

TRUST-WIDE NON-CLINICAL POLICY DOCUMENT

FOOD SAFETY

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2019 – Version 3

Striving for perfect care and a just culture

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Further information about this document:

Document name	SA15 Food Safety
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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Version 1	Presented to the Corporate Document Review Group for approval	July 2012
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Version 3	Circulated to all Facilities Lead's, Dietitians and members of the Hospital Food Standards Group for comments and agreement	February 2019

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 adults, including:

- Being alert to the possibility of child / adult abuse and neglect through their observation of abuse, or by professional judgement made as a result of information gathered about the child / 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 / 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 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 the with a Human Rights based approach and the FREDAs principles of **F**airness, **R**espect, **E**quality **D**ignity, and **A**utonomy

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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 and 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 staff in the Trust and where Service Level Agreements are in place

4. DEFINITIONS

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
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
ADL kitchen	Activities for daily living kitchen used by Occupational therapists to assist rehabilitation of Services users

FMA	Facilities Management Assistant – Position covers tasks such as Catering, Cleaning, Porter and Linen services
High Risk Foods	Any ready-to-eat food that will support the growth of pathogenic bacteria easily and does not require any further heat treatment or cooking.

5. DUTIES

5.1 Executive Director of Corporate Governance and Communications

5.1.1 The Executive Director of Corporate Governance and Communications 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 and holds ultimate responsibility over all Divisions. However the following managers have delegated responsibility for ensuring that Food Hygiene Policy and its associated procedures including staff training are fully implemented:

5.2 Associate Director of Estates and Facilities

5.1.2 The Associate Director of Estates and Facilities 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 Head of Estates & Facilities /Facilities Operations Manager – Local, Secure, Specialist LD, Community Services and Corporate Divisions

5.4.1 The Head of Estates and Facilities/Facilities Operations Manager must oversee the catering provision to ensure risks to the organisation are minimised. The Head of Facilities/Facilities Operations Manager are 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/ Catering Managers

5.5.1 Facilities Site Managers/Catering Managers are responsible for identifying and providing the training required for facilities service staff that cook, store, serve or handle food.

5.5.2 The Facilities Site Manager/Catering 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 Site Managers/Catering Managers/Ward Managers/OT Management/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.

Ensuring that weekly and monthly HACCP documentation is completed correctly and any issues are actioned and escalated as appropriate • Facilitating time for staff that store, handle, cook 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 Site Managers, Catering Managers, Ward Managers 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 Site Managers, Catering Managers, Ward Managers and Nurse in Charge are responsible for the provision of personal protective equipment for staff within their remit.

5.6.5 Ward Managers and Clinician in Charge are responsible for ensuring that the ADL kitchens adhere to the Food Hygiene policy and that all temperatures are recorded as per HACCP documentation.

5.6.6 The Infection Prevention and Control Committee (IPCC) advise and monitor all policy amendments and instruct on trust wide recommendations regarding food safety.

5.7 All Staff

5.7.1 All staff are responsible for complying with the Trust Food Safety, 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 and recording of these checks in line with the site's HACCP requirements.

5.7.3 Each site with catering provision will have a Food Safety Management System (FSMS) which details all site specific operations. This is held and updated by the Facilities Site Managers. All paperwork regarding Food Safety must be completed as per the appropriate timeframes detailed on the documents by those staff carrying out the task, and checked by Facilities Site Management for accuracy.

5.7.4 Food Safety is a primary responsibility of all staff carrying out catering duties for the trust.

5.7.5 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.

5.7.6 All staff are responsible for washing their hands upon entry to all catering areas, before handling, preparing and serving food and for wearing personal protective equipment

5.7.7 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. Cleaning

6.1 A detailed cleaning schedule must be in place, in line with the frequencies in the Trust's Cleaning Policy. (SA16)

6.1.2 When monitoring the cleaning and hygiene practices in the kitchen, attention should be paid to the general condition and cleanliness of:

- Food preparation, serving areas & equipment
- Floor tiles / surfaces
- Paint & tiles on walls, floors and ceilings
- Equipment used to keep food hot or cold
- Fridges and freezers
- Waste disposable systems
- Waste bins
- Electrical lights, fittings and appliances
- Ventilation / extraction systems
- All contact points e.g. door handles, light switches

