



Making catering pay in extra care housing: a case review

This case study summarises the key learning from two catering review projects undertaken with providers of residential accommodation with care for older people. Both were the result of providing a bespoke approach to the specific objectives of the project.

The case study highlights the benefits of using the expertise of a catering specialist to provide objective feedback and draws on this experience to provide direction on how to improve the financial performance and quality of the catering.

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1. Introduction

The specialist housing and care industry are experts in the care and welfare of older people. Within this context all residential homes and the vast majority of extra care and assistive living housing developments include a catering provision. Indeed, catering is a vital part of the home as it provides nutrition, a social opportunity, and variety to their day.

Visitors and potential new residents can form an opinion on the accommodation based on the meal experience and the quality of the food.

Professional catering requires a different skill set and range of disciplines and processes compared to elderly care. There is a tendency for the catering skills to be lacking in this environment, particularly in the management structure. This can have an impact on the quality of the catering which can be inconsistent. The food delivery tends to be more like a canteen than the creation of a memorable experience.

Making the catering work financially is also a challenge, particularly in extra care housing where demand can fluctuate significantly without the imposition of a catering service charge. Like care, catering is about micro managing each element of the business to ensure that the whole system works. Having good processes and systems in place to manage the restaurants is essential for the smooth running of any successful catering business. These systems need to be owned and managed by the management of the property to optimise the performance of the catering operation.

As part of a recent project for a client, Housing LIN members were invited to share their stories about 'making catering pay'. Over twenty members reported on how and if they had broken-even and the various models that had been tried and tested in the industry. The responses came from a range of Housing LIN members from private retirement home operators to social landlords, social enterprises to contract caterers and catering owner operators to housing association managers. From the detailed feedback, it is clear that catering is a challenge and making it work is not easy in the specialist housing and care industry.

2. Undertaking Catering Reviews

2.1 Starters - the problem

Two projects were undertaken in two very different environments. One of the projects was a newly established extra care housing development where a contract caterer is responsible for the restaurant. The other was for a group of residential care homes where the catering is managed in-house. Whilst obviously a different accommodation setting for older people, there are still some relevant lessons which are identified below.

In both cases, the brief was to review the catering provision to see how well it met the needs of the residents and in the residential care homes to identify the opportunities to improve the financial performance.

2.2 A menu of options - the objectives of the review

- To gain a greater understanding of how the current catering facility is perceived by residents and how this could be improved.
- To review the food offer and the systems being used to manage the ordering, preparation and delivery of the menus and management of the stocks.

- To review the management of the labour and the staff meals.
- Review the current product list and pricing from the central supplier and the local suppliers for each of the homes.
- Review the costs of food per resident per day and what might be a reasonable target.
- Gather feedback from the residents on their experiences of the food and the mealtimes.
- To create a methodology for how the improvements can be made to increase accountability and reduce costs.

2.3 Preparation – an agreed methodology

The methodologies for the projects included some or all of the following elements as part of the review process:

- Resident interviews across a cross section of genders, age and health/care needs.
- Time was spent in the kitchens and with the Chef Managers to gain an in depth understanding of how the catering is managed.
- Scheme manager interviews to gain an understanding of the role of the catering and how it is managed within the development.

2.4 Main course - summary of the findings

This section provides a summary of a number of key areas arising from both the reviews undertaken and feedback from Housing LIN members. In particular:

Reasons for choosing to move

- The main reason for residents choosing to live in the development was as a result of the respondents no longer being able to look after themselves due to physical or medical reasons. For some they expressed regret about having to move as it was perceived as a loss of their “life.” For others they were extremely appreciative of the help and support that they received. The more positive residents perceived the experience as the next stage in life and one that they had accepted and were enjoying.
- A key catalyst for moving to a supported environment, such as extra care housing, is that they were no longer able to prepare food for themselves. The residents had been attracted to the development by the presence of a restaurant facility and the ability to have one decent meal a day. This was described as being a key selling point for relatives who were concerned about them and who were actively involved in the decision to move.
- Children had been the biggest external influence on choosing and moving into the development. 80% of the residents had moved within the local area so were familiar with the wider surroundings.

