Yet more hospital food failure

The bill rises to £54 million, and still counting…

Updated evidence on over ten years’ of failed voluntary initiatives to improve hospital food.

March 2010

Research updated by Kath Dalmeny and Alex Jackson, from the Good Food for Our Money campaign; published by Sustain: www.sustainweb.org/goodfoodforourmoney/
Foreword

I can think of no other organisations where it is more important to serve healthy, wholesome food than in our hospitals. It is important in so many ways – to the recovery of patients, to staff morale and to the atmosphere that fills the wards. When hospitals serve good food, everyone benefits.

While this is obvious, hospital food also has an important role to play in leading by example to improve the ethical standard of food we consume in the UK and supporting a shift towards a more sustainable diet. Hospitals are a huge purchaser of food. In total more than 330 million meals are served in the NHS each year. This food has the capacity to change consumer behaviour outside the NHS by demonstrating to hospital patients, staff and visitors what a sustainable diet looks like. It also has the capacity to support British farmers move to more environmentally friendly production methods by giving them a market for good food.

At the present time, hospital food does not take account of a number of environmental problems that it contributes to causing. For example, the production of this food is dependent on oil, which is itself in finite supply. It also relies on “embedded water” which is contained in food and is subject to global water shortages that are already occurring. In addition, the diversity of plant and animal life is threatened on a global scale by the use of industrial chemicals to produce this food.

Government must take responsibility for ensuring that the health and ethical hazards of food served in hospitals has been removed before it is served to patients. The only way it can do this is to introduce legal health and environmental standards for hospital food so that patients throughout the country are assured that it is healthy to eat and has been produced in a way that works in harmony with the planet.

Professor Tim Lang

Centre for Food Policy, City University
Member of the Council of Food Policy Advisors
New evidence in 2010 of wasteful spending

In December 2009, the Good Food for Our Money campaign published a report entitled ‘A Decade of Hospital Food Failure’, in which researchers estimated that over £50 million had been spent by government on failed voluntary initiatives to improve hospital food between 2000 and 2010. Since completing the first phase of research, new evidence has come to light of government spending over three-quarters of a million pounds more of taxpayers’ money on yet another voluntary initiative – the Healthier Food Mark – that continues to repeat the mistakes of the past. The bill for voluntary initiatives has grown to over £54 million and continues to rise.

The government has relied on celebrity chefs and costly gimmicks to paper over the problems with their policies on failed hospital food. It must now take effective action, by requiring hospitals to meet legal standards for hospital food so that, wherever it is served, we can be sure it is safe, enjoyable to eat, supportive of health and good for the environment.

January 2010:  Chef Loyd Grossman “disappointed and frustrated” by NHS Better Hospital Food Initiative

In January 2010, celebrity chef Loyd Grossman responded to media coverage of the ‘A Decade of Hospital Food Failure’ report published by the Good Food for Our Money campaign. From 2001, Loyd Grossman had headed up the NHS Better Hospital Food Initiative, which was scrapped just five years later in 2006 after poor take-up. The scheme cost £40m, although Loyd Grossman pointed out he undertook the work for free and precious little of the total budget was used to serve good food to patients. Responding to media coverage in 2010, Loyd Grossman stated:

“I remain totally convinced that improving hospital catering would bring great benefits to many millions of patients. My colleagues and I were frustrated and disappointed that there was neither the political will nor sufficient resources to improve hospital food. During the five years I worked voluntarily and without pay for the NHS, I reported to five different ministers: such high ministerial turnover means that you are constantly re-selling ideas to the top team. It is a scandal that improving hospital catering remains far from the top of the NHS agenda.”

Campaigner Alex Jackson, from Good Food for Our Money, welcomes the response, stating that “Loyd Grossman’s comments precisely mirror our concerns and experience of weak government policy on the issue of hospital food standards.”

February 2010:  Government pays £788,000 to pilot yet another voluntary food scheme

An official answer to a Parliamentary Question reveals that the government has so far spent £788,000 on the Healthier Food Mark, which includes a contract for the management consultants Deloitte, since 2008.¹ This figure, not previously published by government, brings the running total to £54 million spent on voluntary initiatives to improve hospital food.

The Healthier Food Mark, a key policy measure from the 2009 Cabinet Office Food Matters strategy, has already absorbed large amounts of time and effort. To date, three different versions

¹ Hansard citation: HC Deb, 2 February 2010, c228W: Parliamentary Question, 2 February 2010, see: http://www.theyworkforyou.com/wrans/?id=2010-02-02c.314187.h
of the Healthier Food Mark criteria have been drafted and fifty public sector organisations have been consulted for their views. Deloitte were appointed at the beginning of the process to manage the pilot and further consultation phases of the Healthier Food Mark, planned to continue in 2010.

It is also revealed that the health and sustainability standards included in the Healthier Food Mark have been watered down from those originally put forward. Hospitals that choose to participate in the Healthier Food Mark are now told that they will not be required to buy all of their meat (or meat products) from sources proven to have been produced to legal minimum standards for UK production. Critics explain that these changes will weaken support for British farmers by allowing hospitals participating in the Healthier Food Mark to buy cheap meat from outside the UK that has no animal welfare or environmental accreditation.

**February 2010: Government fails to promise better hospital food to tackle malnutrition**

After a number of lengthy delays, the Government at last responds to a report submitted in August 2009 by the expert Nutrition Action Plan Delivery Board, which indicated that in the region of 47,800 people had died with malnutrition while in NHS hospital care during 2007. In the report, the Delivery Board recommends as a key priority that the government should “clarify (nutrition) standards and strengthen inspection and regulation” to address this problem.

The Government rejects several of the Nutrition Action Plan Delivery Board recommendations, and makes no commitment to systematic improvement of the quality of hospital food. It states that plenty of guidance exists and that Government has offered advice, but gives no evidence of this advice having been taken up.

**Campaigners say: Enough is enough!**

**March 2010: Campaigners call for legally binding hospital food standards**

Frustrated by the waste of time and money spent on failed voluntary initiatives to improve hospital food, the Good Food for Our Money campaign calls on government to introduce mandatory health and sustainability standards for hospital food.

Please consider supporting the campaign. To find out more, visit the Good Food for Our Money website at: www.sustainweb.org/goodfoodforourmoney/

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2 The latest draft of the Healthier Food Mark criteria at entry level ‘Bronze’ standard states that, to achieve this standard, only 75% of meat (or meat products) should be produced to ‘Farm Assured’ standard. Previously, the ‘Bronze’ standard required that 100% of meat (or meat products) should meet this standard.


