

# Food Hygiene for Ward and Therapy Kitchens Infection Prevention and Control Policy

This policy describes the procedures and processes for staff to follow in relation to the management of food and associate hygiene requirements for ward kitchens

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## Version Control and Summary of Changes

Version number	Date	Comments (description change and amendments)
Version 1, Draft1	January 2009	New guideline: Infection Control guideline for Food Hygiene in Ward Kitchens
Version 2, Draft 1	November 2009	Review of Guideline by Amanda Howell, Antonia Garfoot, Una Willis & Tammy Bale Lead Nurses <sup>3</sup>
Version 3, Draft 1	December 2009	Amendments following consultation process Revisions to incorporate requirements of NHSLA Standards
Version 3, Draft 2	January 2010	Amendments following consultation process
Version 4	May 2010	Amendments following identification that no longer requires policy status. Roles and Responsibilities removed, will be covered under the general infection control policy
Version 5	July 2011	Harmonised in line with LCRCHS, LCCHS, LPT (Historical organisations)
Version 6	May 2015	Reviewed by Antonia Garfoot
Version 7	April 2018	Further review by Antonia Garfoot

**For further information contact the Infection Prevention and Control Team**

## Definitions that apply to this Policy

<b>Environmental health Officer (EHOs)</b>	<p>Responsible for carrying out measures for protecting public health, including administering and enforcing legislation related to environmental health and providing support to minimize health and safety hazards. They are involved in a variety of activities, for example inspecting food facilities, investigating public health nuisances, and implementing disease control.</p> <p>Environmental health officers are focused on prevention, consultation, investigation, and education of the community regarding health risks and maintaining a safe environment.</p>
<b>Health Care Premises</b>	<p>Where care or services are delivered to a person related to the health of that individual</p>
<b>Infection</b>	<p>An organism present at a site and causes an inflammatory response or where an organism is present in a normally sterile site.</p>
<b>Pest Control</b>	<p>The regulation or management of a species defined as a pest, usually because it is perceived to be detrimental to a person's health, the ecology or the economy.</p>

## **1.0. Purpose of the Policy**

This policy has been developed to give clear guidance on Food Hygiene for wards. Managers need to be aware that the Food Safety Act 1990 and the regulations relating to food safety legislation apply to all NHS premises and sites where food services are provided. They apply to all areas where food or drinks are supplied by the healthcare facility for consumption by patients, staff and visitors. The standards of food hygiene require the need to reflect the nature of the food handling activities carried out in the area

## **2.0 Summary and key points**

The intention of this policy is to provide staff employed by Leicester Partnership Trust (LPT) with a clear and robust process for staff to follow in relation to the accessibility, preparation and consumption of food and applies to all staff working in LPT.

## **3.0 Introduction**

The accessibility, preparation and consumption of food within a hospital or healthcare setting is an important focus for patients and clients in promoting good health and wellbeing. In order to ensure that the risks of illness or infection are minimised or eradicated; it is important that all managers and staff are provided with information that is consistent in relation to the standards of food hygiene practice required in ward kitchens. This policy identifies the principles, responsibilities and methods associated with achieving the required legal standards of food hygiene.

Staff, patients and visitors health are high on the Infection Prevention and Control agenda and so as a duty of care LPT must ensure that staff are given guidance as to the appropriate steps they need to undertake to ensure they can protect themselves and others in relation to preparation and consumption of food.

All staff have a responsibility to follow this policy.

## **4.0 Design Criteria for Ward Kitchens and Food/Beverage Service Points**

The aim of design criteria for ward kitchen/therapy areas is to provide the minimum practical amount of equipment necessary for the satisfactory operation of the area. This will reflect the nature of the activities to be carried out. General advice is given below. Any other advice can be obtained from the Environmental Health officer and the Infection Prevention and Control team.

## **5.0 Ward and Therapy Kitchen**

These areas may be used to prepare snacks (e.g. toast) drinks and the storage of foods.

