**BDA sustainability round table discussion**

Our co -professional development officer Nina represented our group at the BDA sustainability round table discussion. See Ninas summary below and the One Blue Dot Resource, keep an eye on the BDA webpage for their statement soon:

Delegates of the round table discussion were asked to question, discus, and do some pre-reading around the topic with some questions to provoke thoughts within your speciality:

* What do you find challenging about meeting the nutritional needs of your specialist patient group through your hospital food and drink service?
* What do you think you could do to reduce the carbon footprint of your food services, what small changes can you make?
* Are there any recommendations in the sustainability chapter that you are concerned about implementing?
* How would you feel about having predominantly plant-based menus for your patient groups?

The discussion was focused on inpatients, which we don’t get too many of these days. However, later in the discussions, it was noted that our inpatients in hospital are people in our community. When considering a plant-based menu or changing the menu, it cant be a one menu suits all hospitals, we need to consider local population, which is maybe where we could consider our HIV outpatients opinion – as frequent hospital users.

In the pre-reading, there was some information about the behaviour change approaches used (Nudge Theory) and making plant based the norm and the language used to promote plant-based dishes.

All of the data drawn out from the day is going to be collated and the BDA will release a statement about it.

My view of the day was

* BDA could do more to facilitate change with practical advice for dietitians to take a lead within this topic in our healthcare service.
* There needs to be more collaborative working to achieve a greener NHS – this could include: catering departments, facilities, purchasing, suppliers, waste management external companies who facilitate this sort of large scale change.
* Thinking about the local population’s food choices is important when considering inpatient food. This is where our HIV populations could provide a valuable insight into the general local populations food choices and acceptance.
* Dietitians should be leading with hospital food changes, menu planning and sourcing suppliers – things they don’t directly teach you at university.
* There is scope for Food Services Dietitians to fill this gap in the provision of sustainable hospital food.

Unfortunately, I don’t feel there was anything directly linked to HIV to feed back, but I’m very pleased I attended, I was happy to represent the group and speak up for our speciality.

I'm happy to be contacted if anybody has any questions about sustainability.

The key document discussed was the BDA’s One Blue Dot – chapter 4

[one blue dot reference guide.pdf](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.bda.uk.com%2Fstatic%2F539e2268-7991-4d24-b9ee867c1b2808fc%2Fa1283104-a0dd-476b-bda723452ae93870%2Fone%2520blue%2520dot%2520reference%2520guide.pdf&data=05%7C02%7Ctracy.russell%40nhs.scot%7Cfcc21768dc154728731908dd83d3ef83%7C10efe0bda0304bca809cb5e6745e499a%7C0%7C0%7C638811668918628033%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=W7bX9USX%2BEM0gvVpl8OF2Nvx6VghLafyIDehVQPF1u4%3D&reserved=0)

Best wishes

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