

TRUST-WIDE NON-CLINICAL POLICY DOCUMENT

FOOD HYGIENE POLICY

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Recommending Committee:	Infection Prevention and Control Committee
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Lead Author(s):	Head of Facilities

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2014 – Version 2

Quality, recovery and wellbeing at the heart of everything we do

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Further information about this document:

Document name	SA15 Food Hygiene Policy
Document summary	This policy identifies the requirements of the Trust to achieve compliance with Food Safety Legislation, whilst ensuring that catering services are patient focused and are delivered safely and cost effectively to a high standard. It applies to all food services whether provided by Trust employees or via Service Level Agreements.
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To be read in conjunction with	N/A
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Version Control:

		Version History:
Version 1	Presented to the Corporate Document Review Group for approval	July 2012
Version 2	Presented to the Policy Group for approval	November 2014

SUPPORTING STATEMENTS

This document should be read in conjunction with the following statements:

SAFEGUARDING IS EVERYBODY'S BUSINESS

All Mersey Care NHS Foundation Trust employees have a statutory duty to safeguard and promote the welfare of children and vulnerable adults, including:

- being alert to the possibility of child/vulnerable adult abuse and neglect through their observation of abuse, or by professional judgement made as a result of information gathered about the child/vulnerable adult;
- knowing how to deal with a disclosure or allegation of child/adult abuse;
- undertaking training as appropriate for their role and keeping themselves updated;
- being aware of and following the local policies and procedures they need to follow if they have a child/vulnerable adult concern;
- ensuring appropriate advice and support is accessed either from managers, *Safeguarding Ambassadors* or the trust's safeguarding team;
- participating in multi-agency working to safeguard the child or vulnerable adult (if appropriate to your role);
- ensuring contemporaneous records are kept at all times and record keeping is in strict adherence to Mersey Care NHS Foundation Trust policy and procedures and professional guidelines. Roles, responsibilities and accountabilities, will differ depending on the post you hold within the organisation;
- ensuring that all staff and their managers discuss and record any safeguarding issues that arise at each supervision session

EQUALITY AND HUMAN RIGHTS

Mersey Care NHS Foundation Trust recognises that some sections of society experience prejudice and discrimination. The Equality Act 2010 specifically recognises the *protected characteristics* of age, disability, gender, race, religion or belief, sexual orientation and transgender. The Equality Act also requires regard to socio-economic factors including pregnancy /maternity and marriage/civil partnership.

The trust is committed to equality of opportunity and anti-discriminatory practice both in the provision of services and in our role as a major employer. The trust believes that all people have the right to be treated with dignity and respect and is committed to the elimination of unfair and unlawful discriminatory practices.

Mersey Care NHS Foundation Trust also is aware of its legal duties under the Human Rights Act 1998. Section 6 of the Human Rights Act requires all public authorities to uphold and promote Human Rights in everything they do. It is unlawful for a public authority to perform any act which contravenes the Human Rights Act.

Mersey Care NHS Foundation Trust is committed to carrying out its functions and service delivery in line with a Human Rights based approach and the FREDA principles of **Fairness, Respect, Equality Dignity, and Autonomy**

Contents

Index	Page No
1. PURPOSE AND RATIONALE	5
2. OUTCOME FOCUSED AIMS AND OBJECTIVES	5
3. SCOPE	5
4. DEFINITIONS (Glossary of Terms).....	5
5. DUTIES	6
6. PROCESS	7
7. CONSULTATION	13
8. TRAINING AND SUPPORT	13
9. MONITORING	13
10. EQUALITY AND HUMAN RIGHTS ANALYSIS	14
11. APPENDIX 1 – TRAINING NEEDS ANALYSIS	18

1. PURPOSE AND RATIONALE

- 1.1 The NHS has had a legal obligation to comply with the provisions and requirements of food hygiene regulations since 1987 and there are now several pieces of legislation governing food safety, including the requirement to have a Food Safety Management System (FSMS) based on Hazard Analysis Critical Control Point (HACCP) principles.
- 1.2 All food handlers and NHS premises from which food is sourced, stored, prepared, distributed or served, must comply with the regulations.
- 1.3 The transmission of food borne infection from infected food or an employee can have serious consequences which could result in debilitating illness and even death. The Trust has a duty to ensure that every measure is taken to prevent and protect patients, staff and the public from a food borne infection.

