

# Food Safety Policy (F-001)

|                                    |  |
|------------------------------------|--|
| Version Number:                    | 2.05   |
| Author (name & job title)          | Virginia Hemingway, Patient Services Manager |
| Executive Lead (name & job title): | Peter Beckwith, Executive Finance Director   |
| Name of approving body:            | Health and Safety Committee (v2.04)          |
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| Next Full Review date:             | February 2027                                |

|  |  |
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| <i>Minor amendments made prior to full review date above (see appended document control sheet for details)</i> |  |
| <i>Date approved by Lead Director:</i>   | <i>ODG – 28 November 2023<br/>Health and Safety Committee – 21 February 2024</i> |
| <i>Date EMT as approving body notified for information:</i>  | <i>N/A</i>   |

*Policies should be accessed via the Trust intranet to ensure the current version is used*

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## 1. INTRODUCTION

There are many reasons why food poisoning incidents occur, ranging from poor suppliers, inadequate hygiene practices, cross-contamination from raw to cooked foods, inadequate core temperatures of cooked foods and poor hand hygiene.

Trust staff have a further challenge, in that they provide food for the most vulnerable i.e. the very young, the elderly and the infirm. This in turn leads to a further responsibility for the Trust, who must ensure that the highest levels of food safety standards are practiced during all stages of food preparation and service.

All food provided by the Trust (or on behalf of the Trust) must comply with the relevant Food Safety Regulations currently set down by the Food Safety Act 1990 and any other further food hygiene regulations, including Regulation EC 852/2004; Food Hygiene (England) Regulation 2006, The Food Safety (Temperature Control) Regulations (1995), and the Food Premises (Registration) Regulations 1991 (amended 1997).

In 2006 the Government stated that all food companies must have a Hazard Analysis Critical Control Point (HACCP) document in place, to ensure that the highest standards of food safety are delivered. It is the responsibility of each individual employee to ensure that these guidelines are adhered to in order to minimise the risk of food related illness.

## 2. SCOPE

This policy applies to all Trust employees, patients, and staff employed via external contactors involved in the provision of food services to the Trust.

## 3. POLICY STATEMENT

Humber Teaching NHS Foundation Trust recognises and accepts its responsibilities to provide a high quality service to the patients and to ensure that the highest standards of Food Safety are maintained at all times in accordance with:

- The Food Safety Act 1990 and regulations made there under.
- Relevant EC directives and regulations.
- Regulation EC 852 2004 of the Food Hygiene (England) Regulation 2006.
- The Food Safety (Temperature Control) Regulations 1995.
- The Food Premises (Registration) Regulations 1991 (amended 1997).

The Policy applies to all Trust premises where the production of food is carried out.

- To ensure that the catering hygiene practices, and management provide a high quality catering service in a food safe manner that meets the needs of the patients, staff and visitors.
- To ensure the protection of the customer/client by cost effective, best value, safe and nutritious provision, is achieved at all times.
- To ensure the risk to food is kept to a minimal from physical, chemical and microbiological contamination.

## 4. DUTIES AND RESPONSIBILITIES

### **Chief Executive**

The Chief Executive has overall responsibility for this policy.

The Chief Executive and Trust Board Members have the overall responsibility for ensuring there are effective and robust arrangements in place to ensure the optimum safety for all food provision management within the organisation.

### **Director responsible for Catering Services – Director of Finance**

Has responsibility to ensure that the necessary arrangements are in place to minimise the risks associated with food safety, including increased incidence management i.e. an outbreak associated with food poisoning.

Oversee the contents of this policy and its implementation and monitor the impact of this policy and have the authority to challenge inappropriate practice.

### **Patient Services Manager**

- Responsible for ensuring policy is implemented, following appropriate procedures laid down in the Food Safety Procedures and Trust Specification.
- Will routinely monitor compliance with the Food Safety Act 1990 and other appropriate legislation.
- Works with the dietician to ensure that menus are nutritionally balanced and meet the needs of all patient groups, including special dietary requirements.
- Feeds information back to the Health and Safety Committee and Healthcare associated Infection group (HAIG)
- Update the Trusts Hazard Analysis Critical Control Point (HACCP) document annually.

