Doncaster and Bassetlaw Teaching Hospitals
NHS Foundation Trust

Hospital Catering Policy
Provision of Food to Patients, Staff and Visitors

This procedural document supersedes: CORP FAC 7 v.4 – 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 4.1	November 2026	Amended Section 4.2 Food Provisions to Patients to include 'Patient food, drinks and ward provisions are for patient use only and must not be consumed by colleagues, volunteers, contractors or visitors.	Julie Allison
Version 4	30th June 2025	• Changed the Executive Sponsor. • Amended Sustainability Section 7 title, by adding 'and Reducing Food Waste'. • Revised Training section 9 – added 'All colleagues involved in the service delivery of food and hydration to patients are required to complete 272|LOCAL|ReST - Food Allergy and Hygiene Awareness – every 2 Years'. • Amended Appendix 1 - Patient Meal Ordering Flow Chart. • Amended Appendix 3 - Breakfast and Beverage Flow Chart. • Added Appendix 5 - Ordering Meals for Patients with Food Allergies / Complex Dietary Requirements. • Added Appendix 6 - Food Allergy & Complex Dietary Requirement Flow Chart. • Reviewed/revised Appendix 7 – Oral Nutritional Supplements/Enteral Feeds and Feeding Equipment - Standard Operating Procedure (SOP). • Added Appendix 10 - Ward Provision Ordering. • Revised the numbering/order of the appendices.	Julie Allison
Version 3	23 March 2022	• Inserted in Section 4.3 - 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	• 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	Julie Allison

		• 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) • Inserted Breakfast and Beverage Flow Chart Appendix 6 • Renumbered Appendix 5 to Appendix 7 Equality Impact Assessment Part 1 Initial Screening.	
Version 1 (amended)	13 July 2016	• Link to Catering/Hospitality Request Fact Sheet issued June 2016 from the Chief Executive inserted in Section 5.1.	Julie Allison
Version 1	10 September 2015	• 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 Trust colleagues, patients and visitors from the main kitchens on the following sites:

Doncaster Royal Infirmary (DRI)

Bassetlaw Hospital (BH)

Montagu Hospital (MH)

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 Trust colleagues 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
- Sodexo/Trust colleagues 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 Sodexo/Trust colleagues 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, Trust colleagues 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 colleagues are aware of their responsibilities and to define where those responsibilities end when provision of food is delivered and served. In addition, to ensure that all patients, colleagues 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), Dietitians, Nursing, Estates and Facilities colleagues, 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 colleagues 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 colleagues 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, colleagues and visitors in a manner, which embraces the diet, nutrition and obesity guidelines published by the National Institute for Health and Care Excellence (NICE) and the National standards for healthcare food and drink 2022.

Catering for Trust colleagues, 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 colleagues in the Trust are as follows -:

3.1 Director of Operational 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 colleagues 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 Catering Manager

The Patient Dining Catering Manager is responsible for:

- The administration of the Food Safety Management System
- Ensuring that the colleagues are appropriately trained
- Maintaining colleagues 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 Deputy General Manager

The Deputy General Manager will be responsible for the following Retail outlets –

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

Has responsibility for the provision for hospitality within the Trust (section 5.1).

The Retail Manager is responsible for:

- The administration of the Food Safety Management System
- Ensuring that the colleagues are appropriately trained
- Maintaining colleagues 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

3.6 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, Catering colleagues' 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 colleagues 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 Colleagues

All colleagues 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 colleagues must formally advise their Supervisor of any circumstances that prevent them from maintaining the hygiene standards determined by the Trust. All colleagues 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 nursing colleagues who accepts any food items brought in from home to ensure the food is in date and 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 colleagues 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.

Patient food, beverages, snacks and ward provisions supplied through the Trust catering service are provided solely for patient use and must not be consumed by staff, volunteers, contractors or visitors. Staff requiring food or beverages should use designated staff facilities, retail outlets or personally purchased provisions.

Any concerns regarding the unauthorised use of patient food stocks should be reported to the Ward/Department Manager and managed in accordance with relevant Trust policies.

Patients where there is reason to doubt Mental Capacity:

There may be occasions when a patient requires care under the scope of this policy, and they are unable to make the decision for themselves. In such cases, decisions must be made in line with the principles of the Mental Capacity Act (2005).

The five statutory principles of the Mental Capacity Act are:

1. **Presumption of capacity:** Every adult has the right to make their own decisions and must be assumed to have capacity, unless it is established otherwise through formal assessment.
2. **Support to make decisions:** Individuals must be given all practicable help and support to make their own decisions before concluding that they lack capacity.
3. **Right to make unwise decisions:** People have the right to make decisions that may seem unwise to others, provided they have capacity to do so.
4. **Best interests:** Any act done, or decision made, on behalf of someone who lacks capacity must be done in their best interests.
5. **Least restrictive option:** Any decision or action taken on behalf of someone who lacks capacity, should be the option that least restricts their rights, and freedoms. Individuals who lack capacity must not be treated in a discriminatory manner.

