

2. Confirm or deny whether (Submit any documents in support as applicable)

You have a designated Board member who is responsible for Nutrition and Hydration care including help with eating and drinking

Yes. Nursing Director, Denise McMahon

You discuss nutrition and hydration care related concerns within your Trust at Board meetings?

Quality Priority's 4 & 5 (attached) & will also be discussed as part of the matron presentation, on occasions

All staff are given mandatory training on healthy nutrition and hydration and help with eating and drinking?

New band 5 staff have nutritional screening and nutritional care training, there is also a nutrition course for established nurses which covers oral and artificial nutritional support and we also run a nutrition day for higher support workers. Staff also have food handling training

You have mechanisms to collect real time feedback from patients regarding their nutrition and hydration care?

Audits are carried out by catering and patient satisfaction audits are carried out by the Trust.

Mealtime audits (attached) & patient experience surveys are collected Trustwide.

During hospital stay

3. Confirm or deny whether (Please submit any guidance documents)

Regular assessment is carried out for patients regarding nutrition and hydration during their stay in the hospital

This is carried out and audited as part of (Nurse Care Indicator) NCIs and protected meals audits
Weekly FBC audit, weekly MUST screening/reassessment & captured as part of the NCI's (all attached).

Information is sought from patients regarding their diet and weight including their preferences/likes/dislikes

This forms part of the admission process.

There is also a Take the Time Tool for patients with confusion/dementia

Clear information is given to patients about accessing meals and drinks during and out of meal times while they are in hospital

There are folders available in the patient's bays and individual folders in single rooms outlining menu options including cultural meals.

Welcome booklets provided to each patient on admission (attached) advise that hot & cold drinks are served mid morning, mid afternoon and in the evening after dinner. They can also be obtained at other times at individual request. If patients have any special dietary requirements they can advise the nurse, e.g. gluten free, vegetarian or halal meals.

Clear information is given to patients about accessing oral supplements and/or tube feed if prescribed while they are in hospital

Oral nutritional supplements are added to the patient's drug charts so that they can be dispensed with their medication. In addition all patients appropriately referred to the dietitians for oral nutritional support have a nutritional treatment plan, aim of treatment and appropriate follow up while an inpatient. Tube feeds are prescribed on an enteral feeding introduction regimen form; this is discussed with the patient whenever appropriate.

There are clear methods to identify people who need support with eating and drinking

This is done via the red tray system and nutritional screening on admission & on reassessment.

There are robust procedures to ascertain that they are receiving the help needed.

This is audited via the protected mealtime audits and Nursing Care indicators, & patient experience surveys

At discharge: (Please supply any guidance documents relating to these)

4. What information relating to patients' nutrition and hydration needs (including supplements and tube feed) is given to them at the time of discharge? (E.g. Verbal advice about diet and lifestyle, written advice about diet and lifestyle, Links to websites for advice about diet and lifestyle, written advice on taking oral supplements or the use of tube feed)

Patients seen by a dietitian would be given appropriate information; this is done on an individual basis and includes all of the above depending on the patient and their circumstances.

Lifestyle advisory nurse for specialist units (Stroke & Cardiology) provide written & verbal advice re diet & lifestyle (to follow) Verbal advice from nursing staff where supplements are prescribed as TTO

5. What information relating to patients' nutrition and hydration needs is sent to their GP after the discharge of the patient from the hospital?

Prescriptions requests for supplements and artificial enteral feeding would be sent to GPs. If a patient was seen as an outpatient a letter would be sent to the GP outlining the consultation nutritional assessment and action plan. If a patient was on supplements in hospital this information should be included in the patient's discharge letter. Patients most at nutritional risk will be referred to our community dietitians for continuing care. GP would be notified when patients discharged home with supplements as a TTO or on enteral feeds.

6. What information relating to patients' nutrition and hydration needs is sent to their care home after the discharge of the patient from the hospital?

On discharge to a care home, a discharge letter is completed which requires the nursing staff to complete a section on nutrition & hydration (attached).

Dieticians would provide specific information to homes, also.

Patient safety

7. In the past three years have you had any of the following incidents recorded?

Incident type	Numbers	Details of the incident	Age of the patient
Dehydration	Unable to search directly on DATIX system		
Incorrect diet e.g. causing allergy or unmodified	No category on DATIX system to search		
Incorrect artificial feed	No category on DATIX system to search		
Choking	None identified		
Catering errors Unable to search by this so search carried out for: DATIX category=Delay/failure to respond to catering request	21	Severity 18 no harm 2 minor 1 moderate	
Nil by mouth – patient fed	No category on DATIX system to search		
Nil by mouth –prolonged periods of time	No category on DATIX system to search		
Lack of nutritional assessment Unable to search by this so search carried out for: DATIX category=Inadequate maintenance of Nutrition	42	Severity 1 Near Miss 30 No harm 9 Minor 2 Moderate Unable to search for specific detail	Unable to search directly
Gaps in nutritional care due to transfer of care	No category on DATIX system to search		
Nutrition status identified as a contributing factor in the development of pressure sores	No category on DATIX system to search		

Where indicated above that the Trust's electronic incident reporting system DATIX does not hold the information requested, this information would be held in individual patient case notes.