### **Hotel Services Supervisors**

Assist the Patient Services Manager in monitoring compliance to ensure full-service provision. Ensure an up-to-date HACCP document is available in all production, therapy and patient kitchens across the Trust.

### **Trust staff**

Responsibilities are assigned to individuals within the Trust organisational structure and are clearly defined within individual job descriptions or appropriate contract document schedules and are reviewed on an annual basis.

All Managers are responsible for ensuring that staff comply with the policy and also responsible for the reporting of any shortfalls.

All Trust staff has a responsibility to ensure the safety of all patients in regards to food safety policies and procedures.

Community Hygiene Review – this is discussed in the Infrastructure, Safety and Compliance Committee meeting and Modern matrons meeting.

## **5. PROCEDURES RELATING TO THE POLICY**

The Trust has a comprehensive specification in place for the provision of catering services and in order to maintain high standards of Food Safety, a HACCP system has been developed, which is designed to minimise any risk to food safety.

All food handlers must conform to the guidelines set out in this Food Safety Policy. The Trust will provide all necessary training to achieve and maintain their standards and to supply any equipment that is required to carry out the production of food to a safe standard.

It is the Trust's responsibility to update this system as and when there are any changes in the operational facility, such as change of equipment. The system will ensure that the following procedures are in place:

### **5.1. Community Hygiene Inspections**

These are carried out on a quarterly basis by the Patient Services Manager and fed back to the Unit Managers and Area Supervisors for the appropriate action.

### **5.2. Food Samples**

A sample of each item of food, prepared at each meal, will be retained in the following Trust kitchen; this is in case of a potential food poisoning outbreak and is investigated by the Environmental Health Officer.

- The Humber Centre

A minimum of 100 grams of high risk foods will be stored in a designated freezer for a seven day period, the food container will be labelled identifying the food and the date of production, and in the event of a potential food poisoning incident these samples may be taken for bacteriological examination.

### **5.3. Food poisoning and increased incidence**

In the event of a suspected food poisoning incident within inpatient services staff are to promptly contact the Infection Prevention and Control Team for advice and guidance.

The following people will be liaised with if applicable:

- Patient Services Manager
- Microbiology Services at the processing laboratory
- Service Manager
- Environmental Health Officer (EHO)

The Infection Prevention and Control Team and Patient Services Manager will arrange a local incident meeting to discuss the level of risk and devise an action plan. It will be decided if there is a need to notify the local Environmental Health Officer.

### **5.4. Inspection of food preparation kitchens and other associated areas**

- Catering premises will be inspected by the Hotel Services Supervisors and the Catering Manager. Records will be kept, and findings used as a source of continual improvement
- The Trust will ensure that there is collaborative working with the Environmental Health Officer to achieve high standards of Food Hygiene and Pest Control

## 5.5. Pest Control

The Trust's nominated officer for Pest Control is the Estates Operations and Compliance Manager who is ultimately responsible for Pest Control. However, all staff must report any sightings or findings relating to pests to the Estates Helpdesk (telephone 01482 477877 option 3).

Any sightings or evidence of rodent infestation must be officially recorded in the site documents.

## 5.6. Nutrition

The catering department will provide a menu that has a variety of choices at each meal time which takes into account patients individual preferences and needs .

