





Public - To be published on the Trust external website

Food handling procedure for units operating delivered frozen meal production methods

HS-0016-001-v3.1

Status: Approved

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Overarching Policy: Food Hygiene Policy



Contents

1	Introduction	4
2	Purpose	4
3	Who this procedure applies to	4
4	Related documents	4
5	Food allergies	5
6	Good hygiene practice	5
6.1	Hand hygiene	5
6.2	Personal hygiene	6
6.3	Uniform (work wear clothing)	6
7	Maintenance of equipment and the kitchen area	7
8	The food handling process	8
8.1	Stage 1 – Purchase, delivery and receipt of food	
8.1.1	Food suppliers	9
8.1.2	Delivery of chilled / frozen products	9
8.1.3	Food delivery area(s)	10
8.1.4	Receipt of food	10
8.2	Stage 2 – Storage of food	
8.2.1	Storage of food in refrigerators and freezers	
8.2.2	How to store other foods	12
8.2.3	Personal food items	12
8.3	Stage 3 – Distribution of food	
8.3.1	Distribution of food to wards / units	
8.4	Stage 4 – Preparation of food	
8.4.1	Food preparation and colour-coding	
8.4.2	Regeneration of frozen food	
8.4.3	Use of probe thermometers	
8.4.4	Use of microwave	
8.5	Stage 5 – Service of food	
8.5.1	Meal time standard work	
8.5.2		
8.5.3	Missed meals	
8.6	Stage 6 – Food waste and cleaning	
8.6.1	Food waste	



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8.6.2	Refuse disposal	16
9	Definitions	17
10	How this procedure will be implemented	17
10.1	Training needs analysis	17
11	How the implementation of this procedure will be monitored	17
12	References	18
13	Document control (external)	19
Apper	ndix 1 - Equality Impact Assessment Screening Form	21
Apper	ndix 2 – Approval checklist	24
Appe	endix 3 – Purchase of food guidelines form	26





Introduction

Good food hygiene practices are essential to ensure people who use our services are protected against the risks of food poisoning.

This procedure supports Our Journey To Change as set out in the Food Hygiene Policy.

Purpose 2

Following this procedure will help the Trust to:

- Ensure the supply, storage and production of food within the Trust complies with current legislation and guidance.
- Ensure compliance with legislation and identified standards helping to protect patients and staff against the risk of food poisoning and hazards linked to contaminated food.

Who this procedure applies to

All Trust staff including students and volunteers who handle or prepare food whether open (unwrapped) or packaged, this includes beverages.

Related documents 4

This procedure needs to be read in conjunction with the following:

- Food Hygiene Policy
- Food Allergen Procedure
- Work Procedures, HACCP and Meal Time Standard Work File
- Business Continuity Service Continuity Plan Hotel Services



The Food Hygiene Policy defines what Tees, Esk and Wear Valleys NHS Foundation Trust does to ensure compliance with food hygiene legislation and good practice guidance which you must read, understand and be trained in before carrying out the procedures described in this document





5 Food allergies

Staff using the Kitchen must follow the information available in the Food Allergen Procedure. They must ensure the following:

- Clinical and Hotel Services staff must complete Allergen Awareness Training as detailed in the Food Hygiene Policy
- Staff have read and signed to confirm understanding of the Food Allergen Procedure in the Food Hygiene Policy
- Details of any foods containing allergens are available as per the Food Allergen Procedure and recorded on an Allergen Matrix
- The Allergen Matrix is available for reference for anyone preparing and consuming the food items

6 Good hygiene practice

6.1 Hand hygiene

You must wash your hands:

- After using the toilet
- Before any food handling duties
- After handling any wrapped or unwrapped food, especially raw meat, poultry or vegetables
- Before and after any cleaning procedure
- After touching ears, nose, mouth and hair
- After any contact with patients or their immediate surroundings
- After handling waste food or refuse
- Between different tasks to avoid cross contamination including allergens



Hands must be washed with liquid soap and in running water. They must be dried thoroughly on disposable paper towels