2. OUTCOME FOCUSED AIMS AND OBJECTIVES

- 2.1 This policy identifies the requirements of the Trust to achieve compliance with Food Safety and hygiene standards, including statutory legislation/regulations. Ensuring that catering services across the Trust are patient focused and delivered safely. The policy applies to all food services whether provided by Trust employees or via Service Level Agreements.

3. SCOPE

- 3.1 This policy applies to all patients, visitors and staff in the Trust and where Service Level Agreements are in place.

4. DEFINITIONS (Glossary of Terms)

4.1

Glossary of Terms	Definition
COSHH	Control of Substances Hazardous to Health
EHO	Environmental Health Officer
FSMS	Food Safety Management System
HACCP	Hazardous Analysis and Critical Control Points
HSG	Health Service Guidance
NHS	National Health Service
SLAs	Service Level Agreements
NHSSC	NHS Supply Chain
CIEH	Chartered Institute of Environmental Health
RIPHH	Royal Institute of Public Health and Hygiene
EEC	European Economic Community
HPA	Health Protection Agency
CCDC	Centre for Communicable Disease Control

5. DUTIES

5.1 Executive Director of Resources

5.1.1 The Executive Director of Resources will be the board nominee for Catering Services and is responsible for retaining overall responsibility for Food Hygiene, Safety and Welfare of all persons on the Trusts premises. However the following managers have delegated responsibility for ensuring that Food Hygiene Policy and it's associated procedures including staff training are fully implemented:

5.2 Director of Estates

5.2.1 The Director of Estates is responsible for ensuring that in-house services are managed by someone with the appropriate qualifications and experience in all matters relating to food safety and hygiene for the Local and Corporate Divisions.

5.3 Director of Operations – High Secure

5.3.1 The Director of Operations is responsible for ensuring that in-house services are managed by someone with the appropriate qualifications and experience in all matters relating to food safety and hygiene for the Secure Division.

5.4 Heads of Facilities/Facilities Operations Manager – Local, Secure, Specialist LD, and Corporate Divisions

5.4.1 The Head of Facilities/Facilities Operations Manager must oversee the catering provision to ensure risks to the organisation are minimised. The Head of Facilities/Facilities Operations Manager is responsible for the provision of a catering service, which is staffed appropriately and ensures that the premises worked in are fit for purpose.

5.4.2 The Head of Facilities/Facilities Operations Manager 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 focused and are delivered safely.

5.5 Facilities Site Managers/Head Chef

5.5.1 Facilities Managers are responsible for identifying and providing the training required for facilities service staff that store or handle food.

5.5.2 The Facilities Site Manager is responsible for the safe management of risks associated with food procurement, delivery, storage, handling and provision which includes Service Level Agreements.

5.6 Facilities Managers/Ward Managers/Team Leaders/Modern Matrons/Nurse in Charge

5.6.1 All of the above personnel are responsible for:

- Identifying the training requirements of their staff and arranging the appropriate training. The level of training that is required will vary dependent on the role staff have in relation to food. Managers of staff involved in the preparation of food, supervision of food preparation or serving food from bulk containers/food trolleys must ensure their staff comply with this policy and keep personal development planning records, as appropriate.
- Ensuring that food is stored correctly, that food is dated and labelled and that daily temperature checks are carried out and recorded within their designated area of

responsibility.

- Facilitating time for staff who store, handle or serve food to receive Food Hygiene Training and Updates, and for keeping a record of staff's training.
- Ensuring that the standard of cleanliness in the kitchen and the dining areas meet NHS Cleaning Standards.
- Ensuring deep cleans are carried out at regular intervals.

5.6.2 Ward Managers are responsible for the provision of hand wipes for patient use at all meal times.

5.6.3 Facilities Manager, Ward Manager and Nurse in Charge are responsible for ensuring that ward staff's personal and hand hygiene is excellent and that those involved in handling, preparing or serving food are wearing personal protective equipment where appropriate.