There is no single definition of "best interests." Best interests' decisions must be decision specific and be determined on a case-by-case basis, taking into account, the individual's circumstances. This process should follow a multidisciplinary approach and consider all factors relevant to the decision in order to conclude what is best for the individual.

Where appropriate and safe, an advocate should be offered, and those who know the patient well—such as family members or friends—should be consulted. Please refer to Section 5 of the MCA Code of Practice for further details.

The latest versions of the Mental Capacity Assessment and Best Interests proformas can be found on the MCA page within the Hive, these should be used to record assessments concerning mental capacity, and any decisions made on behalf of someone who lacks decision making ability. Other useful resources and policies can also be found on the Hive MCA page.

For further guidance, please see: **PAT/PA 19 – Mental Capacity Act 2005 Policy and Guidance, including Deprivation of Liberty Safeguards (DoLS).**

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. Following breakfast, menu choices will be taken for lunch and following lunch, menu choices will be taken for the evening meal. It is the responsibility of Sodexo colleagues to undertake this task as per the Patient Meal Ordering flow chart (See Appendix 1).

Ward colleagues 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 nutritional content of menus is sufficient to meet the needs of patients within the guidelines of Care Quality Commission Outcome 5 (Regulation 14) meeting nutritional needs, The Nutrition & Hydration Digest British Dietetic Association (BDA) and the National standards for healthcare food and drink 2022.

The standard menu includes menu codes which identify dishes that are suitable for patient's specific requirements, for example: Easy to Chew (EC) and Vegetarian. 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 colleagues to facilitate this in line with the Making Mealtimes matter initiative and 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. (See Appendix 10 - Ward Provision Ordering)

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 4). Patients having food allergies or intolerances should be identified with the catering team by following the SOP for ordering meals for patients with food allergies (See Appendix 5).

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 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.

DRI – East Kitchen
BH – Kitchen
MH – Kitchen

Trust colleagues 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 7) 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.

Special diets 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 (SaLT) team assess patients for oropharyngeal dysphagia. SaLT 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 8).

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

All colleagues 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. Small portions can be ordered for younger children or large portions for older children if required.

4.7 Screening for Malnutrition

Clinical colleagues 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.

4.8 Making Mealtimes Matter

All ward colleagues 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.

4.9 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 colleagues that that patient requires additional support during the mealtime and that food intake should be monitored.

Nursing colleagues will identify patients who may require additional support with eating and the appropriate assistance by suitably trained and authorised volunteers will be given. Family members of the patient may also wish to assist. Adaptive cutlery is also available if required.

4.10 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, described overleaf, will be provided with food to meet their individual requirements.

Meal Service Times

Breakfast served between 07:30 – 09:00
Lunch served between 11:30 – 13:00
Evening meal served between 16:15 – 18:15

A hot meal or a snack box service can be provided for patients accessible at any time of day or night, e.g. for late admissions. (See Appendix 9).

Typically, snack boxes will contain -

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

4.11 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, cordials and milk based drinks, which are served from the ward hydration station as per the flow chart (See Appendix 3). Fresh water should be available to hospital patients, colleagues 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 colleagues, local arrangements will be in place on each ward to determine when the ward colleagues provides the residual two drinks, these are generally the first and last drink of the day.

4.12 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 colleagues should request the pack by contacting the Catering Department.

4.13 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 Catering Contract Manager. Patients can access electronic patient satisfaction surveys using a QR code on the menu booklets; alternatively, if they are unable to complete the survey electronically a paper form can be requested from the catering department.

5 TRUST COLLEAGUES 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 colleagues and visitors. Sodexo will look for opportunities to make the choices healthier and more sustainable.

The catering provision will offer the opportunity for colleagues 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 National standards for healthcare food and drink 2022.

Services include:

- Breakfast, lunch and evening meals (evening meals not available at MH).
- 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 AND REDUCING FOOD WASTE

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, colleagues and visitors.

The Trust and Sodexo are committed to reducing their level of food waste. Production food waste levels are recorded and monitored and work is actively undertaken towards driving a reduction.

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 Management Team, Sodexo, who can be contacted on DRI 642323/642324 or BH 572906.

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 colleagues 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 colleagues are made aware of the reporting procedure for illness during Formal Induction Training.
- Colleagues suspected of suffering from an infectious disease, especially food poisoning, will be excluded from work.
- Colleagues will be monitored for signs of infectious illness.
- Colleagues 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 colleagues 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 colleagues must complete an Occupational Health pre-employment health questionnaire.