Contents
Providing a summary overview of failed initiatives to improve hospital food

Foreword ..................................................................................................................................................2

New evidence in 2010 of wasteful spending .......................................................................................3
January 2010: Chef Loyd Grossman “disappointed and frustrated” by NHS Better Hospital Food Initiative...........................................................................................................................................................................3
February 2010: Government pays £788,000 to pilot yet another voluntary food scheme ..........3
February 2010: Government fails to promise better hospital food to tackle malnutrition ..........4

Campaigners say: Enough is enough! ...............................................................................................4
March 2010: Campaigners call for legally binding hospital food standards..................................4

Acknowledgements .............................................................................................................................6

A Decade of Hospital Food Failure – research from the first report .............................................7

1. Tasty morsels of background information ......................................................................................8
During 1992: Health of the Nation white paper is published ...............................................................8
During 1992: King’s Fund finds poor nutrition amongst hospital patients .....................................8
During 1995: Government launches Nutrition Guidelines for Hospital Catering ..........................8
During 1997: Hospital patients fail to achieve good nutrition..........................................................8
During 2000: Council of Europe reviews hospital food ....................................................................8

2. The decade of failures (2000 to 2010) ...........................................................................................9
2000 .......................................................................................................................................................9
During 2000: NHS Plan sets out care plan (costing £10m), including food targets .......................9

2001 .....................................................................................................................................................10
May 2001: NHS launches Better Hospital Food initiative (costing £40m) ..................................10
During 2001: NHS launches ‘Essence of Care’ guidance ..............................................................10

2003 .....................................................................................................................................................11
During 2003: Defra launches Public Sector Food Procurement Initiative (costing at least £2.5m) .11
November 2003: Advisory group shows malnutrition in hospital patients persists .................11
December 2003: Council of Europe issues resolution on hospital food .......................................11

2004 .....................................................................................................................................................12
During 2004: NHS identifies hospital food as a priority for health and sustainability ............12

2005 .....................................................................................................................................................13
May 2005: Government sets up the Sustainable Procurement Task Force .................................13
During 2005: Chief Medical Officer calls for healthy and sustainable food in the public sector....13
During 2005: 65,000 people in care homes at risk of malnutrition .............................................14

2006 .....................................................................................................................................................14
During 2006: MP calls for food standards for nursing homes ......................................................14
March 2006: Audit Office says the UK can afford sustainable public sector food ......................... 14
May 2006: Better Hospital Food initiative is scrapped ................................................................. 14
June 2006: Sustainable Procurement Task Force says “it’s not difficult” to achieve sustainable procurement.................................................................................................................. 15
During 2006: Healthcare Commission says hospital patients need help to eat meals ...................... 16
September 2006: Age Concern shows malnutrition in hospital patients persists ......................... 16

2007 ......................................................................................................................................................... 16
During 2007: Royal College of Nursing launches Nutrition Now! campaign .............................. 16
May 2007: Public Accounts Committee recommends high animal welfare, fair trade and healthy eating standards in the public sector ................................................................................... 17
October 2007: The Department of Health launches a Nutrition Action Plan ................................. 18

2008 ......................................................................................................................................................... 18
August 2008: The Department of Health launches online nutrition training .................................. 18
July 2008: Cabinet Office Food Matters report promises action .................................................. 18
July 2008: BBC reveals hospitals waste £1m worth of food every year ......................................... 19
During 2008: Which? investigates the unhealthy state of hospital food ........................................... 19
October 2008: Nutrition Action Plan delivery board reports on ‘awareness raising’...................... 19

2009 ......................................................................................................................................................... 19
January 2009: Sustainable Development Commission urges government to show leadership ....... 19
January 2009: Hilary Benn sets up Council of Food Policy Advisors ........................................... 20
April 2009: Public health minister commissions sustainable food guidelines for hospitals ........... 20
April 2009: Public Sector Food Procurement Initiative falters ..................................................... 20
April 2009: Royal College of Nursing Nutrition Now! campaign is scrapped ............................. 21
April 2009: Office of Government Commerce launches collaborative procurement project .......... 21
February 2009: Government drafts Healthier Food Mark guidelines ........................................... 22
April 2009: Malnutrition in hospitals and care homes continues to rise ....................................... 22
May 2009: Healthcare professionals condemn NHS nutrition initiatives .................................. 23
May 2009: Largest catering company in the world supports legally binding standards .................. 23
June 2009: Celebrity chef Simon Rimmer asked to revamp Liverpool’s hospital food ................. 23
June 2009: Heston Blumenthal hired to sort out hospital food ..................................................... 24
August 2009: Government issues tender for voluntary Healthier Food Mark pilots ..................... 24
August 2009: Expert nutrition reviewers cite lack of leadership for malnutrition deaths in hospitals 24
August 2009: University researchers say hospital food is worse than prison food ....................... 24
September 2009: Council of Food Policy Advisors recommends legally binding standards ........ 25
October 2009: Defra ignores recommendation to adopt legally binding standards ..................... 25
December 2009: Decade of hospital food failures draws to a close, but more is to come .............. 25

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Introduction

When politicians get into office, they seem to like to launch an initiative to improve hospital food, usually involving a celebrity chef to do a make-over of meals. It’s a pattern that has been repeated many times over the past decade. The politicians probably think they’re doing some good, and they certainly enjoy the media coverage it creates.

However, this report reveals that such voluntary initiatives have wasted over £54 million of taxpayers’ money over the past 10 years, and probably much more (as we have not included in our calculations all the money wasted on government staff time, committees and management consultants). Not a single scheme over the past decade has succeeded – however famous the celebrity chef – precisely because the initiatives were voluntary. Government has failed to send a clear message to hospital caterers that the quality of their food is critical to patient health and to the sustainability of our food system.

School meals, on the other hand, have consistently high nutrition standards to protect the health of the children they serve. Why? Because there is a law to ensure that our money is spent on improving food quality.5

This report provides a potted history of the plethora of voluntary initiatives that government has launched over the past decade to attempt to improve the quality, healthiness and sustainability of hospital food. Although it focuses on hospitals, we are interested in the healthiness and sustainability of all public sector food. Over one billion meals are served in the UK’s public sector every year.6 This presents a tremendous opportunity to improve public health, encourage sustainable food production methods and provide delicious meals!

The report has been compiled by Good Food for Our Money, which is a national coalition campaign for a law to make it routine for food served in the public sector to have high health and sustainability standards. We believe public sector food is one of the key ways to transform the food and farming system so that it improves people’s health, protects our environment and gives better value for money.

