



Hospital Catering Policy

Provision of Food to Patients, Staff and Visitors

This is a new procedural document, please read in full.



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Author/reviewer: (this version)	Julie Allison Head of Catering, Facilities Directorate, Hotel Services
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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
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Version 1	10 September 2015	This is a new procedural document, please read in full	Julie Allison

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1. INTRODUCTION

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

Doncaster Royal Infirmary (DRI)

Bassetlaw District General Hospital (BDGH)

Montagu, Mexborough 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 are now widely accepted to 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.

An independent group has been established by the Department of Health to review the standards of food and drink in NHS Hospitals, the Trust is obliged and committed to ensuring compliance with these national requirements in respect of patients dining and in particular to deliver the aims and objectives of the Hospital Food Standards Panel's report on standards for food and drink in NHS Hospitals (2014).

The Trust has a legal obligation to comply with the provisions and requirements of food hygiene regulations since 1987 and there are now 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.

1.1 Food Hygiene Regulations

1.1.1 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, and the defence of 'due diligence'.

1.1.2 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.

1.1.3 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
- HACCP (Hazard Analysis and Critical Control Points)
- 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.

1.1.4 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.

1.2 Policy Statement and Aim

The Trust Catering Services is committed to providing food for our patients, staff and visitors which is safe to eat, nutritious and meets their quality expectations. Catering Services 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.

Catering Services 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.

1.3 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.

To ensure that all patients, staff and visitors have access to safely prepared nutritious food.

The Catering Department 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 Control team, Nursing, Hotel Services and Estates staff, Environmental Health and the Organisational Training and Development Department. All policies and performance measures will be subject to review to ensure maintenance and continual improvement to all food safety systems.

2. PURPOSE

The purpose of this policy is to provide quality standards and outline the responsibilities of the Catering Services Department regarding the provision of food across the Trust.

This policy applies to all staff providing food to patients, visitors and staff, and to ward staff involved in the ordering and serving of food for in-patients.

This policy sets out the provision of catering services to patients, staff and visitors in a manner which embraces Nutrition Guidelines published by the National Institute for Health and Care Excellence (NICE) in February 2006, the Obesity Guidelines published by NICE in December 2006 and the Hospital Food Standards Panel in December 2014.

Catering for staff is addressed in the policy as it has a part to play in well-being, health and in feeling valued by the Trust as an employer.

Relatives and other visitors to the Trust may need to eat on the premises and will be catered for in a manner sensitive to their preference and nutritional needs.

3. DUTIES AND RESPONSIBILITIES

The Trust is 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. The Trust is also responsible for ensuring that resource allocation is adequate to meet the needs of the service and, in a service which relies on co-operation and coordination of several professional disciplines across many locations in the Trust, they are the ultimate authority in ensuring that food service maintains an appropriate level of priority in all areas.

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 ensuring a monitoring programme is in place to guarantee the operational procedures are being implemented across the Trust sites.

3.2 Associate Director of Estates and Facilities

The Associate Director of Estates and Facilities has delegated authority for the control and management of Hotel Services including Catering Services.

3.3 General Manager Hotel Services

The General Manager Hotel Services will ensure that the Catering Department provides a high quality Catering Service in line with this policy and that is safe and compliant with all standards and legislation including food safety and hygiene.

3.4 Head of Catering

The Head of Catering 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 Head of Catering Services 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

The Head of Catering is responsible for the review of this document in line with any amendments or replacements to the aforementioned publications.

3.5 On-Site Catering Managers

The Catering Manager is:

- Responsible for the administration of the Food Safety Management System.
- Responsible for ensuring that the staff are appropriately trained.
- Responsible for maintaining staff rotas to provide a safe food service.
- Responsible for completing food safety audits.
- Responsible for overseeing the day to day food production operation to ensure that safe food is being produced.
- Responsible for reporting any non-conformity which could compromise food safety to the Head of Catering.
- Responsible for ensuring there are adequate cleaning schedules and resources to carry out all cleaning tasks required to keep food safe.
- Responsible for ensuring that all food produced, distributed and delivered will be in compliance to this policy.

