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What Matters to Me?

Patient Dining

Proud to Care: Perfect Dining Week at Central
Manchester University Hospitals NHS Foundation Trust



@CMFTNHS





What Matters to Me?

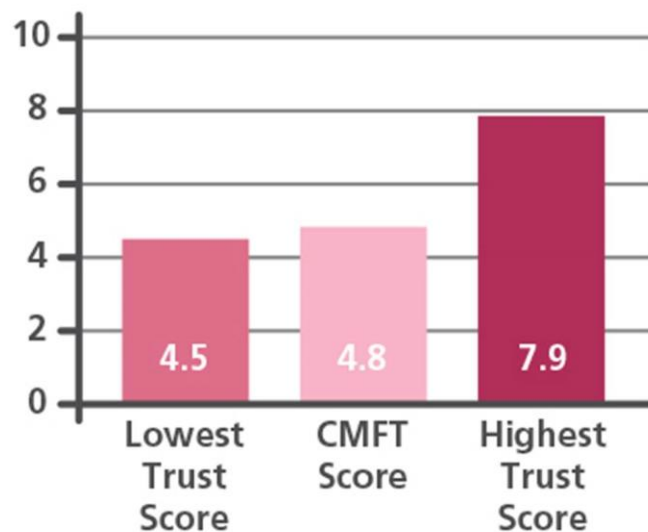
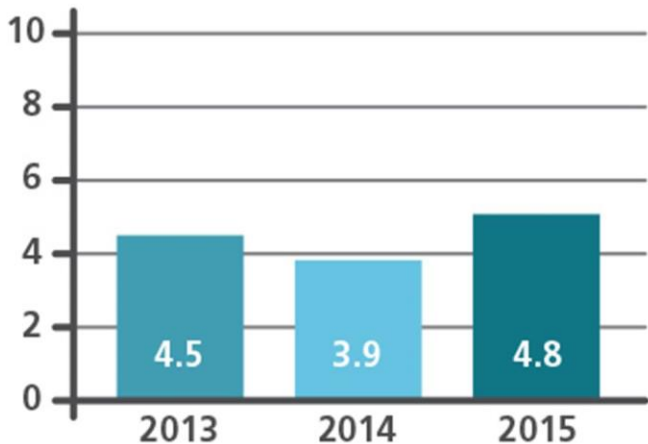
Patient Dining





What are our patients telling us?

National Inpatient Survey (2015)
Q21: How would you rate the hospital food?





What are our patients telling us?

Overall Trust Nutrition Scores April 2014 – July 2016





Perfect Dining Week

Perfect Dining Week was scheduled and undertaken between 4th – 10th July 2016.

The intention of **Perfect Dining Week** was to **deliver a perfect, personalised dining experience to all patients at every meal throughout the week and beyond**, developing long term learning that would inform future continuous improvements.





Perfect Dining Week

- Engagement
- Planning
- Communication and Briefings
- Preparation
- Co-ordination and the Command Centre
- Data Capture
- Divisional Activities
- Atrium Displays
- De-brief Meetings





Divisional Activities





Data Capture

Delivery of Food Process:

- Menu submission time compared to agreed timeline
- Number of food items 'picked'
- 'Picking Error Rate'
- Missing items (i.e. unavailability of food item)
- Orders of food related items (cutlery, trays), snack box orders and timeliness of snack box delivery

Quality Standards:

- Process, leadership, care standards were assessed



Patient Experience:

- Every area was asked to survey 5 patients after every meal by asking 11 patient experience questions
- Change-1-Thing





Data Capture Tool

10 July 2016 10:46
Perfect Dining Week 2016
Central Manchester University Hospitals **NHS**
NHS Foundation Trust

09:17: We have received 273 out of 285 expected surveys.
Last Patient feedback survey from C Broome (TGH Ward 1), Last Meal Process Checklist Survey from Ward 55