6.1.3 An annual deep clean should be carried out using a deep clean checklist to specify areas required. (Appendix 4) This is arranged through the Facilities team with a nominated supplier

7. Consultation

7.1 This Policy has been written by Facilities Management in conjunction with the IPC Team and IPCC overview and support, and widely distributed for consultation with

- Clinical Representatives
- Facilities Site Managers
- Infection Prevention and Control Committee
- Environmental Manager
- PLACE Officer

8. Process

8.1 Food Premises

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

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

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

8.2 Food Preparation

8.2.1 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.
- 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.
- There must be suitable PPE available such as gloves, hats and beard coverings
- All deliveries must be checked for damage and contamination, infestation, date codes and temperature control; all of which must be recorded in FSMS documents.
- Food waste must not be allowed to accumulate in food rooms/dining areas. All food waste to be disposed of in line with the Trust's waste policy (SA22)
- There must be an adequate supply of potable water.

8.3 Food Storage

8.3.1 All foods must be stored in appropriate conditions and be protected from contamination and deterioration, including protection against pests. Again, this must be shown on FSMS documentation.

8.3.2 Food must be stored in the appropriate conditions for its type, for example, refrigerator, freezer or dry stores.

8.3.3 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.

8.3.4 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.

8.3.5 Chilled storage areas and refrigerators must be run at suitable temperatures between 0°C and 8°C to comply with temperature control regulations. Freezers must operate from -18°C or below. Twice daily temperature checks must be taken and the results recorded, recheck the temperature after half an hour if it is outside these parameters and if it is still not within the required temperature range it must be reported immediately for repair.

8.3.6 All records must be kept for a minimum of 3 months. Ward/Unit Managers are responsible for ensuring that this happens on their Ward/Unit including the ADL & Staff kitchens.

8.3.7 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.

8.3.7 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.

8.3.8 Food must not be stored on the floor, and where shelved must be at least 6 inches from the ground to allow for thorough, easy cleaning.

8.4 Food Handling

8.4.1 All food handlers must maintain a high standard of personal hygiene. Good Food Hygiene is everyone's responsibility. The trust adheres to the Food Standards Agency's hand washing guidance which includes;

- Before touching or handling any food, especially ready to eat food and after touching raw meat, poultry, fish, eggs or unwashed vegetables
- When entering the kitchen, e.g. after going to the toilet, or having a break
- After touching or emptying the bins
- After any cleaning
- After touching a cut or changing a dressing
- After touching items such as phones, light switches, door handles, cash registers and money
- The use of disposable gloves is not an alternative to hand washing

- The effective drying of hands with disposable towels to help prevent the spread of harmful bacteria
- No smoking – the NHS is smoke free.
- No eating or drinking whilst handling food. This includes within all catering preparation areas and outlets.
- 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.

8.4.2 A 'food handler' is a person who handles or prepares food whether open (unwrapped) or packaged. Food includes drinks and ice.

8.4.3 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.

8.4.4 Uniform should not be worn outside of work premises.

8.4.5 Employees with boils or septic cuts must be excluded from food handling areas e.g. Production kitchen/ward kitchen.

8.4.7 Food handlers have a legal obligation to notify their Supervisor / Manager if they know or suspect they are suffering from, or carrying, any food borne disease or condition. Staff must be prohibited from working with food if there is a risk of the food becoming contaminated with pathogenic micro-organisms until 48hours following their last symptom or when cleared to work by their doctor.

8.5 Purchasing Food Ingredients

8.5.1 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.

8.5.2 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.

8.5.3 In exceptional circumstances a Trust inspection can be undertaken to determine a supplier's suitability.

8.6 Allergens

8.6.1 The Trust has a legal responsibility to remain up to date and in adherence with all relevant guidance and regulation regarding allergenic requirements relating to Service Users/Patients, Staff and Visitors.

8.6.2 All catering operations within the trust must have service specific allergen guidance relating to their service delivery and target group. This is provided in a variety of formats and displayed in Service User/Patient areas as appropriate.

8.6.3 All queries relating to allergenic requirements should be directed to the local Facilities Site Manager/Catering Manager for advice and support who will work with the trust dieticians to ensure all appropriate processes are followed. Allergen information is available on request and a food allergen poster must be displayed in all food service areas.

8.7 Temperature Control and Regulations

8.7.1 All foods, including raw materials, ingredients, intermediate products and finished products must be kept at temperatures which comply with regulations. This includes any food item that requires refrigeration, whether it is in a vending machine, ward fridge or main kitchen.