Previous Lifestyle

- For the majority, going out to eat when living at home had been a treat either as a family evening out or with friends for lunch. These occasions tended to be a pub, local or ethnic restaurant. All residents associated going out as something they would have done when they could afford it, as opposed to being part of their regular lifestyle.

- Most had cooked meals at home and 40% of the respondents described themselves as good cooks. Traditional meals such as roasts, chops, stews, pies, chicken and rice were what they had tended to eat at home.

Overall Perceptions of their living environment

- In all locations, residents described the environment as being important and having friends, a nice garden, the restaurant, kind and friendly carers and good management were perceived as some of the benefits of moving to the accommodation.
- In addition, the extra care housing development was liked as the “place was very nice”. It was convenient for the shops, they had made friends, the coffee mornings, they were free to do as they pleased, the standard of accommodation, the menu content, the carers were very good and the manager being around to support them.

The role of the Restaurant

- The highlight of the day for the residents is meal times. A number of residents dress up and put on their make-up to come down for the food and socialise with their neighbours. The catering is perceived as a dynamic in their lives that can add joy and variety to each day and is a vital part of their sense of health and wellbeing. In the extra care environment it is the part of the day when they can enjoy their main meal and be social.
- For the majority of people, particularly those who live in a home the food is a catalyst for them to move in, as they cannot cook for themselves. The importance of having at least one good meal a day that they can enjoy is critical. This appears to be clearly understood by the chef managers who all have the best intentions in delivering safe and good quality nutritious food on a daily basis.
- Despite the dining room in the extra care home being described as a restaurant, most felt that the correct description was of a canteen because of the queue to get your food, the speed with which you had to eat and the lack of atmosphere in the room.

“it’s a nice space but more like a canteen than a restaurant”

- Introducing table service for all residents was perceived as being a much more appropriate way of eating so everyone had their food at the same time, it would be more social, relaxed and it would cut down the queue.
- The service in the restaurant was perceived by all as being very good and that all the staff were lovely and friendly.
- Serving meals to residents in their rooms is common across the sector when residents are too ill to come to the restaurant/dining room. The trays should be a “last resort” on account of the food quality being significantly inferior on a tray and this could be made clear to the residents when they are choosing this service. If the number of trays reduced, the overall quality of food would immediately improve as there would be less delivery time for the carers.

The use of sittings

- Most respondents described sitting with the same people at the same table every day and they were happy for this routine to continue.
- There are mixed feelings about a two sitting system in the restaurant. As it is perceived that the food is not as fresh and there is less choice available in the second sitting. The

difficulty with the first sitting is that there is less time to sit and chat at the end of the meal as the tables are needed for the next sitting.

The ordering process

- The majority of restaurants offer a pre-ordering process where the meals are chosen up to a week in advance. Typically the choice is made either with a carer or independently. This is seen as a good system as they have time to consider what they might fancy, but it is criticised as they could not always remember what they had ordered.
- One restaurant offered a menu where people could choose on the day what they would like to eat. This system appeared to be a lot simpler as residents could make a choice based on what they would like to eat then, rather than predicting what they might want in a week's time. More residents came down to the restaurant as it did not allow for residents to opt to have their meal in their room at the time of ordering, which was effective in encouraging them to be more social. It created much more of a meal experience for the residents as it felt like a proper restaurant.

Meeting care needs

- For those that relied on carers to take them to lunch, on some occasions they were taken a lot earlier than 12 o'clock due to the practicalities of the number of people involved. This meant that some residents had to wait until the restaurant opened which was criticised as removing the sense of occasion of the meal time.
- As a result of the carer's needing to administer after lunch drugs to some of the residents, the residents were taken back to their rooms for their pills after approximately 45 minutes.
- This was seen as a negative to not only those residents with carers but also their friends who would like to make the lunch more of a social occasion. Residents felt that their social time was being cut short because of the medical needs of the other residents and the restrictions on the carer's time.