3.6 Assistant Catering Manager

The Assistant Catering Manager is:

- Responsible for ensuring that all procedures within the Food Safety Management system are followed.
- Responsible for ensuring that the staff are appropriately trained.
- Responsible for maintaining staff rotas to provide a safe food service.
- Responsible for completing food safety audits.
- Responsible for overseeing the day to day food service operations to ensure that safe food is being served.
- Responsible for reporting any non-conformity which could compromise food safety to the Head of Catering.
- Responsible for ensuring there are adequate cleaning schedules and resources to carry out all cleaning tasks required to keep food safe.

3.7 Retail Manager

The Retail Manager will be responsible for the management of the following outlets, Silks Dining Room, Women's Coffee Shop, Court yard Coffee Shop and Main Foyer Coffee Shop and also the retail provision for in house and outsourced services.

The Retail Manager is:

- Responsible for ensuring that all procedures within the Food Safety Management system are followed.
- Responsible for ensuring that the staff are appropriately trained.
- Responsible for maintaining staff rotas to provide a safe food service.

- Responsible for completing food safety audits.
- Responsible for overseeing the day to day food service operations to ensure that safe food is being served.
- Responsible for reporting any non-conformity which could compromise food safety to the Head of Catering.
- Responsible for ensuring there are adequate cleaning schedules and resources to carry out all cleaning tasks required to keep food safe.

3.8 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.

3.9 Ward Manager

The Ward Manager is responsible for ensuring maintenance of day-to-day standards of hygiene in ward kitchens. It is the responsibility of the Ward Manager to 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. The Ward Manager will ensure all staffs that are responsible for undertaking fridge 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 Local Authority Environmental Health Officer inspections. It is also their responsibility to ensure that staff have read the 'Level 1-The Essentials of Food Hygiene Leaflet' annually and signed the 'Level 1 Food Hygiene Register'; these can be found on the Training and Education section on the Trust intranet under 'Statutory and Essential to Role Training Leaflets'. Completed registers are to be sent to Training and Education, Education Centre, DRI.

3.10 All Trust Staff

All staff associated with food production or service has a responsibility to ensure food hygiene standards are maintained within their work areas.

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 which sells or supplies food and includes the preparation, treatment and

storage. One application form is required to be completed (by the Head of Catering) for each of the Trust's premises that provide a catering service.

4.2 Food Provisions to Patients

The Catering Department provides catering services throughout the Trust to in-patients and, in certain circumstances, to day patients. Food is available 24 hours a day, 7 days per week. Nutrition and Hydration is 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 Head of Catering who will ensure that adequate amounts and type of foods are available for patients. The Dietetic Department is responsible for ensuring that adequate interpretation of this information is available to the catering management when requested.

4.2.1 Standard Food Provision

This section covers patients who are:

- Eating normally
- Allergic or have a food intolerance

A comprehensive menu is available which offers choice and is flexible in response to individual patient dietary and religious requirements.

It is the responsibility of ward staff to ensure patient menus are completed daily in preparation for them to be collected by a member of the Catering Department.

The menu cycle and formulation is reviewed with dietitians. Dietitians will confirm 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 and of the Hospital Food Standards Panel's report on standards for food and drink in NHS Hospitals (2014).

The standard menu card contains codes, indicating items suitable for variations to standard food. Small and large portions can be requested by annotating this on the menu. Ward provisions (snacks) are available 24 hours a day and are available to all in-patients between meals. Items available include bread for toast, mixed preserves, soup, sweet biscuits, individual cakes, biscuits for cheese, and butter portions.

The Food Information Regulations (FIRs 2014) 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 1](#)). 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;

DRI – East Kitchen

BDGH – Kitchen

Montagu – Kitchen

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

4.2.2 Provision for Therapeutic 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. Provision for special diets includes food that has been texture modified; these meals are suitable for patients with dysphagia. A diet chef is employed to supply food for patients requiring texture modified food. The Speech and Language Therapists (SALT) will give advice on the correctness of consistency of the dysphagia menus, in line with the national descriptors for texture modified diets ([See Appendix 2](#)).

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. Particular attention will be paid to texture modified foods to make them attractive and appetising.

4.2.3 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.

4.2.4 Protected Mealtimes

All ward staffs are expected, where practicable, to observe the protected mealtime protocol. The protected meal time may vary and will be displayed on the ward. This allows patients the

maximum opportunity to enjoy meals in a relaxed environment conducive to eating. During the protected mealtime, clinical interventions and medication of patients should be kept to an absolute minimum. For example, physiotherapy, doctors' rounds and scans should not routinely be conducted during the protected mealtime which is specified in the Protected Mealtimes Policy (PAT/PA 16).