- All internal finishes must be intact and capable of being cleaned.
- All food preparation surfaces must be smooth, impervious, easy to clean and durable, e.g. Formica or stainless steel.
- Flush splash backs should be provided to the rear of sinks, work surfaces and hand wash basins.
- A double sink with double drainer is preferable for washing up. All patients cups/crockery/cutlery must be thermally disinfected in a dishwasher in the main kitchen.
- A hand wash basin must be designated for hand washing. There must be a wall mounted liquid hand soap dispenser, and wall mounted disposable paper towels.
- A domestic waste bin with foot pedal operated lid, if appropriate to area must be provided for the disposal of waste.
- The refrigerator must have a thermometer. The refrigerator should be capable of maintaining food temperatures between 0°C and 5°C. Advice from procurement should be obtained on the most appropriate refrigerator for the purpose.
- Any equipment which does not stand on work surfaces shall be mobile to facilitate cleaning or be wall mounted.
- A supply of potable water shall be provided to the sink. The drinking water supply tap must be marked "Drinking Water"
- A means of heating milk for drinks should be provided, e.g. microwave.
- The area should be large enough to accommodate a beverage vending trolley if required.
- Cupboards and base units should be kept to a minimum and be designed so that cupboard tops slope to the ceiling.
- The toaster must be agreed by and of a design approved by the Trust Fire Safety Officer.
- A conventional cooker is not permitted

## **6.0 Food Service Point**

The positioning of food service points needs to be carefully considered. Normally they will be in dining rooms. Where this is not practicable the area used must be agreed with the Trust's Fire Safety Officer and Environmental Health Adviser/Officer. It may also be necessary to consult with the Infection Prevention and Control Team in certain circumstances.

The food service point should not be sited next to toilets, bathrooms or dirty utility rooms or other potential sources of contamination

The food service point must have an electrical supply to facilitate food trolley service.

There must be close access to a hand wash basin designated for hand washing. There must be a wall mounted liquid hand soap dispenser and a wall mounted paper hand towel dispenser.

## **7.0 Beverage Trolley Points**

The positioning of beverage vending trolley points needs to be carefully considered. Normally they will be in dining rooms or in ward corridors. Where this is not practicable the area used must be agreed with the Trust Fire Safety Officer and Environmental Health Adviser/Officer. It may also be necessary to consult with the Infection Prevention and Control Team in certain circumstances.

The beverage trolley point should not be sited next to toilets, bathrooms or dirty utility rooms or other potential sources of contamination.

The beverage trolley point must have an electrical supply.

There must be close access to a hand wash basin designated for hand washing, with a wall mounted liquid hand soap dispenser and a wall mounted paper hand towel dispenser.

## **8.0 Hazard Analysis: Food Safety**

Food safety legislation requires the operators of food businesses to:-

- Identify potential food safety hazards
- Identify measures that may be used to control these hazards
- Identify critical control points
- Implement monitoring and recording systems to assess the effectiveness of critical controls.

A model hazard analysis system for ward kitchen areas is included as Appendix 1. It is intended that this model would be adapted for local use, printed, laminated and displayed in each area for reference.

## **9.0 Training in Relation to Food Hygiene**

The Food Hygiene (England) Regulation 2006 require that all 'food handlers' are trained and /or supervised and instructed in food hygiene commensurate with the needs of their post. All managers / Senior Nurses shall carry out an objective assessment of the training needs of non-catering food handling staff and ensure that these training needs are fulfilled. Food handlers should have undergone a health screen at the start of their appointment (Occupational Health)

The training given to staff shall include practical instruction of hygiene practices and use of equipment. It should be provided by individuals or a company qualified to undertake this specific training. Appendix 2

It is not intended that all food handlers should undergo a Chartered Institute of Environment Health, Level 2 Food Safety in Catering course. However this course is appropriate for staff involved in high risk food preparation.

A guide to the training needs of other staff is included as Appendix 3. All training given to staff shall be validated and recorded by their manager.

Appendix 4, 'Information for Ward based Food Handlers can be printed, laminated and displayed in the ward kitchen

## **10.0 Cleaning and Washing up**

All patients cups/crockery/cutlery must be thermally disinfected in a dishwasher in the main kitchen. This includes cup holders for use with disposable cups.

Staff crockery and cutlery may be washed in the ward kitchen in a single stainless steel sink with drainer. The hand wash basin must not be used for washing of such items.

Staff crockery and cutlery shall be dried with disposable paper towels. Fabric tea towels and air drying are not permitted.

Beverages vending trolleys must be emptied, cleaned and refilled in the ward kitchen.

The hospital cleaning schedule contains a schedule for the cleaning of ward kitchens. It clearly identifies;

- Who or what group of staff is responsible for each cleaning task.
- The frequency of every cleaning task including high level cleaning of walls and ceiling

The cleaning schedule clearly states the frequencies of domestic clean and that the out of hour's responsibility is that of the nursing staff.