9 TRAINING

Learning requirements for colleagues will be determined by their role and the competencies required to work safely and effectively. These requirements include national, local and role-specific mandatory learning and are set in line with Trust and professional standards.

Role-specific learning will be defined by the relevant subject matter expert or topic lead and coordinated through the Trust's agreed governance arrangements.

All mandatory and role-specific learning requirements, completion status and competency records will be held in the colleague's personal Electronic Staff Record (ESR).

For further guidance, please see: **CORP/EMP 66 – Mandatory Learning Policy and DBTH Mandatory Learning Framework**

All colleagues involved in the service delivery of food and hydration to patients must complete '272|LOCAL|ReST - Food Allergy and Hygiene Awareness - 2 Years|' – to be completed every 2 years, which can be accessed on ESR.

If you require any further Food Safety information, please contact the Facilities Lead BH 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 Supervisors	Monthly	Visual inspections T1 Audits/SMS System Reported to General Manager
Food Handling Unit Assessment Flow Charts and Plans	On Site Catering Managers Training and Compliance Coordinator	Every 12 Months	Observations Reported to General Manager
Food Safety (HACCP) Documentation	Duty Sodexo Colleagues	Daily (each CCP)	Catering Supervisor Sign off appropriate HACCP document

Food Safety (HACCP) Documentation	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	Ad Hoc emails when updates are provided. Suppliers Allergen Portals. Reported to General Manager
In Unit Inspections	Catering Supervisors	Weekly	Safety Walk Round Reported to on site Management Team
	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 Equality, Diversity and Inclusion Policy (CORP/EMP 59).

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 11)

13 ASSOCIATED TRUST PROCEDURAL DOCUMENTS

Nutrition and Hydration Policy for Adults in Hospital – PAT/T 43
Kitchen Hygiene and Refrigerator Monitoring Policy for Wards and Clinical Areas - PAT/IC 22
Health and Wellbeing Policy - CORP/EMP 31

Equality Analysis Policy - CORP/EMP 27
Equality, Diversity and Inclusion Policy - CORP/EMP 59
Trust's Mental Capacity Act 2005 Policy and Procedure, including Deprivation of Liberty Safeguards (DoLS) - PAT/PA 19
Privacy Dignity and Safety in hospital accommodation - PAT/PA 28.

14 DATA PROTECTION

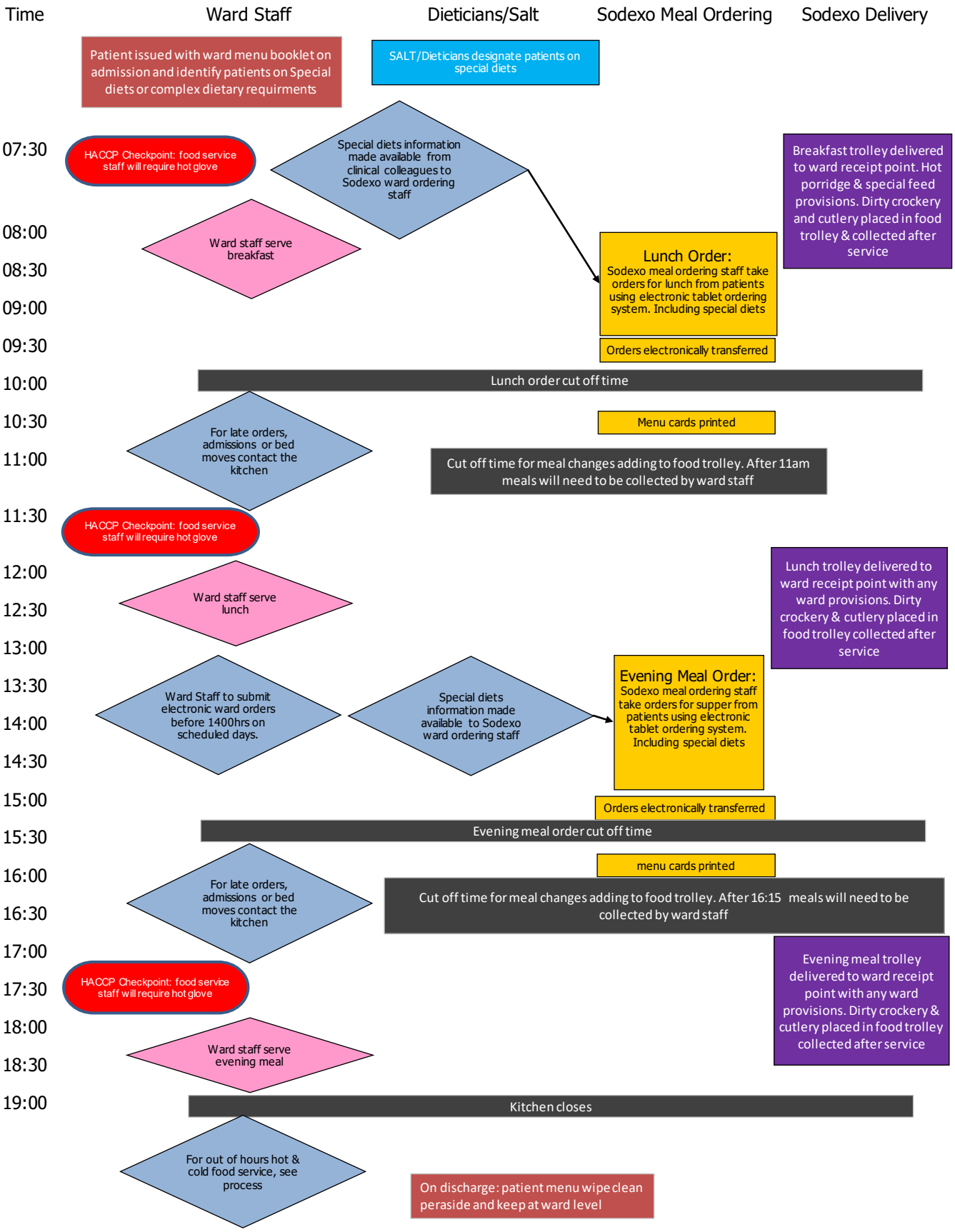
Any personal data processing associated with this policy will be carried out under 'Current data protection legislation' as in the Data Protection Act 2018 and the UK General Data Protection Regulation (GDPR) 2021.

