Nutritional Care Quality

Dame Jo Williams
Chair, Care Quality Commission
Our Work

We make sure people get better care

Who are we improving care for?

- People who use services, carers and families
- People in more vulnerable circumstances
- Public and taxpayers
Our Regulatory Model

• Quality and risk profiling

• Using different sources of information, triangulation

• Consistent choice of regulatory activity in response to view of risk

• Improvement - spreading good practice

• Firm on poor performance – Enforcement powers

• Accessible performance information
There is a specific regulation covering nutrition and hydration, which applies to all registered providers where they prepare, or support people who use services to prepare, food and drink.

We have developed and consulted on our guidance about compliance with these regulations, published in March this year.

Within this set of essential quality and safety standards, we have set out in more detail what providers are expected to do to ensure adequate nutrition, hydration and support.

We also have a range of enforcement powers that we can call upon where providers fail to comply with the law.
Where food and hydration (incl. where applicable parenteral nutrition and the administration of dietary supplements) is provided to service users as a component of the carrying on of the regulated activity the registered person must ensure that service users are protected from the risks of inadequate nutrition by means of the provision of:

- **Choice** of suitable wholesome and nutritious food, in sufficient quantities to meet their needs
- Food and hydration that meets any requirements arising from a service user’s **religious/moral persuasion or cultural background**
- **Support** where necessary for the purposes of enabling them to eat and drink sufficient amounts to meet their needs.
What do we expect providers to do?

- Identify when the person is at risk of poor nutrition and hydration when they begin using the service and when their needs change
- Take action when risks are identified
- Identify individual nutritional needs and include in the care plan
- Access to specialist assessment regarding nutritional needs
- Ensure staff know and practice good nutrition and nutritional care
- Provide supportive environment to enjoy meals (uninterrupted mealtimes)
- Ensure availability of specialist equipment
- Maintain dignity and respect
- Have access to food and drink 24hrs a day
- Appropriate positioning
- Food prepared with due regard to safety and hygiene

...and many more
CQC will involve people in its own work.

CQC will assess how services involve people.

We will look for best practice in involvement and evidence of what services have done differently as a result, and how involvement has improved services.

We will work with providers and commissioners, as well as with people who use services, to agree measures for assessing involvement.
Future challenges – for you and us

Focus on quality

Joining up services

Personalised services, choice and public voice

Financial squeeze
● We are **working with our stakeholders** to identify concerns around nutrition and nutritional care.

● We will work with our partners to **share the information** to ensure availability of robust data across health and social care.

● We would **value the input of our partners** to improve the quality of nutrition and nutritional care for people in all care settings.