Separate cleaning equipment must be used for the ward and therapy kitchens. These materials should be stored in the domestic cupboard. All cleaning materials must be colour coded in accordance with the National colour coding scheme for hospital cleaning materials and equipment, issued by the National Patient Safety Agency. The colour of cleaning cloths, scourers, gloves, mops and buckets to be used for kitchen areas in green. Disposable cloths must be used.

## **11.0 Use of Ward and Therapy Kitchens: General Provisions**

Patient/relative access to ward kitchens must be controlled by the person in charge of the area. The preparation of food in the ward kitchen by patients and patients' relatives is not permitted.

Eating of food or drinking of beverages by staff, patients and visitors in ward kitchens is strictly forbidden.

Any equipment used in ward kitchens shall be provided or approved by the Trust and safety tested accordingly. No unauthorised equipment shall be provided and redundant equipment that is condemned shall be disposed of in accordance with Trust policies.

Worktops should not be used as a seat or for storage of external items such as coats and hand bags at any time.

Animals must not be allowed in kitchen areas. Separate facilities for the storage of support animals pet food and the cleaning of feeding bowls etc., should be provided.

Plants or flowers are not allowed in the kitchen areas.

## **12.0 Food Storage**

All foods shall be stored in appropriate storage conditions in accordance with the manufacturers' recommendations. All high risk foods shall be stored in the refrigerator. Under no circumstances shall their storage at room temperature be permitted.

All foods shall be subject to appropriate stock rotation. New stock must be checked for their expiry date and placed below or behind older stock. All foods must be checked to ensure they remain within their expiry date. Any food that has passed the manufacturers expiry date must be discarded.

The contents of open packets of dry goods shall be transferred to clean; suitable storage containers with a tight fitting lid the date code on the original container should be marked on the storage container.

The stock levels within the ward kitchen must be kept to the minimum practicable levels.

Foods and food contact equipment shall be stored in separate cupboards/units to cleaning chemicals.

Chemicals shall be stored in their original container in a locked cupboard. On no account shall they be stored in food containers. Chemicals that are diluted for use must be labelled with relevant health and safety information.

No food or food materials shall be stored on the floor.

Patient snacks shall be stored in clean, lidded suitable containers and be refrigerated if recommended in the manufacturers storage instructions. If a patient or their visitors wish to bring food into the hospital they must first discuss the matter with the nurse caring for the patient or the Ward Manager. Specific guidance on this issue is contained within Appendix D. This may be printed, laminated and displayed in the appropriate areas.

Staff food in the ward refrigerator must be in date, and stored in a sealed clean containers, labelled with their name. If the food has been prepared at home, or it is not in the manufacturer's packaging, it must be labelled with the use by date and time i.e. 24 hours after putting into the refrigerator. All such food must be consumed within 24 hours or be disposed of. If the food is in the manufacturer's packaging, then the printed use by date should be observed.

The storage of staff food within ward kitchens should be restricted to food intended for consumption at work that day. Raw meats, raw eggs and raw unwashed vegetables shall not be brought into the ward kitchen. No food wrapped in shopping bags is permitted.

### **13.0 Food Service**

The service of food supplied by the catering department must be carried out as quickly and efficiently as possible. This requires the co-operation of the catering department and ward staff. To facilitate clear communication and co-ordination the following is recommended:

- A clear schedule of ward service times and arrangements should be agreed between the catering department and ward staff.

The catering department shall ensure that the food service trolley or regeneration trolleys they use are capable of;

- Regeneration trolleys must be capable of reheating food to a minimum core temperature of 75°C
- Regeneration trolleys and food service systems must maintain cold food service temperatures between 0°C and 5°C upon delivery and service.

Once the food trolley is delivery to the ward food should be served as quickly as possible.

Patients who require assistance with eating should have their meal kept hot in the food trolley until a ward staff member is available to assist the patient.

Hot foods may be consumed up to 90 minutes after regeneration to accommodate slow eaters and patients who need assistance. After this period any remaining hot food shall be thrown away.

Cold foods should be consumed within 90 minutes of dated and labelled and placed in the refrigerator. They must be thrown away after 24 hours.

Ice cream shall always be served frozen and never refrozen once it has started to thaw. Ice cream must be discarded when thawed.

Where patients require a liquid/pureed diet. This shall be provided via the main kitchen and not at ward level.

The communal use of preserves is to be discouraged. These should be provided in individual portion packs.

Staff involved in the service of food to patients shall wear a clean green disposable plastic apron dedicated solely for food service. Hands must be washed with liquid soap and water, and dried using disposable paper towels before putting on the apron prior to commencing food handling activities.