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

https://www.england.nhs.uk/long-read/national-standards-for-healthcare-food-and-drink/
Hospital Food Standards Panel's report on standards for food and drink in NHS Hospitals (2014)
Hazard Analysis Critical Control Point (HACCP) principles
The Food Safety and Hygiene (England) Regulations 2013
Regulation (EC) 2073/2005
Regulation (EC) 852/2004 on the Hygiene of Foodstuffs
Food Information Regulation 2014 (SI 2014/1855)
National Institute for Health and Care Excellence guidelines (NICE) - Diet, nutrition and obesity
Care Quality Commission Outcome 5 (Regulation 14): Meeting nutritional needs
IDDSI Framework
Commissioning for Quality and Innovation (CQUIN)-2017-2019
The Government Buying Standard (GBS) for food and catering services
Patient Led Assessments for the Care Environment (PLACE)
Business Guidance-Introduction to Allergen Labelling Changes
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

APPENDIX 1 – PATIENT MEAL ORDERING FLOW CHART



APPENDIX 2 – PATIENT FOOD AND BEVERAGE SERVICE

Process:

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

Author: Julie Allison | Version: 3

Date issued: November 2021 | Review Date: April 2025

Training required to use this procedure

All colleagues involved in this process are to receive ward induction training and complete Food Allergy and Hygiene Awareness Training in addition to Manual Handling Awareness (SET) commensurate with their post.

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 colleagues 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 colleagues must complete '272|LOCAL|ReST - Food Allergy and Hygiene Awareness - 2 Years|' - every 2 years.

Communicating this procedure

	Staff group	Communication	Responsibility
1	All Ward colleagues	Prior to implementation	Ward Manager
2	Service Assistants	Prior to implementation	Facilities Services Manager
3	Students	Local induction	Supervising colleagues

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 colleagues at meal times

Scope
People who may be involved in this process:- • Nursing colleagues • Healthcare colleagues • Service Department colleagues