- The catering department will ensure the provision of snacks between meals.
- Drinks will be available during meal times and throughout the day, including the provision of water.
- The menu will be nutritious and ensure sufficient daily nutritional intake and will meet all standards identified within the Department of Health and Social Care guidelines.
- Menus will provide information to help patients choose what constitutes a healthy balanced diet.
- The catering department will provide a full range of specialist diets and meals for all religious and ethnic needs within 24 hours of admission this request will be made from the clinical team by completing out a special dietary requirement form which can be found in the [Nutrition and Hydration Guideline for Adult Inpatient Units G388.pdf \(humber.nhs.uk\)](#).
- Patients will be invited to Quality Circle meetings and or feedback about catering services.
- The food must be served at the correct temperature.
- Meals should be served in a timely manner once ready, and assistance provided to patients by nursing staff that require help with eating.
- Nursing staff will provide information about mealtimes and arrangements for mealtimes, this includes protected mealtime service, and gives people a choice about what, when, where to eat and who to eat with.
- Further information can be found in the Nutrition and Hydration Guideline for Adult Inpatient Units.
- Patients who prepare their own meals will be supported by a member of nursing staff who must have their Level 2 Award in Food Safety which can be provided by the Trust.

## 5.7. Food Not Provided by the Trust

- If food items are brought in by family for the patient this must be labelled with the date on, patients name and be stored at the correct temperature and used within 24 hours and recorded on the External Food Record Chart Appendix 3.
- Takeaways are sometimes provided by the ward usually for a treat or equipment breaking down or staff sickness, if this is the case then ward staff will be responsible for ordering the takeaway from a reputable company i.e. good food rating (4 or 5). <https://ratings.food.gov.uk> You can only search for hygiene ratings of businesses in areas where the scheme is run. When the takeaway is delivered the nursing staff must ensure it is served immediately. The receipt from the takeaway should be kept with the name of the business where the takeaway was purchased from and kept up to 7 days. This should be recorded on the External Food Record Chart (see appendix 3).
- Patients on leave will also go out and buy food from shops or takeaways if any food items are brought back into the ward environment, then staff where possible are

required to record this on the External Food Record Chart and ensure the food is stored at the correct temperature by following manufacturer's instructions. The receipt from the takeaway purchased should also be kept with the name of the business where the takeaway was purchased from and kept up 7 days. This should be recorded on the External Food Record Chart (appendix 3).

- Restrictions on take away food may be in place to ensure that therapeutic activity on the ward environment is not undermined.
- The catering team can provide information to patients, staff and visitors about the presence or use of the 14 specified allergens as ingredients in any of the food that we serve.

## **5.8. Dietetic Service**

Dietetic Services are responsible for:

- Seeing patients, referred appropriately according to the departmental procedure, identifying their specific nutritional needs currently. This only applies to Whitby and Malton hospitals.
- Identifying and implementing training for other staff groups as required.
- Liaising and working in partnership with the catering department in the creation of the menus, ensuring nutritional standards are met.
- Routine nutritional screening will be carried by the nursing staff, using a validated Nutritional Screening Tool, within 72 hours of admission to the hospital for all inpatients.

## **5.9. Medical Screening for Prospective Employees**

All employees, prior to employment, will complete a health assessment questionnaire; this may be followed by a visit to the Trust's Occupational Health Nurse.

## **5.10. HACCP (Hazard Analysis Critical Control Point)**

This document acknowledges the principles of a HACCP System as a means of systematically controlling the risks associated with a catering service and the benefits of ensuring appropriate controls are in place.

The Trust will ensure that a HACCP System for food service is adopted at each catering site and its effectiveness monitored to ensure the identified controls are adhered to.

## **ALL FOOD PREMISES MUST BE REGISTERED WITH THE LOCAL ENVIRONMENTAL HEALTH AUTHORITY**

## **5.11. Health and Safety**

All catering staff including Housekeepers will be informed of their rights and responsibilities regarding Health and Safety on induction to the Trust, in line with the Trust Statutory and Mandatory Training Policy.

# **6. TRAINING AND SUPPORT**

## **6.1. Training**

All food handlers will receive food safety training to a level commensurate with the duties undertaken by them, so that:

- They are able to minimise potential risk.
- They are aware of the required food safety standards.
- They have clear knowledge of food safety issues when carrying out their allocated tasks.

