

# Food journey at Calderstones

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## Calderstones Partnership NHS Foundation Trust

**Contact Details:** Calderstones Partnership NHS Foundation Trust  
Mitton Road  
Whalley  
Clitheroe

**Staff Met During Visit:** Catering Manager, Peter Gardner  
Catering Supervisor, Dragana Jovanoska

**Date and Time of Visit:** 21st October, 2015

**Healthwatch Lancashire Authorised Representatives:**

Amanda Higgins (Lead)  
Christina Morley

## Introduction

Healthwatch Lancashire is committed to listening to patients and members of the public in Lancashire and making sure their views and experiences are heard by those who run, plan and regulate health and social care services.

On the 21st October 2015, three service users at Calderstones and two members of staff from Healthwatch Lancashire visited the Herbstones kitchen at Calderstones to report back on the choice, preparation, storage and delivery of the food provided to service users.



## **Rationale**

Healthwatch Lancashire was involved in holding monthly engagement stands at the Whalley site of Calderstones Partnership NHS Foundation Trust, where service users shared their experiences of their time at the hospital. During these activities, one of the main issues raised was the quality and the choice of food available, scoring on average 3.08 out of 5 during the period of March to November 2015.

Data collected by Healthwatch Lancashire for all hospitals across Lancashire have averaged at a higher score of 3.93 out of 5 in the same time period. However, internal intelligence gathered by the Calderstones Partnership NHS Foundation Trust has shown conflicting results, with service users reportedly providing positive feedback about the food.

Upon discussing this at the Calderstones Involvement Group meeting, service users requested Healthwatch Lancashire to visit the kitchen at Calderstones hospital and report back on the food choice, preparation, storage and delivery.

## **Acknowledgements**

Healthwatch Lancashire would like to thank the Catering Manager, the Supervisor and the Customer Care Manager at Calderstones Partnership NHS Foundation Trust together with staff and service users for being so welcoming and for taking part in the visit.

## Methodology

The following actions were undertaken as part of the visit:

- Attend Herbstones restaurant with the Catering Manager and service users
- Observe food preparation, storage and deliveries to wards
- Discuss menus with service users
- Observe kitchen environment
- Taste the food served in Herbstones



## Healthwatch Lancashire observations

Healthwatch Lancashire visited the Herbstones kitchen on the 21st October 2015 from 11.30am to 2.30pm.

On arrival, Catering Manager, Peter Gardner and Catering Supervisor, Dragana Jovanoska welcomed the team to the kitchen and introduced us to the kitchen staff and the three service users that joined us.

The team were provided with overalls; however, these overalls did not fit appropriately. We were not asked to tie our hair back or use a hair net.

Following an introduction to the kitchen and its facilities, the team were shown how the food is ordered by service users, the choice of food on the menu throughout the month, how the food is prepared in the kitchen, how and where it is stored and lastly, how it is delivered to the different ward areas at Calderstones.

Under supervision, the team had access to all areas of the kitchen and records of deliveries, temperature monitoring equipment and food storage.

The kitchen and storage areas appeared clean and organised, and clearly displayed up-to-date monitoring checklists.

The equipment in the kitchen appeared new and of a high professional standard.

### **Preparation, quality and delivery of ward food**

The assessment team were informed that all the food delivered to the wards at Calderstones hospital was prepared on site in Herbstones restaurant.

Food served in Herbstones restaurant is eaten on a daily basis by both service users and staff at the hospital.

Service users stated that in general the food in Herbstones restaurant is always of a satisfactory standard; however, food on the wards was deemed of a lesser quality. The assessment team discussed the differences and were all

informed that the food served in the restaurant is prepared and served on the same day, whereas ward food is prepared one day before, refrigerated overnight, and served to the wards the following day.

Service users discussed on the day that they are frequently served bread that is out of date and stale, with weekends indicated as the most common occurrence for this. Bread was shown to us from the delivery cart; this had been sourced locally and was in date. We were told by the kitchen staff that bread deliveries take place twice per week on Mondays and Thursdays.

During the Calderstones Involvement Group (monthly meetings) some negative comments had been received regarding the limited Halal options on the menu. We questioned this during the food journey and it was found that a high proportion of the food was already Halal, and that, if requested, any of the meals served can be made to be Halal.

We were informed that menus are pre-planned on a four weekly rotation. Service users talked about week four being their favourite, because they collaboratively chose all of the food to be served in this week.

Chips have frequently been described as hard and inedible by service users. These have recently been changed to McCain's chips and service users were involved in making this choice.

At the Calderstones Involvement Group and obtained through Healthwatch Lancashire's engagement activities an issue has previously been raised that food is often cold once delivered to the wards. During the food journey, we were told that this should not be an issue, as food delivered to the wards is stored in a hot box. This reportedly keeps the food warm if the service users do not want to eat as soon as it has been delivered.

Food is delivered to the wards in a purpose built vehicle to ensure the food is delivered quickly.

The food tasted by Healthwatch Lancashire representatives on the day was found to be hot, tasty and nutritious.

We were told that the vending machines on the wards sell sandwiches which are made at Herbstones restaurant. These were said to be too expensive by service users.