Where patients are away from the ward at meal times undergoing routine, non-emergency test etc., the catering department shall ensure that adequate arrangements are made for the provision of late meals. The ward should use provisions at ward level and / or organise an alternative meal with the catering department.

Patients should be issued with disposable hand wipes or offered the opportunity to wash their hands prior to food services.

A ward staff member should ensure that the patient's bed table is clean and clear of any obstructions prior to any food and beverage being served. Urinals must not be placed on tables.

#### **14.0 Use and installation of Equipment in Ward Department Kitchens**

The selection of equipment for use in ward/therapy kitchens should be carefully considered. It is recommended that no electrical equipment is provided without prior consultation with the Trust Estates Department and the Infection Prevention and Control Team. All equipment to be installed in the kitchen must be mobile or wall mounted to facilitate cleaning.

Equipment shall be installed and used in accordance with the manufacturer's instructions. A copy of the manufacturer's instruction manual shall be kept in a conveniently accessible position in the kitchen. Specific advice is given below on the use of equipment that may be expected to be provided in a ward kitchen.

##### **Microwave ovens**

Microwave ovens should not be used for reheating or boosting the heat of patients' meals.

Microwave ovens are acceptable for heating drinks and milk for cereals and porridge for patients.

The microwave oven manufacturer's instructions must be followed at all times when in use, being cleaned or maintained

Microwave ovens are provided for the use of patients and should be cleaned after each use. If staff are permitted to use them for their use they must clean them immediately after use.

##### **Water Coolers**

Water coolers must be installed and used in accordance with their manufacturer's instructions and have a servicing and cleaning regime in place.

Water coolers must be plumbed into a suitable source of potable water. Machines requiring manual filling must not be used or purchased.

## Refrigerators

The operating temperatures of ward refrigerators must be monitored daily. If the unit does not have a digital temperature display a thermometer must be placed in the refrigerator to facilitate this requirement. The operating temperature of the refrigerator should be 1°C to 4°C. If the operating temperature is outside this range the unit should be checked again in one hour. If the unit is back in range the temperature should be entered on the record. If the refrigerator reaches 10°C all food and perishable goods should be discarded and the contents that were discarded logged on the Hotel Services wastage sheet. Refrigerators that are not operating within the required temperature range following the follow up check shall be reported to the Estates department. If the unit is incapable of achieving the required temperature criteria it must be replaced.

All foods stored in the refrigerator shall be in sealed labelled containers (refer to section 5.7 food storage).

Only staff food to be consumed on site, that day shall be stored in the ward refrigerator (refer to section 5.7 food storage).

Food in the refrigerator should be systematically checked and food that has been stored over 24 hours or beyond the manufacturers use by date will be disposed of.

Where space is limited in the ward refrigerator, patients' food must take priority

No raw unprepared foods other than fruit shall be stored in the ward food refrigerator

No drugs, specimens, blood or cold compresses will be stored in the ward food refrigerator

## Beverage Trolleys and Manual Beverage Systems

This type of equipment shall be used, cleaned and maintained in accordance with the manufacturer's instructions. The machines will be descaled as part of the annual maintenance checks.

The trolleys will be cleaned in the ward kitchen at least once a day.

The water tank must always be filled in the ward kitchen. The water tank must be emptied at least every 24 hours. Water used to fill them must be drawn from a suitable potable water supply, not from a wash hand basin. A dedicated water jug must be made available to fill beverage vending machines where automatic water filling is not possible. The jug must not be used for any other purposes. This jug must be washed after use and stored dry between uses.

Milk provided for use with a beverage vending trolley or a manual beverage system should be set out in minimum quantities, Milk containers must be labelled with the date and time that they are put on the beverage trolley. Milk must not be left out at room temperature for more than **4 hours**.

After this time it must be removed from the trolley and disposed of in the ward kitchen. Small jugs or containers should be used for the provision of milk. These should be changed rather than refilled. They should be thoroughly washed prior to reuse.

Plastic spoons provided for use with patients' drinks must be single use

### **15.0 Pest Control**

Any signs of pests or sightings of pests' must be reported immediately to the ward manager or person in charge for that area. The ward manager or person in charge must then inform the nominated pest control officer in the Facilities Department.

Ward staff are not permitted to treat a pest infestation or problem without the nominated pest control officers express agreement.

The eradication and control of pests at ward level shall be carried out as part of the service contract for the hospital site.

### **16.0 Maintenance**

Any defects in kitchen equipment or fabric must be reported to the contracted Facilities Customer Service Helpdesk.

