

## Hospital Food Survey

All patients over 66 years of age. 35 Respondents. All had been a patient in Sunderland hospital in the last year. Time spent in hospital ranged from 3 days to 64 with an average stay of 26 days. As the menu cycle is fortnightly, most of the people in the survey will have experienced the full cycle of meals.

**Q1 Overall, how happy or unhappy are you about the food in Sunderland Hospital**

54% of patients stated that overall they are very happy or quite happy with the food in Sunderland Hospital and 20% had no strong opinion either way. However, 23% were quite unhappy or very unhappy. Subsequent questions in the survey indicate this unhappiness is related mainly to personal taste and choice not being met.

*"On the whole meals were very good, especially Christmas lunch. Nursing staff were very caring. Soft food was offered which helped enormously. A choice of meals would be very nice but not very practical. I was able to eat all meals in the soft diet."*

*"Some food was very nice and other times very untasty"*

*"The food at first seemed meagre and dull but after my operation it was appropriate as I had a reduced appetite. The sandwiches were easy to eat. I couldn't handle a knife and fork anyway because I couldn't sit up. Small portions were all I could eat and there was a good choice of sandwiches."*

**Q2 Answer this question if you missed any meal in hospital or if a meal you were served had to be taken away.**

Reasons for missing a meal were mainly because patients did not like the food and it was either not to their taste (20%) or was unappetising (17%). Understandably a significant number were not eating because of their condition and had little appetite. In the latter case it would be expected that alternatives were offered to patients. It was noted that supplementary drinks were used when patients refused food or missed food because of illness.

*"I never felt hungry. Had little appetite after the operation."*

*"Food is not part of the treatment when nurses don't know what waste is left. Food used to be part of patient care but this has to involve people. The ward used to be viewed as a whole and used to be a better service. Now that overview has been lost"*

**Q3 If your medical condition meant that you had no appetite or were unable to eat, were any alternatives offered to you?**

49% of patients said they were not offered an alternative when they had no appetite for food or were unable to eat. Other evidence indicates this is a reference to the

desire for appropriate quantities, individual requirements and snacks. Pureed food offered.

*"Sometimes the food given is excellent but not appropriate for weak patients."*

*"I asked for fruit but fruit is only given to diabetics so I was told."*

*"There was no fresh fruit, only fruit crumbles. In the evening, mash and either chicken or beef were the only choice. I never saw a menu. Juice was available all the time. I saw one woman having a baked potato as an alternative to sandwiches but she was in for longer."*

*"As a visitor I encourage my friends to drink but some people have no visitors, also the drink is not put into a suitable receptacle."*

**Q4 Did the nursing staff encourage you to eat because the food would help you to get better?**

The majority of patients (63%) said that nursing staff did encourage them to eat. It is noted that all respondents were complimentary about the nursing staff and unhappiness in relation to the service is 'systems' related, not staff related.

*"Staff encouraged to eat but seemed at times to be too busy."*

*"It is impossible for nurses to give adequate time to feed patients. As a visitor I have gone into the hospital at lunch time to help feed friends who were not able to feed themselves. It took me over one hour on each occasion and even then they had not eaten sufficient."*

*"The serving staff were good but did put things out of reach sometimes and had to be asked to move them closer."*

**Q5 Which of the following would have helped to improve meal times for you?**

Choice and variety again came up as the top answer (46%). Hot meals at the right temperature was the second highest answer (34%). This was an unexpected answer as the food is heated on the ward, close to the patients and is kept in heated units until being served. As all of the respondents to this survey were elderly it is noted that a significant proportion (23%) indicated smaller portions of food would have helped. 26% said they would have liked to be able to sit at a table or eat in the company of others. 14% would have liked more beverages and 9% asked for more snacks.

*"There is no system for choice to be exercised. Trolley's are loaded with whatever is appropriate for the ward. When they used to have individual sheets to tick there was a choice, that's gone. Filling in slips takes time and needs people but is used to work. You can't even request a boiled egg on toast now."*

*"I think it would be good for family and friends to have access at meal times in order to help."*

*"Jug of water lukewarm – cold would be nice. Would have liked tea refill at breakfast."*

**Q6 If you weren't able to eat the food in hospital for any reason, what did you do?**

Patient's response to not wanting what was presented to them was mainly to eat a small amount (34%), or to not eat it at all (23%). 17% sought alternatives either by asking relatives to bring in food, requesting snacks or an alternative meal.

*"I did not always get what was ordered, and then I was offered mince which I dislike a lot. Family then got (me) food as I was very hungry. I have been in hospital here a lot. The food used to be very good, but no longer."*

*"There is nothing in the admission process about how to exercise choice. I complained when all that was left was wedged potatoes and baked beans. The catering managers don't go round the ward and when I complained at 6.00 pm they weren't on duty."*

**Q7 What did you like best about the food in hospital?**

Traditional dinners, regularity, punctuality were popular, as well as of course some patients preferences were ideally met by the menu and where patients appetites were not affected by their condition the mealtime schedule seemed to be appreciated. Texture seems to be something that is catered for and this goes hand in hand with help with eating were the food is mashed for patients who need help and this seems to be working well.

*"Punctuality of meals good – helps with diabetes"*

*"Staff very good"*

**Q8 What was the worst thing about the food in hospital?**

Lack of choice and variety was the favourite answer (14%). 23% opted for either taste or temperature. Too much food was common complaint, again this was an elderly cohort.

*"No appetite because mealtimes too close together. Sometimes food cold / warm"*

*"Food was adequate – it depends how ill you are feeling at the time."*

*"Needed to be tempted to eat"*

*"Meals not appetising. Not served on the plate attractively."*

*"Not used to a meal at 4 pm – it is a bit early. While meals are quite satisfactory maybe some sauce when some products might be dry would help. To spread meal times a little could make a difference."*