8.7.2 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:

- Refrigerated food is to be kept at a temperature of between 0 and 8°C. The temperature of the food itself is controlled rather than the storage facility.
- Frozen food to be kept at a temperature below -18°C
- Canned foods to be subject to temperature control once opened and decanted into another (sealed) container and labelled.

8.6.3 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. This must be managed by an appropriately trained person and recorded within HACCP documentation. It must also be used as an exception rather than usual practice. This process and the disposals process for food breaching temperature guidelines will be authorised by the Facilities Site Manager where it relates to patient provided food or visitor provided food.

8.7 Food Safety Management System (FSMS)

8.7.1 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 and Critical Control Points), and provides information, guidance and documents to enable the catering teams to manage food safety.

8.7.2 The system sets out organisation 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. An annual review is carried out by the divisional Catering Manager to ensure these food hygiene practices are being followed across Trust sites and reflect any changes to procedure or local arrangements.

8.8 Guidance for Visitors Bringing Food into Hospital

8.8.1 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.

8.8.2 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:

8.8.2.1 **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.

8.8.2.2 **Discouraged**

- All takeaway food.

8.8.2.3 **Permitted**

Suggestions of food items that would be acceptable:

- Sandwiches
- Bread
- Salads
- Cheese
- Yoghurts and other individual desserts
- Washed fruit

8.8.3 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. It is suggested that queries are directed to the individual sites for local procedures and clarified guidance on what is permissible regarding individual circumstances

8.8.4 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.

8.9 **Ward Kitchens**

8.9.1 The Ward Manager in partnership with the Facilities Site 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, tears 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 dated in line with food safety guidelines.
- 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 containing food and drinks for service users/patients must be dedicated for this purpose 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, escalate to your local Facilities Site Manager/Catering Manager.
- All new appliances must be fitted with a digital temperature display, and be designed to operate between +0 C and +8 C.

8.10 Food Incidents & Complaints

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

8.10.2 The Responsible Manager must

- Ensure that incidents/complaints relating to all food are reviewed, and complete the required documentation.
- Inform the Infection Prevention and Control Team (or the Bronze On Call if out of hours) if a food related outbreak is suspected
- 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.

8.10.3 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.

8.11 Contingency Arrangements

8.11.1 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.

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

8.12 Relationships with our Suppliers

8.12.1 Only suppliers authorised by NHS Purchasing & Supply Agency (PASA) should be used. All Facilities Managers, Facilities staff ordering/receiving stores and procurement staff should be aware of the approved suppliers list.

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

8.13 Relationships with Environmental Health Officers (EHOs)

8.13.1 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.

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

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

8.13.4 To support the trusts' FSMS an external provider carries out annual checks of all of our catering operations in use trustwide. This report is circulated to the local managers to action any areas of non-compliance. This process provides assurance that all areas are operating in accordance with Food Safety guidelines and are fully compliant.

9. TRAINING AND SUPPORT

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

9.2 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.

The level of training is commensurate to the employee's grade and specific to their particular job role, broad guidance can be given as follows;

- FMA and other food handlers – Level 2 (or equivalent)
- Facilities Team Leader/Assistant Manager – Level 3 (or equivalent)
- Facilities Manager – Level 4 (or equivalent)

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

9.4 Training records will be kept by the Responsible Manager.

10. MONITORING

10.1 At operational level, the Head of Facilities, Facilities Manager (Operations), Facilities Site Managers, Catering 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
- Hospital Food Standards Group

10.2 The system details the monitoring frequencies relating to each principle of HACCP. The monitoring documentation is completed daily by the person responsible in the area. The daily checks are reviewed at least weekly by a member of the teams' management (usually an assistant manager within facilities) and this in turn is monitored at least monthly by their manager (usually the facilities site manager).

11. Equality and Human Rights Analysis

Title: Food Hygiene Policy
Area covered: Trust wide
What are the intended outcomes of this work? To ensure a consistent approach to food safety and legal requirements throughout the trust whilst maintaining a cost effective high standard of delivery.
Who will be affected? Service users, staff, volunteers and visitors
Evidence
What evidence have you considered? Policy, legislation
Disability (including learning disability) No impact noted.
Sex No impact noted.
Race 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.</i>
Age 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. No impact noted.
Gender reassignment (including transgender) 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. Note that staff using certain kinds of skin-based hormone medications may decide to wear extra protective clothing.
Sexual orientation Consider and detail (including the source of any evidence) on heterosexual people as well as lesbian, gay and bi-sexual people. No impact noted.
Religion or belief Consider and detail (including the source of any evidence) on people with different religions, beliefs or no belief.