Ward / Area Breakdown															
CSS	DMACS	RMCH	SMS	SMH	Surgery	TGH	REH								
Adult HDU	✓ 5 13	AM1	✓ 5 26	Ward 75	✓ 5 27	AM3	✓ 7 27	Ward 47A	✓ 2 2	MVC	✓ 5 22	TGH Ward 1	✓ 5 13	Ward 55	0 11
TGH HDU	✓ 2 2	AM2	✓ 5 27	Ward 76 SS	0	AM4	✓ 5 27	Ward 47B	✓ 5 17	HNSU	✓ 10 16	TGH Ward 2	✓ 5 21		
		MRI AMU F	✓ 5 27	Ward 77	✓ 5 16	Ward 3	✓ 5 26	Ward 62	✓ 5 25	ESTU Fema	✓ 6 23	TGH Ward 3	0 28		
		MRI AMU M	✓ 5 27	Ward 78	✓ 5 26	Ward 4	✓ 5 27	Ward 64 C	✓ 5 7	ESTU Male	✓ 6 22	TGH Ward 4	✓ 5 30		
		Ward 5	✓ 5 27	Ward 81 Bur	✓ 5 7	ACC (Ward	✓ 5 17	Ward 65	✓ 5 25	Ward 8 HPE	✓ 5 26	TGH Ward 6	✓ 6 32		
		Ward 15	✓ 5 22	Ward 82 PHU	✓ 2 2	Ward 37A	0 4	Ward 66	✓ 5 26	Ward 9	✓ 5 25	TGH Ward 12	✓ 5 10	Other Areas	
		Ward 45	✓ 5 27	Ward 83	✓ 2 2	Ward 36 Rev	5 21			Ward 10	✓ 5 20	TGH AMU	✓ 5 23	Gorton F	0
		Ward 46	✓ 5 28	Ward 84 IP	✓ 5 18	Ward 37 Rev	5 26			Ward 11	✓ 6 17				
		Ward 30	✓ 6 16	Ward 84 Tra	✓ 2 1	Ward 44	✓ 5 16			Ward 12	✓ 5 22				
		Ward 31	✓ 5 23	Ward 85	✓ 4 4	CSICU	✓ 5 10			Ward 14	✓ 5 13				
		Ward 32	✓ 5 15							ETCSS	✓ 6 22				
		OMU	✓ 5 9												

Dining Audits	55	93%
Patients Dining	1038	

4th - 10th July 2016

	0%	20%	40%	60%	80%	100%
Enjoyed Meal	90%					
Offered Drink	93%					
Reasonable Choice	95%					
Received Ordered Meal	94%					
Presentation Satisfaction	88%					
Quality Satisfaction	94%					
Temperature Satisfaction	94%					

Last Patient Comment: (Bonne Sante) - SMS: CSICU: The patient thinks that we have a very good choice of foods on the menu. The only thing that is bad is the toast it is not very nice and it is very dry.





Real Time Quality Standards

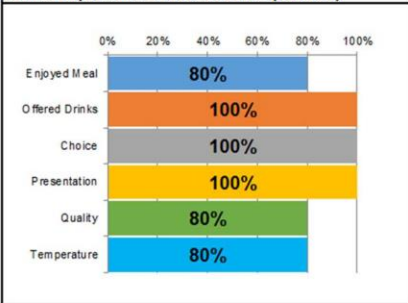
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Select Area: **ACC (Ward 35)**

Patients Eating: 17
Hospital Corporate Area: SMS
Meal Service Type: Bonne Sante
Survey Entered By: Ajitha Aju
Survey Contact Number: 64200

Patient Experience Questions - ACC (Ward 35)



Dining Experience - Meals Process Checklist - ACC (Ward 35)			
Q1: Meals Process	Achieved	Q13: Presentation standards	Achieved
Q2: Protected Mealtimes	Achieved	Q14: Correct choice delivered	Achieved
Q3: Preparation and Presentation	Achieved	Q15: Meals accessible	Achieved
Q4: Professional Communication	Achieved	Q16: Drinks offered	Achieved
Q5: Infant Feeding facilities	Not Applicable	Q17: Patients Prepared	Achieved
Q6: Food Temperature Checks	Not Applicable	Q18: Assistance given	Achieved
Q7: Clean probes used	Not Applicable	Q19: Nutrition records updated	Not Achieved
Q8: Timely process	Achieved	Q20: Red Trays used appropriately	Not Applicable
Q9: Clean Hands	Achieved	Q21: Patient Satisfaction	Achieved
Q10: Timely Delivery	Achieved	Q22: Timely collection of trays	Not Achieved
Q11: All grades of staff involved	Achieved	Q23: Area left clean	Achieved
Q12: Blue Aprons worn	Achieved		

Comments from Meals Process Checklist

Patient on red tray refused breakfast.
Plates and cups were cleared at 09:00



Results

- Process: 21,724 meals delivered
- Quality Standards: 1,174 audits completed
- Patient Experience: 5,870 patient feedback