4.2.5 Red Tray Initiative

The Trust operates the Red Tray initiative which will be replaced with a red pledge mat to identify patients who have particular dietary needs or who require assistance with the 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 4.2.3) and menus are annotated with a red 'dot' to alert catering staff of the requirement to deliver meals on a red tray. 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.

4.2.6 Patients Requiring Additional Support at Mealtimes

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 ([See Appendix 3](#)).

4.2.7 24 Hour Catering

The DRI catering department operates between 06.30 and 20.00 seven days per week. BDGH operates between 06.30 and 19.00 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 642328, BDGH extension 2919 or MMH extension 649097.

A snack box service is provided for patients accessible at any time of day or night, e.g. for late admissions.

Typically **Snack box A** will contain -
Sandwich (White or Wholemeal Bread)
Portion of Fresh Fruit
Fruit Juice
Chocolate Snack
Crisps
Yoghurt

Snack Box B will contain -
Cheese and Biscuits
Portion of Fresh Fruit
Fruit Juice
Chocolate Snack
Crisps
Yoghurt

Snack boxes are located in a number of satellite refrigerators throughout the Hospital and can be accessed via bleeping the on-call Clinical Site Manager via the switchboard by dialling 0 (zero).

Ward based snacks as described under 4.2.1 are available 24 hours per day, 7 days per week.

4.2.8 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. Fresh water should be available to hospital patients, staff and visitors throughout the 24 hour day. It should be provided in its most palatable condition – freshly drawn from a mains supplied tap, served cool and offered regularly. Patients should be encouraged to meet their fluid intake and, as a minimum, must be offered 7 beverages throughout the day. 5 drinks each day will be provided by Hotel Services staff, local arrangements will be in place on each ward to determine when the ward staff provide the residual 2 drinks, generally the first and last drink of the day.

4.2.9 Ethnic/Religious/Cultural Menus

Menus are provided for patients with specific cultural preferences. Menus are available upon request from the catering departments.

4.2.10 Children's Menu

A children's menu is available on the paediatric wards, as well as the standard menu. Baby milk is provided via the Dietetics department at BDGH and via Materials Management at DRI.

4.2.11 Occupational Therapy Provisions

A 'Home Alone pack' can be provided to patients who are going home and who will not immediately have a carer to assist them with purchasing food. The home alone pack includes simple items such as bread and milk.

4.2.12 Speech & Language Therapy (SALT) Provisions

Speech and Language Therapy assess and manage patients with oropharyngeal dysphagia and prescribe the most appropriate modified texture diet and fluid modification in line with the National Descriptors.

A fresh cooked texture modified, fortified food menu is supplied to dysphagia patients identified by SALT. The Catering department works closely with the SALT and the Dietetic department to ensure that the texture-modified food is presented to the patient in a way that will stimulate the appetite.

4.2.13 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 General Manager Hotel Services.

Audits are also undertaken by the Estates & Facilities Senior Management Team on a regular basis during ward inspection visits.

5. STAFF AND VISITOR CATERING SERVICES

The Trust makes provision for a range of catering services which reflect the activity of the hospital and needs of staff and visitors.

Catering is provided which offers the opportunity to eat full meals or snacks in the hospital for staff and visitors between specified hours.

Food is 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 are 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 Montagu)
- Salad bar
- Sandwich bar (not available at Montagu)
- Hot and cold beverages
- Light meals and snacks
- Vending machine provision
- Function 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.

Where possible, food promotions will positively discriminate healthy food choices to encourage uptake. The restaurant 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. Please see [Catering/Hospitality Request Fact Sheet](#) issued June 2016 from the Chief Executive.

Where sponsored events are held on Trust premises, outside caterers must not be used. For hygiene and governance reasons, food and refreshments must be ordered via the Catering Department. Permission to use alternative providers can only be approved by the Director of Facilities.

6. FOOD PURCHASING, DELIVERY, STORAGE, PREPARATION AND SERVICE

The Trust employs a Hazard Analysis and Critical Control Point (HACCP) system to monitor all catering activities. This HACCP Internal Quality Audit data is subject to external validation by Local Authority Environmental Health Officers to ensure compliance with the Food Safety and Hygiene (England) Regulations 2013. In addition to this, the Trust employs an Environmental Health Advisor to undertake independent food inspections against the food hygiene regulations and policies.

