



Hospital Catering Policy

Provision of Food to Patients, Staff and Visitors

This procedural document supersedes: CORP FAC 7 v.2 – Hospital Catering Policy - Provision of Food to Patients, Staff and Visitors



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Amendment Form

Please record brief details of the changes made alongside the next version number. If the procedural document has been reviewed **without change**, this information will still need to be recorded although the version number will remain the same.

Version	Date Issued	Brief Summary of Changes	Author
Version 3	23 March 2022	<ul style="list-style-type: none"> • Inserted in Section 4.2.1 - food labelling changes in England, Wales and Northern Ireland (Natasha's Law). • Inserted in References - link to www.food.gov.uk-Business Guidance - Introduction to Allergen Labelling Changes. • Reviewed and amended Appendix 2 • Reviewed and amended Appendix 4 • Reviewed and amended Section 4.2 	Julie Allison
Version 2	21 December 2018	<ul style="list-style-type: none"> • Changed the catering service from in-house service to Sodexo Catering Services • Inserted hyperlink to Hospital Food Standards Panel Report (2014) • Section 10 to reflect Sodexo Catering Service monitoring compliance procedures • Inserted in section 4.2.1 the process for ordering a cooked breakfast • Removed Appendix 3 Adapted Cutlery Standard Operating Procedure (SOP) • Removed Appendix 4 Water Safety Leaflet - Information For Service Assistants • Renumbered Appendix 1 - 14 Major Allergens to Appendix 3 • Inserted Patient Meal Ordering Flow Chart Appendix 1 • Inserted Patient Meal Service Standard Operating Procedure (SOP) Appendix 2 • Inserted Oral Nutritional Supplements/Enteral Feeds and Feeding Equipment Standard Operating Procedure (SOP) Appendix 4 • Renumbered Appendix 2 to Appendix 5 and amended National Descriptors for Texture Modified Diets replaced with International Dysphagia Diet Standardisation Initiative (IDDSI) 	Julie Allison

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Version 1	10 September 2015	<ul style="list-style-type: none"> • This is a new procedural document, please read in full 	Julie Allison

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1 INTRODUCTION

Sodexo Catering Services (hereafter referred to as Sodexo) provide patient catering and retail catering services for Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust (hereafter referred to as the Trust) to staff, patients and visitors from the main kitchens on the following sites:

- Bassetlaw Hospital (BH)
- Doncaster Royal Infirmary (DRI)
- Mexborough Montagu Hospital (MMH)

Hospital catering services are an essential part of patient care, given that good quality and nutritious food plays a vital part in patient's rehabilitation and recovery. Effective catering services are dependent on a range of processes which involve menu planning, procurement, food production and distribution of meals to patients across the Trust

Hospital catering and the food it provides play an important clinical role in the treatment of hospital patients. Hospital catering services also play an integral part to ensure sufficient, quality catering facilities are supplied to all staff working within the Trust

Sodexo have a legal obligation to comply with the provisions and requirements of Food Hygiene Regulations since 1987 and there are several pieces of legislation governing food safety, including the requirement to have a food safety management system based on Hazard Analysis Critical Control Point (HACCP) principles.

Sodexo recognises that a successful food safety culture can be achieved only by following safe working practices developed through effective hazard analysis which provides full traceability of foodstuff, training and sharing of good practices.

Food safety legislation applies to all businesses that are involved in the production, handling, transportation and supply of food. These hygiene laws affect caterers, primary producers (such as farmers), manufacturers, distributors, and retailers.

1.1 The Food Safety and Hygiene (England) Regulations 2013

This is a UK only regulation applying to food intended for human consumption. These regulations lay down the enforcement options available to Food Enforcement Agencies, such as Local Authority Environmental Health Officers (LAEHO), and the defence of 'due diligence'.

1.2 Regulation (EC) 2073/2005

This Regulation lays down the microbiological standards for food during the various stages of production, processing and distribution, including retail. The document specifies a number of specific testing criteria for various foods, together with the necessary actions to be followed where food samples show unsatisfactory results.

1.3 Regulation (EC) 852/2004 on the Hygiene of Foodstuffs

This is the Regulation in which the main requirements for any food establishment are made clear, including:

- structure, including temporary premises.
- equipment.
- transportation of food.
- personal hygiene.
- food handling procedures, food wrapping, and water supply.
- Hazard Analysis and Critical Control Points (HACCP).
- temperature control.
- staff training.

At every stage of the food business all the potential hazards that might arise must be considered and methods of controlling them must be implemented such that all food from the establishment is safe to eat.

This will be supported through a range of comprehensive procedures and monitoring systems. In addition, there must be other supporting systems such as staff training; infectious disease policies; cleaning regimes; traceability of food ingredients; structure/equipment maintenance and product recall procedures.

1.4 Food Information Regulation 2014 (SI 2014/1855)

This guidance is designed to help food businesses provide information to customers who need to avoid certain ingredients because of a food allergy or intolerance. It includes the new allergen information rules (EU FIC), general advice and information on food allergy and intolerance, and specific voluntary best practice guidance on cross-contamination controls for pre-packed foods and loose foods.

2 PURPOSE

Sodexo is committed to provide food for our patients, staff and visitors which is safe to eat, nutritious and meets their quality expectations. Sodexo must comply with all relevant legal

requirements for food safety within the parameters in which it operates. It has developed and adopted enhanced food safety procedures to reduce product risk and the associated threat of food borne illness which are based on industry best practice and departmental experience and expertise.

The objective is to ensure Catering, and all ward based staff are aware of their responsibilities and to define where those responsibilities end when provision of food is delivered and served. And to ensure that all patients, staff and visitors have access to safely prepared nutritious food.

Sodexo will ensure the effective delivery of food services by continual training, consultation, communication and policy development with all Trust personnel involved in food services. These are the Infection Prevention Control team (IPC), Nursing, Estates and Facilities staff, Environmental Health. All policies and performance measures will be subject to review to ensure maintenance and continual improvement of all food safety systems.

The purpose of this policy is to raise the profile of food safety and hygiene within the Trust, to highlight that several disciplines of NHS staff are identified as being 'food handlers' and to emphasise and promote awareness of the existing arrangements for the strict management of food hygiene. Also, this policy aims to provide quality standards and outline the responsibilities of Sodexo in relation to the provision of food across the Trust.

This Policy must be followed by all Trust employees, including those on temporary contracts bank staff and students, who are involved in ordering, storing, preparing, serving or delivering any food or beverages.