Please join us in calling for change. To find out more, visit: the Good Food for Our Money website at: www.sustainweb.org/goodfoodforourmoney/

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5 For details of the standards for school meals, see: http://www.schoolfoodtrust.org.uk/ and http://www.sustainweb.org/childrensfoodcampaign/food_in_schools/
## 1. Tasty morsels of background information

### During 1992: Health of the Nation white paper is published

The Health of the Nation white paper, published by the Department of Health, is heralded by Government as: “The central plank of health policy in England, forming the context for the planning of services provided by the NHS.” The Health of the Nation identifies caterers as having an important role in providing a healthy diet. A Nutrition Taskforce is established, which in turn sets up a Hospital Catering Project Team. They start to develop Nutrition Guidelines for Hospital Catering.

### During 1992: King’s Fund finds poor nutrition amongst hospital patients

The King’s Fund identifies problems with nutrition amongst hospital patients in its extensive report: “A Positive Approach to Nutrition as Treatment”.

### During 1995: Government launches Nutrition Guidelines for Hospital Catering

Celebrity Chef Albert Roux heads the list of supporters of the Department of Health’s new Nutrition Guidelines for Hospital Catering. In his foreword, Albert Roux says, “Food should be regarded as an integral part of hospital service and treatment… Food provides us with the nutrients essential to our existence and general health… In providing comfort, food can also help to make patients feel more at home, reduce stress, and actively contribute to an ambience that can enhance the quality of medical treatment.” The guidelines are largely ignored.

### During 1997: Hospital patients fail to achieve good nutrition

The Community Health Council undertakes a survey of hospital catering, and the resulting briefing examines the problems that result in some patients not eating and drinking enough when they are in hospital.

### During 2000: Council of Europe reviews hospital food

The Council of Europe creates a network of national experts from eight member countries to collect information on nutrition programmes in hospitals. The aim is to review the food provided in European hospitals, highlight deficiencies and issue guidelines to improve the nutritional care and support of hospital patients. Five major problems are identified:

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• lack of clearly defined responsibilities
• lack of sufficient training
• lack of influence on menus from the patients
• lack of co-operation among staff groups
• lack of involvement from the hospital management.

The committee concludes that better leadership is needed from national governments and senior management to improve the food served in hospitals, with good food championed by all staff involved in nutritional care and support, including hospital managers.9

A resolution on food and nutritional care in hospitals is eventually published by the Council of Europe (made up of ministers from European Union countries, including the UK) in November 2003 (see below).

2. The decade of failures (2000 to 2010)

During 2000: NHS Plan sets out care plan (costing £10m), including food targets

The NHS finds that up to 40% of patients are malnourished in hospital and one in 10 would have a shorter stay in hospital if the food was better.10 The resulting five-year NHS Plan11 states: “These standards are not good enough. The food is variable in quality, it is not provided in a way which is sufficiently responsive to patients, and too much of it is wasted as a result.”

The NHS commits £10 million12 to achieving a plan by 2001 that includes the following targets:
• a 24-hour NHS catering service with a new NHS menu, designed by leading chefs. This was to be a minimum standard for all hospitals
• a national franchise for NHS catering should be examined to ensure hospital food is provided by organisations with a reputation for high quality and customer satisfaction
• half of all hospitals should have new ward housekeepers in place by 2004 to ensure that the quality, presentation and quantity of meals meets patient needs; that patients, particularly elderly people, are able to eat the meals on offer; and that the service patients receive is available round-the-clock
• dieticians should advise and check on nutritional values in hospital food. Patients’ views were to be measured as part of the Performance Assessment Framework and there were to be unannounced inspections of the quality of hospital food.

As of 2009, nine years after the target date, most of these targets remain unmet.

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9 See a report of this activity at: http://linkinghub.elsevier.com/retrieve/pii/S0261561401904947
10 Evidence used by the NHS in its launch of the NHS Plan, see e.g.: http://news.bbc.co.uk/1/hi/uk/1019874.stm
12 See BMJ article at: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1173397/
May 2001: NHS launches Better Hospital Food initiative (costing £40m)

Little progress has been made on the voluntary targets published by the NHS over a year previously. The NHS commissions BBC *Masterchef* host Lloyd Grossman to lead a food team for a £40m revamp of NHS catering called the Better Hospital Food initiative. They create 300 restaurant-style recipes for use in hospitals. “It is not a gimmick, it is not a celebrity exercise,” explains Loyd Grossman. His team also includes Mark Hix of The Ivy restaurant, John Benson-Smith of Hazlewood Castle, and The Savoy's Anton Edelmann. “It is not a joke, it is not trivial – it is incredibly important to a lot of people,” says Grossman.

The Better Hospital Food publishes an “Initial sustainability guide”. The environmental suggestions it contains are very weak and the guidance is rarely used and never updated. Five years later, the Better Hospital Food initiative is scrapped (see 2006, below) as ineffective and unwieldy.

During 2001: NHS launches ‘Essence of Care’ guidance

A new programme is launched by the NHS to provide ‘Patient-focused benchmarking for health care practitioners’. The guidance is intended to help healthcare professionals improve the quality of service in the NHS and patient experience. It does not address sustainability. On the theme of food and nutrition, it focuses on governance issues, such as hospitals having policies and training to ensure that patients are happy with their food, good records are kept of food and fluid intake and that patients are consulted throughout. It does not seek to improve food quality, or the nutritional value of the food.

Six years after its launch, a review in the *Nursing Times* journal states that “many areas have struggled to implement this initiative efficiently or to understand it fully. An online poll conducted by *Nursing Times* and referred to by Hartley (2004) identified that only 46% of respondents were aware of Essence of Care and thought it was making a difference, 20% of those who took part did not understand it and a further 25% assumed it was a management initiative.”

