HEALTHY WEIGHT CQUIN WORKSHOP SUMMARY



Welcome to the summary newsletter following our CQUIN drop in on the 12th February 2021. It was great to see so many familiar faces gathered on our virtual Teams call— for those who couldn't join us this summary will have all the highlights and hopefully give you some food for thought!

Thanks to everyone for the Great Discussion!

Microsoft Teams 12/2/21 1.00 —2pm



Bring a Drink & a Healthy Snack















Round Robin
Service update

Recovery and Outcomes Amanaging a Healthy Weight in adult secure services

Practice Guidance published!

Group Question –

What are everyone's dining experiences like currently?

Next Steps
Healthy Weight Year 3??

HEALTHY WEIGHT CQUIN DROP IN





INTRODUCTIONS

Please tell us your name, the service you are representing and if you are continuing with the 2020/21 Health Weight CQUIN are submitting feedback to NHSE.

Newsam Centre

- Created a passport document
- Working on an overarching implementation process
- Want to make it meaningful
- They are currently available through our healthy living team
- Pandemic meant parts of our Quality Framework had to be stood down and staffing was difficult due to illness and supporting wards opening
- physical health stayed as a priority clear the lockdown would impact weight
- We worked with dieticians and physiotherapists
- Lockdown Olympics
- Walk around Europe
- Boot Camps
- Nutritional Groups
- Fakeaway Groups (subway sandwiches and homemade pizza)

Forest Lodge

- Passports were created and started to be implemented but that process has been disrupted due to Covid
- Staffing due to illness and shielding has impacted the service
- Personal trainers still offering sessions
- Housekeepers making healthy food on site
- Local walking groups







HEALTHY WEIGHT CQUIN PAGE 3

Waterloo Manor

- Passports and journal pages co-produced
- Pilot with one RC and 15 service users across the service
- Initially enthusiasm high, this wore off quickly and was not helped by lockdown
- No outdoor gym, swimming, slimming groups to support that we had relied upon to support weight loss
- Found it triggered some people and was quite unhelpful
- Food was also highlighted as a coping mechanism and only source of comfort and control in a unknown experience
- Clear service user feedback from pilot- 'wrong time' and 'It should be optional'
- We have stood down the passport until year 3 and more guidance is given

We continue to monitor physical health every 2 weeks in 'well woman clinic'

- New online system of recording/ tracking
- Indoor circuits
- Nintendo switch dance
- Healthy meals highlighted on menus
- Food cooked fresh daily
- Tuck shop limits and sugar free pop only

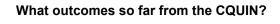




QUESTIONS TO CONSIDER

What has gone well?

Anyone fully implemented passports and willing to share how they have been received?



Other health activities?

Other priorities? Barriers to implementation?





Humber Centre

- Lucky to have a full primary care team
- Already had a passport in place which was for quick admission to hospital – all information needed e.g. medication



- 'My health' is for wider health goal setting physical and mental
- Revisited tuck shop with dietician to look at what was sold in response to feedback;
- 'we fill up on junk as that is what is on sale'
- Individual assessments will be done with service users by dietician to address comments like these;
- 'portions from kitchen are small we are still hungry'
- 'we are not a general hospital, food needs to reflect the service'

Moorlands View

- We have been supporting exercise through lockdown using own body weight and had some outdoor gym equipment installed
- We have had to be creative with the use of outdoor space
- Self catering has been successful in helping weight loss (thank you to Newsam for sharing ideas – Networking at its best) People can fill up on healthy meals and don't need the stodgy hospital supplied pudding
- Access to shops for self catering has been more difficult in lockdown with the restrictions in place
- We have had in reach from dieticians too

<u>Ian Callaghan (Rethink, Recovery and Outcomes)</u>

- So pleased that so much healthy weight work has happened, we didn't think anything could with the pandemic
- Do what you can and keep talking about health, lockdown will end and leave will happen again



Recovery and Outcomes

Managing a Healthy Weight in adult secure services Practice Guidance published!

We'd like to say a **huge thank you** to everyone who took part in the **Recovery and Outcomes Groups** in 2019, and gave feedback on the NHS England **Draft Managing a Healthy Weight Guidance**.

The feedback you gave was circulated to NHS England's **Managing a Healthy Weight Task & Finish Group** and had a big influence on the final **Managing a Healthy Weight Guidance Practice Guidance**, which has now been published and will be circulated with this newsletter.

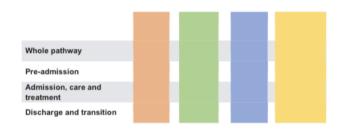
We really valued everyone's thoughts and ideas that contributed to this, which we included in our **Feedback on the Draft Managing a Healthy Weight Guidance Report**, which will also be circulated to all.