This policy sets out the provision of catering services to patients, staff and visitors in a manner which embraces the diet, nutrition and obesity guidelines published by the National Institute for Health and Care Excellence (NICE) in January 2018, and the Hospital Food Standards Panel in December 2014.

Catering for staff, relatives and visitors is addressed in the policy as it has a part to play in well-being and health by providing health enhancing meals over 24/7 services sensitive to their preference and nutritional needs.

3 DUTIES AND RESPONSIBILITIES

Sodexo are responsible for ensuring that catering services are managed by personnel with the appropriate qualifications and experience in all matters relating to catering, the provision of food for all needs, including special and therapeutic diets, cost control and budget management. Sodexo are also responsible for ensuring that resource allocation is adequate to meet the needs of the service and, in a service which is interlinked and relies on co-operation and coordination of several professional disciplines across many locations in

the Trust. The ultimate authority in ensuring that food service maintains an appropriate level of priority in all areas lies with the Trust.

The duties and responsibilities of key staff in the Trust are as follows.

3.1 Director of Estates and Facilities

Has overall responsibility for the implementation and adherence to this policy and has responsibility for the contract for Patient Catering and Retail Services.

3.2 Catering Contract Manager

Has delegated authority for the monitoring the contract for Patient Catering and Retail Services and is responsible for the review of this document in line with any amendments or replacements to the aforementioned publications.

3.3 General Manager, Sodexo

Has overall responsibility to ensure that the Catering Department provides a high quality catering service in line with the Patient Catering and Retail Services Contract and will ensure that catering services are safe and compliant with all standards and legislation including food safety and hygiene.

Will comply with this policy and act as a source of professional knowledge/leader on catering matters, to ensure that the Trust meets its legal obligations and provides services to a high standard that are patient and staff focused and are delivered cost effectively.

The General Manager will ensure that:

- All Provision of catering is issued in compliance with this policy.
- That all food supplied meets the hygiene standards.
- That all food is of a good quality for the cost applied.
- The nutritional needs of all patients can be met through food and drink provided.

3.4 Patient Dining Manager

The Patient Dining Manager is responsible for:

- The administration of the Food Safety Management System.
- Ensuring that the staff are appropriately trained.
- Maintaining staff rotas to provide a safe food service.
- Completing food safety audits.

- Overseeing the day to day food production operation to ensure that safe food is being produced.
- Reporting any non-conformity which could compromise food safety to the General Manager.
- Ensuring there are adequate cleaning schedules and resources to carry out all cleaning tasks required to keep food safe.
- Ensuring that all food produced, distributed and delivered will be in compliance to this policy.

3.5 Retail Manager

The Retail Manager is responsible for:

- The administration of the Food Safety Management System.
- Ensuring that the staff are appropriately trained.
- Maintaining staff rotas to provide a safe food service.
- Completing food safety audits.
- Overseeing the day to day food production operation to ensure that safe food is being produced.
- Reporting any non-conformity which could compromise food safety to the General Manager.
- Ensuring there are adequate cleaning schedules and resources to carry out all cleaning tasks required to keep food safe.
- Ensuring that all food produced, distributed and delivered will be in compliance to this policy.

The Retail Manager has the responsibility for the provision of hospitality within the Trust (see Section 5.1) and is responsible for the following outlets:

- Hot Kitchens
- Subway
- Aspretto Coffee Shops
- Costa Coffee Outlet
- Education Snack bar (DRI)
- Vending machines

3.6 Catering Supervisor

At an operational level, the Catering Supervisors will routinely monitor compliance with relevant aspects of the Food Safety Management System, including meal ordering, selection, service and quality, food wastage, staff responsibilities and training standards.

3.7 Ward Manager

The Ward Manager is responsible for:

- Ensuring maintenance of day-to-day standards of hygiene in ward kitchens.
- Ensure that all temperature records are documented in accordance with the Kitchen Hygiene and Refrigerator Monitoring Policy for Wards and Clinical Areas - PAT/IC 22, to ensure compliance with food safety and food hygiene legislation.
- Ensure that all staff that are responsible for undertaking refrigerator temperature checks have received sufficient training to be competent in the required task and have access to the required logbook which should be stored in a way that supports LAEHO inspections.
- Food and beverages are served quickly and efficiently without delay and that any delays in food service are reported to the catering department.

3.8 All Trust Staff

All staff associated with food and beverage service has a responsibility to ensure food hygiene standards are maintained within their work areas in accordance with the policies and instructions laid down by the Trust, in a safe and hygienic manner.

All staff must formally advise their Supervisor of any circumstances that prevent them from maintaining the hygiene standards determined by the Trust. All staff who are involved in the handling of food and beverage items, whether during distribution or at ward level have a responsibility to attend mandatory training sessions and follow identified practices and procedures.

4 IN-PATIENT CATERING SERVICES

4.1 Food Premises

Regulations require that all food premises/businesses be registered with the local authority. A 'Food Business' is one that sells or supplies food and includes the preparation, treatment and storage.

4.2 Food Provisions to Patients

Sodexo provide catering services throughout the Trust to in-patients and to day stay patients. Food is available 24 hours a day, 7 days per week. Nutrition and Hydration are a vital part of a patient's treatment and it is essential to ensure that the food provided meets the patient's individual requirements. Food provision must also take into account personal, cultural and religious needs.

Current guidelines on patient nutritional requirements for normal and special diets will be provided to the General Manager who will ensure that adequate amounts and type of foods are available for patients. Sodexo is responsible for ensuring that adequate interpretation of this information is available to the Sodexo Management Team when requested.

Patients should be encouraged to eat all items at the time of delivery. The storage of food should not be encouraged.

It shall be the responsibility of the nurse/member of staff who accepts the food item to ensure the food is marked with the patient's name and the date and time received and placed in the kitchen/refrigerator on the patients' behalf.

It shall be the responsibility of the nursing staff to ensure that the patient food items are checked each night. Items should be removed by their 'use by' date or within 24 hours of receipt if home-produced or shop-bought but undated.

PATIENTS LACKING CAPACITY

Sometimes it will be necessary to provide care and treatment to patients who lack the capacity to make decisions related to the content of this policy. In these instances, staff must treat the patient in accordance with the Mental Capacity Act 2005 (MCA 2005).

- A person lacking capacity should not be treated in a manner which can be seen as discriminatory.
- Any act done for, or any decision made on behalf of a patient who lacks capacity must be done, or made, in the persons Best Interest.
- Further information can be found in the MCA policy, and the Code of Practice, both available on the Extranet.