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14 Read more about Essence of Care at: http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4005475
15 Read the Nursing Times article at: http://www.nursingtimes.net/nursing-practice-clinical-research/the-essence-of-care-developing-practice-through-partnership/217246.article
During 2003: Defra launches Public Sector Food Procurement Initiative (costing at least £2.5m)

In the wake of the 2001 outbreak of Foot and Mouth Disease, and in response to the Sustainable Food and Farming policy commission, Defra launches the Public Sector Food Procurement Initiative (PSFPI) with a budget of around a quarter of a million pounds per year. Its stated aim is to put British food and farming back on its feet, and to support “a world-class sustainable farming and food sector that contributes to a better environment and healthier and prosperous communities”. It sets out to:

- Increase consumption of healthy and nutritious food
- Improve sustainability and efficiency of production, processing and distribution
- Increase tenders from small and local producers, and cooperation among buyers
- Increase demand for organic food
- Promote animal welfare
- Create better working conditions and fair treatment for catering staff and suppliers
- Improve data collection and measurement of performance

Six steering groups are set up to coordinate the PSFPI, which are:

- Sustainable Procurement Task Force
- Food Procurement Implementation Group (FPIG, set up in 2003)
- Sustainable Procurement Operations Board (SPOB, set up in 2006)
- Government Office of the Regions Steering Group (GSOR, set up in 2005)
- PSFPI Practitioners Group (set up in 2006)
- Food Procurement Group (FPG, set up in 2006)

The programme publishes reams of ‘how to’ guides, tools, a website, food quality standards, guidance on contract management practices, standardised contracts and food benchmarking tools. Some good work is done to help smaller farmers and suppliers get reliable public sector contracts but, over time, the financial support dwindles.

After six years, the PSFPI evaluation conducted by management consultants Deloitte (see 2008, below) concluded that “take up of the initiative was limited” and “PSFPI is not embedded in the public sector. The initiative is mothballed in 2009, to be superseded by the Healthier Food Mark (see below).

November 2003: Advisory group shows malnutrition in hospital patients persists

The Malnutrition Advisory Group publishes a report highlighting the continuing high proportion of patients malnourished in hospital.

December 2003: Council of Europe issues resolution on hospital food

Aiming to address malnourishment among hospital patients, the Council of Europe issues a resolution on hospital food, encouraging hospitals to identify patients at risk of malnourishment.

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and take steps to ensure that these people eat well.\textsuperscript{19} The resolution does not address sustainability issues, nor does it deal with nutritional or food quality standards other than for people at risk of malnourishment.

\textbf{2004}

\textbf{During 2004: NHS identifies hospital food as a priority for health and sustainability}

The NHS funds the Sustainable Development Commission’s Healthy Futures programme\textsuperscript{20} to “develop the capacity of NHS organisations to act as good corporate citizens” for sustainability, highlighting two priorities:

- food procurement in the NHS and across other public sector services
- capital developments and new building programmes in the NHS.

A draft takes three years to write, and another year elapses before it is eventually issued as a consultation document in December 2008.

The NHS also publishes a major review of its health strategy called Choosing Health: Making healthy choices easier,\textsuperscript{21} in which they commit to improving both the nutritional value and sustainability of hospital food. On nutrition, it says:

“Catering providers in both the public and private sector have an important role to play in influencing access to healthier foods. Public procurement of food through the NHS, the Prison Service and the Ministry of Defence offers an opportunity to demonstrate best practice. We will develop nutritional standards for all foods provided by these organisations and other public bodies – building on the work in schools. Our intention is to increase access to a range of healthier foods and will take account of the different formats of food provision – restaurant, fast food, vending, etc. This will be supported by a new Working Group and will link into the work of the Public Sector Food Procurement Initiative led by Defra and the work of the Expert Panel on Armed Forces Feeding (EPAFF), recently set up by the Ministry of Defence. We will look at opportunities to promote this guidance into the private sector through the introduction of a national ‘Healthy Eating’ award. This will build on local initiatives, often promoted by environmental health, such as ‘Heartbeat’ awards.”\textsuperscript{22}

Nutritional standards do not emerge, but more guidance is issued and a government-run Healthier Food Mark health and sustainability award for public sector caterers starts to be piloted five years later, at the end of 2009 (see below).

\textsuperscript{18} Council of Europe Committee of Ministers, Resolution ResAP(2003)3 on food and nutritional care in hospitals (Adopted by the Committee of Ministers on 12 November 2003 at the 860th meeting of the Ministers’ Deputies), see: https://wcd.coe.int/ViewDoc.jsp?id=85747
\textsuperscript{19} Information via the National Patient Safety agency: http://www.nrls.npsa.nhs.uk/resources/?entryid45=59865
\textsuperscript{20} Details of the scheme can be found at: http://www.corporatecitizen.nhs.uk/
\textsuperscript{21} To download Choosing Health, go to the DH website at: http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4094550
\textsuperscript{22} See: http://www.nice.org.uk/niceMedia/docs/Making_the_case-Procurement.pdf
May 2005: Government sets up the Sustainable Procurement Task Force

The Sustainable Procurement Task Force is established in May 2005, charged with drawing up an action plan to change sustainable public procurement so that the UK is among the leaders in the EU by 2009. It sets about writing a lot of reports.

During 2005: Chief Medical Officer calls for healthy and sustainable food in the public sector

The Government’s Chief Medical Officer, Sir Liam Donaldson publishes his Annual Report for 2004: "On the State of Public Health". It features a chapter entitled A Fresh Look: Realining food procurement in the public sector, stating that:

- “Despite recent progress, considerable scope exists to promote healthier foods and to achieve greater sustainability in food procurement practices across the board.”
- “The public sector should use its huge financial muscle as a purchaser and procurer to improve the nation’s health and promote a more sustainable food chain.”

Sir Liam Donaldson’s excellent recommendations include:

- Government should broaden the methodology for demonstrating value for money in government procurement policy to include long term health benefits and sustainable development.
- Public sector food procurers should collaborate to agree creative specifications for contracts to supply food and catering, incorporating nutritional criteria.
- Public sector food purchasers should create local trade groups, with business support organisations and local suppliers to raise awareness of forthcoming tender and supply opportunities, building on the progress already made through the PSFPI.
- The proportion of high-quality local suppliers of food through the public sector should be increased substantially.
- Seasonality should be embraced and incorporated into supply calendars, rather than specifying a standard year-round supply.
- Public sector food buyers should be given training and guidance on the impact of food and diet on health and on the principles of sustainable purchasing.
- The Food Standards Agency’s review of nutritional standards in public institutions should be used as a basis for action and the FSA should continue to track progress on reform of public sector food procurement and purchasing.

None of these are adopted by Government, and no new incentives are given to caterers or NHS Trusts to take up the Chief Medical Officer’s recommendations.