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 July 2014. 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.

The Trust is committed to providing sustainable food procurement by, where possible, sourcing local produce and goods through the NHS Supply Chain procurement process. Menus are designed to provide information on the provenance of food, positively promoting to patients, staff and visitors items that are locally grown or sourced. The Trust acknowledges its corporate social responsibility in the procurement of local foods stuff and goods, and looks to foster and encourage relationships via the NHS Supply Chain with small and medium sized enterprises (SME's) as per DEFRA's guidance.

8. FOOD HAZARDS, FORMAL COMPLAINTS & INFECTIOUS DISEASES

All information received relating to food safety hazards and formal complaints must be forwarded to the Head of Catering via the on-site Catering Manager. In cases where food poisoning is indicated, Local Authority Environmental Health Officers 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. ([See Appendix 4](#)).

8.1 Hazard Warnings

The Catering Management Team are responsible for distributing copies of any hazard warning information to each appropriate location and for issuing guidance and assistance as appropriate.

8.2 Complaints

Complaints will be dealt with by the Head of Catering. Formal complaints of a serious nature will be referred to the Patient Advice Liaison Team and/or the Complaints Management Team.

8.3 Infectious Diseases

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 Team regarding infectious diseases.

8.3.1 Infectious Disease Procedure

- 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.
- 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.
- An adequate supply of waterproof dressings will be provided in the first aid box.

9. 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. The Catering Department has a Business Continuity Plan which includes severe weather addendum.

10. MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT

Doncaster and Bassetlaw Hospitals NHS Foundation Trust has developed a comprehensive 'in-house' Catering Audit System as part of its Food Safety Management System (HACCP Procedures). The Trust's Head of Catering is responsible for ensuring compliance with the document and reporting findings to the General Manager, Hotel Services. The Trust's Food Safety Management System (HACCP Procedures) details monitoring arrangements and methodology and lists all 'Controlled' Documents. Only these documents may be used for the gathering of catering audit data, although the resulting data may be transposed for use in other reporting media, for example, Board Reports.

Unannounced external Food Hygiene Inspections will be conducted by Local Authority Environmental Health Officers. Serious breaches of Food Hygiene or Food Safety codes of practice will result in the issue of Improvement or Prohibition Notices.

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where Reported to
Food Premises – Infrastructure	On-site Catering Managers Trust Head of Catering	Monthly Quarterly	Visual inspections Reported to General Manager, Hotel Services
Food Handling (HACCP)	Catering Supervisors/ Assistant Catering Managers	Daily	Observations Reported to on-site Catering Managers
Food Safety (HACCP) Documentation	Duty staff Supervisors On-site Catering Managers Head of Catering	Daily Daily Monthly Quarterly	Audit appropriate HACCP documents Reported to General Manager, Hotel Services
Patient Satisfaction Surveys	On-site Catering Managers	Monthly	Reported to Head of Catering and reported to General Manager, Hotel Services

11. EQUALITY IMPACT ASSESSMENT

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) ([See Appendix 5](#)).

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.

Any specific issues raised relating to equality will be appropriately addressed through the monitoring processes, which oversee the implementation and effectiveness of this document in practice.

12. ASSOCIATED TRUST PROCEDURAL DOCUMENTS

A Practical Guide to Nutrition Support for Adults - PAT/T 35

Nutrition & Hydration Policy for Adults in Hospital - PAT/T 43

Kitchen Hygiene and Refrigerator Monitoring Policy for Wards and Clinical Areas - PAT/IC 22

Protected Mealtimes Policy - PAT/PA 16

Policy for Staff with Diarrhoea and/or Vomiting – CORP/EMP 30 v 3

13. REFERENCES

Department of Health - (1996) HSG (96)20 Management of food hygiene and food services in the National Health Service. London, TSO

The Hospital Food Standards Panel's report on standards for food and drink in NHS Hospitals (2014)

National Institute for Health and Care Excellence guidelines (NICE)

Hospital Caterers Association – A good Practice to Ward Level Services

Care Quality Commission Outcome 5 (Regulation 14): Meeting nutritional needs

Patient Led Assessments for the Care Environment (PLACE)

DBH Food Safety Management System (HACCP Procedures)

<https://www.food.gov.uk>

APPENDIX 1 – 14 MAJOR 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:



1

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.