Overall Patient Experience Quality Score

Baseline Data (22/06/16)	Breakfast	Lunch	Dinner
	90%	87%	90%
Perfect Dining Week	Breakfast	Lunch	Dinner
Monday	94%	92%	92%
Tuesday	94%	92%	90%
Wednesday	95%	94%	94%
Thursday	96%	96%	90%
Friday	95%	93%	91%
Saturday	95%	93%	92%
Sunday	96%	93%	93%





Results

Identified areas for improvement:

- High use of 'snack boxes' in some areas
- Unavailability of cutlery
- Issues with Food Choice / Food Temperature / Maple Ordering / Special Diets
- There were significant variations across wards / divisions and mealtimes for the preparation of patients
- Uptake of the Protected Mealtimes (PM) remains variable between wards
- Variations in quality were identified between the different food delivery methods
- Lack of knowledge about Kosher Meal / utensil provision
- Cold toast!
- Staff were engaged and very motivated to be involved and deliver improvements





Results

Positive Comments:

- 'Excellent service and meals lovely' Patient
- 'Satisfied customer' Patient
- 'The HCA very good at his role' Patient
- 'Enjoyed my toast today' Patient
- 'Nice to be offered a selection of both hot and cold food' Patient
- 'Always served with a smile' Patient
- 'Gorgeous food' Patient
- 'The meals were wonderful this evening' Patient
- 'Excellent team work to improve scores compared with previous day' Staff

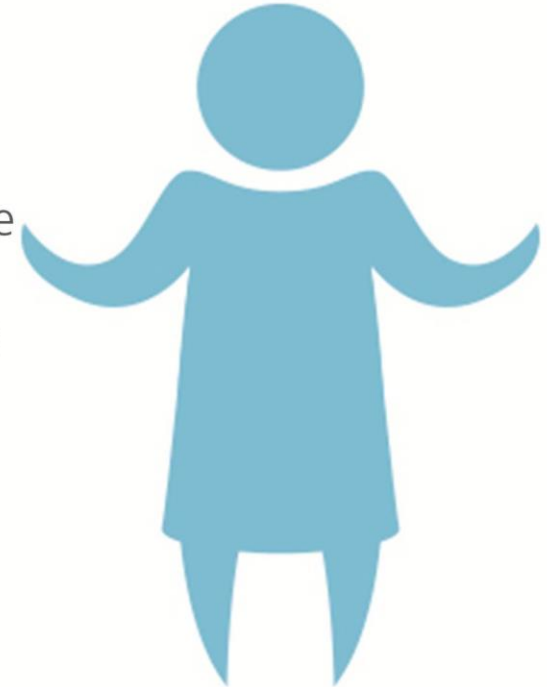




Results

Change-1-Thing:

- 'Nothing everything is perfect' Patient
- 'I want to look at the menu' Patient
- 'The food I would change to be more edible as the texture is very soggy is fish and chips' Patient
- 'Before I came here, I wasn't eating. But ever since I came to this fine establishment, I've eaten every morsel. Food here is really good. I wouldn't change a thing' Patient
- 'It's good – keep it up. Thanks' Patient
- 'Smaller / plastic cutlery for toddlers' Parent
- 'Food can often be dry and portions not always big enough for teenagers' Patient





Results

What Matters to Me: Staff Experience

The Perfect Dining Week is a perfect opportunity to give the patients a voice –
Housekeeper,
Surgery

By observing processes you can see that small things really make a difference to the patients –
Sister, CSS

It's been really great to see how a few simple steps can make such a difference to patient experience –
Matron, SMS

This week has been much more improved because everyone has been engaged and involved –
HSA, Sodexo





Results

What Matters to Me: Staff Experience

PDW has been the ideal process for all staff engaged in food service to focus on the specific needs of children and young people – LN, RMCH

It has been great to see shared understanding of the processes and developing ownership of the service being established over the week – Deputy Head of Facilities Management

Interesting to see the quality improvement process; this has highlighted areas for our own learning for example MAPLE training – Student Nurse





What Was Next?

- Detailed data analysis and written report
- Dissemination of results
- Development of local work-streams
- Identification of 10 Trust-wide high impact actions
- Continue to seek regular patient feedback
- Aim for Excellence
- Finally:

Do we do it all again next year?