5.6.4 Facilities Manager, Ward Manager and Nurse in Charge are responsible for the provision of personal protective equipment for staff.

5.7 Trust Staff

5.7.1 All staff are responsible for complying with the Trust Food Hygiene, Cleaning Standards and Infection Prevention and Control Policies and for attending identified training commensurate to their role. Must have received the appropriate food handling instruction and/or training commensurate with their duties.

5.7.2 The facilities staff and ward unit staff are responsible for checking deliveries, storage, handling and provision of the food service.

5.7.3 All Trust staff are responsible for their own standards of personal hygiene, hand hygiene, and wearing clean uniforms and for reporting staff who break these hygiene standards.

5.7.4 All staff are responsible for washing their hands before handling, preparing and serving food and for wearing personal protective equipment.

5.7.5 All staff involved in the provision of food are required to adhere to this policy. Failure to adhere to this Policy may result in disciplinary action.

6. PROCESS

6.1 Food Premises

6.1.1 Regulations require that all food premises/businesses be registered with the local authority.

6.1.2 A 'food business' is one which sells or supplies food and includes preparation, treatment and storage.

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

6.2 Food Preparation

6.2.1 All food preparation, processing, manufacturing, distribution and transportation must be carried out in hygienic conditions:

- All satellite units receiving or preparing food must have a FSMS based on HACCP principles. The Facilities Manager will provide the documentation required.
- All food premises must be kept clean and in good condition and must be designed and constructed so as to permit good hygiene practices, including the prevention of contamination.
- There must be an adequate number of hand washing facilities for staff. In all Trust kitchens, anti-bacterial soap must be used for hand-washing.
- There must be facilities for cleaning and disinfection of work tools and equipment and all units must have up to date, and easily accessible, COSHH safety data sheets and risk assessments.
- All deliveries must be checked for damage and contamination, infestation, date codes and temperature control; all of which must be referred to in FSMS documents.
- Food waste must not be allowed to accumulate in food rooms/dining areas. All food waste to be disposed of in the kitchen waste disposal unit, or if necessary in a food waste bin.
- There must be an adequate supply of potable water.

6.3 Food Storage

- 6.3.1 All foods must be stored in appropriate conditions (as below) and be protected from contamination and deterioration, including protection against pests. Again, this must be shown on FSMS documentation.
- 6.3.2 Food must be stored in the appropriate conditions for its type, for example, refrigerator, freezer or dry stores.
- 6.3.3 Dry goods storage areas must be kept clean and tidy to minimise 'foreign body' hazards and to prevent harbouring pests. Packs must be handled with care to prevent damage that may allow contamination.
- 6.3.4 Non-food items may present a safety hazard if they contaminate food (e.g. cleaning materials). These must be stored away from food and packed in such a way that they cannot contaminate or taint the food.
- 6.3.5 Chilled storage areas and refrigerators must be run at suitable temperatures between 0oC and 8oC to comply with temperature control regulations. Twice daily temperature checks must be taken and the results recorded. All records to be kept for 3 months. Ward/Unit Managers are responsible for ensuring that this happens on their Ward/Unit.
- 6.3.6 Raw foods, which may be liable to contamination, must be kept away from ready to eat foods such as fruit and vegetables. Again, this must be shown on FSMS documentation.
- 6.3.7 To comply with Food Labelling Regulations, food labelled with 'Use By' dates must be used by the expiry date and must not continue to be stored past this date.

6.4 Food Handling

- 6.4.1 All food handlers must maintain a high standard of personal hygiene.

