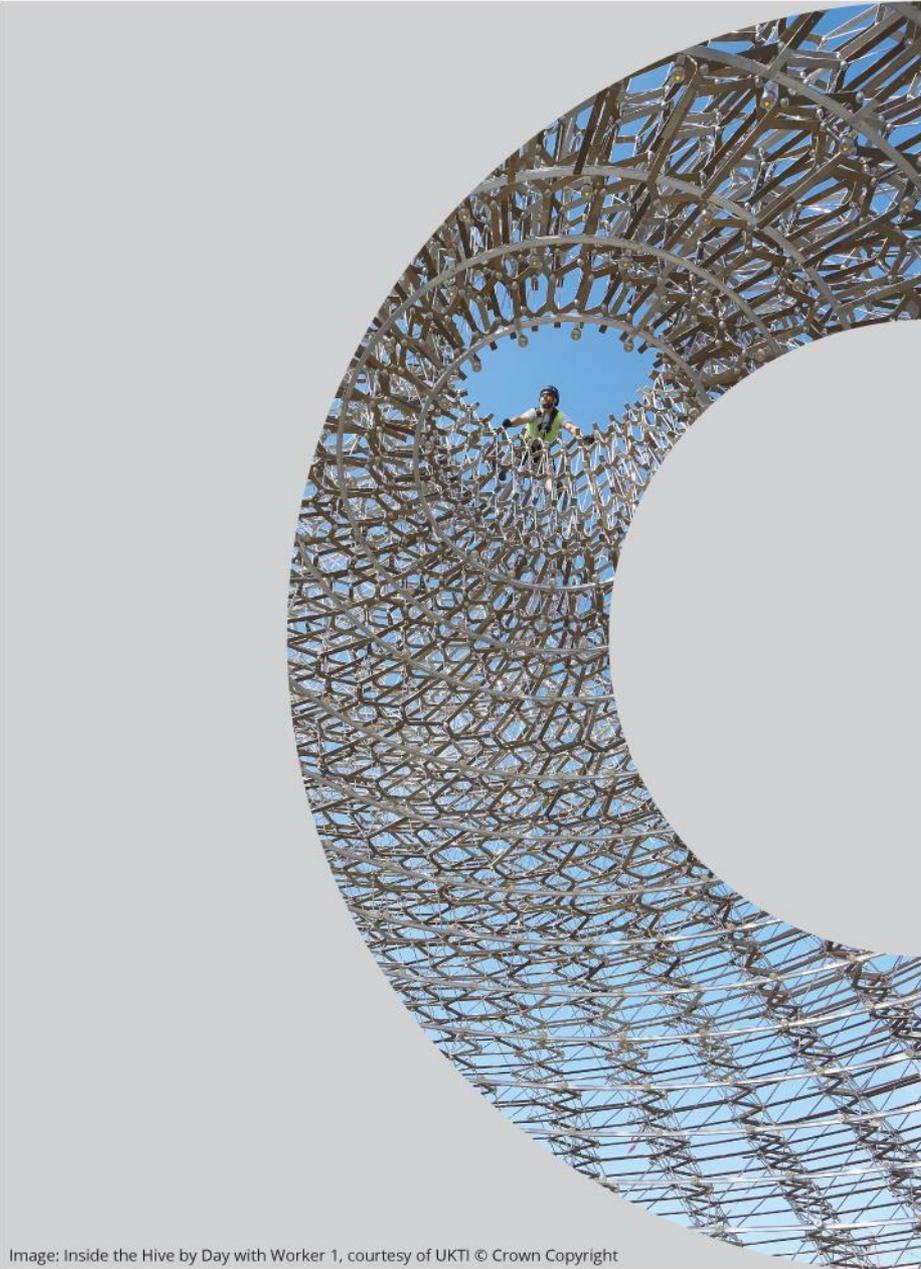




Reducing food waste in hospitals

A SELECTION OF TRAINING SLIDES TO HELP STAFF REDUCE FOOD WASTE IN HOSPITALS

WRAP, DECEMBER 2016



- **This presentation provides advice on communicating food waste reduction in hospitals**

- **Its aimed at managers and supervisors who want to:**
 - Engage staff in waste reduction
 - Share information and gain feedback from staff on how to reduce waste
 - Train staff on data collection

- **It is part of the WRAP Toolkit designed to help hospitals identify the root causes of waste and implement solutions for reducing this waste**

Theme 1: Why reduce food waste?

Theme 2: How much does waste cost the hospital?

Communication Themes

Theme 4: Data Collection

Theme 3: Identifying opportunities and providing feedback

- **Select the most appropriate method of communication according to:**
 - your audience – what works best for them
 - what it is you need to communicate
 - how much time you have to get across key messages
 - who is the best person to run communications sessions

Verbal: Staff briefings, Manager/
Sustainability meetings

Example: to frontline staff, communicate
key messages

Visual: Staff briefings, on the
ward/in kitchen/restaurant

Example: to demonstrate practical
changes e.g. cooking methods, utensils,
portion sizes, new forms to complete

Written: Newsletter article,
emails, ward notices, posters,
hand-outs

Example: to promote achievements, as a
memory aid/at a glance reminder

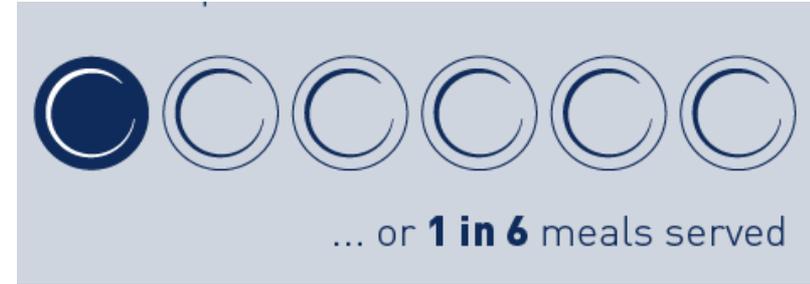


- Keep language simple and clear
- Messages should be positive and motivational
- Use facts and figures for interest and that are relevant to the audience and the hospital
- Don't assume a lot of knowledge about the issue or be patronising
- Use images and text in written material
- Regularly reinforce key messages - to remind staff and to inform new members of staff
- Provide paper hand-outs for new starters, as reminders or to staff unable to attend briefings
- Use posters on noticeboards in central areas

Why is reducing food waste so important?