2



3

Crustaceans

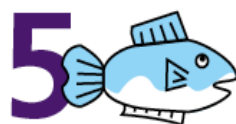
Crabs, lobster, prawns and scampi are crustaceans. Shrimp paste, often used in Thai and south-east Asian curries or salads, is an ingredient to look out for.

Eggs

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



4



5

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.



6



7

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](https://twitter.com/AllergyAlert) on Twitter and Facebook

📘 Let's keep connected at [food.gov.uk/facebook](https://www.facebook.com/food.gov.uk)

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

📺 Watch us on [food.gov.uk/youtube](https://www.youtube.com/food.gov.uk)

APPENDIX 2 – NATIONAL DESCRIPTORS FOR TEXTURE DIETS



Diet Textures: The change to 'National Descriptors'

Texture C (Puréed)

- Food has been puréed or has a puréed texture. It is smooth throughout with no 'bits'.
- It does not require chewing.
- It is a thick purée; it holds its shape on a plate and can be eaten with a fork because it does not drop through the prongs.
- Any fluid in or on the food is as thick as the purée itself (i.e. no loose fluids).



Texture D (Pre-mashed)

- Food is soft, tender and moist with some variation in texture.
- It requires very little chewing.
- Meat must be finely minced (i.e. 2mm) otherwise puréed.
- Any fluid in or on the food is as thick as the food itself (i.e. no loose fluids).



Texture E (Fork Mashable)

- Food is soft, tender and moist and will require some chewing.
- Food is soft enough that it could be mashed or broken into pieces with a fork.
- Meat is served in small, soft, tender pieces no bigger than 15mm.
- Sauce/gravy/custard may need to be served thick if thickened fluids are required*.



'High Risk Foods' are likely to cause difficulty and should be avoided on all textured diets:

- No mixed (thick-thin) textures. No thin, loose fluid.
- No hard, tough, chewy, fibrous, stringy, dry, crispy, crunchy or crumbly bits.
- No pips, seeds, pith/inside skin. No skins or outer shells e.g. on peas, grapes. No husks.
- No skin, bone or gristle.
- No round or long-shaped foods e.g. sausages, grapes, sweets. No hard chunks e.g. pieces of apple.
- No sticky foods e.g. cheese chunks, marshmallows.
- No 'floppy' foods e.g. lettuce, cucumber, uncooked baby spinach leaves.
- No juicy food where juice separates off in the mouth to a mixed texture e.g. watermelon.

***If patient requires thickened fluids, no jelly or ice cream - If in doubt leave it out!**

Dietetics Department, Doncaster Royal Infirmary Tel 01302 366666 ext 4109. Speech and Language Therapists, Doncaster Royal Infirmary Tel 01302 366666 ext 3178.

Designed by Medical Photography & Design, Doncaster, 01302 366666 ext 3178

APPENDIX 3 - ADAPTED CUTLERY STANDARD OPERATING PROCEDURE

Standard Operating Procedure (SOP)

Process:	Adapted Cutlery
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Author: Joanne Pack/Anita Hobson
Date issued: 17/12/14

Version: 1
Review Date: 1/12/15


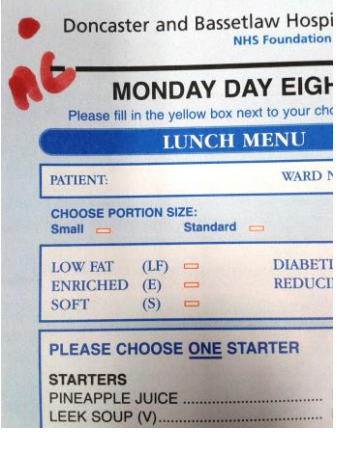
Training required to use this procedure:- Food hygiene (mandatory training), MUST		
	Risks identified with performing this SOP	Countermeasure
1	Patient unable to eat	Follow this SOP
2	Patient not assessed appropriately	Random process audits

Communicating this procedure:-			
	Staff group	Communication	Responsibility
1	All ward staff & service assistants	At implementation	Ward Manager
2	Catering staff	At implementation	Catering Manager
3	New starters	Local induction	Nutrition link
4	Students	Local induction	LEMs
5	NHS Professionals/agency staff	Beginning of night shift	Nurse in charge

The purpose of this standard is to ensure patients have access to adapted cutlery when required in order to promote nutrition and independence.