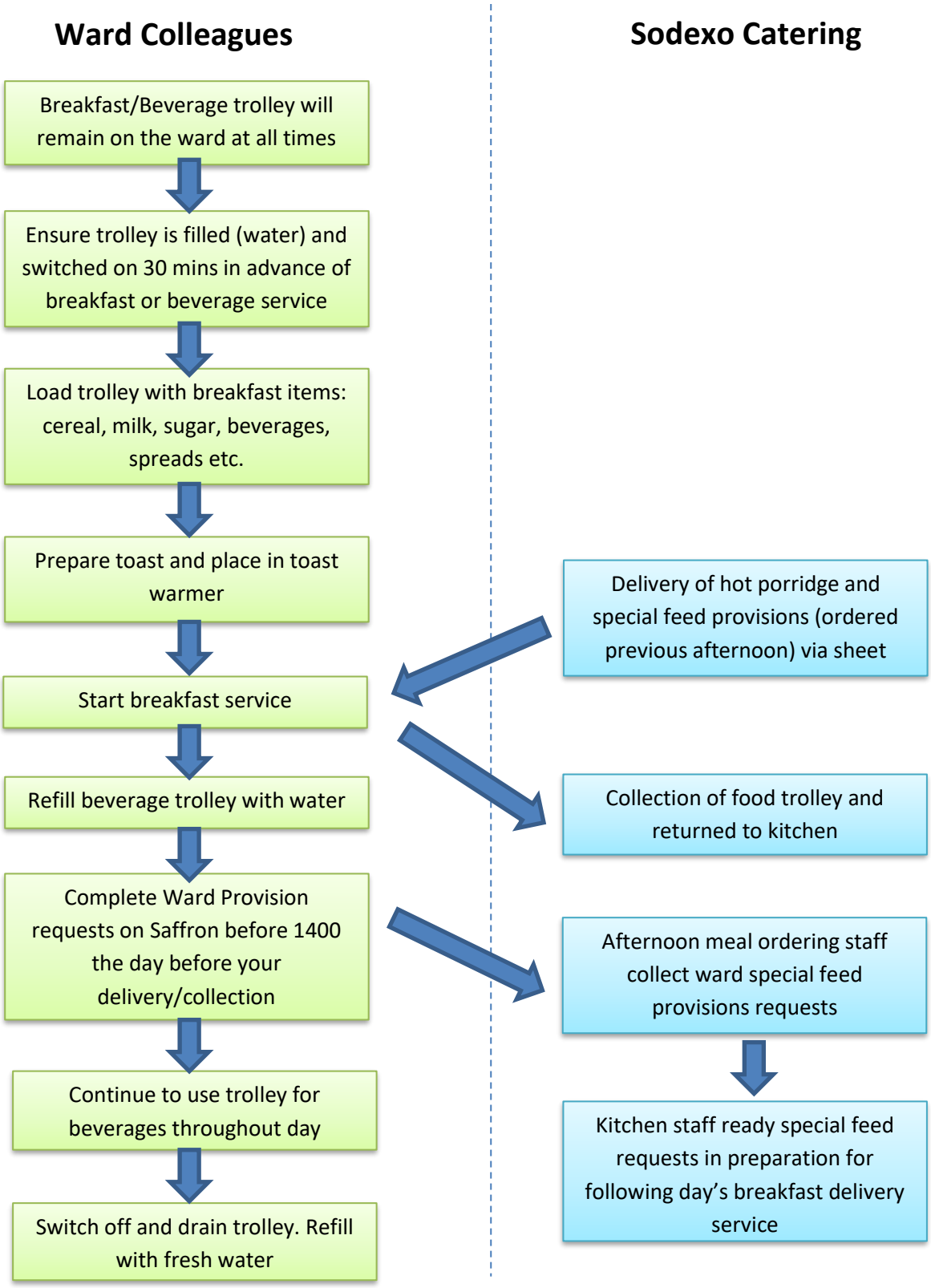
Introduction
Patients must be provided with food which is safe to eat, nutritious and meets their quality expectations

Instruction	Responsible
Food and beverage service to patients	Nursing colleagues Healthcare colleagues Facilities Services colleagues
Task	
Knowledge of the delivery times of meals	Nursing colleagues Healthcare colleagues Facilities Services colleagues
Ensure patients are readied for the meal service in line with PLACE (Patient Led Assessments for the Care Environment) national requirements – • Patients prepared for the meal service; e.g. over bed tables cleared / assisted to sit up • Patients offered the chance to wash their hands/provided with hand sanitiser wipe prior to meal service • Colleagues/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 colleagues Healthcare colleagues Facilities Services colleagues

• Nursing colleagues 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	
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: - • DRI Catering Office – 642321 • BH Catering Office – 572906 • MH Catering Office – 649099	Nursing colleagues Healthcare colleagues Facilities Services colleagues
Registered colleagues to check any patients who are diabetic and who will require medication prior to meals arriving.	Nursing colleagues
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	Nursing colleagues Healthcare colleagues Facilities Services colleagues
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	Nursing colleagues Healthcare colleagues Facilities Services colleagues

APPENDIX 3 - BREAKFAST AND BEVERAGE FLOW CHART

When making meal choices, ensure reference to patient allergen, nutrition and special diet information



APPENDIX 4 – MAJOR FOOD ALLERGENS

14 Allergens

Coming to a food label near you

Food Standards Agency
food.gov.uk

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

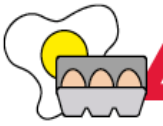
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Crustaceans

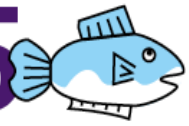
Crabs, lobster, prawns and scampi are crustaceans. Shrimp paste, often used in Thai and south-east Asian curries or salads, is an ingredient to look out for.

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.

8

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



9



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.

10

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.