- They are aware of the Trust's food safety policies and the controls.

| Course Title                 | Method                          | Course Details   | Refresher | Staff Positions (roles)   |
|------------------------------|---------------------------------|--|-----------|---|
| Introduction to Food Hygiene | E-learning                      | Mandatory for employees serving food and beverages only in the workplace.  | 3 years   | The following staff in all inpatient units: <ul style="list-style-type: none"> <li>• Healthcare Assistant</li> <li>• All Registered Nurses (deputy team leaders, team leaders, Clinical Leads and all other nurses).</li> <li>• Housekeepers</li> <li>• Peer Support Worker</li> </ul>                  |
|                              |                                 | <p>This course will increase food hygiene awareness, prevent food poisoning and assist our organisation to keep within current food hygiene legislation. By the end of the course participants will have gained an increased knowledge of food hygiene awareness, incorporating:</p> <ul style="list-style-type: none"> <li>• Food poisoning and the law</li> <li>• Cleaning and disinfection</li> <li>• Personal hygiene</li> <li>• Temperature control</li> <li>• Food contamination</li> <li>• HACCP</li> </ul> <p>These sessions will act as a 3 yearly refresher for the applicable staff.</p> <p>This workshop will also act as a 2 yearly refresher for those who possess the Level 2 Award in Food Safety in Catering.</p> | 2 years   | The following staff in all inpatient units: <ul style="list-style-type: none"> <li>• Cooks.</li> <li>• Occupational Therapist</li> <li>• Activity Coordinator</li> <li>• Activity Worker</li> <li>• Occupational Therapy Activities Co-ordinator</li> <li>• Occupational Therapist Assistant</li> </ul> |
| Nutrition Matters            | Classroom based with Dietitians | Mandatory for employees preparing and or serving food and beverages.   | 3 years   | The following staff in all inpatient units: <ul style="list-style-type: none"> <li>• Healthcare Assistant</li> <li>• All Registered Nurses (deputy team leaders, team leaders, Clinical Leads and all other nurses).</li> <li>• Housekeepers</li> <li>• Peer Support Worker</li> </ul>                  |
|                              |                                 | <p>This course is designed to improve staff knowledge of various aspects of nutrition affecting our patients. Participants will be educated on general healthy eating in adults, as well as malnutrition, fortification of food, MUST, hydration, texture modification (a basic introduction to IDDSI), and learn about disease specific diets such as gluten free diets, diabetic diets, allergies, and obesity.</p> <p>This course is intended for anybody who is involved with the feeding of patients or the provision of food for patients with specific nutritional needs.</p> <p>These sessions will act as a 3 yearly refresher for the applicable staff.</p>  | 2 years   | The following staff in all inpatient units: <ul style="list-style-type: none"> <li>• Cooks</li> <li>• Occupational Therapist</li> <li>• Activity Coordinator</li> <li>• Activity Worker</li> <li>• Occupational Therapy Activities Co-ordinator</li> <li>• Occupational Therapist Assistant</li> </ul>  |