- 6.4.2 A 'food handler' is a person who handles or prepares food whether open (unwrapped) or packaged. Food includes drinks and ice.
- 6.4.3 All people working in a food handling area must wear suitable protective clothing. Standards of clothing may differ depending upon the duties being carried out. However, clean uniform, tunic or apron and head covering should be considered as a minimum requirement.
- 6.4.4 Uniform should not be worn outside of work premises.
- 6.4.5 People working in food handling areas must also practice good hygiene. This includes:
- Ensuring they have clean hands when handling food.
 - No smoking – the NHS is smoke free.
 - No eating or drinking whilst handling food.
 - Not wearing jewellery (a plain band ring is acceptable), false nails or nail varnish.
 - Covering wounds likely to cause risk of contamination of foods. Staff who report for duty with a dressing on should have it changed before they enter a food area. Any loss of dressings must be reported immediately.
- 6.4.6 Employees with boils or septic cuts must be excluded from food handling areas e.g. production kitchen/ward kitchen.
- 6.4.7 Food handlers known or suspected of suffering from, or carrying, any food transmitted disease must be prohibited from working with food if there is a risk of the food becoming contaminated with pathogenic micro-organisms.

6.5 Purchasing Food Ingredients

- 6.5.1 Suppliers must be registered with the NHS Supply Chain (NHSSC). This will ensure there are written purchasing specifications for all ingredients which comply with standards based upon authoritative sources.
- 6.5.2 The use of whole pasteurised, rather than raw (shell) eggs, eradicates problems with cross contamination. Where raw eggs have to be purchased they will be procured via an accredited source and be stored in a refrigerator and be used before their expiry date.
- 6.5.3 In exceptional circumstances a Trust inspection can be undertaken to determine a suppliers suitability. The Internal Inspection schedule is attached as an appendix to this policy and will be carried out by a suitably qualified person.

6.6 Temperature Control and Regulations

- 6.6.1 All foods, including raw materials, ingredients, intermediate products and finished products must be kept at temperatures, which comply with regulations. This states that 'any person who keeps any food at or in food premises at a temperature above 8°C shall be guilty of an offence'. This includes any food item that requires refrigeration, whether it be in a vending machine, ward fridge or main kitchen.
- 6.6.2 The Trust is, therefore, required by law to ensure that certain foods (including those which are classified as high risk or have a 'use by label') are kept at a temperature, which does not result in a risk to an individual's health. The regulations incorporate the following

requirements:

- Food to be kept at a temperature of between 0 and 8oC. The temperature of the food itself is controlled rather than the storage facility.
- Canned foods to be subject to temperature control once opened and decanted into another (sealed) container and labelled.

6.6.3 The regulations allow, where necessary, food to be outside temperature control for a defined limited period to accommodate food handling, transport, storage, display and service of food.

6.6.4 The regulations exempt certain food from the 8oC temperature requirement. This includes food, which needs to be kept hot in order to control the growth of pathogenic microorganisms or the formation of toxins (minimum 63oC). Where food is transported to external units, it is delivered in insulated boxes, within 15 minutes, or the temperature on arrival must be checked and recorded as per FSMS documentation.

6.7 Food Safety Management System (FSMS)

6.7.1 A bespoke Food Safety Management System has been developed for Mersey Care NHS Foundation Trust to cover all production within the Trust. This is based upon the principles of HACCP (Hazard Analysis Critical Control Point), and provides information, guidance and documents to enable the catering teams to manage food safety.

6.7.2 The system sets out organization and responsibilities, and is reviewed regularly. It has identified the different food groups for hazard analysis, and sets out the guidance for catering staff in relation to cooking, chilling, cross contamination and cleaning. The system covers the full catering process, from purchase to service, as well as premises issues. Regular checks are carried out to ensure these food hygiene practices are being followed across Trust sites.

6.8 Guidance for Visitors Bringing Food into Hospital

6.8.1 We strongly advise against bringing food into hospital for your relatives as it is difficult to ensure the safety of products not provided by the Trust.

6.8.2 Certain foods present a higher risk of food contamination than others do. For safety reasons we would ask you **not** to bring in the following food groups:

6.8.2.1 Prohibited

Food items not allowed:

- Raw meat and meat products;
- Any product that requires reheating;
- Any product that is past its “best by” or “use by” dates;
- Any food that is not labelled with the patients name and dated;
- Any food requiring refrigeration that has not been stored appropriately;
- Raw eggs;

- Any unpasteurised dairy products.