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During 2005: 65,000 people in care homes at risk of malnutrition

A report by the British Association for Parenteral and Enteral Nutrition finds that more than one-fifth of residents over 65 in UK care homes are at medium to high risk of falling victim to malnutrition, which equates to around 65,000 people. Figures from the Commission for Social Care Inspection show that more than 2,000 care homes out of the 11,000 in England failed to meet minimum standards for meals.25

2006

During 2006: MP calls for food standards for nursing homes

MP Paul Burstow tables a private member’s bill calling on Government to introduce minimum nutritional standards for all care homes and tougher regulation via the Food Standards Agency. He describes this work as needing to “tackle the scandal that is elder abuse in our country”.26

March 2006: Audit Office says the UK can afford sustainable public sector food

The National Audit Office reviews public sector food procurement.27 They explicitly include health and sustainability criteria and conclude that “increasing efficiency can have a positive impact on sustainability and nutrition, by enabling organisations to use cost savings in some areas to help to finance improvements in others; for example, savings resulting from better checks on goods delivered could be used to improve the quality of ingredients purchased, or improved nutritional quality could lead to reduced hospital stays and so improve the overall efficiency of NHS Trusts.”

It takes a year for the Treasury to respond to the NAO report (see May 2007, below).

May 2006: Better Hospital Food initiative is scrapped

Five years after its launch (and only two months after the National Audit Office has highlighted how important it is to improve the nutritional quality and sustainability of public sector food), the NHS Better Hospital Food initiative limps to a halt and is finally scrapped.28

The Department of Health (DH) had set a target that all hospitals should introduce at least three new meals promoted by the initiative, but after five years the Hospital Caterers Association estimated that 25 per cent of NHS trusts had failed to introduce a single dish from the new menus, with less than half offering three of the choices.

• Loyd Grossman, celebrity figurehead of the initiative, commented: "Although we made significant improvements in delivering better quality food to many hospitals, there is still a

26 Read more about this at: http://www.caterersearch.com/Articles/2006/02/23/305368/care-home-catering-takes-its-turn-in-the-spotlight.html
27 The NAO report ‘Smarter food procurement in the public sector’ can be downloaded at: http://www.nao.org.uk/idoc.ashx?docId=8103a285-1e8f-4e26-a988-9c6ebedb9a4d&version=-1
very long way to go in improving patient nutrition. The Government has made no other plans for improving standards and I am extremely concerned that without a strong, and persistent, voice promoting the issue, it will slip through the cracks."

- Simon Williams, policy director of the Patients Association, who sat on the Better Hospital Food Programme panel, said: “There is now nobody to drive this issue forward and in the current climate of NHS budget cuts, food and catering will be hit first which will mean a rapid decline in standards and be very bad news for patients.”

June 2006: Sustainable Procurement Task Force says “it’s not difficult” to achieve sustainable procurement

The Sustainable Procurement Task Force publishes a National Action Plan, giving recommendations on how the UK Government can successfully meet its target of being recognised as amongst the EU leaders in sustainable procurement by 2009. Over the year since its establishment (see above), the task force has published the following:

- UK Government Sustainable Procurement Action Plan
- Local Government Sustainable Procurement Action Plan
- Costing the future: Securing Value for Money through Sustainable Procurement
- SOGE (targets for Sustainable Operations on the Government Estate)
- SDiG (an assessment of Sustainable Development in Government)

Sir Neville Simms, Chair of the task force, says: “This is the Sustainable Procurement Task Force plan for action. It requires determined effort from the top down throughout both central and local government, the NHS, indeed everyone who either spends money from the public purse or on behalf of the public. The message from the Task Force is simple: this is worth doing, there are clear benefits, it can be done, it is not difficult, it will not cost more in the medium term and will show real dividends in the long term.”

The action plan has simple recommendations, namely that government should:
1. Lead by example
2. Set clear priorities
3. Raise the bar
4. Build capacity
5. Remove barriers
6. Capture opportunities

On the third point ‘raise the bar’, Sir Neville Simms’ foreword to the action plan states that “The Task Force believes that existing minimum standards for central government should be properly enforced and extended to the rest of the public sector and that further standards (both minimum and forward-looking) should be developed in the priority areas of spend it has identified.” His list of key sectors includes food. He adds, “The Task Force recommends working with suppliers to identify future needs and to phase out products and services that fall below minimum standards by 2009.”

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Progress and take-up is predictably slow. By 2008 (with only a year to go until the 2009 target of the UK becoming a ‘leader’ in sustainable procurement by 2009), the Sustainable Development Commission criticises government’s performance against its own sustainability targets and calls on the Government (yet again) to show leadership by setting more ambitious targets for improving sustainability on the Government estate (see 2008, below).

**During 2006: Healthcare Commission says hospital patients need help to eat meals**

In 2006 the Healthcare Commission reports in England and Wales that, “Of those patients who needed help to eat their meals, fewer (58%) said they always received it, down from 62% in 2005. The rise in the proportion of patients saying they did not get enough help from staff to eat their meals is concerning, increasing from 18% in 2005 to 20% in 2006.”

**September 2006: Age Concern shows malnutrition in hospital patients persists**

The charity Age Concern publishes a major report into what they call “the scandal of malnourished older people in hospital”. In the survey, nine out of ten nurses say they do not have time to provide the elderly with the assistance they need at mealtimes. The Age Concern report Hungry to be Heard contains descriptions of food trays left at the bedside, only to be removed untouched half an hour later either because the patient couldn't reach it or didn’t have the ability to eat. According to Age Concern, six out of 10 older people, who occupy two-thirds of hospital beds, are now at risk of malnutrition while in hospital.

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**2007**

**During 2007: Royal College of Nursing launches *Nutrition Now!* campaign**

The Royal College of Nursing launches a *Nutrition Now!* campaign. Professor Alison Kitson, Executive Director for Nursing at the Royal College of Nursing, says: “Good nutrition and hydration are vital for all of us, but they are even more important for people who are ill. Nurses really do care deeply about this but to ensure that good patient nutrition happens, it needs to be a priority for everybody in the system from the catering staff through to chief executives. Only then will nurses be able to break through the obstacles and get the time and resources to ensure better patient care. The time has come to really make this a top priority. Our campaign will highlight the need to tackle this issue and take action now.”

The campaign is supported by publication of a new (and voluntary) set of ‘RCN Principles for Nutrition and Hydration’ giving advice to the nursing profession.

The campaign aims to raise awareness of the importance of food and drink to patient health and to ensure that patients get good nutritional care. It runs for a year and a half (until April 2009), when it is cancelled due to lack of take-up. A senior catering manager at a London hospital states, “They couldn’t convince nurses to care about nutrition as they don’t see it as their job.”

