CATERING POLICY
PROVISION OF FOOD TO PATIENTS, STAFF AND VISITORS

<table>
<thead>
<tr>
<th>POLICY REFERENCE NUMBER:</th>
<th>RM12</th>
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<tbody>
<tr>
<td>VERSION NUMBER:</td>
<td>1.1 (3 month extension, GC)</td>
</tr>
<tr>
<td>AUTHOR:</td>
<td>Fiona Benson</td>
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<td>CONSULTATION GROUPS:</td>
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<tr>
<td>IMPLEMENTATION DATE:</td>
<td>1st April 2017</td>
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<td>AMENDMENT DATE(S):</td>
<td>March 2018</td>
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<td>LAST REVIEW DATE:</td>
<td>March 2018</td>
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<td>NEXT REVIEW DATE:</td>
<td>March June 2021</td>
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<td>APPROVAL BY .... COMMITTEE:</td>
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<tr>
<td>RATIFICATION BY QUALITY COMMITTEE:</td>
<td>12th April 2018</td>
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**POLICY SUMMARY**

Catering Policy Quality Statement

Essex Partnership University NHS Foundation Trust (EPUT) is committed to providing a catering service which:

- Meets the nutritional and hydration requirements of our patients, staff and visitors.
- Provides for tasty and interesting menus with a selection of foods and drinks which reflect the diverse cultures and needs of the people we serve.
- Provides safe services which meet the highest food hygiene standards at all times.
- Enables patients to access food and drink whenever needed, 24 hours a day, 7 days a week, 365 days a year.
- Provides good quality food and beverages which are delivered cost effectively by well trained, courteous staff who are responsive to patient’s needs.

The Trust monitors the implementation of and compliance with this policy in the following ways:

<table>
<thead>
<tr>
<th>Services</th>
<th>Applicable</th>
<th>Comments</th>
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<tbody>
<tr>
<td>Trustwide</td>
<td>✓</td>
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<td>Essex MH&amp;LD</td>
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<td>CHS</td>
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The Director responsible for monitoring and reviewing this policy is Associate Director of Estates
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Assurance Statement

Essex Partnership University NHS Foundation Trust (EPUT) is committed to complying with all aspects of Food Safety Legislation and acknowledges the importance of maintaining a hygienic environment in which appropriately trained staff receive, store, prepare and serve food. By failing to adopt this policy the Trust will be placing itself at risk of breaching the Food Safety Act 1990 (as amended) and the Food Safety and Hygiene (England) Regulations 2013. By adopting this policy the Trust can evidence that it is doing all that is reasonably practicable to ensure compliance with the relevant legislation, to show the due diligence required and that every member of staff understands their individual responsibility for food safety to prevent and control infection. It also demonstrates that the Trust is working towards the full implementation of its Food & Drink Strategy (in support of the Hospital Food Standards Panel Report - 2016) and is compliant with the NHS Commissioning Board’s PLACE requirements and the responsibilities outlined by the CQC Essential Standards of Quality and Safety Outcome 5.

1.0 INTRODUCTION

1.1 EPUT is committed to providing high quality services to patients.

1.2 The Trust takes all reasonable precautions and exercises due diligence to ensure that its products are free from harmful microbiological, chemical and physical contamination and are fit for human consumption.

1.3 The Trust recognises it is important that Management and staff are suitably trained according to their tasks and responsibilities.

1.4 The Trust has regard to current law and practice and continuously monitors reviews and updates the systems used by the various catering functions.

2.0 SCOPE OF DOCUMENT

2.1 This policy applies to all staff providing food to patients, visitors and staff (where such services are provided) and to ward staff involved in the ordering and serving of food for in-patients. This also includes takeaways, bbq's, food brought or bought in.

3.0 RESPONSIBILITIES

3.1 The Trust Chief Executive is ultimately responsible for catering services across the Trust.
3.2 The Trust Director of Nursing is responsible for ensuring that all nursing staff are aware of their responsibilities within this policy.

3.3 Clinical Leads are responsible for ensuring that all provision of catering within their areas of responsibility is in compliance with this policy.

3.4 The Ward/Department Manager is responsible for maintaining the service of food on their wards and seeing that patients receive the best possible meal experience whilst in their care.

3.5 Nursing staff are responsible for assisting patients to eat and drink and to ensure that appropriate levels of nutrition and hydration are maintained at all times and in accordance with the individual's personal and clinical requirements.

3.6 The Chief Finance Officer is responsible for ensuring that the catering services are managed by someone with the appropriate qualifications and experience.