6.8.2.2 Discouraged

- All takeaway food.

6.8.2.3 Permitted

Suggestions of food items that would be acceptable:

- Sandwiches
- Bread
- Salads
- Cheese
- Yoghurts and other individual desserts
- Washed fruit
- Confectionery/crisps/pre-wrapped biscuits

6.8.3 It is suggested that food items are brought in for consumption on the same day only. In the event that any product is not eaten immediately, it must be labelled with the patient's name and dated; this must be stored in a clean airtight container. Glass storage containers are not permitted. Please note food placed in the fridge which is not labelled or has been stored for 24 hours will be disposed of.

6.8.4 The Trust acknowledges that service users may require specific foods to be brought in relating to their religious and cultural beliefs; for food safety purposes, we advise that the principle of the above recommendations still apply.

6.9 Ward Kitchens

6.9.1 The Ward Manager in partnership with the Facilities Manager is responsible for ensuring that the following controls are maintained within ward kitchens:

- Clean daily and as spills occur.
- Check door seals regularly for mould splits and general repair.
- Fridges are used for short-term storage only.
- Restrict storage of staff and patients personal food. Where storage is essential, all items must be wrapped or sealed and labelled with the person's name and date it was placed in the refrigerator.
- A nominated member of the ward staff must check expiry dates daily. Any food found to be out of date must be discarded (including patient food).
- **Under no circumstances must raw meat, fish or poultry be stored in the ward refrigerator.**

- Refrigerators must be used for food storage **ONLY**.
- The refrigerator temperature sheet must be checked and recorded in the morning and evening. The refrigerator must operate between +0 C and +8 C. The nurse in charge must be informed of any rise in temperature. Where there is a rise in temperature, the door must not be opened for 15 minutes when a second reading must be taken. If the temperature remains incorrect, notify the BES contract manager (via the helpline) immediately.
- All new appliances must be fitted with a digital temperature display, and be designed to operate between +0 C and +8 C.

6.10 Food Incidents & Complaints

6.10.1 Food incidents and complaints must be managed in accordance with the Trust's Complaints and Risk Management Policies and be reported as below:

6.10.2 The Responsible Manager must:

- Ensure that incidents/complaints relating to all food are reviewed, and complete the required documentation.
- Inform the Infection Prevent and Control Team (or the Silver On Call if out of hours) if a food related outbreak is apparent.
- In the event of a diagnosis of a communicable disease relating to food being identified, the Infection Prevention and Control team will meet with the Facilities team and the Environmental Health Officer(s) to discuss what action is required.

6.10.3 The Trust has a responsibility to ensure that prompt action is taken on receiving notification of a problem associated with food. This is communicated by the Food Hazard Warning System, directly from the local Environmental Health Officer to the Responsible Manager and/or Infection Prevention and Control Team.

6.11 Contingency Arrangements

6.11.1 Contingency arrangements must be in place to ensure the delivery of safe and nutritious food in the event of total or partial failure of normal arrangements. The Head of Facilities for in-house services must produce documentation in readiness for this possibility, and the arrangements for services provided via SLAs or external contractors must also be documented.

6.11.2 The service continuity plan must take account of quality control measures, particularly in relation to health and hygiene.

6.12 Relationships with our Suppliers

6.12.1 Only suppliers authorised by PASA should be used. All Facilities Managers, Facilities staff ordering/receiving stores and procurement staff should be aware of the approved suppliers list.

6.12.2 The nominated Facilities staff should reject suspect food, the supplier notified and such rejection recorded.

6.13 Relationships with Environmental Health Officers (EHOs)

6.13.1 The local Government Officers enforce the Food Safety Act. An authorised officer (normally an Environmental Health Officer - EHO) may at all reasonable times examine any food premises and food products intended for human consumption. Visits may be carried out in response to complaints, usually within 7 days. Officers have access to all records and documentation and can visit all parts of the food premises, including staff rest rooms. Staff may be asked questions, food samples removed and photographs taken. Although EHOs have wide ranging powers of inspection it should also be accepted that they can be very helpful in solving problems.