|   |  |   |               |  |
|---|--|---|---------------|--|
|   |  | This workshop will also act as a 2 yearly refresher for those who possess the Level 2 Award in Food Safety in Catering.   |               |  |
| Level 2 Award in Food Safety in Catering (accredited)     | Classroom-based (1 day)<br>External Provider | <p>Mandatory for employees preparing food.</p> <p>These sessions are mandatory for all new staff who prepare/handle food in the workplace. It is aimed at those staff that has a major role in preparing and handling food during their usual working day and will be of particular importance to ward / residential based staff and occupational therapists who prepares meals.</p> <p>This course will increase food hygiene awareness, prevent food poisoning and assist your organisation to keep within current food hygiene legislation. By the end of the course participants will have gained an increased knowledge of food hygiene awareness, incorporating:</p> <ul style="list-style-type: none"> <li>• Food poisoning and the law</li> <li>• Cleaning and disinfection</li> <li>• Personal hygiene</li> <li>• Temperature control</li> <li>• Food contamination</li> <li>• HACCP</li> </ul> <p>The course will act as a 3 yearly refresher for the applicable staff.</p> | 3 years       | <p>The following staff in all inpatient units:</p> <ul style="list-style-type: none"> <li>• Cooks.</li> <li>• Occupational Therapist</li> <li>• Activity Coordinator</li> <li>• Activity Worker</li> <li>• Occupational Therapy Activities Co-ordinator</li> <li>• Occupational Therapist Assistant</li> </ul> <p><b>Please note</b> any additional staff working in an inpatient unit who regularly supports the preparing and cooking of food with patients / group would require this training in addition to Introduction to Food Hygiene and Nutrition Matters.</p> |
| Food Allergen Training-Food standards Agency              | Government Website                           | <p>Food Allergen Training-Food standards Agency Website 3 yearly</p> <p><a href="http://allergytraining.food.gov.uk/">http://allergytraining.food.gov.uk/</a></p>   | Achieved once | Employees preparing and or serving food and beverages  |
| RIPH Level 3 Award in supervising Food Safety in Catering | East Riding College                          | <p>RIPH Level 3 Award in supervising Food Safety in Catering</p> <p>Guided Learning hours: 25</p> <p>The objective of the Level 3 Award in Supervising Food Safety in Catering is to covers those aspects of the supervision of food hygiene and safety which enable candidates to identify problem areas and to recommend solutions. It is valuable as a freestanding qualification or as an addition for people following other training programmes.</p>  | Achieved once | Employees supervising staff who prepares food  |

|  |                           |   |                  |   |
|--|---------------------------|---|------------------|---|
|  |                           | <p>The purpose of this qualification is to provide a broad knowledge of food safety and food hygiene. Holders of this qualification will have the appropriate knowledge and understanding to be able to take responsibility for food safety monitoring procedures, to identify hazards to food safety, take appropriate action in the light of these hazards and contribute to improvements in food safety practice.</p> <p>These topics are regarded by the Food Standards Agency as being important to understanding and maintaining good practice in the handling, processing and preparation of safe food.</p>  |                  |   |
| RIPH<br>Advanced<br>Food<br>Hygiene<br>Certificate | East<br>Riding<br>College | <p>The qualification is aimed at managers working in a food or drink environment. We offer the Managing Food Safety in Catering, Managing Food Safety in Retail and Managing Food Safety in Manufacturing courses - the choice of which exam you sit is up to you. This qualification is also one of the qualifying criteria for those who wish to train others at foundation food hygiene level. Ideally you should already have an intermediate (level 3) food hygiene certificate and a good level of literacy and numeracy. Arrangements are in place for special needs.</p> <p>The advanced food hygiene training course covers:</p> <ul style="list-style-type: none"> <li>• Introduction to Food Safety and Contamination</li> <li>• Microbiology (Multiplication &amp; Survival Hazards)</li> <li>• Food Borne Illness</li> <li>• Food Handlers and Personal Hygiene</li> <li>• Training and Education</li> <li>• Food Hazards and Controls from Purchase to Service</li> <li>• The Design and Construction of Food Premises and Equipment</li> <li>• Cleaning and Disinfection</li> <li>• Pest Management</li> <li>• Food Safety Management and HACCP</li> <li>• The Role of the Manager</li> <li>• Food Safety Legislation and</li> </ul> | Achieved<br>once | Patient Service Manager and Supervisors |

|  |  |  |  |  |
|--|--|--|--|--|
|  |  | <p style="text-align: center;">Enforcement</p> <p>There is a 2½ hour exam and a 2-hour controlled assignment that has to be undertaken under exam conditions.</p> <p>The aim of the six-day Level 4 Award in Managing Food Safety training course is to make you aware of a manager's responsibilities with regard to food safety. It focuses on how to develop, implement and monitor safe and cost-effective food safety procedures.</p> |  |  |
|--|--|--|--|--|

## 6.2. Records of Training

All records of food safety training must be held both centrally and locally as defined below:

- Centrally by the Hotel Services department.
- Locally at the food handlers' place of work.
- All training records of all catering staff must be maintained and updated on a regular basis.