3.7 The Head of Estates and Facilities will provide the professional knowledge/lead on catering matters, to ensure that the Trust meets its legal obligations and provides services to a high standard, that are patient focused and are delivered cost effectively. They are also responsible for the upkeep of this document in line with food hygiene legislation and meeting the requirements of the Care Quality Commission in the provision of healthcare.

3.8 The Estates and Facilities Team are responsible for ensuring that facilities staff comply with the Food Safety and Hygiene (England) Regulations 2013 and the Food Safety Act 1990, and implementing relevant changes.

3.9 The Nominated Dietician will be responsible for ensuring that all menu items offered to patients meet the national Nutritional Standards and that they notify the Trust of any changes to guidance on these standards. They will be responsible for providing professional advice to Ward Managers and nursing staff on the individual hydration and nutritional requirements for patients.

3.10 The Infection Prevention and Control Team are responsible for providing expert advice in accordance with this policy. They are also responsible for ensuring this policy remains consistent with the evidence-base for safe practice, and for reviewing the policy on a regular basis.

4.0 PROVISION OF CATERING SERVICE

4.1 Food and beverages are provided by the Trust for patient consumption only. This will be provided free of charge to patients whilst in the care of the Trust as an in-patient or whilst using day hospital services (where these services are provided). Food and beverages are not provided for Trust staff or visitors except via the retail units (where applicable) where a modest charge will be applied.
4.2 Where staff are routinely required to eat and drink with patients as part of the therapeutic regime, staff may be expected to pay for the food and beverages they consume. If required, the unit will be charged for such meals.

4.3 The catering service will provide a safe and healthy service through the provision of:

- In-patient and day patient meals (Breakfast, lunch and supper) snacks and beverages including special dietary requirements in line with the Trusts service specification. Food and beverages will be available 24/7 as required and in accordance with Department of Health guidance.
- Meals for staff and visitors (where facilities are available) including vending for which a charge will be applied.
- Hospitality Services
- To support the clinical team to apply the Protected Meal Time procedure.
- Use of the M.U.S.T. Tool or equivalent (Clinical Procedure)* Ref: BAPEN.

4.4 In-patient food and beverage service menu:

- The catering service will provide a suitable menu cycle at all in-patient and day hospital service locations where patient meals are provided.
- Menus will be changed as required to reflect seasonal variation.
- Relevant supporting Allergen and Nutritional information will be available at all meal outlets to assist with informed meal options for those with food allergies/intolerances and those making lifestyle choices such as healthy eating, vegetarian, etc.

4.5 Purchasing and Meeting Food Quality Standards

All food must be purchased from reputable suppliers. These suppliers will be on an approved list as a result of either holding a recognised 3rd Party Accreditation (i.e. via a contracted supplier or service provider or through a nationally recognised association such as STS) or undergoing a satisfactory inspection of their premises and processes to ensure that the food and/or ingredients are safe and of good quality. They will have robust systems in place which will enable food products to be traced to their source of origin.

4.6 Sustainability

The Trust is committed to improving sustainable food procurement by sourcing local produce and goods where possible. Sustainable business practices can be defined as:

- Promoting good health and eating food in season
- Reducing food miles through-out the supply route
- Sustainable farming, promoting animal welfare and valuing nature and biodiversity
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- Reducing waste in energy and utility consumption
- Minimise imported products e.g. reduced meat and dairy content within the confines of required nutritional standards.

4.7 Contingency plans

Contingency plans are in place at a local level to provide meals and provisions to inpatients and day patients in case of emergencies such as non-delivery of food to units through bad weather, fuel crisis, missed deliveries, food spoilage, etc. The catering service is responsible for checking the contingency plans of suppliers.

4.8 Objectives

In conjunction with meeting the 10 Key Characteristics of Good Nutritional Care contained in the Food & Drink Strategy there will also be a set of operational objectives, the Trust will:

Ensure meal services are flexible and able to cater for differing patient needs including small and frequent meal patterns and access to food and drink 24 hours a day. Also providing information for patients about the food and drink services in place and the standards that can be expected

Have a range of menus in place to meet all dietary, religious and cultural needs, and ensure that the menu format allows all patients to understand the choices available to them. This also includes food allergy, diabetic and dysphasic requirements that meet nutritional targets for both nutritionally well and nutritionally vulnerable patients

Participate in national events such as HCA Nutrition and Hydration Week (March each year) and the annual Dieticians Week (June) so as to promote staff awareness of own and patient nutrition and hydration needs. (Increased hydration can improve individual well-being, quality of life and health outcomes to patients and staff alike)

Protect mealtimes to allow patients to enjoy their meal and gain maximum benefit from the experience. Patients who require assistance with eating and drinking will be identified through MUST assessments and support put in place to enable them to eat and drink with dignity, including relatives helping where possible and appropriate.