11



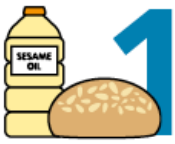
Peanuts

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.

12

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.



13



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.

14

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**

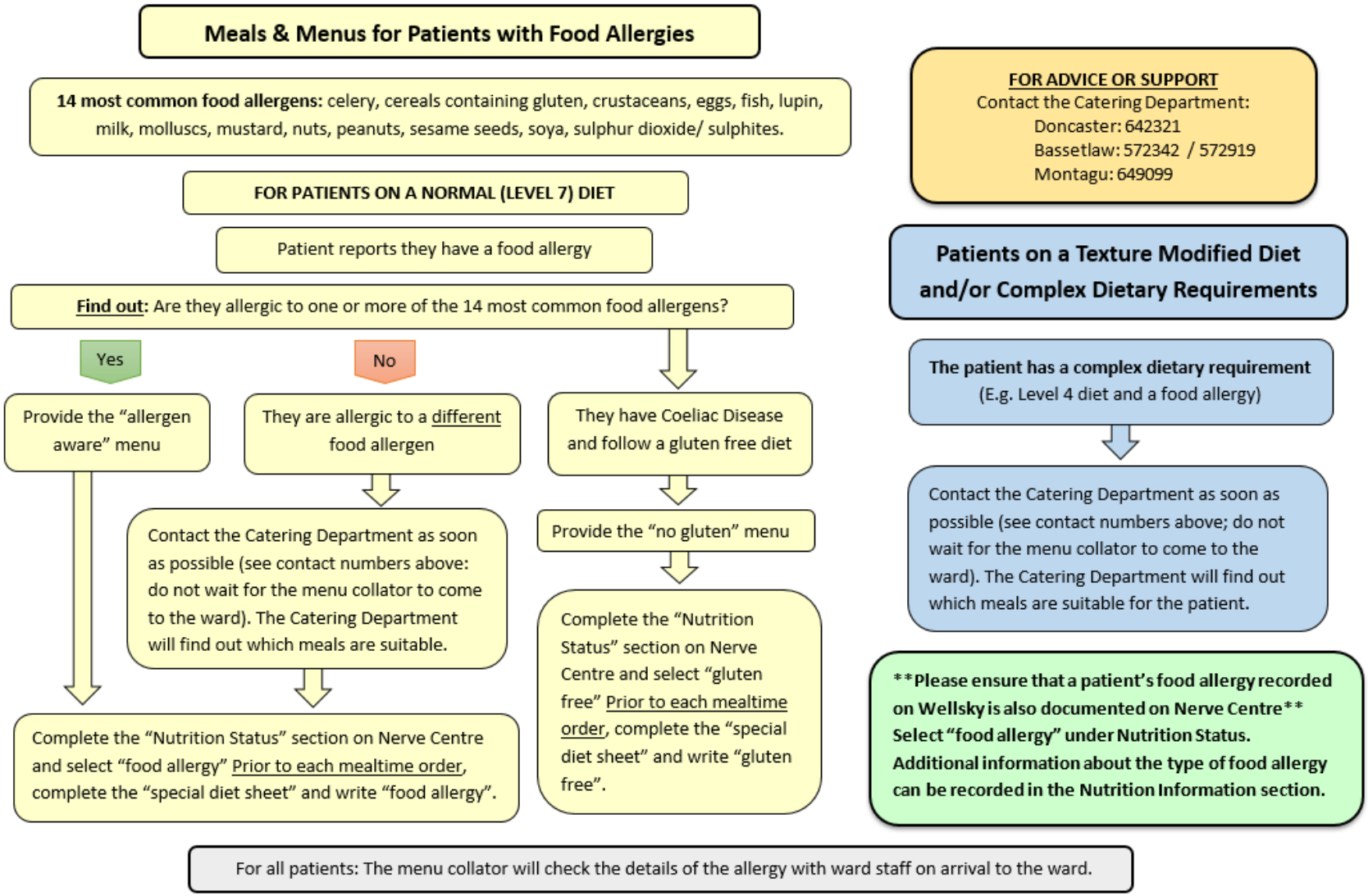
Watch us on **food.gov.uk/youtube**

APPENDIX 5 - ORDERING MEALS FOR PATIENTS WITH FOOD ALLERGIES /COMPLEX DIETARY REQUIREMENTS

Ordering Meals for Patients with Food Allergies / Complex Dietary Requirements			Responsible Person:
1	Patient reports having a food allergy	Check if the patient's food allergy is to one (or more) of the fourteen most common food allergens: celery, cereals containing gluten, crustaceans, eggs, fish, lupin, milk, molluscs, mustard, nuts, peanuts, sesame seeds, soya, sulphur dioxide/ sulphites. (See Appendix 4 above)	Ward staff
		Complete the nutritional status section on nerve centre and select 'food allergy' or 'gluten free' depending on the patient's individual requirement.	Ward staff
		Prior to each mealtime order, fill in the special diet sheet with bed number, 'food allergy' or 'gluten free' depending on the patient's individual requirement.	Ward staff
2	If the patient has an allergy to one of the fourteen most common food allergens and is on a normal (level 7) texture diet.	Provide the patient with a copy of the allergen aware menu.	Ward staff
3	If the patient follows a gluten free diet and is on a normal (level 7) texture diet	Provide the patient with a copy of the 'no gluten' menu.	Ward staff
4	If the patient has an allergy to a food outside of the fourteen most common food allergens:	Contact the Catering Department on extension: 642321 as soon as reasonably possible (do not wait until the menu collator comes to the ward). Inform the catering department about the patient's allergy so they can find out which meals are suitable.	Ward staff
5	If the patient has a complex dietary requirement for example,	Contact the catering department on extension: 642321 as soon as reasonably possible (do not wait until the menu collator comes to the ward).	Ward staff

