

Trust Board (public) Tuesday 28 February 2017 at 14:15 Meeting Room 1, Block 7, Fieldhead, Wakefield, WF1 3SP

AGENDA

- 1. Welcome, introduction and apologies (verbal item)
- **2. Declaration of interests** (verbal item)
- 3. Healthy Eating CQUIN 2016 18 (attached)
- 4. Date of next meeting

The next meeting of Trust Board will be held on Tuesday 28 March 2017 in the Boardroom, Kendray, Barnsley.



Trust Board 28 February 2017 Agenda item 3

Title:	Healthy Eating CQUIN 2016 - 18
Paper prepared by:	Director of HR, Organisational Development and Estates
Purpose:	This paper is required to achieve full compliance with the healthy eating CQUIN.
Mission/values:	Within the current national CQUIN programme there is a requirement to promote healthy eating within the NHS for all service users staff and visitors.
	The Trust needs to meet some key performance indicators within financial years 2016/17 and 2017/18 these are set out in the accompanying paper together with the approach that has been adopted to ensure compliance.
	A key requirement of the CQUIN is to report compliance to the Trust Board in order for payment terms to be met. The value of this is £374,000 per year and would be lost income rather than an additional payment to the Trust.
	As well as the impact on income the Trust should benefit as the food offer we make becomes increasingly healthy which is in line with our core values of helping people to improve their health.
Any background papers/ previously considered by:	The CQUIN is referenced in the overall CQUIN documentation supplied elsewhere. This paper is additional and is needed to ensure we fully comply with the CQUIN.
Executive summary:	The Trust has met the technical requirements for the 2016/17 CQUIN in full and will have achieved technical compliance with the 2017/18 CQUIN within this financial year.
	Reports to Board and to the relevant CCG's will be an ongoing commitment to the organisation in order to achieve full compliance.
	The only wider impact of the CQUIN is financial as it is not anticipated that the reduction in sugary drinks will result in reduced sales as the low sugar options are the better sellers already as people take responsibility for their health.
Recommendation:	Trust Board is asked to NOTE the content of the report and APPROVE the circulation of this report to the relevant Quality Boards.
Private session:	Not applicable



Trust Board 28 February 2017

Healthy Eating CQUIN 2016-18



1. INTRODUCTION

Within the CQUIN for 2016 to 2018 the Trust is subject to a national item for healthy eating which covers service users, visitors and staff. In 2016/17 the value of this to the Trust is £374,000 the reporting for which is all in Q4.

The Trust is compliant with the CQUIN and has to report in the following manner to prove technical compliance

- Uploading compliance information to UNIFY database
- Board report to Trust detailing compliance
- Reports to all CCG's concerned

The uploading of the information has been undertaken. This report is being presented to the Trust Board. The CCG's will be informed through the quality boards following Trust Board approval

2. REQUIREMENTS

For year 2016/17 the requirements are aimed mainly at outsourced provision within the NHS and the prevention of price and product promotions, along with some changes to staff provision for access to healthy food 24 hours a day. As the Trust does not extensively outsource catering, compliance has been a relatively routine process as follows.

2016/17 CQUIN

- a.) The banning of price promotions on sugary drinks and foods high in fat, sugar or salt (HFSS).
- No price promotions, meal deals or multi-buy discounts are available for food or
- b.) The banning of advertisements on NHS premises of sugary drinks and foods high in fat, sugar or salt (HFSS);
- Only advertised foods are healthy options or daily specials
- c.) The banning of sugary drinks and foods high in fat, sugar or salt (HFSS) from checkouts;
- All confectionary and drinks are offered either in vending machines or away from checkouts to avoid impulse buying
- d.) Ensuring that healthy options are available at any point including for those staff working night shifts.
- Both dining rooms at Fieldhead and Kendray open for staff 24/7 (August 2016).
- Carousel vending machines in place (June 2016) to offer healthy options, for example fresh fruit, yogurts, nut / cereal bars and fruit juice.
- Drinks and confectionary machines in both dining rooms also offering healthy options to meet government standards.
- All vending companies who supply the trust are aware of the CQUIN regarding soft drinks and confectionary and comply to the requirements.
- Both dining rooms supply fresh salads and fruit pots daily plus homemade soup and jacket potatoes, these are advertised as healthy options on tables.