There is no single definition of Best Interest. Best Interest is *determined on an individual basis. All factors relevant to the decision must be taken into account, family and friends should be consulted, and the decision should be in the Best interest of the individual. Please see S5 of the MCA code of practice for further information.*

4.3 Standard Food Provision

This section covers patients who are:

- Eating a standard diet.
- In need of a therapeutic diet (special diet) due to medical, cultural or religious needs.
- Allergic to specific food ingredients or have a food intolerance to specific food ingredients.
- Requiring Oral Nutritional Supplements/Enteral Feeds.
- A comprehensive menu is available which offers choice and is flexible in response to individual patient dietary and religious requirements.

Patients' meal orders will be taken twice each day in advance, breakfast for lunch and lunch for the evening meal. It is the responsibility of Sodexo staff to undertake this task as per the Patient Meal Ordering flow chart ([See Appendix 1](#)).

Ward staff should identify nutritionally vulnerable patients who require any cooked breakfast items and send the request to: PatientDining.Bassetlaw.HC.UK@sodexo.com or PatientDining.DoncasterRI.HC.UK@sodexo.com the request should be made by 18.30 the evening before clearly detailing the Ward **and** the Bed/Bay number of the patient the request is for. The breakfast will be delivered on the breakfast trolley.

Items available to order are:

- Grilled bacon – per rasher
- Sausage – each
- Hash browns - each
- Scrambled eggs – per portion
- Plum tomatoes – per portion
- Baked beans – per portion

A texture modified 'All day breakfast' can also be ordered using the email address above.

The menu cycle and formulation is reviewed with Sodexo and Trust Dietitians. The Dietitians will confirm that the menus deliver nutritional requirements sufficient to meet the needs of all patients, within the guidelines of Care Quality Commission Outcome 5 (Regulation 14) meeting nutritional needs, the Nutrition & Hydration Digest Compliance Checklist as recommended within the Hospital Food Standards Panel's report on standards for food and drink in NHS Hospitals (2014).

The standard menu booklet contains codes, indicating items suitable for variations to standard food. Small and large portions can be requested at the point of ordering.

It is essential to ensure that in-patients receive their meals in an environment which is conducive to dining and to meet quality standards. It is the responsibility of the ward based staff to facilitate this in line with the Patient Food and Beverage Service SOP ([See Appendix 2](#)).

A selection of ward provisions (snacks), are available 24 hours a day and are available to all in-patients between meals.

The Food Information Regulation 2014 (SI 2014/1855) came into effect on 13 December 2014 and applies to all food businesses. There are 14 major food allergens to be aware of which food businesses need to be able to know and identify in order to comply with the regulations ([See Appendix 3](#)).

From 1 October 2021, the requirements for prepacked for direct sale (PPDS) food labelling changed in England, Wales and Northern Ireland (Natasha's Law).

The new labelling will help protect consumers by providing potentially life-saving allergen information on the packaging.

The law states that if you sell or provide food for the consumption of others or for any charity fundraising food events such as any bake/cake sales you must provide allergen information in writing and it must be easily accessible, this information can be obtained from the packages to ensure that consumers, especially allergy sufferers will be confident that the food that is available is safe for them to eat.

Businesses are required by law to provide accurate information on allergenic ingredients in all types of food, whether packed or loose, i.e. all dishes & food items prepared for patients, dishes & food items sold in retail outlets and dishes & food items prepared for functions.

Within the Trust this information is held in central locations on each site and can be accessed as follows:

- BH – Kitchen
- DRI – East Kitchen
- Montagu – Kitchen

Staff and visitors can obtain the information in each retail outlet.

Any patients who may require Oral Nutritional Supplements/Enteral Feeds and Feeding Equipment should refer to the SOP ([See Appendix 4](#)) which describes how to access correct dietetic products.

4.4 Provision for Therapeutic Diets (Special Diets)

This section covers patients who:

- Are too ill to eat normal food.
- Have dysphagia (difficulties with swallowing).
- Need prescribed therapeutic diets.
- Have an eating disorder.
- Have a food allergy or intolerance.

Provision for special diets is made and can be provided to patients following consultation with dietitians, speech and language therapists or at the specific request of patients.

The Speech and Language Therapy team assess patients for oropharyngeal dysphagia. The Speech and Language Therapy team may make recommendations for texture modified diet and/or fluids to minimise or prevent choking and aspiration risks.

The International Dysphagia Diet Standardisation Initiative (IDDSI) definitions are used to describe texture modified foods and thickened liquids used for individuals with dysphagia, in all care settings, and all cultures. Levels are identified by numbers, text labels and colour codes. ([See Appendix 5](#)).

Sodexo supply a range of textured modified meals and special diets.

All staff involved with the service of meals, snacks and beverages will be sensitive to the need for good presentation of normal and special diets. They will ensure that the potential for the patient's enjoyment of food is maximised and will actively encourage nutritional intake.

4.5 Alternative Menus

Menus are provided for patients with specific cultural preferences. Menus are available on all wards.

4.6 Children's Menu

A children's menu is available on the paediatric wards, as well as the standard menu.

4.7 Screening for Malnutrition

Clinical staff are responsible for applying the 'Malnutrition Universal Screening Tool' ('MUST') to identify those patients at risk in the time frames specified in the Trust's Nutrition and Hydration Policy for Adults in Hospital - PAT/T 43. Patients have an appropriate nutritional care plan which reflects their 'MUST' score and will highlight the food and fluid requirements for that patient.

4.6 Making Mealtimes Matter

All ward staff are expected to support the 'Making Mealtimes Matter' ethos. This allows patients the maximum opportunity to enjoy meals in a relaxed environment conducive to eating. During the mealtime period, all non-urgent patient activity should be suspended and the focus should move to supporting mealtime activities.

4.8 Red Tray Initiative

The Trust operates the Red Tray, initiative to identify patients who have particular dietary needs or who require assistance with eating. These can range from patients with temporary physical conditions that inhibit dexterity, to complex permanent medical conditions. Red Tray assessments are determined during the malnutrition screening (see 4.7). The arrival of the red tray on the ward alerts staff that that patient requires additional support during the mealtime and that food intake should be monitored.

Nursing staff will identify patients who may require additional support with eating and they will be given the appropriate assistance by suitably trained and authorised volunteers or members of staff. Family members of the patient may also wish to assist with this task.

Adaptive cutlery is also available.

4.9 24 Hour Catering

DRI Catering Department operates between 06:30 and 20:00 seven days per week. BH operates between 06:30 and 19:15 and MMH operates between 07:00 and 19:00. Patients requiring meals during these hours, but outside the locally advertised meal service times, will be provided with food to meet their individual requirements as detailed below. Additional patient catering services can be requested from the DRI catering department on extension 642327, BH extension 572919 or MMH extension 649099.

