

STANDARD OPERATING PROCEDURE FORENSIC - USE OF THE DINING ROOMS

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Author/Lead	Helen Courtney
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VALIDITY - All local SOPS should be accessed via the Trust intranet

CHANGE RECORD

Version	Date	Change details
1.0	Aug-19	New Local SOP
2.0	Feb 2020	New format, update to ward names
2.1	Mar 2023	Reviewed. Approved at Security Committee (6th March 2023).

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1. INTRODUCTION

This procedure has been devised to guide the practices and processes that ensure the safe and effective use of dining facilities. The procedure does not offer any guidance on nutrition or any other diet and eating related issues. There are inherent risks within this area, so these locations are considered "controlled access areas" which means staff will manage patients' access to these areas whilst meals are being prepared, served, eaten and the area is cleared. Patients will be supervised at all times whilst in the dining rooms. Patients and staff should under no circumstances go beyond the serving hatch or counter. Those individuals who have legitimate reason to access the catering department will be identified through the line management process. Risk assessment will govern all aspects of the use of the dining room.

2. SCOPE

This SOP is aimed at all staff who escort, interact with and supervise patients at mealtimes in the dining rooms. This includes, but is not limited to, nursing and hotel services staff.

3. DUTIES AND RESPONSIBILITIES

All staff must adhere to the procedures set out in this SOP.

4. PROCEDURES

4.1. Patients' Use of Dining Rooms

There are three dining areas across the two buildings of the Forensic service. Breakfast is served in the ward areas.

The times for meals will be as follows:

Lunch: 12. 00 - 13.30

Evening Meal: 16.45 - 18.00

The wards are served at separate sittings, which are rotated on a monthly basis

4.2. Security in the Dining Room

The clinical needs and local risk assessment of each ward will dictate the numbers of escorting staff to the dining rooms. At each sitting, a member of staff will be positioned at the servery to assist with communications and to manage risk.

<u>Humber Centre</u>: cutlery will be counted by the nursing staff prior to each sitting and after patients have finished their meal, prior to them leaving the dining room. Gloves will be worn by staff for both of the counts.

<u>Pine View:</u> nursing staff take responsibility for counting cutlery out and back in again for each sitting. Gloves will be worn by staff for both counts.

In the event of an item of cutlery found to be missing, the nurse responsible for the patients in the dining area will take charge of the situation. In all areas of the service attempts will be made to locate the missing item before patients are allowed to leave the dining room. If this proves unsuccessful then procedures for lockdown, personal search and search of environments will be implemented immediately on return to the ward. The support team may be called upon to assist with this process.

4.3. Provision for Disturbed Patients

On occasion it may be more appropriate for individual patients to remain on the ward. At these times a meal may be obtained from the dining area and brought to the residential area. Disposable cutlery and crockery will be issued. This also applies to patients who are being cared for in conditions of seclusion.

4.4. Risk Management

Staff are encouraged to sit with the patients they are escorting. Some patients may require enhanced supervision at mealtimes for a variety of reasons – staff should be allocated to this task. Staff who wish to eat at the dining room must pre-order and pay for their meal.

Patients should not be escorted to the dining room during mealtime periods for other purposes, such as accessing the vending machines, the café or the shop, as this compromises the security and supervision of the area and the equipment in use.

4.5. Provision for Visitors

Visitors can be provided with hot drinks. Patients' visitors, i.e. friends and family will not be permitted to use the dining facilities.

4.6. Standards

The dining experience is kept under review by the Patients Council, a forum comprising patients, clinicians and other staff, as required.