The requirements for 2017/18 have been considered as part of the Trust approach to ensure the requirement is maintained and that additional requirements when formally agreed can be met these are as follows. Where we are running down stocks of non-compliant drinks they will have been used up within financial year 2016/17 so we will be achieving compliance earlier than required.

The three new changes to food and drink provision in 2017/18 CQUIN

- a.) 70% of drinks lines stocked must be sugar free (less than 5 grams of sugar per 100ml). In addition to the usual definition of SSBs it also includes energy drinks, fruit juices (with added sugar content of over 5g) and milk based drinks (with sugar content of over 10grams per 100ml).
- No high energy drinks sold from vending machines, currently running down the stock available from dining rooms with no more to be purchased
- b.) 60% of confectionery and sweets do not exceed 250 kcal.
- In both vending machines and counter sales, small(er) packets, bars of confectionery and sweets are offered therefore do not exceed 250 kcal.
- c.) At least 60% of pre-packed sandwiches and other savoury pre-packed meals (wraps, salads, pasta salads) available contain 400kcal (1680 kJ) or less per serving and do not exceed 5.0g saturated fat per 100g
- Pre-packed sandwiches are currently supplied for patient feed at Fieldhead however this is being reviewed and will eventually change to these being made on site. Currently only 35% of the pre-packed sandwiches contain less than 400 kcal and do not exceed 5g saturated fat. Facilities Services are currently in discussion to ensure we meet the 60% requirement until sandwiches are made in house at which point the requirement will cease although we will continue to offer healthy sandwiches

Detailed information on food and drinks is available if required

3. SUMMARY

The Trust is positioned to fully comply with the CQUIN for 2016 through to 2018 within the first year but will have a requirement to continue to report to ensure total compliance. The requirements are expected to be tightened in 2018/19 and the Trust will continue to comply and report. The detailed compliance requirements are included for information at Appendix Α.

4. RECOMMENDATION

The Trust Board is recommended to:-

- Note the contents of this report
- Approve its submission to the relevant Quality Boards.

Director of Human Resources, Organisational Development and Estates

Indicator 1b Healthy food for NHS staff, visitors and patients

Indicator 1b			
Indicator name	Indicator 1b: Healthy food for NHS staff, visitors and		
	patients		
Indicator weighting (% of CQUIN scheme available)	33.3% of 0.25% (0.0833%)		
Description of indicator	Providers will be expected to build on the 2016/17 CQUIN by:		
	Firstly, maintaining the four changes that were required in the 2016/17 CQUIN in both 2017/18 & 2018/19 a.) The banning of price promotions on sugary drinks and foods high in fat, sugar or salt (HFSS) ¹ .		
	The following are common definitions and examples of price promotions:		
	 Discounted price: providing the same quantity of a product for a reduced price (pence off deal); Multi-buy discounting: for example buy one get one free; Free item provided with a purchase (whereby the free item cannot be a product classified as HFSS); Price pack or bonus pack deal (for example 50% for free); and Meal deals (In 2016/17 this only applied to drinks sold in meal deals. In 2017/18 onwards no HFSS products will be able to be sold through meal deals). 		
	 b.) The banning of advertisements on NHS premises of sugary drinks and foods high in fat, sugar or salt (HFSS); The following are common definitions and examples of advertisements: Checkout counter dividers Floor graphics End of aisle signage Posters and banners 		
	c.) The banning of sugary drinks and foods high in fat, sugar or salt (HFSS) from checkouts;		

¹ The Nutrient Profiling Model can be used to differentiate these foods while encouraging the promotion of healthier alternatives. <a href="https://www.gov.uk/government/publications/the-nutrient-profiling-publications/the-nutrient-publications/the-n <u>model</u>

Indicator 1b

The following are common definitions and examples of checkouts:

- Points of purchase including checkouts and self-checkouts
- 2. Areas immediately behind the checkout

and;

d.) Ensuring that healthy options are available at any point including for those staff working night shifts. We will share best practice examples and will work nationally with food suppliers throughout the next year to help develop a set of solutions to tackle this issue.