A snack box service is provided for patients accessible at any time of day or night, e.g. for late admissions. ([See Appendix 6](#)).

Typically snack boxes will contain -

- Fruit juice
- Sandwich (white or wholemeal bread)
- Portion of fresh fruit
- Chocolate snack or crisps or slice of cake
- Yoghurt or jelly

4.10 Beverages

Beverages are an integral element of the patient catering service. A varied selection of beverages should be readily available over a 24 hour period including tea and coffee, fruit juices, cordials and milk based drinks, which are served from the ward hydration station as per the flow chart ([See Appendix 7](#)). Fresh water should be available to hospital patients, staff and visitors throughout the day. Patients should be encouraged to meet their fluid intake and, as a minimum, must be offered seven beverages throughout the day. Five drinks each day will be provided by Facilities Services staff, local arrangements will be in place on each ward to determine when the ward staff provides the residual two drinks, these are generally the first and last drink of the day.

4.11 Occupational Therapy Provisions

A 'Bag of Kindness' can be provided to patients who are going home and who will not immediately have a carer to assist them with purchasing food. The Bag of Kindness includes simple items such as bread and milk. Ward staff should request the pack by contacting the Catering Department.

4.12 Monitoring of Patient Meal Services

Regular audits of patient satisfaction are undertaken by the Catering Team and the results are reported on a monthly basis to the Catering Contract Manager.

5 STAFF AND VISITOR CATERING SERVICES

The Trust makes provision for Sodexo to provide a range of Catering Services which reflect the activity of the hospital and needs of staff and visitors.

The catering provision will offer the opportunity for staff and visitors to eat full meals or snacks between specified hours, automated vending facilities offering hot and cold choices are available over the 24/7 period.

Food will be of visibly good quality with a range of contrasting dishes each day. Foods for all population groups who regularly work in or visit the hospital will be available and meet cultural, religious and ethnic dietary requirements.

All menus offer the opportunity to choose a healthy diet in line with meeting nutritional needs and of the Hospital Food Standards Panel's report on Standards for Food and Drink in NHS Hospitals (2014).

Services include:

- Breakfast, lunch and evening meals (evening meals not available at MMH).
- Hot and cold beverages.
- Light meals and snacks.
- Vending machine provision.
- Hospitality catering.

It is the policy of the Trust that healthier food choices are available in all dining areas with the objective of increasing the availability of foods that are healthy and enjoyable and comply with Commissioning for Quality and Innovation (CQUIN) Initiative.

Where possible, food promotions will positively discriminate healthy food choices to encourage uptake. The retail food pricing is subject to annual price increases.

5.1 Hospitality and Functions

Meals and/or refreshments may be provided in support of meetings and events. It is the responsibility of Department budget holders for ensuring the appropriate authority is sought prior to booking any requests using Sodexo Catering Services hospitality request form. The provision of catering for hospitality, functions and meetings should be supplied by Sodexo. Food purchased from external providers cannot be controlled and managed by Sodexo and therefore the food safety aspects cannot be the responsibility of the Trust.

6 FOOD PURCHASING, DELIVERY, STORAGE, PREPARATION AND SERVICE

Sodexo acknowledges its responsibility for food safety and has a documented Food Safety Management System. The system is based on the HACCP principles in accordance with Regulation (EC) 852/2004 on the Hygiene of Foodstuffs. In addition to this, Sodexo are audited by both internal and external organisations.

7 SUSTAINABILITY

The Department for Environment, Food and Rural Affairs (Defra) is the government department responsible for environmental protection, food production and standards, agriculture, fisheries and rural communities in the United Kingdom.

The Government Buying Standard (GBS) for food and catering services (Defra) was first introduced in 2011 and updated in December 2017. Its criteria cover three areas of sustainable procurement:

- Foods produced to higher sustainability standards – covering issues such as food produced to higher environmental standards, fish from sustainable sources, seasonal fresh food, animal welfare and ethical trading considerations
- Foods procured and served to higher nutritional standards – to reduce salt, saturated fat and sugar and increase consumption of fibre, fish and fruit and vegetables.
- Procurement of catering operations to higher sustainability standards – including equipment, waste and energy management.

Sodexo is committed to providing sustainable food procurement and uses nominated suppliers who are fully compliant with GBS. Menus are designed to incorporate nutritionally balanced choices to all our patients, staff and visitors.

8 FOOD HAZARDS, FORMAL COMPLAINTS & INFECTIOUS DISEASES

All information received relating to food safety hazards and formal complaints must be forwarded to the General Manager, Sodexo via the on-site Catering Managers. In cases where food poisoning is indicated, LAEHO will be informed and take the lead and will fully investigate each suspected case.

By law drinking water must be wholesome at the time of supply, and all water must be fresh, and free from water borne pathogens that can make people ill.

8.1 Complaints

Any complaints should in the first instance, be directed to the Catering Supervisors using the local numbers as specified in section 4.9. If escalation is required, complaints will be dealt with by the General Manager, Sodexo, who can be contacted on DRI 642320.

Formal complaints of a serious nature will be referred to the Patient Experience Team and/or the Complaints Management Team.

8.2 Infectious Diseases – For Food Handlers

Detailed information regarding Infectious Diseases should be sought through the Occupational Health Department. Current policy stipulates that anyone suffering from, or showing symptoms of diarrhoea, vomiting, skin infection or gastrointestinal infections must not be allowed to work in an area where they may directly or indirectly contaminate food. All staff must be instructed of their obligation and managers should be fully familiar with this policy.

Catering Department Line Managers are responsible for ensuring that any person known or suspected to be suffering from, or to be a carrier of, a food borne disease or infection, including vomiting, diarrhoea, skin infections, sores and open wounds, be excluded from working with food pending professional evaluation of the condition by the Occupational Health Practitioners.

The Catering Department will be guided by the Trust's Infection Prevention and Control (IPC) Team regarding infectious diseases.

8.3 Infectious Disease Procedure – For Food Handlers

- All staff are made aware of the reporting procedure for illness during Formal Induction Training.
- Staff members suspected of suffering from an infectious disease, especially food poisoning, will be excluded from work.
- Staff will be monitored for signs of infectious illness.
- Staff whose diarrhoea and vomiting symptoms are confirmed as food poisoning or other illness likely to put food safety at risk, are excluded from the workplace until 48 hours after symptoms have ceased naturally i.e. without the use of a suppressant such as Imodium.
- All staff are made aware of the need for good personal hygiene practice, both during Formal Induction Training and during their annual Food Hygiene Training.
- All new food handling staff must complete an Occupational Health pre-employment health questionnaire.

