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21 April 2016

Sir David Dalton (sent via email)
Chief Executive
Salford Royal Foundation Trust
Stott Lane
Salford M6 8HD

Dear Sir David

Re: SRFT Patient Catering Service

I write in response to your letter dated 18th April 2016 in which I requested permission for a delegation to attend to put our concerns about the proposed tender of patient catering. In your response you stated that it had been agreed at the Joint Partnership Forum meeting of 12th April that any concerns should be raised with Paul Renshaw, Workforce Director, who would then write to you, following which you would add details of his letter to your CEO report to board. Following conversations with my trade union colleagues it is clear that while this was suggested by Mr Renshaw no such agreement was given by staff side.

This issue has garnered wide-spread public support, with almost 1,500 people signing an online petition and another 500 sending back postcard versions of the petition, and there has been local media coverage. It is an issue which could have a significant impact, not only on patient health but on cost and efficiency. I feel, therefore, that it is too important not to raise with you directly. I have copied the Board in for their convenience. A small delegation from the campaign will be available on-site on Monday to provide any further information or clarifications that board members might require. I summarise our understanding of the situation and our continued concerns below.

The trust is planning to tender patient catering on 16th May 2016, replacing the current fresh food service with cook-chill or cook-freeze food which will then be warmed up on site. My understanding is that this food will be factory-produced and that the contract is only being offered to commercial companies with no in-house bid considered. The staff side was made aware of the trust's intention to tender out this service just over a week before the contract was advertised and UNISON is very disappointed that the trust did not seek to engage in partnership working to try and resolve the issues facing patient catering.

Currently the kitchen provides a fresh food service, with most meals being prepared on-site on the day. The exceptions are for certain foods such as halal and kosher, which must be prepared in a kosher kitchen meaning it cannot be prepared at Salford Royal. The food is cooked by chefs then distributed to the wards. There is provision for patients with a range of special diets – including vegetarian, vegan, gluten free, low salt, low potassium, high fat, low fat, high fibre and low fibre. Patients can also have other specific needs met, such as having a special meal prepared for them if they do not feel able to eat anything on the menu. I believe this is particularly important for long-term patients on the intestinal failure unit, which is one of only two such units in the country. There is also a degree of flexibility with certain dishes which allows chefs to adapt them for patients who do not like a particular ingredient.



These are some of the things patients and families have had to say about the food at SRFT on the online petition:

"My husband spent seven weeks in Salford Royal, two in a coma. The other five he constantly praised the food and looked forward to his meals" - Janice W

"I've been a patient and the meals are so good I looked forward to them" – David P

"The food is excellent in Salford and they cater for people with specific needs" – Michelle S

We have a number of concerns about cook-chill or cook-freeze food provision. Firstly, it is impossible for the trust to be able to monitor the ingredients put into the food. As the trust has gained specialist status under Healthier Together for neurology, and with the aforementioned intestinal failure unit it is vital that there is a high level of control over what goes into the food. And as well as the special dietary requirements there is an obesity problem which cannot be ignored. Patients are advised by the NHS to eat fresh, healthy food at home and the same should apply while in hospital.

The flexibility which the kitchens have, with chefs able to try and accommodate specific patient needs, will be lost if food which has been made off site is presented to patients. There is a danger that fewer patients will eat the food. With 193 patients presenting at Salford Royal suffering malnutrition in 2014/15 according to a BBC report, a priority must be ensuring that patients want to eat the food which is provided for them.

The following quote is from 'Keep Hospitals Cooking', a piece of research by Campaign for Better Hospital Food:

"[After we brought cooking back in house] people reported the food as 'excellent'. There was also waste reduction as people seemed to be eating more" – Gary Wilkins, Catering Manager at North Bristol NHS

Linda Brooks, UNISON Branch Secretary of Tameside Health said, of cook-chill food:

"The food was so disgusting patients were refusing to eat it and posting pictures of it on social media. The portion sizes were so small we had to give patients four times as much just to be able to meet basic nutritional needs. After six months it was brought back in house. As it was a trial we were able to do that easily. If the kitchens had been decommissioned we may not have been so lucky"

The point about the kitchens being decommissioned is an interesting one. It was confirmed at last week's JPF meeting that part of the kitchens will be refitted and used as office space. This means that if there is a decline in the quality of patient catering it will be extremely difficult to reverse the decision to outsource and the trust will in future be forced to continue to use cook-chill. There is also a question to be raised about why the trust is able to provide funds to refurbish part of the building for office space when no further funds will be made available to allow fresh food to continue to be provided. As the works include a new roof, doors and windows it must be assumed that this work will go ahead whatever the use of the building and the funding will be found from a source somewhere.

There is also a serious concern about the quality of cook-chill food. While there have been attempts to reassure us about this, anecdotal evidence from elsewhere does little to allay our concerns. The examples below are taken from the public comments left under a Manchester Evening News article about SRFT's patient catering proposals. They relate to cook-chill food provided at Central Manchester:

"These ready meals are really disgusting. I could only eat the yogurt and the sandwiches that my family brought in" - Margaret L

"Just came out of MRI. The food was disgusting, cold, inedible" - Janet R

"I had the ready meals at St Marys and to be honest I wouldn't have given them to my dog" - Donna G

"Six days in MRI, unable to eat the disgusting ready meals. Had to live on cold sandwiches. Best meal of the day was breakfast – cold cereal!!" - Margaret C

"They are already doing it at MRI. It's the most disgusting food I've ever had to endure in my life and I was in for gastric problems!" - Chrissi S

Finally, we do not believe there is a cost saving in the longer term. Trusts in Greater Manchester using cook-chill services pay on average £1.95 more per patient per day according to national ERIC data. With Salford Royal currently providing the best value service at £5.25 per patient per day there are questions to consider about the long-term cost of providing cook-chill as opposed to using capital spend to refurbish the kitchens so that cook-chill can be provided.

I would be very grateful if these concerns could be discussed with the board prior to the contract being awarded on 16th May. Ultimately if all issues are not thoroughly considered Salford Royal could be left with a service which doesn't deliver good quality healthy food to its patients and no means to return to fresh food provision.

Yours sincerely



WENDY ALLISON
Regional Organiser

cc SRFT Trust Board (via post)
Rebecca Long-Bailey (via email)
Paul Dennett (via email)
Lisa Stone (via email)