Planned preventative maintenance for key kitchen equipment must be in place and included in a planned preventative maintenance programme.

### **17.0 Waste Disposal**

All food waste will be disposed of in accordance with the Trust's Waste Policy. Normally plate waste will be returned to the catering department for disposal. Waste in waste bins in the ward kitchen must be disposed of at least once a day.

### **18.0 Occupational Health**

All staff have a responsibility to ensure that they inform occupational health if they are suffering from:

- Diarrhoea and vomiting
- Throat infections
- Skin rashes
- Boils or skin lesions

### **19.0 Training requirements**

There is a need for training identified within this policy. In accordance with the classification of training outlined in the Trust human resources and organisational development strategy, this training has been identified as mandatory and role development training.

The course directory source link below will identify who the training applies to, delivery method, the update, frequency learning outcomes and a list of available dates to access the training.

<http://www.leicspart.nhs.uk/Library/AcademyCourseDirectory.pdf>

## **20.0 References and Bibliography**

DEPARTMENT OF HEALTH (2004) *The General Food Regulations*. London: The Stationery Office

Food Safety Act 1990

FOOD SAFETY & HYGIENE REGULATIONS 2013 (England). The Hospital Food Standards Panels report on standards for food and drink in NHS Hospitals (August 2014)

## Appendix 1- Food Safety Assurance

HAZARDS	CONTROLS	MONITORING
<p><b><u>PURCHASE</u></b></p> <ul style="list-style-type: none"> <li>• Food may already be contaminated</li> <li>• Cross contamination from raw to cooked foods.</li> </ul>	<ul style="list-style-type: none"> <li>• Buy from R.D.C. or via Catering Department</li> <li>• Guidance on patients' and relatives food should be observed.</li> </ul> <p>Staff and patients are not allowed to bring in raw foods such as meat, poultry, eggs and fish into ward kitchen.</p>	<ul style="list-style-type: none"> <li>• Senior Nurses, Ward Manager and Ward Staff.</li> <li>• Responsibility of all staff</li> <li>• Checks by Ward Manager.</li> </ul>
<p><b><u>FOOD SERVICE</u></b></p> <ul style="list-style-type: none"> <li>• Bacteria may grow if food is left at room temperature after delivery to the ward.</li> <li>• Contamination</li> </ul>	<ul style="list-style-type: none"> <li>• Serve food as soon as possible after arrival. Hot food not served within 1 hour must be discarded. If it is to be eaten hot keep it piping hot above 63°C</li> <li>• Serve cold food as soon as possible. If the time delay to service from trolley arriving is more than 1 hour food must be put in the ward refrigerator.</li> <li>• Serve food with clean utensils and maintain good standards of personal hygiene. Wash hands before food service and put on green apron.</li> <li>• Ward service points should not be in close proximity to toilets, bathrooms or dirty utility rooms.</li> <li>• Handle crockery and cutlery by the handle part only.</li> </ul>	<ul style="list-style-type: none"> <li>• Senior Nurses, Ward Manager and Ward staff.</li> <li>• Senior Nurses, Ward Manager and Ward staff.</li> <li>• Senior Nurses, Ward Manager and Ward staff.</li> </ul>
<p><b><u>STORAGE</u></b></p> <ul style="list-style-type: none"> <li>• Cross contamination from raw to cooked foods.</li> <li>• Growth of bacteria due to chilled/perishable food storage at too high a temperature.</li> <li>• Growth of bacteria due to shelf like abuse</li> </ul>	<ul style="list-style-type: none"> <li>• Raw foods shall not be accepted into ward kitchens</li> <li>• Storage high risk foods in the refrigerator working below 5°C need to check what temp we are saying</li> <li>• All food and fluids are rotated. Food and fluids are discarded by the 'Use by Date'.</li> </ul>	<ul style="list-style-type: none"> <li>• Senior Nurses, Ward Manager and Ward Staff.</li> <li>• Daily temperature check of refrigerator.</li> <li>• Senior Nurses, Ward Manager and Ward Staff.</li> </ul>