"it would be lovely if we could have a cup of tea after our lunch and not have to rush off"

Food Quality

- The reliance on the food being of a good standard is much higher than in a restaurant as they rely on the food served for their nutrition. This is also the case in the extra care development as the meal in the restaurant is the main meal of the day. The majority of the residents in extra care do not cook "main" meals in their apartments especially if they live alone or are not physically able to cook.
- The quality of the food in all the homes is of a high standard and there are a good range of home cooked traditional meals that are perfectly suited to and appreciated by the residents in the homes.
- Inconsistency in the food quality between chefs is unacceptable and easily solved by ensuring that the recipes and methods of cooking and serving are written down and followed by all chefs.
- Poor food quality is disruptive and this has a detrimental effect on the management of the development. Residents will tend to complain to the scheme managers about poor food quality rather than a chef manager

- Cooking issues can involve undercooking of meals and a tendency for the food to be dry.
- The Scheme Managers are not caterers and they need the kitchens to be managed seamlessly and to the satisfaction of the residents and staff. When the kitchen doesn't work the place is disrupted and the residents become unhappy as they are dissatisfied with the food. When the kitchen works well the home is a much happier place.
- Most residents do not want to make a fuss and would rather not say anything to draw attention to themselves. Having a process in place that allows residents to engage with the kitchen team and give feedback on the food quality on a regular basis works well in some of the restaurants which can overcome this issue.
- Whatever feedback system is in place, it must be set up as a two way process where the residents feel that action is taken to rectify problems.
- Complaint handling training is needed to give the chef managers confidence in digging out and handling any issues with the food. Being proactive and attending to any issues promptly will increase the resident's confidence in providing feedback.
- Overall there was a consensus in the extra care housing scheme that they would rather go out to eat with relatives than stay in the restaurant, as it creates an opportunity to do something different and be independent, but there is also a feeling that the restaurant is inconsistent and therefore not reliable.

"its not good enough for visitors"

Food Choice

- The menus are perceived as being consistent with what they expect and are considered to be a good range of traditional meals.

"well cooked traditional British food is great"

- Examples of meals that were liked were all day breakfast, roast chicken, spaghetti bolognese, curry, macaroni cheese, the greens, fish & chips.
- Dishes that would be liked included meat pies, pastry, liver and bacon, baked beans, more cabbage, Hamburger and Chips, Steamed Bacon Pudding, Chinese – something a bit different, cauliflower and Lamb as an option on the Sunday roast.

Maximising cost efficiencies

- There are a number of practices that are done differently which all need to be scrutinised in the context of saving money. One is recycling food, another is the labour hours, the local suppliers and the value for money on the central supplier.
- Staffing is a real issue that needs addressing, the reliance on agency staff is concerning in some homes, especially when there is a clear acknowledgement that they do not have the same standards of care and cooking as the Chef Manager's and their teams.
- A standard number of hours are needed to manage each kitchen given that they are all preparing roughly the same number of meals. There is currently too much variation on the number of labour hours used on an average day. This needs to be reviewed in the context of starting and finishing times which do vary.
- The chef managers who have had commercial experience are much more proactive in delegating and training other team members to cook and do other things. There is also a

higher awareness of the importance of consistency amongst this group.

- Safely recycling food and freezing leftovers is an absolute requirement of managing the food costs and offering a good choice of meals to the residents.
- The chef managers need to understand how any central supplier works so that they can get the most out of the system. The attraction of special offers from the central supplier outweighs the need for consistency from the residents. It is a common problem that the chef manager resents a central supplier who they did not choose and does not always seem to offer the best price or service.
- A monthly report on financial budgetary performance, comparing performance, is required to assist with the managers gaining feedback on how they are doing.
- A simple system is needed to manage the stock. The reality is if cash was left lying around in an open cupboard in the kitchen then it would be looked after a lot better. A basic system needs to be put in place to monitor where all the food is going and giving a value to the stock in hand on a regular basis.
- The cost of the food budgets broken down per resident per day based on the accounts vary. Where comparisons are available across several residences in a portfolio, ensuring that all are operating as well as the most efficient kitchen will generate savings. In the example used the annual savings would amount to 6% for the year.
- Consideration needs to be given to the cost of each meal when deciding what items should be included within the menu on a daily basis to manage within the budget.
- There are some significant skills across the accommodation portfolios that are in the chef manager teams that could be utilised to spread best practices. This also helps with enthusiasm and motivation in the teams. These all could be employed to improve efficiency and skill levels within the other kitchens.
- Because of the lack of expertise in catering higher than the Chef Manager, it would be ideal to actively encourage the opening up of communication between the chef managers as a group. This could include a regular get together to help solve common problems and issues.

