

Not so Soup-er

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Introduction

- This project was conducted in collaboration with the Catering and Dietetic Department of SVUH.
- Lunch is the meal with the greatest food waste in the hospital setting. (1)
- SVUH identified soup as a significant contributor to waste at lunch meal.

"Patients can fill up on soup, which often has a low nutritional content, and eat less of their lunch."

- Green Healthcare (1)

Across several studies soup consumption was associated with...

- Reduced hunger ratings (2)
- Reduced subsequent energy intakes (3,4)
- Reduced total intake of the subsequent meal (5)
- A 20% reduction in total energy intake at lunch when consumed as a preload (5)

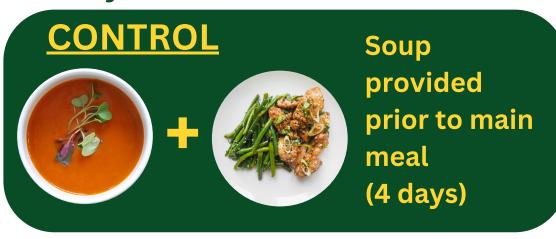
Aims & Objectives

To evaluate the impact of removing soup prior to the lunch meal on energy intake, protein intake and/ or food waste from the main meal.



<u>Methodology</u>

Visually estimated leftovers to determine food intake/ waste using an Audit tool.



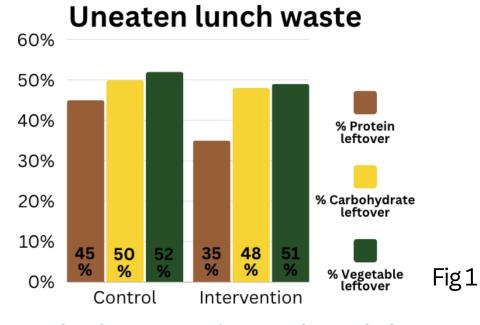


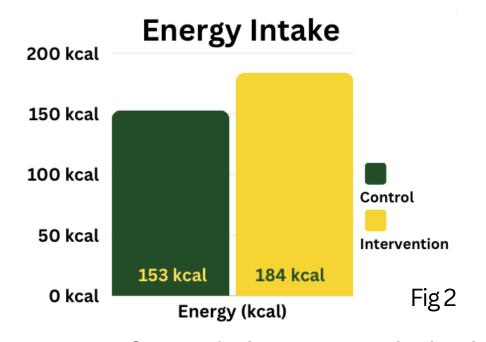
No soup provided prior to main meal (4 days)

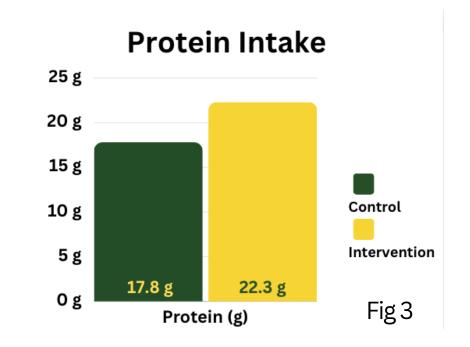
Wards included:

- Ann's (oncology)
- Helen's (dementia & stroke)
- Our Lady's (stroke unity)
- Lucy's (general)

Results







- The intervention reduced the uneaten waste of protein by 10%, carbohydrate by 2% and vegetables 1%
- The intervention resulted in an increase in the estimated average intake from the main meal for:
 - Energy by ~9% (184 kcal vs 153 kcal) across all wards.
 - o Protein by ~11% (22.3 g vs 17.8 g) across all wards.
- Catering Staff: Reported positive feedback regarding a noticeable decrease in food waste on the wards and the elimination of soup has proven to be more time efficient for staff.

Conclusion

Removing soup prior to lunch has potential to reduce food waste and improve energy and protein intakes from the main meal.

Alternative recommendation:

Offer soup as an option on the main course menu along with a high protein sandwich. An ordering system has potential to reduce waste.

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