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31 See the Hungry to be Heard campaign at: http://www.ageconcern.org.uk/AgeConcern/hungry2beheard.asp
32 See also: http://www.dailymail.co.uk/news/article-502702/Hospital-food-makes-patients-feel-sick.html
33 See the press release for the launch of the RCN’s campaign at: http://www.rcn.org.uk/news/events/campaigns/nutritionnow/news_stories/news_one
34 Informal evidence submitted by email to Sustain by a senior NHS catering manager.
May 2007: Public Accounts Committee recommends high animal welfare, fair trade and healthy eating standards in the public sector

The Public Accounts Committee meets to examine progress in efficiency of procuring public sector food. They are told by officials giving evidence\(^{35}\) that:

- All NHS patient menus should be approved by a qualified dietitian, with consideration given to the dietary requirements of the whole in-patient population.
- The Department of Health is committed to producing central guidelines for all food provided.
- The Food Standards Agency has begun work to develop nutrient- and food-based guidance for institutions, to feed into the Department of Health’s consultation on the National Minimum Standards and regulations for adult social care.
- Defra is encouraging public sector bodies to specify higher animal welfare standards through a new model specification clause that promotes farm assurance standards, including higher level schemes such as Freedom Foods, or equivalent. The model clause allows buyers to give a higher weighting for produce meeting higher level standards when awarding contracts, on a value for money basis.

All of these schemes will be voluntary, so there is no guarantee that anything will change.

The committee is also told by the NHS that “The majority of hospitals in England continue to comply with the standards set out by the Better Hospital Food Programme.”\(^{36}\) However, this reassuring statement is clearly at odds with the finding (see above) that 25% of NHS trusts had failed to introduce a single dish from the new Better Hospital Food menus, with less than half offering the target, which was three of the choices.

Helpfully, the Public Accounts Committee states that:

- Public bodies should be able to demonstrate that the animal welfare and food production practices of their suppliers adhere to the standards under which UK producers operate and satisfy themselves that enough independent spot checks and inspections are taking place.
- “Defra, together with the Office of Government Commerce and the three main food procuring departments, should work with the major food and catering firms to develop and promote improved contract management practices. These should, for example, encourage smaller, locally based producers by breaking contracts into smaller lots, and focus on outcomes such as reducing waste or increasing healthy eating.”
- “Public sector procurers should seek to increase the proportion of food purchased from ‘Fair Trade’ sources that offer the same standard at a competitive price. In some cases fair trade products will be more expensive but departments should work with the supply chain to improve competitiveness while still securing a fair price for producers.”


The Office of Government Commerce will have a new remit, structure and powers, set out in a paper Transforming Government Procurement, to “drive the step change needed to support better and more effective purchasing by Government”.

Unhelpfully, the Public Accounts Committee recommends that government should provide yet more voluntary guidance, toolkits and workshops. This is despite the conclusion that: “The Department of Environment, Food and Rural Affairs has produced overarching guidance and toolkits on sustainable food procurement, but turning these into practical and effective contracting arrangements at the local level has proved less successful.”

October 2007: The Department of Health launches a Nutrition Action Plan

A Nutrition Action Plan from the Department of Health outlines how nutritional care and hydration can be improved in hospitals and suggests five key priority areas through which managers and staff working in health and social care can address this. Put together by a group of 25 stakeholders and civil servants, led by Ivan Lewis MP, the initiative coordinates existing nutrition initiatives and encourages everyone to work harder on them, and to raise awareness of the importance of nutrition and to think about providing more training, but without additional funds. A Nutrition Action Plan delivery group is commissioned to report on their progress, which sets to work in January 2008 and reports in August 2009 (see ‘August 2009’ below and ‘New developments in 2010’, above).

2008

August 2008: The Department of Health launches online nutrition training

In support of the Nutrition Action Plan, an online e-learning programme is launched to help nursing and other staff learn more about nutrition for hospital patients. Staff do not have to participate, there is no budget to cover staff time, and there is no integration of sustainability.

July 2008: Cabinet Office Food Matters report promises action

The Cabinet Office publishes Food Matters: Towards a Strategy for the 21st Century. It states that: “The public sector in England should be leading by example. More nutritious, environmentally sustainable food will be delivered through a new ‘Healthier Food Mark’ linked to standards for food served in the public sector. The standards will help in delivering better food with existing resources. The scheme will be voluntary initially and piloted within central government, HM Prison Service and NHS services. The Government will then consider if compliance should be made compulsory in England for central government and for prisons. As the scheme progresses, all public bodies in England will eventually be encouraged to sign up – ensuring a minimum standard of healthier food across the public sector.”

37 Read more at: http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_079931
38 See the e-learning programme at: http://www.dh.gov.uk/en/SocialCare/Socialcarereform/Dignityincare/DH_087414
Civil servants from the Department of Health and the Department of the Environment, Food and Rural Affairs insist that any improvements should be achieved without any extra money, being “cost neutral”. A call is issued for hospital caterers to sign up for a pilot project, which will be run by the management consultants Deloitte.\(^\text{39}\)

**July 2008: BBC reveals hospitals waste £1m worth of food every year**

A BBC Freedom of Information request reveals that “Huge differences in the way meals are controlled and the proportion of food being thrown away” in different parts of the country. Journalists calculate that the cost of the wastage could pay for 50 extra nurses.\(^\text{40}\)

**During 2008: Which? investigates the unhealthy state of hospital food**

*Which?* (formerly the Consumers Association) conducts an investigation and finds that in 18 of the 21 hospitals checked, 86% of meals contain too much salt; 67% too much saturated fat and more than half (52%) contain too much fat, tested against government health guidelines. Nikki Ratcliff, from *Which?*, said: “Hospitals have a responsibility to serve and promote healthy food, so the situation at the moment is farcical. Although we did find some examples of good practice, most hospitals we visited really need to raise their game.”


**October 2008: Nutrition Action Plan delivery board reports on ‘awareness raising’**

An interim report on the Department of Health’s Nutrition Action Plan\(^\text{41}\) reports on very minor achievements. Almost everything reported as key achievements are seminars, ‘awareness raising’, articles in magazines, and meetings of stakeholder groups. It also describes a series of yet more toolkits and voluntary guidance notes and reports that some funds have been found for a “pocket guide to nutrition”, to be handed out to nurses. No evidence is presented that anything has changed as a result.

**2009**

**January 2009: Sustainable Development Commission urges government to show leadership**

At the start of the year when the government has aimed to become an EU leader on sustainable procurement (see above), the Sustainable Development Commission\(^\text{42}\) criticises government’s performance against its own sustainability targets. Their review, published in January 2009, states, “Although Ministers have always accepted the need to lead by example, delivery has lagged some way behind.” The report notes that some progress has been made in areas such as transport and energy efficiency, but on sustainable food procurement, it has just a few case studies to report.