Wash hand basins must be used for hand washing only, not for washing food or food equipment. Hands must not be washed in food sinks

Hands must be washed between food preparation tasks to avoid cross contamination including allergens





6.2 Personal hygiene

What you must do	What you must not do
✓ Tie back long or untidy hair	x Wear nail varnish or false nails
✓ Remove jewellery except for plain wedding rings	x Eat or drink whilst handling food
✓ Always wear a clean uniform (work wear clothing)	
✓ Wear a green disposable apron during food service	
 ✓ Report any relevant illness to your Supervisor or Manager (see Appendix 4a/b Food Hygiene Policy) 	
✓ If working with a minor abrasion cover it with a blue waterproof dressing from the first aid box	

6.3 Uniform (work wear clothing)

What you must do	What you must not do
✓ Wear clean and low-heeled, enclosed footwear within catering areas	x Wear uniform (work wear clothing) outside of Trust premises
✓ Store outdoor clothing separate from uniform (work wear clothing)	x Wear outdoor clothing in food handling areas



Remember you are serving food to patients who may already be vulnerable, therefore being more at risk from infection than people who are well.

It is your responsibility to make sure that you observe the highest standards of hygiene possible to ensure their safety whilst in our care





Maintenance of equipment and the kitchen area



You must report all defects

What ?	Who to ?
Defect to kitchen area or any equipment contained within it	Estates / PFI / SLA Hotel Services Supervisor Ward Manager
Sight of vermin or pest or evidence of their presence	Catering & Performance Office Hotel Services Supervisor Ward Manager



Faulty items awaiting repair must be taken out of use and labelled accordingly with ward name, date reported and works reference number



8 The food handling process

Stage 1

Purchase / Delivery / Receipt

Stage 2

Storage

Stage 3

Distribution

Stage 4

Preparation

Stage 5

Service of Food

Stage 6

Food Waste and Cleaning

Ratified date: 16 July 2024 Last amended: 16 July 2024



8.1 Stage 1 - Purchase, delivery and receipt of food

8.1.1 Food suppliers

- You should purchase food from suppliers approved by Procurement and NHS Supply Chain or appointed NHS Suppliers
- A supplier not Procurement or NHS Supply chain approved must be a reputable retailer for example a local supermarket with a food standard agency hygiene rating of 4 or above see www.food.gov.uk/ratings
- You must complete the 'Purchase of Food Guidelines Form' (See Appendix 3) for each purchase made and keep for 3 months
- All supplier complaints should be reported to the Hotel Services Supervisor who must use the company specific complaints documentation and procedure

8.1.2 Delivery of chilled / frozen products

- Storage compartments on delivery vehicles must be clean and undamaged
- The vehicle must be used for transporting food only
- Food must be delivered in sealed containers within a temperature controlled vehicle
- The vehicle log must be present and show no variation above +5°C for chilled food, or for frozen food above -18°C
- The delivery driver must observe the Trust's personal hygiene rules
- The coding on the food must show a 'production date' and should be used within the manufacturer expiry date



All information must be recorded on the 'Delivery Acceptance Sheet' found in the Hotel Services Standard Work File

If any requirements stated above are not satisfactory you <u>must not accept</u> the delivery of food

You must inform the Hotel Services Supervisor immediately of non-compliances

You must transfer accepted food to designated chilled/freezer storage area immediately





8.1.3 Food delivery area(s)

W	hat you must do	What you must not do
✓	Keep designated delivery areas clean, free of waste material and any risk of	x Leave food open to contamination
	infestation or contamination	x Leave food unattended or place lower than 18 inches from the ground unless
✓	Schedule deliveries to ensure a trained person is available to receive the goods	the goods are adequately protected against contamination
✓	Following delivery acceptance criteria in Standard Work File	

8.1.4 Receipt of food



Three high risk products must be checked on each delivery – standard Delivery Acceptance paperwork to be used