- **Wasting Food is wrong – isn't it?**
- **Opportunity to save money – meals, ingredients, staff costs, waste disposal**
- **Good for the environment - reduces waste, use of resources and the carbon footprint of the hospital**
- **More money to allocate elsewhere - such as more staff, training, patient needs**

- **WRAP estimates that 18% of food purchased by hospitals is wasted** (equivalent to 1 in every 6 meals wasted)
- **The total cost of food waste to the healthcare sector is £230 million per year** (equivalent to the salaries of 1,500 Band 1 Nursing staff)
- **Each tonne of food waste costs an average £1,900 per tonne** (equivalent to 22p per meal for every meal served)



Environmental Facts

- **Food waste to sewer or landfill is a lost resource - it could be used to produce compost or renewable energy**
- **Landfilled food decomposes to give off greenhouse gases contributing to climate change**
- **Food disposed via a macerator to sewer is likely to be banned in future in Wales**
- **Cost of water, electricity, buying and maintaining of macerators....plus growing, processing, transporting the food ingredients**



**How much is food waste
costing the hospital?**

Present any data you have collected on the **QUANTITY** of food waste:

- Number of waste containers/bins collected per year
- Weight of food waste
- Number/ percentage of unserved patient or restaurant meals



Present any data you have on the **FINANCIAL COST** of food waste:

- Waste disposal charges
- The cost of waste as a proportion of the catering budget (i.e. discarded ingredients/meals, staff costs)
- Present cost as something meaningful e.g. a salary, a procedure at the hospital



Identifying opportunities for waste reduction

- Where does food waste occur on the ward/kitchen/restaurant?
- What are the causes of food waste?
- What improvements can we make to help reduce food waste?
- Quick wins vs longer term?
- What targets or goals should we set?
- Develop an Action Plan and agree ownership and timescales for actions



Discussion topics for staff

- Plate waste/unserved/spoilage
- The meal ordering process
- Portion sizes/spare portions
- Menu
- Food quality
- Stock control
- Staff communication
- Staff training and experience
- Interaction with patients



After embedding waste reduction actions or from a trial, feedback helps to share success stories and opportunities to further improve

This can include:

- Summary of the changes put in place
- Presentation of before and after data on waste and costs
- An acknowledgement of the staff involved
- Feedback sessions from staff on what could be done better
- Conclusion on impact of trial and decision on whether to roll out

Data Collection

Why collect data?

- An accurate measure for how much waste is produced (not guesswork)
- Helps identify where & why waste is produced
- Helps to prioritise reduction actions to make the most savings
-
- Enables you to measure and monitor the impact of any actions

What data should we collect?

- Baseline data
- Data that can be used to report Key Performance Indicators (KPIs)
- To start with, identify one or two KPIs
 - What would provide the most insight?
 - Are we interested in patient, kitchen or restaurant food waste?
 - Do we want to report on waste or cost?
 - How often we want to measure & report e.g. daily, weekly or monthly
 - Further guidance is given via <http://www.wrap.org.uk/sites/files/wrap/KPI%20Information%20Sheet%20Healthcare.pdf>

Example 1: The percentage of unserved portions vs the number of portions ordered

- This KPI will show how well you are doing against actions targeting meal ordering procedures
- You can use it to monitor ongoing performance
 - useful if the number of patients on a ward/those who are eating varies day by day
 - if you want to compare different wards.

Example 1 - Calculation

Example 1: The percentage of unserved portions vs the number of portions ordered

- **The data you will need to collect is:**
 - The number of main dish portions ordered (A)
 - The number of main dish portions unserved (B)

$$\% \text{ unserved} = (B \div A) \times 100$$

$$A = 26; B = 4$$

$$(4 \div 26) \times 100 = 15\% \text{ of meals are unserved}$$

Or $(26 \div 4) = 6.5 = 1$ in every $6\frac{1}{2}$ meals are unserved

Example 2: Average food waste per patient on ward (excluding nil by mouth)

- This KPI gives you a food waste weight (kg) per patient
- You can use it to measure
 - the unserved food waste and/or plate waste
 - how good the ordering system is at picking up patients that are going to be nil by mouth at the time of meal service

Example 2 - Calculation

Example 2: Average food waste per patient on ward (excluding nil by mouth)

The data you will need to collect is:

- Number of portions unserved (A)
- Average weight of a main dish/carbohydrate/vegetable/pudding per portion (from menu plans) (B)
- Number of patients at time of ordering (C)
- Number of NBM patients at time of service (D)

Kg waste per patient eating = (A x B)/(C-D)

A = 6 main dish portions C = 26

B = 230g D = 2

Total weight of unserved main dish waste = (A x B) = 6 x 230 g = 1,380 g

Number of patients eating = (C - D) = 26 - 2 = 24

Average unserved food waste per patient on ward eating

= (A x B)/(C-D) = 1,380 ÷ 24 = 57.5 grams