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\(^{39}\) Food Matters, 2008, [http://www.cabinetoffice.gov.uk/media/cabinetoffice/strategy/assets/food/food_matters1.pdf](http://www.cabinetoffice.gov.uk/media/cabinetoffice/strategy/assets/food/food_matters1.pdf)

\(^{40}\) Read the story on the BBC News at: [http://news.bbc.co.uk/1/hi/england/7534719.stm](http://news.bbc.co.uk/1/hi/england/7534719.stm)


January 2009: Hilary Benn sets up Council of Food Policy Advisors

Following the Food Matters strategy report, the Secretary of State for the Environment Hilary Benn sets up the Council of Food Policy Advisors, which includes specialists in catering, training, sustainability, health and public procurement.\(^{43}\) Their remit is to:

- Provide advice on how to achieve sustainable production, distribution and consumption of food, ensuring that it is available and affordable for all sectors of society
- Consider the effects of global trends on the above
- Advise the Secretary of State on how to achieve the four objectives for food policy set out in the Strategy Unit’s report Food Matters: Towards a Strategy for the 21st Century
- Make practical policy recommendations.

April 2009: Public health minister commissions sustainable food guidelines for hospitals

Following a visit to a pioneering hospital in Cornwall\(^{44}\) where healthy and sustainable food are paramount, the then health minister Ben Bradshaw commissions yet more guidelines for hospitals to improve their food. He seems unaware both that his own Department of Health is also commissioning voluntary standards for the Healthier Food Mark and that a stack of guidance already exists (see above), which is largely ignored. A committee meets several times and eventually publishes Sustainable Food: A Guide for Hospitals\(^{45}\), which turns out the most far-reaching sustainability guidance yet seen. By December 2009, in a Sustainable Development Commission report\(^{46}\), the guidelines are praised as one of only three government or voluntary sector initiatives to integrate health and sustainability.

April 2009: Public Sector Food Procurement Initiative falters

After six years, and around £2.5 million of taxpayers’ money, the Public Sector Food Procurement Initiative\(^{47}\) is evaluated by the management consultants Deloitte (at a cost that has not been made public), which tells Defra that:

- Take up of the initiative was limited
- PSFPI is not embedded in the public sector
- Buyers don’t have the skills required to implement the initiative
- The initiative relies on enthusiastic individuals for success
- There is a perceived cost barrier

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\(^{43}\) For more information, see: http://www.defra.gov.uk/foodfarm/food/policy/council/index.htm

\(^{44}\) See information about the Cornwall Food Programme: http://www.cornwallfoodprogramme.co.uk/

\(^{45}\) Download Sustainable Food: A Guide for Hospitals (2009) at:

\(^{46}\) Setting the Table: Advice to Government on priority elements of sustainable diets (2009), see: http://www.sdcommission.org.uk/publications.php?id=1033

\(^{47}\) See the PSFPI website (where the evaluation can also be downloaded) at:
http://www.defra.gov.uk/foodfarm/policy/publicsectorfood/
• Caterers feel that the work is ‘low priority’
• The initiative would benefit from more visible political weight.

Deloitte recommends to Defra that government intervention should continue because “Sustainable sourcing must become a routine part of contract drafting, not an exceptional best practice example. Achieving widespread take-up of the objectives of the PSFPI is important to generate economies of scale and deliver a sustainable market for suppliers.” In 2009, it remains unclear what has become of PSFPI, but it appears to have been mothballed, to be replaced by the Healthier Food Mark (see 2008: Cabinet Office promises better hospital food).

April 2009: Royal College of Nursing Nutrition Now! campaign is scrapped
The Royal College of Nursing’s Nutrition Now! campaign is cancelled due to lack of take-up.

April 2009: Office of Government Commerce launches collaborative procurement project
The Office of Government Commerce, part of the Treasury, launches a collaborative procurement initiative, whose stated aim is to:
• Achieve minimum standards and best practice target setting
• Implement measurement and audit against standards
• Become the lead expert for new green approaches, technologies and recommendations
• Improve management systems to provide targeted efficiency savings

The following diagram for the OGC provides a glimpse of the structures designed to oversee this process, involving at least eight committees made up of senior civil servants and project officers. It seems that no new money is available to the caterers themselves to implement any recommendations or new guidance that may emerge.
Their remit includes food, catering services and catering equipment supplied to: Ministry of Defence; Prisons; Local Authorities; National Health Service (NHS – including hospitals); Education; and Distribution Hubs.

**February 2009: Government drafts Healthier Food Mark guidelines**

Officials from the Department for Health and Department for the Environment, Food and Rural Affairs get together to draft criteria for the Healthier Food Mark, which the Cabinet Office Food Matters team has directed should integrate both health and sustainability criteria. Analysis of the draft standards shows that a caterer could get government endorsement and a ‘gold star’ even if they served:

- 70% of fresh vegetables and all processed (e.g. ready-cut or frozen) vegetables produced to no recognised standard of environmental protection.
- All fruit produced to no recognised standard of environmental protection.
- No Marine Stewardship Council certified sustainable fish.
- No tea, coffee, chocolate, sugar or exotic fruit certified as fairly traded, and no implementation of a wider ethical trading policy, such as the ethical procurement guidance currently being explored by the NHS Purchasing and Supply Agency.
- Food procured in a way that has done little or nothing to reduce the environmental impact of transport.
- Livestock products produced to no accredited standard of animal welfare or environmental protection any higher than the current legal minimum.

There is still no indication of how government thinks this voluntary scheme will be any more successful than previous failed attempts, and there appears to be no extra money on offer.

**April 2009: Malnutrition in hospitals and care homes continues to rise**

In answer to a parliamentary question, the Department of Health reveals that over 2,600 people have died from malnutrition in hospitals and care homes in England during the past decade.

The Conservatives claim that the government figures suggest an 85% increase in those being discharged from hospitals undernourished since 1997. The biggest regional increases in hospital deaths from malnutrition have been in the East Midlands (55%) and the South East (27%) and the North-west (23%).

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48 For details of the controversial Healthier Food Mark, a joint project of DH and Defra, see: http://www.dh.gov.uk/en/Publichealth/Healthimprovement/Healthyliving/HealthierFoodMark/index.htm
Stephen O’Brien, shadow minister for health, said: “A healthy diet and nutritional care are absolutely crucial if patients are to make a swift recovery, yet the Government is presiding over a culture of carelessness and rising deaths.”