Entertainment

- All residents felt that there was a need for more activities for them to do for two main reasons – one to be more sociable and secondly to be stimulated and be part of a routine of activity.

“I know I’m old but I still want to have fun!”

- The coffee mornings are really liked and all respondents agreed that they are better when the manager is able to attend so that they can keep up to date with what is going on in “their community” and see everyone. The only criticism of the coffee mornings is that they would like more of them.

“I like the coffee mornings, it would be nice to have more of them”

3. Dessert - tasty learnings

- A major attraction of living in the extra care housing development is that they can create their own home and have the benefits of a restaurant and all their care needs met.
- Food is considered to be a social and pleasurable experience. Enjoying a quality meal is one of the few dynamics left in an older person's life especially as they get older and less mobile.
- The residents have a clear understanding that to satisfy so many different dietary needs across five generations is a huge challenge. As a result, there is an acceptance that it is not going to perfectly suit everybody, every day. However, the menu is felt to offer a good traditional choice for most tastes and the residents can find something to enjoy on most days.
- A restaurant is known to be a place where you get together with friends, loved ones and family to chat and enjoy a relaxing and nutritious meal in an atmosphere where your food and service needs are catered for with authentic care. It is about having an experience which is memorable, life enhancing and fun.
- A canteen is a place where you get a food fix, you help yourself, the food is edible, you are in and out as quickly as possible – to a large extent it is a forgotten purchase and the same every time and the service is minimal and purely focused on efficiency and cleanliness.
- Sadly, too many restaurants/dining rooms are run like a canteen and what the residents would ultimately like and expect is a meal experience more like what they can enjoy in a restaurant, which fundamentally requires better quality food and attention to creating a meal experience.
- A more rigorous process is required to recruit the right quality and types of cooks to cover all shifts and for holiday/sickness cover. The extent of the variation in quality during these times is a real concern.
- Consideration for introducing a menu into the restaurant rather than the pre-order system appears to have many benefits and creates a much nicer atmosphere that residents can enjoy.
- If the restaurant was able to consistently offer quality food then there is an opportunity to create a programme that could actively encourage locals and visitors to come and eat a nutritious and tasty meal – socialise and dine with others, which in turn would create a warm atmosphere.
- The impact of nutrition and socialising on a regular basis is a fundamental and basic need to the health and well being of all humans especially when they are old and with ill health. Creating a restaurant concept that fulfils these needs and those of the community where the priority is not cost adherence would perhaps generate a different solution.
- Managing around the carers and the after dinner drugs so that residents can extend their lunch would be a much appreciated step. This would lead to higher resident satisfaction and an increase in essential socialising.
- Introducing an objective service measurement system to ensure that residents are encouraged to give feedback and that action is taken to address the issues and improve quality is essential in meeting resident expectations on an ongoing basis.
- Sharing best practices, having a programme of training and ongoing skill enhancement is a vital investment in the kitchen teams to create loyalty, motivation and consistency.

- Basic systems are required in all kitchens to manage the suppliers, stocks and management of all the food to eliminate unnecessary wastage in order to improve the cost controls.