## 7. REFERENCE TO ANY SUPPORTING DOCUMENTS

- Food Safety Act 1990 (<https://www.legislation.gov.uk/ukpga/1990/16/contents>)
- Regulation EC 852/2004 of the Food Hygiene (England) Regulation 2006 (<https://app.croneri.co.uk/topics/regulation-ec-8522004-general-food-hygiene-requirements-businesses/indepth>)
- The Food Safety (Temperature Control) Regulations (1995) (<https://www.legislation.gov.uk/uksi/1995/2200/contents/made>)
- Food Premises (Registration) Regulations 1991 (amended 1997) (<https://www.legislation.gov.uk/uksi/1997/723/made>)
- Department of Health and Social Care ([Department of Health and Social Care - GOV.UK \(www.gov.uk\)](http://www.gov.uk))

## 8. MONITORING COMPLIANCE

- Hazard Analysis Critical Control Point (HACCP) document (<https://www.food.gov.uk/business-guidance/hazard-analysis-and-critical-control-point-haccp>)
- Trust Catering Specification
- Nutrition & Hydration Guidelines for Adult Inpatient Unit G338 [Nutrition and Hydration Guideline for Adult Inpatient Units G338.pdf \(humber.nhs.uk\)](#)
- NHS England nutrition and hydration guidance (<https://www.england.nhs.uk/wp-content/uploads/2015/10/nut-hyd-guid.pdf>)
- IPC policies intranet page [IPC policies intranet page](#)

## APPENDIX 1: DOCUMENT CONTROL SHEET

This document control sheet, when presented to an approving committee must be completed in full to provide assurance to the approving committee.

|  |  |  |  |
|--|--|--|--|
| Document Type  | Policy – Food Safety   |  |  |
| Document Purpose   | Humber NHS Foundation Trust recognises and accepts its responsibilities to provide a high quality service to the patients and to ensure that the highest standards of Food Safety are maintained at all times in accordance with: <ul style="list-style-type: none"> <li>• The Food Safety Act 1990 and regulations made there under.</li> <li>• Relevant EC directives and regulations.</li> <li>• Regulation EC 852 2004 of the Food Hygiene (England) Regulation 2006.</li> <li>• The Food Safety (Temperature Control) Regulations 1995.</li> <li>• The Food Premises (Registration) Regulations 1991 (amended 1997).</li> </ul> The Policy applies to all Trust premises where the production of food is carried out. |  |  |
| Consultation/ Peer Review:   | Date:  | Group/Individual                                     |  |
| <i>List in right hand columns consultation groups and dates</i>  | Aug-2023   | Infection Prevention and Control Team                |  |
|  |  | Patient Environment Manager                          |  |
|  |  | Hotel Services Area supervisor                       |  |
|  |  | Head of Estates                                      |  |
|  |  | Dietician  |  |
| Approving Committee:   | Governance Committee   | Date of Approval:                                    | June 2014                                      |
| Ratified at:   | Trust Board  | Date of Ratification:                                | June 2014                                      |
| Training Needs Analysis:<br><br><i>(please indicate training required and the timescale for providing assurance to the approving committee that this has been delivered)</i> |  | Financial Resource Impact                            |  |
| Equality Impact Assessment undertaken?   | Yes [ <input checked="" type="checkbox"/> ]  | No [ <input type="checkbox"/> ]                      | N/A [ <input type="checkbox"/> ]<br>Rationale: |
| Publication and Dissemination  | Intranet [ <input checked="" type="checkbox"/> ]   | Internet [ <input type="checkbox"/> ]                | Staff Email [ <input type="checkbox"/> ]       |
| Master version held by:  | Author [ <input type="checkbox"/> ]  | HealthAssure [ <input checked="" type="checkbox"/> ] |  |
| Implementation:  | <i>Describe implementation plans below - to be delivered by the author:</i><br>The policy will be available on the Trust intranet and disseminated across the Trust to relevant services.  |  |  |
| Monitoring and Compliance:   | The Patient Services Manager is responsible for ensuring a monitoring programme is in place to check that operational procedures are being implemented across Humber NHS Foundation Trust. This monitoring will take the form of a Community Hygiene Review Team as identified previously and a Community Hygiene Inspection Team to inspect all food premises for safety and compliance.  |  |  |