What you must do	What you must not do
✓ Check foods received against the purchase order for quantity	x Not accept short shelf life or out of date food
✓ Check and record Chilled and Frozen food temperatures on the 'Delivery Acceptance Form'	x Not accept products with broken packaging or containers as the food may be contaminated, damaged and possibly pest infested

8.2 Stage 2 – Storage of food

8.2.1 Storage of food in refrigerators and freezers



Chilled and frozen food items must be stored immediately after receipt To prevent cross contamination food should be adequately covered when stored



Tees, Esk and Wear Valleys NHS Foundation Trust

Refrigerator	Freezer
General refrigerators must be capable of operating below +5°C	Frozen food must be stored at -18°C or below. The manufacturers advice on length of storage must be followed
Must be sited away from any heat source - including sunlight - in a well-ventilated area, so all surfaces and surrounding area can be adequately cleaned. Good ventilation ensures efficient running	Must be sited away from any heat source – including sunlight – in a well-ventilated area, so all surfaces and surrounding area can be adequately cleaned. Good ventilation ensures efficient running
The probe of a visible temperature gauge must be situated in the warmest part of the refrigerator for the most effective monitoring The temperature must be checked twice during a 24-hour period once am and once pm, with a	A recorded check of the operating temperature of the freezer must be taken daily by the relevant staff plus an additional air temperature also taken and recorded • An air probe and digital display reading must
 minimum of 6 hours between readings plus an air temperature daily An air probe and digital display reading must be used 	 Any reading higher than -15°C or between -15°C and -18°C on 3 occasions must be reported to the Estates Department for
 Any readings above +5°C must be reported to the Estates Department for remedial action and inform the Hotel Service Supervisor 	reported to the Estates Department for remedial action, and inform the Hotel Services Supervisor
You must check the temperature of stored foods in the event of a refrigerator breakdown	You must check the temperature of stored foods in the event of a freezer breakdown
If the food temperature has not exceeded +5°C the food must be placed into an alternative refrigerator	If the food temperature has not exceeded -15°C the food must be placed into an alternative freezer
Food between +5°C to +8°C should be transferred to an alternative refrigerator and used as soon as possible	Food between -14°C to +5°C should be discarded / consumed / cooked depending on product Food above +8°C must be destroyed
Food above +8°C must be destroyed	l cou above to o made so accurações
Overstocking must be avoided, in order to ensure a good circulation of air never place items directly in front of the air circulation unit	Overstocking must be avoided, in order to ensure a good circulation of air never place items directly in front of the air circulation unit
All items taken from their original packaging, including open cans, must be covered, and labelled with day dots identifying the date for disposal	All items should be appropriately packaged to prevent exposure to frost and 'freezer burn' and labelled with day dots identifying contents, date frozen and use by date
Food stocks must be rotated following the basic rule of 'First in-First Out'	Food stocks must be rotated following the basic rule of 'First in-First Out'
Food must be used with reference to the 'use by date' and no food used after this date	Food must be used with reference to the 'expiry date' and no food used after this date
All outer packaging of food must be removed, away from food preparation areas	All outer packaging of food must be removed, away from food preparation areas
Spot clean daily Deep clean on a weekly basis	Spot clean daily Deep clean on a weekly basis Freezers without a self-defrost must be defrosted weekly prior to cleaning



8.2.2 How to store other foods

Food Item	Storage	Other Guidelines
Ice cream and ice cream products	-18°C in freezer	Do not exceed manufacturer expiry date
Cooked meat	+1°C to +5°C in refrigerator	Separate from raw products
Milk, butter, cheese, yoghurts and other dairy products	+1°C to +5°C in refrigerator	Keep separate from raw products
Eggs	+1°C to +5°C in refrigerator	Check date codesCracked or dirty shell eggs should be discarded
Fresh fruit except bananas	+1°C to +5°C in refrigerator	 Remove external packaging and place in ventilated container Bananas to be stored at room temperature to avoid 'chill injury'
Vegetables and Salad items	+1°C to +5°C in refrigerator	Remove external packaging and place in ventilated container
Bread and bread products	Cool well-ventilated store	Check for mould
Canned goods	Check labelling on product for specific details	 Rotate stock following manufacturer dates Discard any cans which are blown, dented, rusty or have seam damage
Dry goods (flour and cereal)	Room temperature Damp free After opening store in impervious container with tight fitting lid	 Check regularly for signs of contamination and infestation Containers must be cleaned and dried each time they are emptied