	requires a level 4 diet + has a food allergy/ follows a gluten free diet	Inform the catering department about the patient's requirements so they can find out which meals are suitable.	
6	Menu collator arrives on the ward:	The menu collator will collect the special diet sheet and will ask to speak to a member of staff to check if there have been any changes to the nutritional status and bed numbers of the patients on the ward.	Menu collator and member of ward staff
		The menu collator will ask for more information about the food allergy and check if it is to one of the fourteen food allergens or outside of the fourteen allergens.	
7	Menu collator takes the patient's menu order using the relevant menu:	If the food allergy is to one of the fourteen food allergens, the menu collator will take the patients menu order using the relevant menu. If the patient's complex dietary requirement or allergy to food outside of the fourteen allergens **<u>has</u> been reported to the catering department in advance**, the menu collator will take the patient's menu order using a list of identified suitable options.	Menu collator
		If the patient's complex dietary requirement/ allergy to food outside of the fourteen allergens **<u>has not</u> been reported to the catering department in advance**, the menu collator will contact the catering supervisor over the phone to find out which meals are suitable for the patient. Before 10:30am: The menu collator will return to the ward with a list of suitable meal choices. After 10:30am: The catering team will contact the ward over the phone and offer a choice of suitable meal choices.	Menu collator

APPENDIX 6 - FOOD ALLERGIES /COMPLEX DIETARY REQUIREMENTS FLOW CHART



APPENDIX 7 – 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 Montagu Hospital.

Author: Sophie Hempsall Version: 2

Reviewed By: Lindsey Germain

Date Issued: 09/11/2021 Review Date: 17/04/2025

Training required to use this procedure: - *Food hygiene (mandatory training- colleagues 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 Colleagues, Nursing And Healthcare, Speech and Language Therapy, Therapy assistants, Catering Colleagues and Procurement.

