Home from hospital: Making sure people have access to food at hospital discharge and beyond

July 2021

Introduction

This new project focuses on ‘enterprising’ responses to ensure older people have access to food from the point of discharge from hospital, during reablement and recovery and where needed for the longer-term. The project will present good practice, as well as shared challenges and solutions from across the country.

Project outcomes

1. Patients can access appetising and nutritional meals and/or food after being discharged from hospital to assist with recovery, reduce readmission and avoidable costs. (Indicator: Number of Trusts supporting enterprises)

2. Enterprises can sustain effective, nutritional and appetising meals and/or food provision for patients during their period of recovery and longer term. (Indicator: Number of enterprises)

What’s the problem?

All people, at all stages of life, need and deserve good food. Food provides health and strength and is a way to keep people connected to their neighbours and community. But nationally, more than 1.3 million people over the age of 65 are malnourished. Malnutrition makes people more susceptible to physical and mental ill-health, extends hospital stays and makes re-admission more likely; indeed malnutrition accounts for nearly £20bn of health and social care spending in England (BAPEN, 2015).

Unfortunately, the need to ensure access to food can often be lost between health and care services; access to effective models of meals or food provision in the community at this point is highly varied. This can result in reduced independence and quality of life, malnutrition, increased chance of hospital readmission and increased pressure on community health services. While government is taking concrete action on the quality of food in hospital, this is unfortunately not being mirrored by similar action on access to food in the community, including at the point of discharge from hospital.

The recently published White Paper for health and care services in England restates the Government’s commitment to prevention and the integration of health and social care, as well as
specific action on hospital food and improving the hospital discharge process. This provides a specific opportunity to focus attention on enterprising approaches to nutritional meals and food provision at the point of hospital discharge, as part of recovery and reablement support for people to live at home, to reduce demand on hospital beds and to prevent readmission (currently an especially critical issue both in terms of patients post-Covid recovery and pressure on health services). This issue is not specifically referenced in the White Paper, but access to nutritional and appetising food should be a key part of the hospital discharge process.

Yet there are functioning exemplars around the country running viable and enterprising approaches to meeting needs and offering integrated support thereby improving outcomes for people, preventing escalation of needs, ensuring strong recovery and ultimately saving public money.

There is a modest but growing research base in support of action, for example, a recent study has found that over 90% of recipients receiving a Nutritional and Wellbeing Service, offered by the Hertfordshire Independent Living Service (HILS) meals on wheels service, maintained or improved their nutritional status over time. The proportion of recipients identified as being at low risk of malnutrition improved noticeably from 57% to 73%. Furthermore, recent Sustain research with local authority staff identified a general consensus that meals on wheels services are preventative and provide multiple health and social benefits and are cost-saving when public expenditure is looked at holistically. There are also opportunities for services to offer good employment and support more localised and sustainable producers and supply chains.

**Project aims and activities**

1. **To gather learning from a range of successful enterprising models.**
   
   We will run a workshop and one-to-one interviews to better understand the range of successful and enterprising operating models and business cases, drivers for success, professional and clinician engagement, referrals and social prescribing, economies of scale and dispersed delivery models, focus on specific patient groups, challenges and impact for beneficiaries, professionals and wider cost savings, benefits and productivity increases.

2. **To ensure enterprises are better able to develop and sustain provision.**

   We will present this information in a concise, impactful and practical briefing and toolkit. Contents will cover the rationale for this provision, successful examples from around the country and specific guidance and resources to establish, sustain, expand and evaluate provision. We will run a national summit and practical workshops with organisations running or aiming to establish enterprises. We will offer bespoke advice and signposting to those running or establishing enterprises, as well as signposting to organisations to support enterprises.

3. **To convince decision-makers, funders and investors to support viable enterprises to both meet people’s needs and to make best use of budgets and funding.**

   We will share learning and recommendations with national and local decision makers, key public sector bodies (including government health departments, national and local NHS bodies, ADASS and the LGA) and meetings with funders and investors to share the evidence and opportunities to support effective enterprises.

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How is the project run?

Simon Shaw will lead the project and the Meals on Wheels Alliance (convened by Sustain) will act as the steering group for the project. As part of and alongside this, a range of enterprises and organisations have committed to share their learning, including diverse meals delivery models. We will make the most of a wide range of links with local authority, public health, health, community and enterprise organisations.

Timeline

July - Sept 2021  Evidence gathering
Oct 2021      Draft publication
Nov 2021       Launch of publication
Nov 2021 – Jan 2022  Dissemination and meetings

Project supporters include:

![Supporter Logos]

Project funders

![Funder Logos]

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