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.

Pregnancy and maternity Consider and detail (including the source of any evidence) on working arrangements, part-time working, infant caring responsibilities.
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,
Support will be requested from dieticians and clinical colleagues from the facilities teams as any specific query is raised.

Human Rights	Is there an impact? How this right could be protected?
Right to life (Article 2)	<i>This policy seeks to support this article and protect life.</i>
Right of freedom from inhuman and degrading treatment (Article 3)	<i>This article is not engaged.</i>
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)	<i>This article is not engaged.</i>
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 <i>detail any engagement and involvement that was completed inputting this together.</i>

<p>Summary of Analysis <i>This highlights specific areas which indicate whether the whole of the document supports the trust to meet general duties of the Equality Act 2010</i></p> <p><i>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 :</i></p> <ul style="list-style-type: none"> <i>Age</i> <i>Disability</i> <i>Gender reassignment</i> <i>Sex</i> <i>Race</i> <i>Religion and Belief</i> <i>Sexual orientation</i> <i>Pregnancy and Maternity</i> <i>Marriage and Civil Partnership</i> <p><i>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.</i></p>
Eliminate discrimination, harassment and victimisation
Advance equality of opportunity
Promote good relations between groups

<p>What is the overall impact? The overall impact is positive and guidance is clear.</p>

<p>Addressing the impact on equalities <i>The areas identified are immediately addressable.</i></p>

<p>Action planning for improvement <i>See action plan.</i></p>

For the record

Name of persons who carried out this assessment:

Joanne Ashley

Date assessment completed:

8th April 2019

Name of responsible Director:

Executive Director of Communications and Corporate Governance
Associate Director of Estates and Facilities

Date assessment was signed:

May 2019

12. APPENDIX 1 – Training Needs Analysis

Job Role	Responsibility	Training Needs
Head of Facilities Facilities Site Manager Catering Manager	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) or equivalent.
Assistant Facilities Site Managers Facilities Supervisor Facilities Team Leaders	Overseeing the preparation and storage of food	CIEH Level 3 in Food Safety or RSPH or 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 or equivalent. MCNFT online training available.
All FMA's All ward based staff as appropriate to their job role	Food preparation and storage of food within a hospital environment	Infection Control Hand Hygiene Food Safety Training at Trust induction and Mandatory Training MCNFT online training available.

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.

13.APPENDIX 2 – Kitchen Daily Cleaning Schedule & Daily Cleaning Record Example

Kitchen Cleaning Schedule

Area	Surface/equipment	Method of cleaning	Cleaning materials	PPE	How often	Who by
e.g. food prep area	Work surfaces	<p>1. <u>At the end of prep/service</u> – Scrub with green scourer with hot water/detergent. Dry with paper towel. Spray surfaces with sanitiser leave for 10-15 minutes then wipe off.</p> <p>2. <u>During prep/service</u> Ensure food is covered/safely stored Spray with sanitiser leave on for a few seconds then wipe off with disposable towel</p>	Sanitiser Detergent Disposable cloth/paper towel Scourer	Gloves	<p>1. Daily</p> <p>2. Throughout the day</p>	Kitchen staff

All surfaces should be cleaned and sanitised. Review schedule and add new items of equipment when they are changed.

14. APPENDIX 3 – Kitchen Deep Clean Specification Checklist Form (Non-exhaustive)

FACILITIES MANAGEMENT SERVICES

KITCHEN DEEP CLEANING SPECIFICATION CHECKLIST

ITEM	REQUIREMENTS	REQUIRED - YES/NO	COMMENT
FLOOR	Floor to be brushed, mopped and scrubbed to remove any marks or build up – including behind equipment cupboards and counters. Floor drains to be cleaned / steamed.		
COUNTERS	Counter tops, legs and sides to be fully washed, sanitised and polished dry.		
FRIDGES	Fridges & Walk-in fridges to be cleaned and sanitised inside and out including seals, floor, walls, doors and ceiling. Shelves / racking to be washed / sanitised.		
FREEZERS	Freezers & Walk-in freezers to be defrosted, cleaned and sanitised inside and out including seals, floor walls, doors and ceiling. Shelves / racking to be washed / sanitised.		
COOKERS/OVENS	Cookers and ovens to be cleaned/steam cleaned inside & out removing all build up and residue, including shelves and all removable parts.		