9 TRAINING

Please refer to the Mandatory and Statutory Training Policy (CORP/EMP 29) for details of the training needs analysis, as staff will require different levels of training.

All staff involved in the service delivery of food and hydration to patients are required to complete food hygiene and Allergen awareness training, please contact Education Department for details.

If you require any further Food Safety information, please contact the Facilities Lead, BDGH or Nominated Deputy on BH 572152/DRI 644105.

10 CATERING CONTINGENCY PLAN

The Catering Departments hold sufficient stock levels of core ingredients to provide a fundamental service to patients in the event that food deliveries are affected. Sodexo has a Business Continuity Plan which includes severe weather addendum.

11 MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT

Sodexo have an audit system in place as part of its Food Safety Management System (HACCP Procedures) of which the General Manager is responsible for ensuring compliance. Sodexo's HACCP Procedures details monitoring arrangements.

Unannounced external Food Hygiene Inspections will be conducted by LAEHO. Serious breaches of Food Hygiene or Food Safety codes of practice will result in the issue of Improvement or Prohibition Notices. The Facilities Lead - BH or authorised delegate reserves the right to undertake quality audits of Sodexo's services and its Approved Suppliers.

Food is assessed as part of Patient Led Assessments of the Care Environment (PLACE) which take place annually; the results show how hospitals are performing both nationally and in relation to other hospitals providing similar services.

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where Reported to
Food Premises – General Workplace Inspection	On Site Catering Managers	Every 6 Months	Visual inspections Reported to General Manager
Food Handling Unit Assessment Flow Charts and Plans	On Site Catering Managers	Every 12 Months	Observations Reported to General Manager

Food Safety (HACCP) Documentation	Duty Staff	Daily (each CCP)	Catering Supervisor Sign off appropriate HACCP document
	On Site Catering Managers	Weekly	Audit appropriate HACCP documents Reported to General Manager
Food Safety Allergens	Catering Supervisors	Daily (If prepared on site)	Files kept on site
	On Site Catering Managers	Weekly	Reported to General Manager
In Unit Inspections	Catering Supervisors	Weekly	Safety Walk Round Reported to on site Catering Managers
	On Site Catering Managers	Every 3 Months	Safety Walk Round Reported to General Manager
Patient Satisfaction Surveys	Catering Supervisors	Daily survey collation	Reported to Catering Managers
	On Site Catering Managers	Monthly reporting results	Reported to General Manager

12 EQUALITY IMPACT ASSESSMENT

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are disadvantaged over others. Our objectives and responsibilities relating to equality and diversity are outlined within our equality schemes. When considering the needs and assessing the impact of a procedural document any discriminatory factors must be identified.

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27) and the Fair Treatment for All Policy (CORP/EMP 4).

The purpose of the EIA is to minimise and if possible, remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. ([See Appendix 8](#))

13 ASSOCIATED TRUST PROCEDURAL DOCUMENTS

Equality Analysis Policy - CORP/EMP 27
 Fair Treatment for All Policy - CORP/EMP 4
 Health and Wellbeing Policy - CORP/EMP 31
 Kitchen Hygiene and Refrigerator Monitoring Policy for Wards and Clinical Areas - PAT/IC 22
 Nutrition and Hydration Policy for Adults in Hospital – PAT/T 43
 Privacy and Dignity Policy - PAT/PA 28
 Safeguards (DoLS) - PAT/PA 19
 Trust’s Mental Capacity Act 2005 Policy and Procedure, including Deprivation of Liberty

14 DATA PROTECTION

Any personal data processing associated with this policy will be carried out under ‘Current data protection legislation’ as in the Data Protection Act 2018 and the UK General Data Protection Regulation (GDPR) 2021.

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website:

<https://www.dbth.nhs.uk/about-us/our-publications/information-governance/>

15 REFERENCES

[Business Guidance-Introduction to Allergen Labelling Changes](#)

[Care Quality Commission Outcome 5 \(Regulation 14\): Meeting nutritional needs](#)

[Commissioning for Quality and Innovation \(CQUIN\)-2017-2019](#)

Department of Constitutional Affairs Mental Capacity Act (2005): Code of Practice, 2007
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/497253/Mental-capacity-act-code-of-practice.pdf

[Food Information Regulation 2014 \(SI 2014/1855\)](#)

[Hazard Analysis Critical Control Point \(HACCP\) principles](#)

[Hospital Food Standards Panel’s report on standards for food and drink in NHS Hospitals \(2014\)](#)

[IDDSI Framework](#)

[National Institute for Health and Care Excellence guidelines \(NICE\) - Diet, nutrition and obesity](#)

[Patient Led Assessments for the Care Environment \(PLACE\)](#)