Engage with clinical staff to encourage them to recognise the opportunity for raising positive health promotion and wellbeing activities with patients. To also use the electronic clinical record (Paris) to capture lifestyle information to prompt clinicians to raise potential issues with patients if appropriate. Nutritional link workers will be in place on in-patient units where possible to help lead in these areas.

Monitor the service and assess the views of patients so as to develop continuous improvement and reduced wastage. (The nutritional value of food not eaten is nil!)
Raise staff awareness of healthy eating initiatives through the Occupational Health services, which will link in with national government initiatives

Work in partnership with suppliers and contractors to meet the various Government Buying Standards.

### 5.0 MONITORING OF POLICY DELIVERY AND COMPLIANCE

5.1 The Catering Policy will be reviewed by the Head of Estates and Facilities three yearly or as Legislation changes or requires.

5.2 The Catering Policy will be available via the Trust Intranet site.

5.3 All significant catering related concerns will be reported to the Head of Estates and Facilities for advice.

5.4 All food safety related incidents will be reported to the most relevant authority or department this may include the Environmental Health department and the provider of the service.

5.5 This policy and its associated procedures will be continually monitored for compliance.

5.6 The contract specification for the Trusts catering service contains a number of KPI's relating to food safety, food quality, the retail and vending services and outcomes will be reported via the catering contract review meetings.

5.7 Audit monitoring Criteria

<table>
<thead>
<tr>
<th>Monitoring requirements (e.g. what we monitor against)</th>
<th>PLACE requirements</th>
<th>Monitoring Method (e.g. statistics, report)</th>
<th>PLACE audits</th>
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<td>Adherence to contract (KPI's)</td>
<td>Satisfaction surveys (including patient survey)</td>
<td>Food quality audits</td>
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<td>Retail Audits</td>
<td>Clinical and Infection Control Audits</td>
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<tr>
<td>Monitoring carried out by: (Job titles)</td>
<td>Head of Estates and Facilities</td>
<td>Estates and Facilities Managers</td>
<td>Estates and Facilities Officers</td>
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<td>Dieticians</td>
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<td>Nursing Leads</td>
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<td>Monitoring presented to: (e.g. Committees)</td>
<td>Facilities Contract Review Group</td>
<td>Health and Well Being Group</td>
<td>Infection Control Meetings</td>
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<td>Capital Planning and Facilities</td>
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<td>Directorate SMT</td>
<td>Executive Operational Team (by request)</td>
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<td>Trust Board of Directors (by exception)</td>
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<tr>
<th>Frequency of presentation: (e.g. Monthly)</th>
<th>Monthly – Facilities Operational Meeting / MGT Monthly – Contract Review Meeting/SMT Annually – PLACE</th>
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6.0 POLICY REFERENCES / ASSOCIATED DOCUMENTATION

- Food Safety Act 1990
- Food Safety Act 1990 (Amendment) Regulations 2004
- The Food Standards Act 1999
- Explanatory Notes to the Food Standards Act 1999
- The General Food Regulations 2004
- Food Safety and Hygiene (England) Regulations 2013
- Regulation (EC) 2073/2005
- Regulation (EC) 852/2004 on the hygiene of foodstuffs
- The NHS Plan 2000
- HSG (96) 2000 Management of Food Hygiene & Food Services in the National Health Service.
- NHS Code of Practice for the manufacture, distribution and supply of food, ingredients and food related products.
- NHS Estates – Protected Mealtimes 2004
- Care Quality Commission Essential Standards of Quality and Safety – Outcome 5 – Meeting Nutritional Needs.
- Health Act 2006 Code of Prevention and control of Health Care
- The Nutrition & Hydration Digest (BDA, 2012)
- Sustainable Food – A guide for Hospitals (DH, 2009)
- The Hospital Food Standards Panels Report (May 2016)

7.0 REFERENCE TO OTHER TRUST POLICIES/PROCEDURES

- Trust Food & Drink Strategy
- Occupational Health HR42
- Uniform Procedure (catering staff)
- Infection Control & Facilities Liaison Procedure CPG 49
- Waste Management Policy RM13
- Infection prevention and Control Policy ICP1
- Food First
- Facilities Catering Handbook
- Nutritional Guidelines for Mental Health
- The St Aubyn Centre Guidelines for Naso-Gastric (NG) Tube insertion and Feeding Regime
- Staff Health & Wellbeing Strategy

END