These documents will also be available on the Yorkshire & Humber involvement website; Yorkshire And Humber Involvement Network - Welcome

And more can be found about the work undertaken by Recovery and Outcomes and where you can join in at; Recovery and Outcomes (rethink.org)







Required outcomes	Responsibility for achieving this outcome			How this outcome might be achieved Supportive practice and resources
Whole pathway General				
Accessible information is provided to service users and their carers, friends and family about environments that tend to cause obesity (obesogenic environments).	ASMH Provider		Please include specific roles where required.	Coproduce materials with service users and carers outlining the benefits of maintaining a healthy weight and the risk associated where this is not the case. Should include the promotion of opportunities within the specific services to become active. Materials could include: Welcome Pack Nelcome Pack Information Booklet Video Posters
	Staff	1		
	Service User	1		
	Carer, family and/or friend	1		These materials should include information about physical activity, food and nutrition, and treatment interventions across the whole pathway. information on the specialist weight management
	Other			 Materials may need to be tailored to specific parts of the pathway and/or distributed at different points in the pathway and/or distributed at different points in the pathway eg sending some information prior to admission. Information should be provided in a range of formats to ensure they are accessible to all.
Service users have a 'Physical Health Passport' (PHP) that enables them to set goals and chart their progress.	ASMH Provider		include - specific roles where required	Coproduce a "Physical Health Passport" (PHP) that service users keep and made available to carers, that covers all physical health requirements with sections on:
	Staff	1		Food & Nutrition Physical activity goals Occupational needs Psychological needs Cupation to Managene a Health Passport in relating to Managene a Health Weight what does
	Service User	1		Motivation to change Desired outcome(s) Perception of need. Service user records should be audited to ensure information is being gathered and this could be fed back to the system

what are people's dining experiences like?

Forest Lodge

- Food is made fresh on site
- It used to be chips every night, but not anymore
- Tuck shop is healthy snacks & zero sugar pop
- Previously had a vending machine that needed filling daily – had it removed

Waterloo Manor

- Food made fresh on site with healthy options highlighted on menu
- Shop and cook with OT & self catering budget available
- Tuck shop is zero sugar pop and low calorie snacks e.g. single packet crisps less than 100 calories & has a buying limit
- Conflict with reducing restrictive practice, capacity and increase in technology use – online ordering of food and snacks has become complex issue through lockdown
- Dining expectations in place on wards and service users and staff eat together at mealtimes
- Frequent ask is for more seasonal vegetables (not just peas and carrots)

Newsam Centre

- It feels like there is a lot of work to be done we still have a cook/chill provision and is often poor quality
- Veg is frozen
- Portions are small
- Extra bread is requested to make meals more filling
- Self catering is an option for some, but not all



HEALTHY WEIGHT CQUIN PAGE 7

Humber Centre

 Food is made for general hospital, good enough for a short tem stay

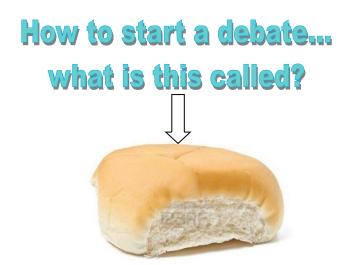
- The portions are really strict e.g. 1 scoop of mash only
- Never any extras
- Food is one of the last things people have some sort of control over – it is important, but where is the choice?!



Moorlands View

- With evening meals there is always more than enough food available for people and extras too
- Lunch options are small, especially sandwiches
- Hospital choice is also limited too plain, no flavour or spice

We had one person who stopped ordering hospital lunches, the money saved was given for self catering—they were able to buy larger bread cakes, better quality fillings, they had to walk to the shop too—they lost weight as a result as the main item—the sandwich—was tasty and more filling which meant no pudding was needed!



To gherkin or not to gherkin?



NEXT STEPS

Year 3 Healthy Weight CQUIN- what will it look like?

What can the network do to support the CQUIN?

Wellbeing push?





- 10 years ago the 'dining experience' was a CQUIN itself, it sounds like things either didn't change or reverted back and that cook/chill was a get out clause – it would be interesting to revisit the dining experience and we could use the SeQuIn Tool to benchmark services and share good practice, help others overcome barriers
- The guidance from Rethink and NHS will be a useful tool moving forwards and could help support change in services
- We have heard from individual services today and from engagement planning with the network that 'wellbeing' would be a good focus, to help service users and staff feel supported and re-energised after a tough year and promote meaningful engagement. Weight loss is a complex issue and needs a broader approach.
- We have fed back comments to NHS England and may have options to do something locally to support the National CQUIN and passport data requirement.
- We are waiting for Year 3 CQUIN guidance and options available
- We could as a Network go the extra mile anyway and drive positive practice through wellbeing workshops
- We need to think how we can support healthy lifestyle into the community as we work with the Provider Collaboratives and Specialist Community Forensic Teams

HEALTHY WEIGHT CQUIN PAGE 9





We are Holly, Jo and Charlotte and we work as Involvement Leads across all the secure services in Yorkshire and Humber and we like to produce a newsletter after we have met virtually so everyone can share in ideas and conversations— it is especially important to us to stay in contact in this way whilst we follow Government Covid-19 guidance and cannot visit or meet up at Sandal.

This newsletter is a great way to find out what is happening in other hospitals around the healthy weight CQUIN—If you want to tell us anything about all the good things you and your service are doing please get in touch!!

Find out more or contact us at; www.yorkshireandhumberinvolvementnetwork@nhs.net