6.13.2 All staff must assist / cooperate fully and courteously with the EHO.

6.13.3 When asked a question by an EHO always answer truthfully. To do otherwise could render yourself and others liable to prosecution.

7. CONSULTATION

7.1 This policy as written by the Head of Facilities and distributed to members of the Infection Prevention and Control Team and Facilities Management for consultation, along with a selection of key individuals in the Trust.

8. TRAINING AND SUPPORT

8.1 Staff must ensure that they complete food hygiene training, in line with the Organisation Training Needs Analysis which can be found in the Learning and Development Policy and Mandatory Training Policy.

8.2 As a minimum, employees are required to have a basic knowledge of hygiene principles and required practices prior to handling food. Training/instruction must be seen as a continuous requirement and will therefore require the organisation to provide refresher courses for employees.

8.3 Managers must ensure that food handlers are provided with relevant training in the handling of food relating to specific religious and cultural beliefs.

8.4 Training records will be kept by the Responsible Manager.

9. MONITORING

9.1 At operational level, the Head of Facilities, Facilities Managers, Modern Matrons and Ward/Unit Managers all have a role to routinely monitor compliance with relevant aspects of the system, including food hygiene and safety standards. Where appropriate, monitoring must be carried out at different periods, including weekends. As appropriate, routine continuous monitoring and/or periodic audit reviews must be used to ensure compliance through:

- Internal audits (unannounced)
- External inspections (unannounced)
- Quality Surveillance Group

10 Equality and Human Rights Analysis

Title: Food Hygiene Policy
Area covered: Trust wide

<p>What are the intended outcomes of this work? <i>Include outline of objectives and function aims</i> To ensure a consistent approach to food safety and legal requirements throughout the trust whilst maintaining a cost effective high standard of delivery.</p>
<p>Who will be affected? <i>e.g. staff, patients, service users etc</i> Service users, staff, volunteers and visitors</p>

<p>Evidence</p>
<p>What evidence have you considered? Policy, legislation</p>
<p>Disability (including learning disability) No impact noted.</p>
<p>Sex No impact noted.</p>
<p>Race <i>Consider and detail (including the source of any evidence) on difference ethnic groups, nationalities, Roma gypsies, Irish travellers, language barriers.</i> People working in food handling should be aware of restrictions on handling of food in relation to some cultures.</p>
<p>Age <i>Consider and detail (including the source of any evidence) across age ranges on old and younger people. This can include safeguarding, consent and child welfare.</i> No impact noted.</p>
<p>Gender reassignment (including transgender) <i>Consider and detail (including the source of any evidence) on transgender and transsexual people. This can include issues such as privacy of data and harassment.</i> Note that staff using certain kinds of skin-based hormone medications may decide to wear extra protective clothing.</p>
<p>Sexual orientation <i>Consider and detail (including the source of any evidence) on heterosexual people as well as lesbian, gay and bi-sexual people.</i> No impact noted.</p>
<p>Religion or belief <i>Consider and detail (including the source of any evidence) on people with different religions, beliefs or no belief.</i> People working in food handling should be aware of restrictions on handling of food in relation to some religions i.e. Jewish and Islamic religions. This also occurs in assistance in enabling a person to eat who observe these religions. In this case the container holding the food should not be touched by the person assisting. In the enforcement of hygiene standards should not extend into restricting religious expression e.g. dreadlocks, turbans, nijabs or kippahs.</p>
<p>Pregnancy and maternity <i>Consider and detail (including the source of any evidence) on working arrangements, part-time working, infant caring responsibilities.</i></p>

No impact noted.
Carers Consider and detail (including the source of any evidence) on part-time working, shift-patterns, general caring responsibilities. No impact noted.
Other identified groups Consider and detail and include the source of any evidence on different socio-economic groups, area inequality, income, resident status (migrants) and other groups experiencing disadvantage and barriers to access. No impact noted.
Cross Cutting implications to more than 1 protected characteristic Food handling in relation to culture, religion and belief. Breaking of fasts for religious and cultural reasons often requires a specific food, which may not be in the list of recommended foods for visitors to bring into trust premises, can a procedure for these exceptions be included in the policy to support staff in such situations?