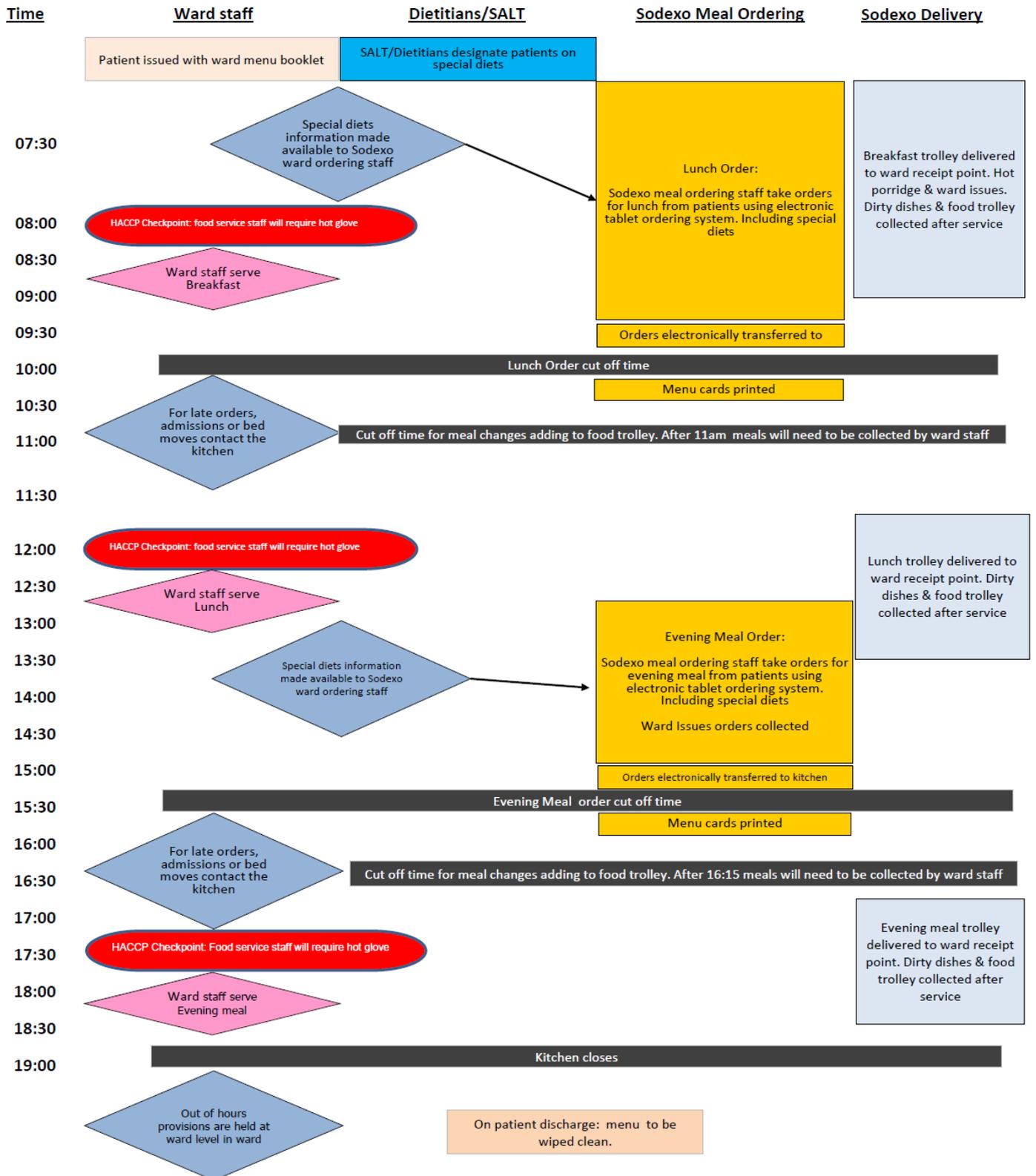
[Regulation \(EC\) 2073/2005](#)

[Regulation \(EC\) 852/2004 on the Hygiene of Foodstuffs](#)

[The Food Safety and Hygiene \(England\) Regulations 2013](#)

[The Government Buying Standard \(GBS\) for food and catering services](#)

APPENDIX 1 – PATIENT MEAL ORDERING FLOW CHART



APPENDIX 2 – PATIENT FOOD AND BEVERAGE SERVICE

Process:

Patient meal service by multi-disciplinary staff groups at Doncaster Royal Infirmary (DRI), Bassetlaw Hospital (BH) and Mexborough Montagu Hospital (MMH)

Author: Julie Allison

Version: 2

Date issued: 9/11/2021

Review Date: 9/11/2024

Training required to use this procedure

All staff involved in this process are to receive ward induction training and will include Level 1 Food Safety and Allergen Awareness Training in addition Manual Handling Awareness (SET).

Ward Managers will be required to provide or organise any ongoing training and updates as required.

On completion of training a record of attendance and competency will be retained via DBTH Electronic Staff Record (ESR) system.

	Risks identified with this Procedure	Countermeasure
1	Breaches in manual handling procedures	All staff involved with the patient meal and beverage service are to receive the appropriate manual handling training (SET Training)
2	Breaches - Non-conformance in the Food Safety procedure	All staff must are to receive Level 1 Food Safety and Allergen Awareness Training

Communicating this procedure

	Staff group	Communication	Responsibility
1	All Ward staff	Prior to implementation	Ward Manager
2	Service Assistants	Prior to implementation	Service Department Manager
3	Students	Local induction	Supervising staff

Purpose
The purpose of this SOP is to ensure that in-patients receive their meals in an environment which is conducive to dining and to meet quality standards, it also outlines the responsibilities of the ward based staff at meal times
Introduction
Patients must be provided with food which is safe to eat, nutritious and meets their quality expectations

Scope	
People who may be involved in this process:- <ul style="list-style-type: none"> • Nursing staff • Healthcare staff • Service Department staff 	
Instruction	Responsible
Food and beverage service to patients	Nursing staff Healthcare staff Service Department staff
Task	
Knowledge of the delivery times of meals	Nursing staff Healthcare staff Service Department staff
Ensure patients are readied for the meal service in line with PLACE (Patient Led Assessments for the Care Environment) national requirements – <ul style="list-style-type: none"> • Patients prepared for the meal service; e.g. overbed tables cleared / assisted to sit up • Patients offered the chance to wash their hands/provided with hand sanitiser wipe prior to meal service • Staff/carers and visitors involved in meal service are required to wash their hands • Where food items are packaged (e.g. sandwiches / yoghurts / butter portions) are they opened or offered assistance? • All unnecessary activity should cease and protected meal time is operated • Nursing staff to be clearly active and involved in the meal service • Ensure the meal being served is checked against the menu to be the correct meal • Ensure all patients have a full water jug available 	Nursing staff Healthcare staff Service Department staff

<p>If there has been any patient movement in between menu collation and food service, this should be communicated to Sodexo by contacting the Catering Department by telephone as follows: -</p> <ul style="list-style-type: none"> • DRI Catering Office – 642321 • BH Catering Office – 572906 • MMH Catering Office – 649097 	<p>Nursing staff Healthcare staff Service Department staff</p>
<p>Registered staff to check any patients who are diabetic and who will require medication prior to meals arriving.</p>	<p>Nursing staff</p>
<p>On arrival of the Sodexo meal trolley, the doors will be opened, and the trolley left to vent for 5 minutes (this is to be timed) as per SOP instructions</p>	<p>Nursing staff Healthcare staff Service Department staff</p>
<p>Following meal service, any items to be retained at ward level should be stored in the ward kitchen conforming to the procedural document Kitchen Hygiene and Refrigerator Monitoring Policy For Wards and Clinical Areas -PAT/IC 22</p>	<p>Nursing staff Healthcare staff Service Department staff</p>

APPENDIX 3 – MAJOR FOOD ALLERGENS

14 Allergens

Coming to a food label near you



The way allergens are labelled on prepacked foods is changing because of new regulations. The Food Information Regulation, which comes into force in December 2014, introduces a requirement that food businesses must provide information about the allergenic ingredients used in any food they sell or provide.