## Conclusion

The food journey presented some valuable and unknown information regarding the quality of the food at Calderstones Partnership NHS Foundation Trust.

## Response from provider

**Peter Gardner, Catering Manager at Calderstones Partnership NHS Foundation Trust provided the following response:**

“Overalls provided were freshly laundered, food safety white coats.

The kitchen is indeed clean and the equipment is new.

Ward food is in fact made within Herbstones restaurant.

With reference to the refrigeration of food overnight. This is a recognised cook chill food delivery system used throughout many establishments.

Comments relating to out of date and stale bread, will be explored by the Trust.

The department runs a four weekly rotational menu cycle. Each individual dish included in the menus is requested by service users. Every single menu has been written collaboratively with service users.

Since the report a marked improvement has been found by all service users.

To confirm, there are no vending machines on the ward, there is one vending machine located in the Herbstones conservatory that sells sandwiches. These are priced the same as they are in the Herbstones restaurant in line with our pricing structure.”

**Healthwatch Lancashire Patient Engagement Day Action Plan**

No.	Deliverable	Expected Outcome	Action	Progress	Person Responsible	Date for Delivery	RAG
1	Question 4: Do you think there are enough staff to deliver a quality service?	To understand the perceptions of patients regarding the numbers of staff and a quality service	This question will be added to the Calderstones Patient Experience Survey so it can be monitored internally	The following question has been added to the Calderstones Patient Experience Survey which will be circulated for completion in May 2016: <ul style="list-style-type: none"> <li>Are there enough staff on the ward to deliver a quality service?</li> </ul>	L Singleton, Clinical Governance Lead	31 <sup>st</sup> May 2016	
			This question will be added to the monthly 'Speak Up' Meeting Agenda for further exploration and discussion on the ward	This has been added to the monthly 'Speak Up' meeting agenda for May 2016 for discussion with patients and an action plan for the ward will be developed	F Cairns, Head of Occupational Therapy	31 <sup>st</sup> May 2016	
			Service user feedback and views from the 'Speak Up' meeting will be discussed at the Integrated Therapy Meeting in June 2016	This has been added to the agenda for the Integrated Therapy Meeting in June 2016 so any actions can be logged and tracked	F Cairns, Head of Occupational Therapy	16 <sup>th</sup> June 2016	
			Continue to monitor staffing daily through the Service Coordinator who has an oversight of the staffing levels for the whole service	Senior managers meet with the Service Coordinator each morning to discuss staffing for the day	S Wrathall, Senior Operational Manager	30 <sup>th</sup> April 2016	
			Any rearranged activities due to staffing to be monitored through the weekly 'Staffing Analysis' meeting via a report produced	A report on activities is produced weekly and presented at the 'Staffing Analysis' meeting with any actions logged and tracked	F Cairns, Head of Occupational Therapy	30 <sup>th</sup> April 2016	

			Report staffing issues via the 'Red Flag' Ulysees reporting system	The 'Red Flag' report is presented and discussed weekly at the 'Staffing Analysis' meeting with any actions logged and tracked	J Tynan, Clinical Risk and Patient Safety Manager	30 <sup>th</sup> April 2016	
2	Question 6: Do you think that you do enough activities during the evening and weekend?	To understand the perceptions of patients regarding the numbers of evening and weekend activities required.	This question will be added to the Calderstones Patient Experience Survey so it can be monitored internally	The following questions have been added to the Calderstones Patient Experience Survey which will be circulated for completion in May 2016: <ul style="list-style-type: none"> <li>• Are there enough activities in the evenings after 5pm?</li> <li>• Are there enough activities at the weekend on Saturdays and Sundays?</li> </ul>	L Singleton, Clinical Governance Lead	31 <sup>st</sup> May 2016	
			Evening and weekend activity plans will be discussed with patients and a pictorial timetable developed and displayed on their ward/house.	Evening and weekend activities are planned with service users and documented on patients shared activity planners	F Cairns, Head of Occupational Therapy	31 <sup>st</sup> May 2016	
			This question will be added to the monthly 'Speak Up' Meeting Agenda for further exploration and discussion on the ward	This has been added to the monthly 'Speak Up' meeting agenda for May 2016 for discussion with patients and an action plan for the ward will be developed	F Cairns, Head of Occupational Therapy	31 <sup>st</sup> May 2016	
			Service user feedback and views from the 'Speak Up' meeting will be discussed at the Integrated Therapy Meeting in June 2016	This has been added to the agenda for the Integrated Therapy Meeting in June 2016 so any actions can be logged and tracked	F Cairns, Head of Occupational Therapy	16 <sup>th</sup> June 2016	

			Implement new 'Activity Coordinator' role ensuring staff are responsible for the delivery of evening and weekend activities	The job description has been completed and this is awaiting job matching prior to advertisement and recruitment	F Cairns, Head of Occupational Therapy	30 <sup>th</sup> June 2016	
			Planned social activities in the evening to take place for all patients	There is a planned social evening rota delivered by Occupational Therapy staff every two weeks on a Friday evening in St Luke's Club	F Cairns, Head of Occupational Therapy	31st April 2016	



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