| <b>Document Change History:</b>                            |  |          |   |
|--|--|----------|---|
| Version Number/Name of procedural document this supersedes | Type of Change i.e. Review/Legislation | Date     | Details of Change and approving group or Executive Lead (if done outside of the formal revision process)  |
| 2.00   | Review                                 | 14-07-11 | Update of policy – changed to new format  |
| 2.01   | Review                                 | 06-08-12 | Annual with the following updates<br>Changes to 5.5 <ul style="list-style-type: none"> <li>• Provide information about mealtimes and arrangements for mealtimes, this includes protected mealtime service, and gives people a choice about what, when, where to eat and who to eat with.</li> </ul> |

|      |        |          |  |
|------|--------|----------|--|
|      |        |          | <ul style="list-style-type: none"> <li>• Patients who prepare their own meals will be supported by a member of nursing staff who must have their Foundation Certificate in Food Hygiene qualification.</li> <li>• 5.1 addition of East Riding Community Hospital</li> </ul>  |
| 2.02 | Review | 14-07-14 | <p>Reviewed with Minor changes</p> <ul style="list-style-type: none"> <li>• 5.2 food poisoning and increased incidence – Appendix on removed as flow document no longer in use and increased incident plan had minor changes to the procedure</li> <li>• 5.7 – removed appendix 3 – medical questionnaire</li> <li>• Section 4 – updated duties and responsibilities</li> <li>• 5.5 added allergens information</li> </ul> |
| 2.03 | Review | 01-09-17 | <p>Reviewed with minor changes to the following</p> <ul style="list-style-type: none"> <li>• 4.0 – duties and responsibilities</li> <li>• 5.1 food samples</li> </ul>  |
| 2.04 | Review | Aug-20   | <ul style="list-style-type: none"> <li>• 4.0 Duties and responsibilities – job titles updated</li> <li>• 5.1 Food Samples updated to include Granville Court</li> <li>• 5.5 point 14 – Takeaways and food brought in from external source.</li> <li>• 5.8 – Training – Moving forward Food Hygiene Awareness training to be available on ESR.</li> </ul> <p>Approved at HAIG 12-August 2020</p>                            |
| 2.05 | Review | Aug-23   | <p>Reviewed with minor amends which include Update of executive lead and review of policy links director and update ,change meeting names Needs Reviewed by IPC and dietetics</p> <p>Approved by ODG-28-11-23 and H&amp;S 21-2-24</p>  |

## Appendix 2: Equality Impact Assessment (EIA)

For strategies, policies, procedures, processes, guidelines, protocols, tenders, services

1. **Document or process or service name:** Food Safety Policy (F-001)
2. **EIA reviewer (name, job title, base and contact details):** Virginia Hemingway Patient Services Manager
3. **Is it a policy, strategy, procedure, process, tender, service or other?** Policy

|  |
|--|
| <b>Main Aims of the Document, Process or Service</b>   |
| To detail the Trust's responsibilities relating to food safety.  |
| Please indicate in the table that follows whether the document or process has the potential to impact adversely, intentionally or unwittingly on the equality target groups contained in the pro forma |

|  |  |  |
|--|--|--|
| Equality Target Group<br>1. Age<br>2. Disability<br>3. Sex<br>4. Marriage/Civil Partnership<br>5. Pregnancy/Maternity<br>6. Race<br>7. Religion/Belief<br>8. Sexual Orientation<br>9. Gender re-assignment | Is the document or process likely to have a potential or actual differential impact with regards to the equality target groups listed?<br><br>Equality Impact Score<br>Low = Little or No evidence or concern (Green)<br>Medium = some evidence or concern (Amber)<br>High = significant evidence or concern (Red) | How have you arrived at the equality impact score?<br>a) who have you consulted with<br>b) what have they said<br>c) what information or data have you used<br>d) where are the gaps in your analysis<br>e) how will your document/process or service promote equality and diversity good practice |
|--|--|--|