Secondly, introducing three new changes to food and drink provision:

In Year One (2017/18)

- a.) 70% of drinks lines stocked must be sugar free (less than 5 grams of sugar per 100ml). In addition to the usual definition of SSBs it also includes energy drinks, fruit juices (with added sugar content of over 5g) and milk based drinks (with sugar content of over 10grams per 100ml).
- b.) 60% of confectionery and sweets do not exceed 250 kcal.
- c.) At least 60% of pre-packed sandwiches and other savoury pre-packed meals (wraps, salads, pasta salads) available contain 400kcal (1680 kJ) or less per serving and do not exceed 5.0g saturated fat per 100g2

In Year two (2018/19):

The same three areas will be kept but a further shift in percentages will be required

a.) 80% of drinks lines stocked must be sugar free (less than 5 grams of sugar per 100ml). In addition to the usual definition of SSBs it also includes energy drinks, fruit juices (with added sugar content of over 5g) and milk based drinks (with sugar content of over 10grams per 100ml).

² <u>https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419245/balanced-scorecard-annotated-march2015.pdf</u>

Indiantes 4b		
Indicator 1b		
	b.) 80% of confectionery and sweets do not exceed 250 kcal.	
	c.) At least 75% of pre-packed sandwiches and other savoury pre-packed meals (wraps, salads, pasta salads) available contain 400kcal (1680 kJ) or less per serving and do not exceed 5.0g saturated fat per 100g3	
Numerator	N/A	
Denominator	N/A	
Rationale for	Any Provider who does not sell food or drink on their site	
inclusion	will not be eligible for the CQUIN. In these cases the weighting for this part (1b) will be added equally to parts 1a and 1c.	
	PHE's report "Sugar reduction – The evidence for action" published in October 2015 outlined the clear evidence behind focussing on improving the quality of food on offer across the country. Almost 25% of adults in England are obese, with significant numbers also being overweight. Treating obesity and its consequences alone currently costs the NHS £5.1bn every year. Sugar intakes of all population groups are above the recommendations, contributing between 12 to 15% of energy tending to be highest among the most disadvantaged who also experience a higher prevalence of tooth decay and obesity and its health consequences. Consumption of sugar and sugar sweetened drinks. It is important for the NHS to start leading the way on tackling some of these issues, starting with the food and drink that is provided & promoted in hospitals.	
	NHS England will continue with their work at a national level with the major food suppliers on NHS premises to ensure that NHS providers are supported to take action across all food and drink outlets on their premises.	
Data source	Provider data source	
Frequency of data collection	End of Quarter 4	
Organisation responsible for data collection	Evidence should be provided that shows a substantive change has been moved in shifting to healthier products Reduction in % of sugar/salt products displayed: Increase in healthier alternatives Avoidance of overt promotion	
	However the exact detail of reporting should be agreed locally so that it can be adapted to the local situation (for	

³ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419245/balanced-scorecard-annotated-march2015.pdf

Indicator 1b		
	instance it may differ depending on the scale and types of	
	outlets on premises).	
	,	
	Each provider must evidence to commissioners that they have maintained the changes in 2016/17 and introduced the 2017/18 changes by providing at least the following evidence:	
	 A signed document between the NHS Trust and any external food supplier committing to keeping the changes 	
	 Evidence for improvements provided to a public facing board meeting 	
Frequency of	End of Quarter 4	
reporting to		
commissioner		
Baseline period/date	N/A	
Baseline value	N/A	
Final indicator	Year 1 - End of Q4 2017/18	
period/date (on	Year 2 - End of Q4 2018/19	
which payment is		
based)		
Final indicator value	To be determined locally	
(payment threshold)		
Final indicator	As soon as possible after Q4 2017/18	
reporting date		
Are there rules for	No	
any agreed in-year		
milestones that		
result in payment?		
Are there any rules	Yes	
for partial		
achievement of the		
indicator at the final		
indicator		
period/date?		

Rules for partial achievement of indicator 1b

Final indicator value for the partial achievement threshold	% of CQUIN scheme available for meeting final indicator value
2017/18 - 2016/17 changes maintained 2018/19 - 2016/17 changes maintained	50% payment
2017/18 - Year 1 changes introduced 2018/19 - Year 2 changes introduced	50 % payment
2017/18 - 2016/17 changes maintained and Year 1 changes introduced	100% payment
2018/19 – 2016/17 changes maintained and Year 2 changes introduced	

2016/17 CQUIN

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