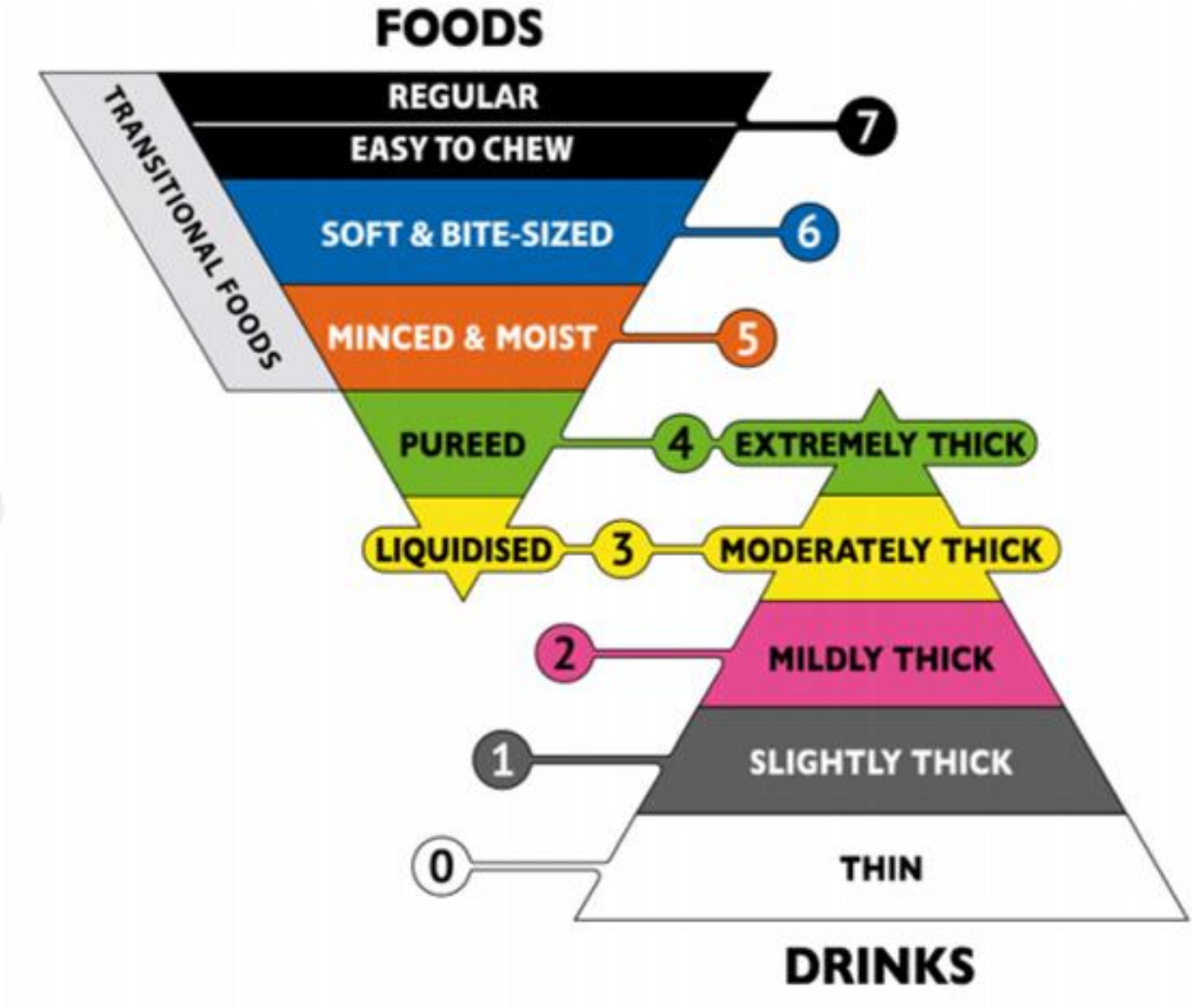
Instruction	**Responsible**
Minimum stock levels for dietetic items will be maintained within the catering storage areas	Inventory Management Team
Standard stock control measures will apply	Inventory Management Team
Non-Stock items required will be ordered by dietetics and delivered to catering.	Dietetic Colleagues

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 colleagues
Ward colleagues/Dietitian/Dietetic Assistant completes the Adult/Paediatric Supplement Order Form for specific dietetic requests. This order form is collected by catering colleagues for delivery at breakfast.	Ward Colleagues/Dietetic Colleagues
Dietetic Items will be collected from catering store and placed on ward meal trolley for delivery at breakfast.	Catering Colleagues

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 for collection outside meals service times.	Ward Colleagues/Dietetic Colleagues
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 Colleagues/Dietetic Colleagues

APPENDIX 8 - IDDSI - NATIONAL DESCRIPTORS FOR TEXTURE FOOD & DRINKS DIETS

IDDSI
International Dysphagia Diet Standardisation Initiative
www.iddsi.org



APPENDIX 9 - 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 – B5 kitchen.
  - MH – 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 colleagues.

Sodexo will restock OOH meals according to paperwork received and be responsible for stock rotation and fridge/freezer temperature records

APPENDIX 10 - WARD PROVISION ORDERING

Ward provisions orders are placed electronically using Saffron (link below). All inpatient areas have login details and passwords specific to their areas.

https://saffron.global/SaffronSSI/#/login



The electronic order form is also accessible via the Hive.

>>> https://extranet.dbth.nhs.uk/sodexo/electronic-ordering/

Step-by-step guide

- Access Saffron using link above.
- Log in using your Ward Specific details.
- Click on to your relevant date you wish order to be delivered before 1400hrs (blue box).
- Select your quantity of provisions and ensure you click on submit order. (Blue box shall now turn green if done so).
- Order should be delivered the following day.

Please note that if you try to place an order after 14.00hrs it will not be processed online.

If you experience any issues with accessing the form or require additional support, please contact catering to avoid delays with receiving provisions, the preferred numbers are below:

- DRI – 642321
- Bassetlaw – 572919
- Montagu – 649099

APPENDIX 11 - 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	Estates & Facilities	Julie Allison	Existing Policy	April 2025

1) Who is responsible for this policy? Estates & Facilities/Sodexo 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 regarding the provision of food across the Trust.

3) Are there any associated objectives? To ensure Catering, Clinical and Domestic colleagues are aware of their responsibilities and to define where those responsibilities end when provision of food is shared with ward and clinical colleagues.

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

- **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

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.

Date for next review: April 2028

Checked by: Adrian Farmer – QA & Compliance Manager Date: April 2025