4. Second helpings? What next

The key part of the work that has been undertaken in the extra care housing development has been to work very closely with the contract caterer to effect the changes that are needed in the business. This has included the following elements:

- Introduction of a formal and ongoing contract performance management system with customer satisfaction at the centre. This has resulted in a year on year improvement in customer satisfaction scores.
- To address the issues raised by the residents in the annual catering survey. This has resulted in an increase in the number of residents visiting the restaurant and an increase in customer satisfaction.
- Develop a partnership approach to facilitate closer operational management of the contract. A bi-weekly meeting is held on site to review performance.
- Key Performance Indicators have been agreed to identify best practice, trends and poor performance.
- A formal complaints procedure has been developed so that all complaints are addressed effectively.
- All residents have completed a diet profile that is reviewed every six months. This is a joint approach by the Chef Manager and Scheme Manager.
- Weekly recorded meetings to a set agenda with the Chef Manager and Scheme Manager to address service failures.
- Created catering “centres of excellence” which will provide a new induction and training resource for Chef Managers and Assistants.
- Introduced customer service training to staff. This has reduced complaints, service failures and improved customer satisfaction.
- Service standards have been agreed for the meal service.
- A la Carte menu is being looked at to offer more choice at a premium cost for those residents that would enjoy it.

In the care homes, a consensus was agreed on how to increase the cost efficiencies in the businesses and introduce processes to create more consistency:

- For a month the chef manager’s recorded all their recipes and methods on paper so that they could be costed.
- Introduce a simple stock monitoring and ordering system using a clipboard in each food storage area which can be used for a stock management system.
- Look at further training which may develop and benefit the chef managers and cooks.
- Create a plan for eliminating agency staff from the business.
- Review the kitchen operating hours and look at a standard rota, and monitor performance based on hours not money.

- Confirm the exact number of choices and meals that will be served as a standard.
- Monitor and record customer feedback by chatting with residents especially on the days after the chef manager has been off.
- Record on a daily basis what is being eaten including the staff for monitoring where the stock is going.
- Trial the weekly system of menu planning and service at meal times for one month.
- Create a policy for wastage and recycling food as part of an overall catering file.
- Establish a consistent budget for all homes that does not reduce the quality of the food offering but employs management processes to improve efficiency.

5. Conclusion

Catering is perceived by the residents and the management of the homes as an essential part of the development in each of the locations that were studied. Confronting the lack of knowledge or understanding of how the catering works improves confidence and decision making amongst the management team.

The investment in hiring an expert is paid off in sustainable knowledge and skills that will have a long term impact on the quality and financial performance of the catering.

It is a challenge to listen to feedback from customers, clients or residents without taking them personally but the value in listening and recording feedback is incredible. Calmly reading and or listening to the feedback without an audience or having to respond to the answers enables you to clearly hear what the issues are and identify the most appropriate action that needs to be taken.

The impact on both organisations of the review report was profound – actions were taken that are still being implemented and sustained twelve months on.

Ultimately the biggest impact has been on raising the profile of catering, the complexities of managing it and providing consistent food on a daily basis in both organisations. This has had a significant impact on the quality of the food in all locations which has benefited the resident's lives immeasurably.

Note

The views expressed in this paper are those of the authors, and not necessarily those of the Housing Learning and Improvement Network.

About Aviatrix

Aviatrix are a strategic research consultancy that have collaborated with Care Sec Ltd to provide catering advice and support to the housing and care industry. Projects include defining an appropriate catering offer, conducting a feasibility study, auditing a current offer, managing and assisting catering tender processes and conducting research amongst existing and potential residents. Helen Bailey MD of Aviatrix has twenty five years experience of working in the hospitality industry as adviser, researcher and operator. www.aviatrix.co.uk

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About the Housing LIN

Previously responsible for managing the Department of Health's Extra Care Housing Fund, the Housing Learning and Improvement Network (LIN) is the leading 'learning lab' for a growing network of housing, health and social care professionals in England involved in planning, commissioning, designing, funding, building and managing housing, care and support services for older people and vulnerable adults with long term conditions.

The Housing LIN welcomes contributions on a range of issues pertinent to housing with care for older and vulnerable adults. If there is a subject that you feel should be addressed, please contact us.

For further information about the Housing LIN's comprehensive list of online resources and shared learning and service improvement networking opportunities, including site visits and network meetings in your region, visit: www.housinglin.org.uk

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