List of people who may be involved in this process:- nursing & healthcare staff, therapists & therapy assistants, catering, service assistants

Instruction	Responsible
When completing MUST, assess patient's need for adapted cutlery by asking: <ul style="list-style-type: none"> Do you have any problems gripping cutlery? If so, would you like to try our adapted cutlery while in hospital? Check if patient happy to use adapted cutlery in front of other patients and refer to Occupational Therapist if major issues with grip Document action in Eating & Drinking section of the Nursing Assessment	Admitting nurse

Place 'Adapted Cutlery' magnetic symbol on patient's bed board		Admitting nurse
Follow ward routine to ensure distribution and completion of menus (Insert routine here)		Nurse in charge
<p>Menus are delivered to the ward each evening. Write patient name & bed number on each menu along with</p> <ul style="list-style-type: none"> • Red 'AC' on menu to indicate need for adapted cutlery • Red dot on menu to indicate need for red tray <p>N.B. Some patients may benefit from help from their relatives/carers and may need to complete their menu in the evening. Generally patients will complete their menu on the day.</p>		Delegated staff
Collect & check menus each morning		Menu collator
Place adapted cutlery on appropriate meal trays for delivery to patient		Catering
Ensure all cutlery returned on trays to kitchens		Service assistant/all staff
N.B. Wards are responsible for returning all cutlery & replacing lost items		

APPENDIX 4 – WATER SAFETY LEAFLET - INFORMATION FOR SERVICE ASSISTANTS

Further Information

If you have any questions, or
for further information
please contact your
supervisor.



Doncaster and Bassetlaw Hospitals 
NHS Foundation Trust

Water Safety
Leaflet —
Information For
Service Assistants

Author: Kirsty Edmondson-Jones

Version 1 August 2015

Doncaster & Bassetlaw Hospitals NHS Foundation
Trust, Doncaster Royal Infirmary, Armthorpe Rd.
DN2 5LT

Phone: 01302 366666
Fax: 01302 738308
E-mail: kirsty.edmondson-jones@dbh.nhs.uk





What do we mean by Safe Water?

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.

As part of your normal job you help to keep the hospital water system safe by running taps whilst you are cleaning sinks, baths and showers.

This is known as 'flushing' and is vital to maintain a safe water supply for our patients, staff and visitors.

Why are we Flushing ?

- To keep the water 'fresh', which helps to control *Legionella* and *Pseudomonas aeruginosa*, which can cause infections
- Public mains water is food and just like the food we buy in the shops it has a 'best before' and 'use by' date for our drinking, washing and cooking purposes.
- The 'best before' date is 24 hours, after which the disinfectant in the supply is no longer present. This is why we don't store more than 24 hours equivalent in our water storage tanks.
- Would you be happy to eat from a piped food supply if you knew that the food supply pipework system included lengths of pipe containing food which had not moved for a long period of time and was past its 'use by' date?
- If not, you now know why we flush water outlets to keep water 'fresh'!

What do you need to do?

All water outlets (sinks, baths, shower heads, sluice, slop hoppers, arjo's etc) need to be flushed for a minimum of three minutes, twice per week.

We will ask you to do this every Tuesday and Friday of each week.

You can do this as part of your normal cleaning routine.

When you have run all taps in your area, you need to fill in a Weekly Flushing Sheet which will be supplied to you by your supervisor.

Completed forms are then sent back to your supervisor, who will send them on to the Estates Department.



APPENDIX 5 – EQUALITY IMPACT ASSESSMENT - PART 1 INITIAL SCREENING

Service/Function/Policy/Project/Strategy	CSU/Executive Directorate and Department	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
Hospital Catering Policy	Catering Services - Facilities	Julie Allison	New Policy	24 July 2015
1) Who is responsible for this policy? Catering Services				
2) Describe the purpose of the service / function / policy / project/ strategy? To provide quality standards and outline the responsibilities of the Catering Services Department 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? No <ul style="list-style-type: none"> If yes, please describe current or planned activities to address the impact 				
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 in Appendix 4</i>				
Date for next review: July 2018				
Checked by: Sharon Wright - General Manager Hotel Services			Date: 27 July 2015	