Human Rights	Is there an impact? How this right could be protected?
Right to life (Article 2)	This policy seeks to support this article and protect life.
Right of freedom from inhuman and degrading treatment (Article 3)	This article is not engaged.
Right to liberty (Article 5)	This article is not engaged.
Right to a fair trial (Article 6)	This article is not engaged.
Right to private and family life (Article 8)	This article is not engaged.
Right of freedom of religion or belief (Article 9)	See cross cutting under protected characteristics.
Right to freedom of expression Note: this does not include insulting language such as racism (Article 10)	This article is not engaged.
Right freedom from discrimination (Article 14)	This article is not engaged.

Engagement and Involvement detail any engagement and involvement that was completed inputting this together.

Summary of Analysis This highlights specific areas which indicate whether the whole of the document supports the trust to meet general duties of the Equality Act 2010

This policy is based on legislation and safety. It does not however include a statement on equality and human rights or acknowledge the protected characteristics under the Equality Act of :

Age
Disability
Gender reassignment
Sex
Race
Religion and Belief
Sexual orientation
Pregnancy and Maternity
Marriage and Civil Partnership

Whilst the policy will not impact on some of these protected characteristics, it may impact on others and a system of how to manage this should be available.

Eliminate discrimination, harassment and victimisation

Advance equality of opportunity

Promote good relations between groups

What is the overall impact?

The overall impact is positive and guidance is clear r.

Addressing the impact on equalities

The areas identified are immediately addressable.

Action planning for improvement

See action plan.

For the record

Name of persons who carried out this assessment:

Barbara Rafferty
George Sullivan
Pippa Georgeson

Date assessment completed:

09 December 2014

Name of responsible Director:

Executive Director of Resources

Date assessment was signed:

December 2014

Action plan template

This part of the template is to help you develop your action plan. You might want to change the categories in the first column to reflect the actions needed for your policy.

Category	Actions	Target date	Person responsible and their area of responsibility
Transparency (including publication)	<p>Food Handling in relation to culture, religion and belief.</p> <p>Breaking of fasts for religious and cultural reasons often requires a specific food, which many not be in the list of recommended foods for visitors to bring into trust premises, identify a procedure for these exceptions and include in the policy to support staff in such situations</p> <p>Provide links to information for staff to access guidance on assisted feeding in relation to culture, religion and belief</p>	19/12/2015	Head of Facilities Director of Resource
Legislation	<p>Reference to the Equality Act 2010 and the Human Rights Act 1998</p> <p>Equality Statement which includes the protected characteristics to be inserted.</p>	19/12/2015	Head of Facilities Director of Resource

11. APPENDIX 1 – TRAINING NEEDS ANALYSIS

Job Role	Responsibility	Training Needs
Head of Facilities Facilities Site Manager Head Chef	Strategic and Operational compliance of catering service with statutory and local requirements.	Chartered Institute of Environmental Health (CIEH) Level 4 Advanced standard or Royal Society for Public Health (RSPH) equivalent.
Assistant Facilities Site Managers Facilities Supervisor Catering Team Leaders	Overseeing the preparation and storage of food	CIEH Level 3 in Food Safety or RSPH equivalent.
Facilities Management Assistants (including drivers transporting food) All staff (including clinical reps) who are responsible for handling/preparation of food	Prepare basic food items Work in kitchen environments Work in community kitchen environments (supporting service users) Serve meals Assisted Feeds Kitchen Hygiene Storage and stock rotation of food	CIEH Level 2 in Food Safety or RSPH equivalent
All Facilities disciplines, Occupational Therapists and nursing staff (up to Band 6)	Food preparation and storage of food within a hospital environment	Infection Control Hand Hygiene Food Safety Training at Trust induction and Mandatory Training

General points:

- If in doubt as to what level of Food Safety training you or your team should receive, please contact the Head of Facilities.
- Service Managers will be responsible for ensuring their teams receive the appropriate training and on-going supervision.