HAZARDS	CONTROLS	MONITORING
<p><b><u>PURCHASE</u></b></p> <ul style="list-style-type: none"> <li>• Bacteria may grow in high risk foods if they are kept at room temperature.</li> <li>• Contamination of food</li> <li>• Bacteria growth in porridge if left at room temperature.</li> </ul>	<ul style="list-style-type: none"> <li>• Do not keep foods at room temperature for more than 1 hour.</li> <li>• Handle food with clean hands and equipment. Handle crockery and cutlery by the handle part only.</li> <li>• Maintain good standards of personal hygiene.</li> <li>• Prepare just before service in accordance with the manufacturer's instructions. Serve within 1 hour of discard.</li> </ul>	<ul style="list-style-type: none"> <li>• Senior Nurses, Ward Manager and Ward Staff.</li> <li>• Senior Nurses, Ward Manager and Ward Staff.</li> <li>• Senior Nurses, Ward Manager and Ward Staff.</li> </ul>
<p><b><u>STAFF HEALTH</u></b></p>	<ul style="list-style-type: none"> <li>• Staff Health Policy to be adhered to and staff to be 48 hrs. free from Diarrhoea and Vomiting prior to return to work</li> </ul>	<ul style="list-style-type: none"> <li>• Occupational Health, Senior Nurses, Ward Manager and Ward Staff</li> </ul>
<p>Keep animals and pests out of the kitchen. If you think you have a problem with pests contact the Estates department who will contact the Pest Control contractor for advice.</p> <p>Wash your hands regularly and wear clean over clothing when preparing food e.g. Disposable green apron.</p> <p>People who are ill should not prepare foods for others.</p> <p>Keep the kitchen clean and tidy.</p> <p>Guidance for patients and visitors on food to be brought into hospital should be observed.</p> <p><b>If in doubt throw it out. Discard food, which has not been purchased, prepared, cooked and served properly.</b></p>		

## Appendix 2: **Food Hygiene Training for Ward Based Food Handlers**

### **Induction**

All staff shall receive induction training. Induction training shall include communication to new starters. This shall include the Essentials of Food Hygiene as a minimum.

Staff or volunteers who solely prepare hot beverages should receive written instruction on induction covering the food hygiene aspects of their duties. Their understanding of these written instructions shall be assessed by the supervisor inducting them into the organisation.

### **Practical Instruction**

All staff shall receive training and or instruction in the practical competencies their post requires. This training shall include the food hygiene aspects of the tasks they are required to perform.

### **Hygiene Awareness**

Staff who serve food and prepare beverages but do not prepare any other foods shall receive hygiene awareness training. This shall comprise of a structured training session covering the food hygiene issues and relevant Trust Policies and procedures. A copy of the syllabus to be covered is attached. Staff shall undergo a short test as the end of the course.

### **Level 2 in Food Safety in Catering Certificate**

All staff that prepare high risk foods or are involved in rehabilitation kitchen assessment sessions with patients shall undergo this course or its equivalent.

## Appendix 3: **Hygiene Awareness Training for Ward Based Food Handler**

### **Introduction**

This course has been developed for ward based food handlers. The course is intended to provide candidates with an underpinning knowledge of food hygiene. The objective is that at the end of the course they will be aware of the importance of good standards of food hygiene and their own obligations.

It is anticipated that the course contact time will be a minimum duration of 4 hours.

The course shall be delivered by a trainer who is registered with the Chartered Institute of Environmental Health as a tutor for the Level 2 in Food Safety in Catering Certificate.

### **Module 1 – Introduction to food hygiene**

**Aims:** The expected outcome is that the candidate knows the symptoms and main causes of food poisoning. The candidate understands the cost of poor hygiene to themselves, patients and the Trust.

**Objectives:** Candidate is able to state names and characteristics of bacteria and requirements for their growth.

Candidate is able to explain what is meant by the terms food hygiene, food poisoning, food borne disease and contamination.

Candidate is able to list the possible consequences of poor standards of food hygiene in a healthcare environment.

### **Module 2 – Basic bacteriology**

**Aims:** The expected outcome is that the candidate is aware of the potential for pathogenic bacteria and viruses to cause food poisoning or food borne illness in a healthcare environment.

**Objectives:** Candidate is able to list the key growth requirements of bacteria, method of multiplication and timescale of that process. Explain the terms bacteria spore and toxin and their relevance to food poisoning bacteria in the health care environment.

## Appendix 4: Information for Ward Based Food Handlers

### Hand washing

Hands should be routinely washed when entering the kitchen.

Hands must be washed before accessing the following:-

- Ice / Ice Machine /Ice Scoop
- Refrigerator
- Toaster
- Microwave
- Preparing Snacks/Beverages

### Ward Kitchen

- Only authorised staff are allowed to use the ward kitchen area.
- Waste must be disposed of in accordance with the Trust's Waste Policy.
- Do not leave out garments, and handbags in kitchen.
- Do not attend to your hair in the kitchen.
- Do not sit on work surfaces.
- Do not eat your lunch or drink in a ward kitchen.