There are 14 major allergens which need to be mentioned (either on a label or through provided information such as menus) when they are used as ingredients in a food. Here are the allergens, and some examples of where they can be found:



Celery

This includes celery stalks, leaves, seeds and the root called celeriac. You can find celery in celery salt, salads, some meat products, soups and stock cubes.

Cereals containing gluten

Wheat (such as spelt and Khorasan wheat/Kamut), rye, barley and oats is often found in foods containing flour, such as some types of baking powder, batter, breadcrumbs, bread, cakes, couscous, meat products, pasta, pastry, sauces, soups and fried foods which are dusted with flour.



Crustaceans

Crabs, lobster, prawns and scampi are crustaceans. Shrimp paste, often used in Thai and south-east Asian curries or salads, is an ingredient to look out for.

Eggs

Eggs are often found in cakes, some meat products, mayonnaise, mousses, pasta, quiche, sauces and pastries or foods brushed or glazed with egg.



Fish

You will find this in some fish sauces, pizzas, relishes, salad dressings, stock cubes and Worcestershire sauce.

Lupin

Yes, lupin is a flower, but it's also found in flour! Lupin flour and seeds can be used in some types of bread, pastries and even in pasta.



Milk

Milk is a common ingredient in butter, cheese, cream, milk powders and yoghurt. It can also be found in foods brushed or glazed with milk, and in powdered soups and sauces.

Molluscs

These include mussels, land snails, squid and whelks, but can also be commonly found in oyster sauce or as an ingredient in fish stews

**Mustard**

Liquid mustard, mustard powder and mustard seeds fall into this category. This ingredient can also be found in breads, curries, marinades, meat products, salad dressings, sauces and soups.

Nuts

Not to be mistaken with peanuts (which are actually a legume and grow underground), this ingredient refers to nuts which grow on trees, like cashew nuts, almonds and hazelnuts. You can find nuts in breads, biscuits, crackers, desserts, nut powders (often used in Asian curries), stir-fried dishes, ice cream, marzipan (almond paste), nut oils and sauces.

**Peanuts**

Peanuts are actually a legume and grow underground, which is why it's sometimes called a groundnut. Peanuts are often used as an ingredient in biscuits, cakes, curries, desserts, sauces (such as satay sauce), as well as in groundnut oil and peanut flour.

Sesame seeds

These seeds can often be found in bread (sprinkled on hamburger buns for example), breadsticks, houmous, sesame oil and tahini. They are sometimes toasted and used in salads.

**Soya**

Often found in bean curd, edamame beans, miso paste, textured soya protein, soya flour or tofu, soya is a staple ingredient in oriental food. It can also be found in desserts, ice cream, meat products, sauces and vegetarian products.

Sulphur dioxide (sometimes known as sulphites)

This is an ingredient often used in dried fruit such as raisins, dried apricots and prunes. You might also find it in meat products, soft drinks, vegetables as well as in wine and beer. If you have asthma, you have a higher risk of developing a reaction to sulphur dioxide.



For more information, visit: food.gov.uk/allergy or nhs.uk/conditions/allergies

✉ Sign up to our allergy alerts on food.gov.uk/email, or follow #AllergyAlert on Twitter and Facebook

📘 Let's keep connected at food.gov.uk/facebook

🐦 Join our conversation @[food.gov.uk/twitter](https://twitter.com/food.gov.uk)

📺 Watch us on food.gov.uk/youtube

APPENDIX 4 – ORAL NUTRITIONAL SUPPLEMENTS/ENTERAL FEEDS AND FEEDING EQUIPMENT STANDARD OPERATING PROCEDURE (SOP)

Process:

Supply and Distribution of Oral Nutritional Supplements/Enteral Feeds and Feeding Equipment (Dietetic Items) for inpatients on hospital wards at Doncaster Royal Infirmary, Bassetlaw Hospital and Mexborough Montagu Hospital.

Author: Sophie Hemsall

Version: 2

Date issued: 09/11/2021

Review Date: 09/11/2021

Training required to use this procedure: - Food hygiene (mandatory training- staff only)

	Risks identified with performing this SOP	Countermeasure
1	Patient does not receive appropriate nutrition in addition to or in place of their daily menu	Follow this SOP
2	Patient given incorrect oral nutritional supplement/enteral feed/equipment	Follow this SOP

The purpose of this SOP is to provide a structure for ensuring patients on hospital wards have access to the correct dietetic products required for their nutritional care whilst an inpatient

List of people who may be involved in this SOP: Dietetic Staff, Nursing And Healthcare, Speech and Language Therapy, Therapy assistants, Catering Staff and Procurement.

Instruction	Responsible
Minimum stock levels for dietetic items will be maintained within the catering storage areas	Inventory Management Team
Standard stock control measures will apply	Inventory Management Team
Non-Stock items required will be ordered by dietetics and delivered to catering.	Dietetic Staff
A 'Ward Dietetic Item Ordering' sheet will be completed daily using information from ward catering communication system	Ward staff

Adult/Paediatric Supplement Order Forms will be sent with the evening meal order to catering for items to be delivered at breakfast	Catering and ward staff
Ward staff/Dietitian/Dietetic Assistant completes the Adult/Paediatric Supplement Order Form for specific dietetic requests. This order form is collected by catering staff for delivery at breakfast.	Ward staff/Dietetic Staff
Dietetic Items will be collected from catering store and placed on ward meal trolley for delivery at breakfast	Catering Staff
Dietetic products no longer required on ward to be returned to catering if meets following criteria. <ul style="list-style-type: none"> • The item has not entered patients bed area • The item is with its use by date • The item is unopened 	Ward Staff
Where dietetic items are required prior to the next meal trolley delivery the ward or Dietitian will contact catering by telephone to make a request	Ward Staff/Dietetic Staff
Dietetic items can be ordered for discharge and the following provision should be made: 14 days' supply to be given for patients discharge within the Doncaster area 14 days' supply to be given to patients discharged outside the Doncaster area	Ward Staff/Dietetic Staff