STORAGE ROOMS	<p>Floor to be brushed / mopped/ scrubbed to remove any marks or build up – including behind equipment cupboards and counters. Floor drains to be cleaned / steamed.</p> <p>Shelves to be moved, walls behind washed/sanitised/steam cleaned.</p> <p>Shelving to be washed / sanitised / steam cleaned.</p>
WALLS	<p>All walls throughout to be washed/sanitised/steam cleaned. Including tiled areas which should be polished dry to prevent smearing.</p>
ALL AREAS	<p>Light fittings and vents to be cleaned inside and out.</p>
ALL AREAS	<p>Doors/handles and door frames – washed/sanitised and all marks removed.</p>
ALL AREAS	<p>Radiators- covers removed by Mitie and cleaned / steam cleaned and dusted behind radiator with all marks being removed.</p> <p>Covers cleaned /sanitised.</p>
ALL AREAS	<p>High and low ledges and pipes including skirting boards – to be washed /steam cleaned and all marks removed.</p>

15. APPENDIX 4 – Hand washing Technique Poster



Hand-washing technique with soap and water



1
Wet hands with water



2
Apply enough soap to cover all hand surfaces



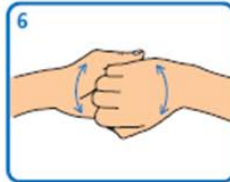
3
Rub hands palm to palm



4
Rub back of each hand with palm of other hand with fingers interlaced



5
Rub palm to palm with fingers interlaced



6
Rub with back of fingers to opposing palms with fingers interlocked



7
Rub each thumb clasped in opposite hand using a rotational movement



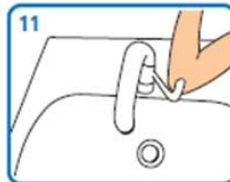
8
Rub tips of fingers in opposite palm in a circular motion



9
Rub each wrist with opposite hand



10
Rinse hands with water



11
Use elbow to turn off tap



12
Dry thoroughly with a single-use towel



13
Hand washing should take 15–30 seconds



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Adapted from World Health Organization Guidelines on Hand Hygiene in Health Care



16. APPENDIX 5- Kitchen Cleaning Schedule Template

Kitchen Cleaning Schedule

Area	Surface/equipment	Method of cleaning	Cleaning materials	PPE	How often	Who by
e.g. food prep area	Work surfaces	<p>1. <u>At the end of prep/service</u> – Scrub with green scourer with hot water/detergent. Dry with paper towel. Spray surfaces with sanitiser leave for 10-15 minutes then wipe off.</p> <p>2. <u>During prep/service</u> Ensure food is covered/safely stored Spray with sanitiser leave on for a few seconds then wipe off with disposable towel</p>	Sanitiser Detergent Disposable cloth/paper towel Scourer	Gloves	<p>1. Daily</p> <p>2. Throughout the day</p>	Kitchen staff

All surfaces should be cleaned and sanitised. Review schedule and add new items of equipment when they are changed.

17. Appendix 6 FSMS Recording Documents

Daily Cleaning Record

This record should be completed by the kitchen staff to show cleaning has been completed in kitchen areas. .

Unit Name:	Week Commencing:
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Area of kitchen	Who by	Mon	Tue	Wed	Thu	Fri	Sat	Sun
e.g. Wash up, dry stores, sandwich prep area etc	<i>Head chef</i>	<i>KDL</i>	<i>KDL</i>	<i>KDL</i>	<i>KDL</i>	<i>KDL</i>	<i>KDL</i>	<i>KDL</i>
Main kitchen/prep area								
Servery/Counters								
Fridges/freezers								
Dry stores								
Other storage areas								
Wash up area								
Other: <i>Specify</i>								

Comments/Corrective Action to improve cleaning:

Inspection Record checked weekly by:

SignatureDate:.....
(Unit Manager)

18. Appendix 7 Safe Refrigerator food storage chart

SAFE REFRIGERATOR STORAGE