### Food Service

- Wash hands and wear a clean disposable green apron, prior to service. Wash hands, change apron as required throughout service.
- Serve food to patients as soon as the food trolley has been handed over to the ward (at required temperature)
- Interruptions to service for patient handling assistance – wash hands, wear a new disposable green apron before returning to food service
- Serving food to patients with an infection – follow the precautions as required prior to entering the room, serve food and then wash hands, wear a new disposable apron before returning to food service.
- Do not allow food trolley service to be in close proximity to bathrooms and toilets.
- Handle crockery and cutlery by the handles.
- Do not assist with food service if you are suffered from diarrhoea and/or vomiting with the last 48 hours (and review the need to be on duty).
- Food waste should be returned to the main kitchen for disposal.

### Food Safety

- No raw foods allowed in ward kitchens
- Food should be purchased via reputable source i.e. RDC, Catering Contractors.
- Follow guidance for food allowed to be brought in by relatives.
- Follow model code of practice for ward kitchens
- Adhere to all ward kitchen policies and procedures
- Follow the requirements of the Level 2 in Food Safety in Catering Certificate.

## **Kitchen Colour Coding**

The trust operates a cleaning colour coding policy to assist with the prevention of cross contamination:

- Green colour coded clean cloths, scourers, gloves, mops and buckets must only be used in ward kitchens. Staff shall wear a clean disposable green apron whilst working in the kitchen or serving food.

## Appendix 5: **Guidance for Patients and Visitors on Foods to be brought into Hospital**

The Trust's catering service makes strenuous efforts to ensure that they cater for all the needs of patients. If you have any special requirements, please discuss them with a member of the Ward Staff or a Dietician.

However, you may wish to special food brought in to boost your morale. If you or your visitors wish to bring food into hospital, they must first discuss the matter with the Nurse caring for you. This is to ensure that the food you are intending to eat is suitable for your condition or requirements.

The following guidance must be followed to ensure that your health and the health of all patients on the Ward is not adversely affected by food brought into hospital.

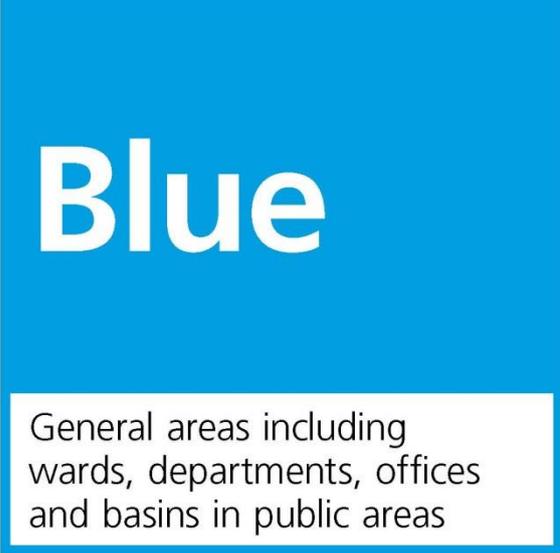
**Please do not bring in any of the following;** raw meat, raw poultry, raw fish, raw eggs, unpasteurised milk, pate, soft cheeses, shellfish, unwashed salad/vegetables.

1. All chilled foods e.g. cooked meat, meat products, cooked fish, fish products, milk, dairy products, cooked eggs, eggs products, sandwiches or cooked rice must be prepared appropriately to eliminate the risk of food poisoning (advice can be sought from the Food Standards Agency or from an approved supplier)
2. Chilled foods must be transported to the hospital in a cool bag with ice packs to ensure that they stay cool. They should be preferably stored in the original packaging or completely sealed.
3. If you bring in chilled foods that are not to be consumed immediately, please ensure that they are given to a member of the nursing staff for storage in the ward refrigerator. Food will then be labelled with the patient's name and date, and retained for consumption with 24 hours. After 24 hours the food will be thrown away. **Please note** Ward staff are instructed not to accept food that has an expired use by or best before date.
4. Due to the limited amount of space in the ward refrigerators, relatives are asked to limit the amount of food brought in to one meal at a time.
5. We discourage the supply of hot foods by relatives because food safety risks are involved. Therefore facilities for reheating food at ward level are not provided.
6. This advice does not apply to chocolate, confectionery, biscuits, cakes (except those with a cream filling) or fresh fruit.