| Equality Target Group             | Definitions   | Equality Impact Score | Evidence to support Equality Impact Score   |
|-----------------------------------|---|-----------------------|---|
| <b>Age</b>                        | Including specific ages and age groups:<br>Older people<br>Young people<br>Children<br>Early years  | Low                   | All dietary requirements are catered for regardless of their age  |
| <b>Disability</b>                 | Where the impairment has a substantial and long term adverse effect on the ability of the person to carry out their day to day activities:<br>Sensory<br>Physical<br>Learning<br>Mental health<br>(including cancer, HIV, multiple sclerosis) | Low                   | Risk assessments are carried out on work activities and any individual with a disability would be risk assessed for the relevant work activity for any potential health and safety implications |
| <b>Sex</b>                        | Men/Male<br>Women/Female  | Low                   | The policy applies equally to either gender   |
| <b>Marriage/Civil Partnership</b> |   | Low                   | The policy applies equally to all marital/civil partnership statuses  |
| <b>Pregnancy/ Maternity</b>       |   | Low                   | Risk assessments are carried out on work activities and any individual who is pregnant would-be risk assessed for the relevant work activity for any potential health and safety implications   |
| <b>Race</b>                       | Colour<br>Nationality<br>Ethnic/national origins  | Low                   | All dietary requirements are catered for regardless of their race   |
| <b>Religion or Belief</b>         | All religions<br>Including lack of religion or belief and where belief includes any religious or philosophical belief   | Low                   | All dietary requirements are catered for regardless of their religions  |
| <b>Sexual Orientation</b>         | Lesbian<br>Gay Men<br>Bisexual  | Low                   | This policy applies equally to all sexual orientations  |

|                            |   |     |  |
|----------------------------|---|-----|--|
| <b>Gender reassignment</b> | Where people are proposing to undergo, or have undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attribute of sex | Low | This policy applies equally to all genders |
|----------------------------|---|-----|--|

**Summary**

|   |                                      |
|---|--------------------------------------|
| <p>Please describe the main points/actions arising from your assessment that supports your decision above</p> <p>The Health and Safety Group review incident data and this allows us to review if an individual's physical, religious, race, disability, etc. requirements had not been met and were one of the factors causing the incident.</p> |                                      |
| <p>EIA Reviewer: Virginia Hemingway - Patient Services Manager</p>  |                                      |
| <p>Date completed: 21 February 2024</p>   | <p>Signature: Virginia Hemingway</p> |

### **APPENDIX 3: FOOD NOT PROVIDED BY HFTT**

If food items, such as homecooked or brought by family for the patient this must be labelled with the date on, patient's name and be stored at the correct temperature and used within 24 hours and recorded on the External Food Record Chart.

Takeaways are sometimes provided by the ward usually for a treat or equipment breaking down or staff sickness, if this is the case then ward staff will be responsible for ordering the takeaway from a reputable company i.e. good Food rating scores, [you can search this website to find out if the scheme is run in your area](#). You can only search for hygiene ratings of businesses in areas where the scheme is run. When the takeaway is delivered the nursing staff must ensure it is served immediately. The receipt from the takeaway should be kept with the name of the business where the takeaway was purchased from and kept up 7 days. This should be recorded on the External Food Record Chart.

Patients on leave will also go out and buy food from shops or takeaways if any food stuff are brought back into the ward environment then staff are required to record this on the External Food Record Chart and ensure the food is stored at the correct temperature by following manufacturer's instructions. The receipt from the takeaway purchased should also be kept with the name of the business where the takeaway was purchased from and kept up 7 days. This should be recorded on the External Food Record Chart.

Restrictions on take away food may be in place to ensure that therapeutic activity on the ward environment is not undermined.



**FOOD RECORD CHART**



| Date / Time | Food item / take away | Patients Initials | Storage / temp | Nurses initials |
|-------------|-----------------------|-------------------|----------------|-----------------|
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