8.2.3 Personal food items



Staff must not store personal food items for their own consumption in the ward regen kitchen

Patient's personal food items for their own consumption should be stored in the ADL Kitchen





8.3 Stage 3 – Distribution of food

8.3.1 Distribution of food to wards / units

Who	What
Housekeeper / Porter / Internal Courier	Check food product is in date and stored in relevant areas

8.4 Stage 4 – Preparation of food



Colour coding of preparation boards must be adopted as standard

The Trust's food preparation colour coding is:

Green - Salad and fruit items

White - Sandwiches and dairy produce

8.4.1 Food preparation and colour-coding

- You must use clean utensils at all times
- You must use clean preparation boards at all times
- Colour-coded preparation boards should be used for purpose of preparing food; these must be thoroughly sanitized and dried between each use
- Preparation boards must be regularly checked for scoring and damage and replaced as necessary
- You must keep food covered until it is needed and in the correct storage condition
- You must wash fresh fruit and salad items in running cold water before use



8.4.2 Regeneration of frozen food

- You must follow regeneration instructions closely
- You must check the centre food temperature is +75°C or above, after regeneration using a disinfected probe. The probe must be disinfected between each product using the appropriate wipe
- You must record the centre food temperatures on the 'Ward Menu Order Temperature Sheet'
- If the centre food temperature is +74°C or below the food must be returned to the regeneration trolley for an additional period of time for regeneration to achieve a centre food temperature of +75°C or above. You must record the centre food temperatures on the 'Ward Menu Order Temperature Sheet'
- You must serve regenerated food at +63°C or above
- You must discard all unserved regenerated food
- You must never re-heat unserved regenerated food

8.4.3 Use of probe thermometers

- You must always keep the probe clean and disinfected, wiping the probe before probing each item of food using the appropriate wipe
- You must check the centre temperature of the food
- You must allow time for the probe readout to stabilise before the temperature is recorded
- You must clean the probe after use and store in a clean draw or washable container, when not is use to prevent unnecessary contamination and damage



The probe thermometer must be checked monthly to show they are working within an acceptable tolerance and this will be carried out by the Hotel Services Supervisor or site clinical staff. Reference probes are calibrated annually by the Facilities Site Manager or Contracting & Performance Officer





8.4.4 Use of microwave

What you must do	What you must not do
✓ Follow the manufacturer instructions on all food items	Never use metal or foil containersNever use metal utensils inside
✓ Check the wattage of the microwave i.e. 700kwh, 850kwh, 900kwh etc.	the microwave
✓ Treat manufacturing re-heating times as a guideline	
✓ Use a deep-sided bowl or jug for liquids, non-metal	
✓ Pierce the film, if the food is in a container, to allow excess steam to escape	
✓ Where possible stir food halfway through the heating time and again on completion	
✓ Always take care when removing liquids from the microwave, as there is often little or no visible sign that a liquid is on the point of boiling over. Always use oven gloves	
✓ Always allow food to 'stand' at the end of the heating time	
✓ Food must achieve a centre temperature of +75°C to destroy bacteria	
 ✓ You must serve microwave food at +63°C or above 	
✓ Always leave the microwave clean after use	





8.5 Stage 5 – Service of food

8.5.1 Meal time standard work

Please refer to the Meal Time Standard Work guidelines in Ward / Unit Kitchen.