**All food brought into Hospital is consumed at the patient's own risk**

## National colour coding scheme for hospital cleaning materials and equipment

All NHS organisations should adopt the colour code below for cleaning materials. All cleaning items, for example, cloths (re-usable and disposable), mops, buckets, aprons and gloves, should be colour coded. This also includes those items used to clean catering departments.

 <p><b>Red</b></p> <p>Bathrooms, washrooms, showers, toilets, basins and bathroom floors</p>	 <p><b>Blue</b></p> <p>General areas including wards, departments, offices and basins in public areas</p>
 <p><b>Green</b></p> <p>Catering departments, ward kitchen areas and patient food service at ward level</p>	 <p><b>Yellow</b></p> <p>Isolation areas</p>

Your local contact for hospital cleaning is:

## Appendix 7: Stakeholders and consultation

Key individuals involved in developing the document

<b>Name</b>	<b>Designation</b>
Antonia Garfoot	Senior Infection Prevention and Control Nurse
Amanda Hemsley Mel Hutchings Andy Knock Annette Powell	Infection Prevention and Control Team

### Circulated to the following individuals for consultation

<b>Name</b>	<b>Designation</b>
Adrian Childs	Chief Nurse Deputy Chief Executive
Claire Armitage	Lead Nurse Community Mental Health
Alison O'Donnell	Interim Head of Learning and Development
Michelle Churchard	Head of Nursing AMH/LD Services
Pauline Blake	Training and Development Manager
Kathy Feltham	Lead Nurse MHSOP
Joanne Wilson	Lead Nurse FYPC
Kam Palin	Occupational Health Nurse
Amin Pabani	Service Manager Podiatry
Andrew Swann	Consultant Microbiologist
Liz Tebbutt	Facilities Manager
Emma Wallis	Lead Nurse CHS
Tejas Khatau	Lead Pharmacist FYPC
Dr Phillip Monk	<b>Consultant in Health Promotion England</b>
Liz Compton	Senior Matron AMHS
Sarah Latham	Matron CHS
Jane Martin	Senior Nurse LD and Rehabilitation
Katie Willetts	Senior Nurse FYPC
Fern Barrell	Risk Manager Risk Assurance
Bernadette Keavney	Head of Trust Health and Safety
Sally Smith	Zone Coordinator
Helen Walton	Property Manager

## Appendix 8: PRIVACY IMPACT ASSESSMENT SCREENING

<p>Privacy impact assessment (PIAs) are a tool which can help organisations identify the most effective way to comply with their data protection obligations and meet individual's expectations of privacy. The first step in the PIA process is identifying the need for an assessment.</p> <p>The following screening questions will help decide whether a PIA is necessary. Answering 'yes' to any of these questions is an indication that a PIA would be a useful exercise and requires senior management support, at this stage the Head of Data Privacy must be involved.</p>			
<b>Name of Document:</b>		<b>Food Hygiene for Ward and therapy kitchens Infection Prevention and Control</b>	
<b>Completed by:</b>		<b>Antonia Garfoot</b>	
<b>Job title</b>	<b>Senior Infection Prevention and Control Nurse</b>	<b>Date</b>	<b>04/05/18</b>
			<b>Yes / No</b>
1. Will the process described in the document involve the collection of new information about individuals? This is information in excess of what is required to carry out the process described within the document.			<b>No</b>
2. Will the process described in the document compel individuals to provide information about themselves? This is information in excess of what is required to carry out the process described within the document.			<b>No</b>
3. Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information as part of the process described in this document?			<b>No</b>
4. Are you using information about individuals for a purpose it is not currently used for, or in a way it is not currently used?			<b>No</b>
5. Does the process outlined in this document involve the use of new technology which might be perceived as being privacy intrusive? For example, the use of biometrics.			<b>No</b>
6. Will the process outlined in this document result in decisions being made or action taken against individuals in ways which can have a significant impact on them?			<b>No</b>
7. As part of the process outlined in this document, is the information about individuals of a kind particularly likely to raise privacy concerns or expectations? For examples, health records, criminal records or other information that people would consider to be particularly private.			<b>No</b>
8. Will the process require you to contact individuals in ways which they may find intrusive?			<b>no</b>
<p><b>If the answer to any of these questions is 'Yes' please contact the Head of Data Privacy Tel: 0116 2950997 Mobile: 07825 947786</b>  <b>Lpt-dataprivacy@leicspart.secure.nhs.uk</b>  <b>In this case, ratification of a procedural document will not take place until approved by the Head of Data Privacy.</b></p>			
<b>IG Manager approval name:</b>			
<b>Date of approval</b>			

Acknowledgement: Princess Alexandra Hospital NHS Trust