May 2009: Healthcare professionals condemn NHS nutrition initiatives

The ‘groundbreaking’ government Nutrition Action Plan (launched 2007, see above) intended to tackle malnutrition and ensure the nutritional needs of older hospital patients were met has had little impact on care, according to a joint survey by Nursing Times and Health Service Journal. Of more than 400 healthcare professionals and NHS managers responding to the survey, nearly one-quarter said the initiative had improved care ‘not at all’ or ‘not much’.

When asked for their opinions on levels of nutritional care and management in the NHS, replies included ‘abominable’ and ‘potentially lethal’. Another respondent said nutrition was ‘taking a back seat’ compared with other priorities. The plan also called for hospitals to set up nutrition screening groups or support teams. Just over half of respondents said this had happened at their trust but only 37% said nutritional care was championed at board level. A spokesperson for the Department of Health said the nutritional action plan delivery board would ‘shortly’ submit a final report assessing the success of the plan to ministers.

May 2009: Largest catering company in the world supports legally binding standards

In an evidence gathering session of the Council of Food Policy Advisors, Compass – the largest caterer in the world, says that obligatory standards are the only way to achieve lasting change in food provision in the public sector. The notes of the meeting report: “To see change, procurers need to be mandated to adhere to national standards. Change will require clear mandatory standards, and this will ultimately bring price down through economies of scale. Food procurement hubs and combined buying will ensure that this price advantage is exploited. While the approach to procurement remains voluntary change will not be made as buyers will focus on the impact on the bottom line. There needs to be a common set of standards, which include nutrition, local and sustainability. Due to an inconsistent approach in the public sector, the changes that have been made in private sector contracts by the big 8 services providers towards higher nutritional standards are not consistently reflected in public sector contracts.”

June 2009: Celebrity chef Simon Rimmer asked to revamp Liverpool’s hospital food

The Liverpool NHS Trust asks celebrity chef Simon Rimmer to re-vamp its hospital menus.

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51 See the Nursing Times report at: http://www.nursingtimes.net/whats-new-in-nursing/specialists/older-people/nhs-still-lagging-on-nutrition-care/5001231.article
53 See a report of this initiative at: http://www.costsectorcatering.co.uk/online_article/Celebrity-chef-Simon-Rimmer-revamps-hospital-menus/7439
June 2009: Heston Blumenthal hired to sort out hospital food

Fresh from his work to upgrade the menus of the Little Chef motorway service station chain, celebrity chef Heston Blumenthal announces that he has been commissioned by government to improve hospital food.54

August 2009: Government issues tender for voluntary Healthier Food Mark pilots

Delayed repeatedly by challenges from industry and public interest organisations, the Officials from the Department for Health and Department for the Environment, Food and Rural Affairs issue a tender for a person to help them manage the pilot projects for the Healthier Food Mark. It appears that the schedule has slipped by nearly a year, and the process will not be complete until late in 2010 (well after the General Election). Deloitte is awarded the contract to manage the pilot project.

August 2009: Expert nutrition reviewers cite lack of leadership for malnutrition deaths in hospitals

After a number of lengthy delays, the Nutrition Action Plan Delivery Board publishes its progress report. It indicates that an estimated 47,800 people are likely to have died with malnutrition while in NHS hospital care during 2007.55 In the report, the Delivery Board recommends as a key priority that the government should “clarify (nutrition) standards and strengthen inspection and regulation” to address this problem. The Government takes until February 2010 to respond (see 2010 Updates section at the start of this document).

The Nutrition Action Plan Delivery Board’s report concludes with this recommendation: “We recommend that [the Government, the Department of Health, regulatory bodies, service providers, professional bodies and campaigners] accept direct responsibility for ensuring that no-one’s life is unnecessarily lost, shortened or damaged because of any failure to fully consider and meet their continuing needs for, and right to, appropriate nutrition.”

August 2009: University researchers say hospital food is worse than prison food

Bournemouth University undertakes research into hospital food and announces that hospital food is worse than prison food.56 The reasons, in a report called ‘Hungry in hospital, healthy in prison?’ sound horribly familiar:

- Poor food quality and nutritional content
- Poor food service, especially for patients without the ability to feed themselves
- Poor staff training57

56 See the research at: http://www.bournemouth.ac.uk/newsandevents/News/2009/sep/ne001_foodservice.html
57 Read the story on the BBC News at: http://news.bbc.co.uk/1/hi/uk/8229815.stm
September 2009: Council of Food Policy Advisors recommends legally binding standards

The Council of Food Policy Advisors, which advises Defra and the Secretary of State for the Environment, publishes its first major report. Among its three headline recommendations, the Council calls for higher health and environmental standards for public sector foods, stating that: “Mandatory food based standards should be developed for application in different settings (including hospitals, prisons, care homes, public sector canteens) based on the healthy low impact diet by 2012. The introduction of mandatory standards ensures that health and sustainability count against the bottom line and levels the playing field for contractors and procurers.”

October 2009: Defra ignores recommendation to adopt legally binding standards

In its response to the Council of Food Policy Advisors (see above), Defra ignores the recommendation to adopt mandatory health and environmental standards for public sector food. It fails to mention the term mandatory at all, and simply says that “standards are important”, commercial agreements need to be consolidated, regional procurement hubs could be developed, and that training has a useful role to play.

Defra continues to champion the voluntary and flawed Healthier Food Mark, stating: “We are now aiming to simplify the mark, and are carrying out a trial to look in more detail at the various criteria which stakeholders have proposed to determine what the mark should look like, before starting the formal pilot when we seek to test organisations’ ability to comply with the Healthier Food Mark itself.”

Defra gives no indication of how this voluntary programme will be any more successful than the previously failed and expensive Public Sector Food Procurement and Better Hospital Food Initiatives. The only difference appears to be that this time there’s no celebrity chef… (as yet).

December 2009: Decade of hospital food failures draws to a close, but more is to come…

As the decade draws to a close, government seems no closer to having achieved either of its priority aims: to improve nutrition in hospitals, and to become an EU leader in sustainable procurement by the end of 2009. As the year 2010 begins, there is little sign of success. Updates included at the start of this revised report, based on new evidence revealed in 2010, demonstrate that government is continuing to repeat the mistakes of the past. Over three-quarters of a million pounds have been spent commissioning yet more consultants to pilot yet another voluntary scheme. There seems little prospect that this will be any more successful than the plethora of voluntary initiatives tried during the Decade of Hospital Food Failure.

Research updated by Kath Dalmeny and Alex Jackson, from the Good Food for Our Money campaign. Published March 2010 by Sustain: The alliance for better food and farming: www.sustainweb.org/goodfoodforourmoney/

59 Read the full Defra response at: http://www.defra.gov.uk/foodfarm/food/policy/council/reports/response.htm