8.5.2 Unserved meals



If available, offer service users the opportunity of a further portion of food

At the end of the meal service record unserved food waste on the 'Ward Menu Order Temperature Sheet'

Following recording of waste discard all unserved regenerated food

Never allow patients to store chilled ready to eat food in their rooms for consumption at a later time as this will increase the risk of food poisoning

8.5.3 Missed meals

If a patient is not on the Ward / Unit at mealtime a missed meal menu is available within the Work Procedures, HACCP and Meal Time Standard Work (Section 1) file which offers a range of hot and cold items

8.6 Stage 6 – Food waste and cleaning

8.6.1 Food waste

- You must dispose of food waste at ward level
- You must use a waste disposal unit

8.6.2 Refuse disposal

What you must do	What you must not do
✓ Place refuse in bags, seal and remove at regular intervals to an outside collection point	 Allow refuse to accumulate in the kitchen Never leave refuse overnight in the kitchen





9 **Definitions**

Term	Definition
HACCP	Hazard Analysis Critical Control Point
PFI	Private Finance Initiative
SLA	Service Level Agreement

10 How this procedure will be implemented

- This procedure will be published on the Trust's intranet and external website
- Line managers will disseminate this procedure to all Trust employees through a line management briefing

Training needs analysis 10.1

Staff/Professional Group	Type of Training	Duration	Frequency of Training
	Section 4.3 Food Hygiene Policy – training for food handlers	As required	As required

11 How the implementation of this procedure will be monitored

Numbe	Auditable Standard/Key Performance Indicators	Frequency/Method/ Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	Kitchen cleanliness audit – measures the physical cleanliness		Infection Prevention Control Committee performance board on a quarterly basis
2	Kitchen catering standards audit –	Monthly monitoring by Head of Cleaning	Infection Prevention Control Committee performance board on a quarterly basis





measures the food safety elements	

12 References

Food Safety and Hygiene (England) Regulations 2013
Food Law Code of Practice
(EC) 852/2004 Hygiene of Food stuffs





13 Document control (external)

To be recorded on the policy register by Policy Coordinator

Required information type	Information
Date of approval	16 July 2024
Next review date	16 July 2027
This document replaces	Food handling procedure for units operating delivered frozen meal production methods HS-0016-001-v3
This document was approved by	HSSFW group (virtual)
This document was approved	23 May 2024
This document was approved by	Infection Prevention & Control Committee
This document was approved	16 July 2024
An equality analysis was completed on this policy on	9 May 2024
Document type	Public
FOI Clause (Private documents only)	n/a

Change record

Version	Date	Amendment details	Status
3.1	16 July 2024	Transferred on to new procedure template Clarifications: 8.1.1 Changes - amalgamated two bullet points into one 8.2.3 Added clarification re storage of patient food items 8.3.1 Added internal couriers	Approved
		 8.4.2 and 8.5.2 Amended record sheet name to 'Ward Menu Order Temperature Sheet' 10.1 Training needs analysis 11 How the implementation of this procedure will be monitored 	









Appendix 1 - Equality Impact Assessment Screening Form

Please note: The <u>Equality Impact Assessment Policy</u> and <u>Equality Impact Assessment</u> <u>Guidance</u> can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	Estates and Facilities
Title	Food handling procedure for units operating delivered frozen meal production methods HS-0016-001-v3.1
Туре	Procedure/guidance
Geographical area covered	Trust wide
Aims and objectives	Ensure compliance with food hygiene legislation and good practice guidance
Start date of Equality Analysis Screening	May 2024
End date of Equality Analysis Screening	09 May 2024



Section 2	Impacts
Who does the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	Service users, staff, visitors / members of the public
Will the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?	 Race (including Gypsy and Traveller) NO Disability (includes physical, learning, mental health, sensory and medical disabilities) NO Sex (Men and women) NO Gender reassignment (Transgender and gender identity) NO Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO Age (includes, young people, older people – people of all ages) NO Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO Pregnancy and Maternity (includes pregnancy, women / people who are breastfeeding, women / people accessing perinatal services, women / people on maternity leave) NO Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) NO Human Rights Implications NO (Human Rights - easy read)
Describe any negative impacts / Human Rights Implications	n/a
Describe any positive impacts / Human Rights Implications	The implementation of this policy and associated procedures will ensure the trust comply with the legal obligation to ensure safe food handling and to supply information to consumers on the allergens that are found in the food we provide. This includes all food outlets in addition to our inpatient services Requests relating to cultural or religious requirements by service users on inpatient wards will be managed at ward level by clinical staff. Facilities will always attempt to meet the requests of services users





Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	See references section
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Yes
If you answered Yes above, describe the engagement and involvement that has taken place	The Food Hygiene Policy and associated procedures have been developed with support from Dietitians
If you answered No above, describe future plans that you may have to engage and involve people from different groups	n/a

Section 4	Training needs
As part of this equality impact assessment have any training needs/service needs been identified?	No *Delete as appropriate [this is only for training identified as part of the equality impact assessment]
Describe any training needs for Trust staff	n/a
Describe any training needs for patients	n/a
Describe any training needs for contractors or other outside agencies	n/a

Check the information you have provided and ensure additional evidence can be provided if asked.





Appendix 2 – Approval checklist

To be completed by lead and attached to any document which guides practice when submitted to the appropriate committee/group for consideration and approval.

Title of document being reviewed:	Yes / No / Not applicable	Comments
1. Title		
Is the title clear and unambiguous?	Yes	
Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2. Rationale		
Are reasons for development of the document stated?	Yes	
3. Development Process		
Are people involved in the development identified?	Yes	
Has relevant expertise has been sought/used?	Yes	
Is there evidence of consultation with stakeholders and users?	Yes	V3 had full trust consultation. Minor clarifications at v3.1 only – no consultation required
Have any related documents or documents that are impacted by this change been identified and updated?	Yes	Food Hygiene Policy and associated Procedures
4. Content		
Is the objective of the document clear?	Yes	
Is the target population clear and unambiguous?	Yes	
Are the intended outcomes described?	Yes	
Are the statements clear and unambiguous?	Yes	
5. Evidence Base		
Is the type of evidence to support the document identified explicitly?	Yes	
Are key references cited?	Yes	



Are supporting documents referenced?	Yes	
6. Training		
Have training needs been considered?	Yes	
Are training needs included in the document?	Yes	
7. Implementation and monitoring		
Does the document identify how it will be implemented and monitored?	Yes	
8. Equality analysis		
Has an equality analysis been completed for the document?	Yes	
Have Equality and Diversity reviewed and approved the equality analysis?	Yes	AH – 9 May 2024
9. Approval		
Does the document identify which committee/group will approve it?	Yes	Health, Safety, Security & Fire Group
10. Publication		
Has the policy been reviewed for harm?	Yes	
Does the document identify whether it is private or public?	Yes	
If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	n/a	
11. Accessibility (See intranet accessibility page for more information)		
Have you run the Microsoft Word Accessibility Checker? (Under the review tab, 'check accessibility'. You must remove all errors)	Yes	
Do all pictures and tables have meaningful alternative text?	Yes	
Do all hyperlinks have a meaningful description? (do not use something generic like 'click here')	n/a	





Appendix 3 – Purchase of food guidelines form

Any person purchasing food for patient consumption must comply with the Trust's Policy and Procedures.

If units wish to purchase from supermarkets and local shops, take-away restaurants or to take patients to restaurants for a meal as part of their treatment programme they are required to complete the following form for each purchase made or ensure that receipts contain the name of the shop or restaurant and date of purchase are attached to this form. This will ensure we safeguard the patient and Trust in the event of a food poisoning outbreak. It is recommended that where available the rating of the establishment is checked with the Food Standards Agency www.food.gov.uk/ratings and only those achieving 4 rating or above are used.

PURCHASE OF FOOD

(from shops, restaurants etc)

Please complete and sign the following:

Food purchased:	
Date:	
Signed:	

This blank form should be photocopied on the unit and the completed copies filed by the Ward/Unit Manager for inspection if required

The form should be kept for three months following the consumption of the food