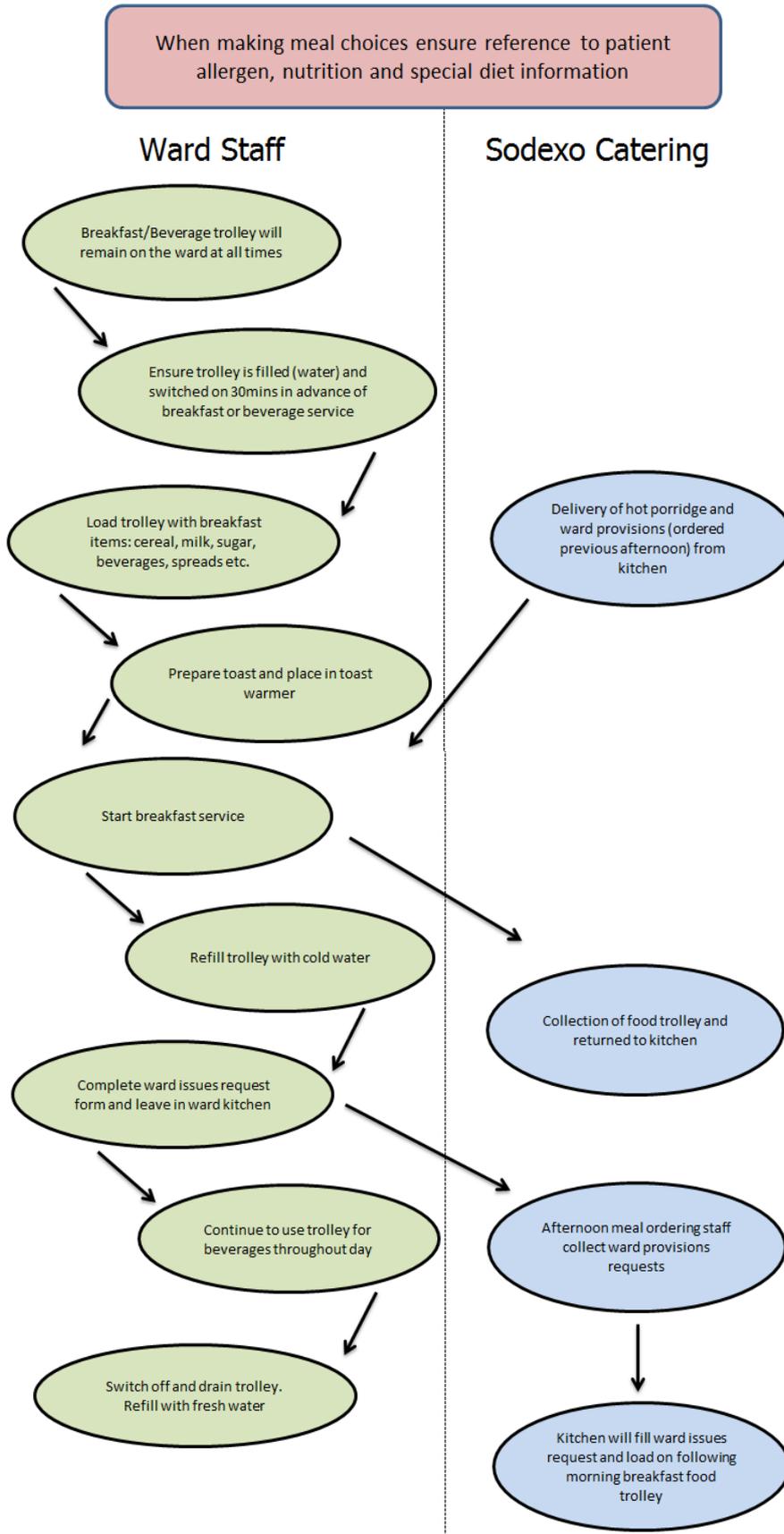
APPENDIX 5 - IDDSI - NATIONAL DESCRIPTORS FOR TEXTURE FOOD & DRINKS DIETS



APPENDIX 6 - OUT OF HOURS (OOH) FOOD SERVICE AT WARD LEVEL PROCESS GUIDE

- Collect the refrigerator/freezer key: -
 - DRI – EWB Ward 19 – please ask a member of the nursing team for the key
 - DRI – W&C Hospital M1 – please ask a member of the nursing team for the key
 - BH – MDU kitchen (key held on B5T) - please ask a member of the nursing team for the key
 - MMH – Rehab 1 Practice Kitchen - please ask a member of the nursing team for the key
- Choose from hot meal choice or cold snack box, when making meal choices ensure reference to patient allergen, nutrition and special diet information.
- Complete 'Requisition Sheet' with meal taken, ward issued to, date, name and signature.
- Collect temperature recording sheet, held OOH refrigerator/freezer location.
- Heat chosen meal in microwave supplied by Sodexo, following the instructions -
Regeneration Procedure at Ward Level.
 - Complete temperature record chart.
 - Regeneration Procedure at Ward Level.
 - Return refrigerator/freezer key.
 - Ensure the microwave and kitchen area is left clean and tidy.
 - Serve the meal to the patient (plates, cutlery and plate covers will be available with the OOH service, replenished daily by the Sodexo stores team).
 - Please leave the completed temperature record sheet in this folder which will be collected by catering staff.
 - Sodexo will restock OOH meals according to paperwork received and be responsible for stock rotation and fridge/freezer temperature records.

APPENDIX 7 - BREAKFAST AND BEVERAGE FLOW CHART



APPENDIX 8 - EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING

Service/Function/Policy/Project/Strategy	Division	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
Hospital Catering Policy Provision of Food to Patients, Staff and Visitors	Catering Services and DBTH Facilities	Julie Allison	Existing Policy	8 March 2022
1) Who is responsible for this policy? Catering Services and DBTH Facilities				
2) Describe the purpose of the service / function / policy / project/ strategy? To provide quality standards and outline the responsibilities of the Catering Services regarding the provision of food across the Trust.				
3) Are there any associated objectives? To ensure Catering, Clinical and Domestic staff are aware of their responsibilities and to define where those responsibilities end when provision of food is shared with ward and clinical staff.				
4) What factors contribute or detract from achieving intended outcomes? – Multi-disciplinary team requirements are necessary to ensure compliance is met.				
5) Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief? Details: [see Equality Impact Assessment Guidance] - No				
<ul style="list-style-type: none"> • If yes, please describe current or planned activities to address the impact N/A 				
6) Is there any scope for new measures which would promote equality? N/A				
7) Are any of the following groups adversely affected by the policy?				
Protected Characteristics	Affected?	Impact		
a) Age	No			
b) Disability	No			
c) Gender	No			
d) Gender Reassignment	No			
e) Marriage/Civil Partnership	No			
f) Maternity/Pregnancy	No			
g) Race	No			
h) Religion/Belief	No			
i) Sexual Orientation	No			
8) Provide the Equality Rating of the service / function / policy / project / strategy – tick (✓) outcome box				
Outcome 1 ✓	Outcome 2	Outcome 3	Outcome 4	
<i>*If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a Detailed Equality Analysis form – see CORP/EMP 27.</i>				
Date for next review: March 2025				
Checked by: Ros Newton			Date: 8 March 2022	