

## FOOD ALLERGEN POLICY

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Applies to:	All Trust staff

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## DOCUMENT CONTROL

<b>Reference</b> DD/May15/FAP	<b>Version</b> V2	<b>Status</b> Final	<b>Author</b> Facilities Manager
<b>Amendments</b> Very minor strengthening of the instructions			
<b>Document objectives:</b> The aim of this policy is to provide instructions on storage, handling and cooking of food in order to prevent serving foods containing allergens to patients and make staff or visitors aware of allergen present in foods and drinks that the Trust serves or makes available for sale.			
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## **1. INTRODUCTION**

- 1.1 All food and drinks served to patients, visitors and staff in the hospital should be allergenically safe and not compromise health in any way.
- 1.2 The aim of this policy is to provide instructions on storage, handling, cooking and service of food, and be able to provide information on the 14 allergens contained in all food and drinks served or sold to patients, staff or visitors.
- 1.3 Negligence can result in prosecution by the Trading Standards Officers (TSO's) not only of Somerset Partnership NHS Foundation Trust but of individual Somerset Partnership NHS Foundation Trust employees. Such action may lead to fines.

## **2. PURPOSE AND RATIONALE**

- 2.1 The aim of this policy is to provide instructions on training, storage, handling and cooking of food in order to prevent incidents outlined in 1.2 above. The EU Food Information for Consumers Regulations 1169/2011 has come into force on the 13 December 2014. The regulation means that all food business including hospitals must provide allergy information surrounding any food or drinks served or sold.
- 2.2 The Trust must be able to provide information to patients, staff and visitors about the presence or use of any of 14 specified allergens as ingredients in any of the items served to patients, staff and visitors upon request.
- 2.3 The local council Environmental Health Officer (EHO) and Trading Standards Officer (TSO) are empowered to ensure adherence to the regulations.

## **3. DUTIES AND RESPONSIBILITIES**

- 3.1 The Trust Board via the Chief Executive has overall responsibility and will delegate such responsibilities to the management team.
- 3.2 Service Managers, Matrons and Hotel Services Supervisors are responsible for the day-to-day management of their site(s). They will ensure the correct procedures are followed and that all staff are appropriately trained.
- 3.3 All staff are responsible for following the correct practices and procedures. They are responsible for ensuring their training is up to date and they are accountable for their actions.
- 3.4 Facilities Manager and Facilities Leads are to ensure that Somerset Partnership NHS Foundation Trust HACCP (Hazard Analysis Critical Control Points) plan is kept up-to-date and any changes are communicated to all relevant staff. All procedure and practices relating to catering must comply with the EU Food Information for Consumers Regulations 1169/2011.
- 3.5 The Facilities Manager and the Facilities Leads will carry out six monthly inspections of the Trust kitchens and will make and implement any agreed recommendations for improvement.

3.6 **The Facilities Manager and Facilities Leads** will lead on the implementation of the recommendations for improvement arising from the Environmental Health Inspections.

Provide advice and work in partnership with Hotel Services staff ensuring that standard recipes are followed and the Menu/Allergen Best Practice Guide is adhered to.

Provide advice and work in partnership with the training department to ensure Primary Food Handlers complete the FSA Allergen training course.

Lead and develop the database/allergen folder of information of allergen present in approved product list from approved suppliers and review and maintain the data base/allergen folder as changes occur.

Ensure the information is accessible to any person involved in preparing, serving, advising or auditing the service.

Review any Specialist Menus such as Gluten Free, Free From and Allergen Free and provide professional advice on further allergies as required.

Provide front of house notice to advise the consumer surrounding allergens information in food and where to seek further advice.

Provide advice for vending labels around food for food products produced on site.

3.14 **Matrons and Departmental Managers** should record which staff are categorised as primary and secondary food handlers and ensure that they receive training as specified with this policy. The departmental manager must ensure that all food and drinks provided within their department complies with the provisions of this policy.

3.14 Ensure that patients with Food Allergies to any of the stated 14 Food Allergens are identified and the facts recorded so that they are available to all Healthcare staff involved in serving food and drinks to patients.

3.15 **All Primary Food Handlers**

By the nature of their work, primary food handlers are involved with food during its preparation, cooking and service. They must ensure that all the general principles and applications within this policy are adhered to at all times.

Follow the local Food Safety Management System Hazard Analysis Critical Control Point (HACCP) for safe storage of ingredients and preparation.

Adhere to the approved buying list of suppliers and products; do not deviate from any standard recipes.

Identify the allergens of any substituted food items received by recording details on the Allergen log using information from product invoices or delivery notes.

Any permanent changes in allergens must be conveyed to Nursing staff, Facilities Manager and Facilities Leads and the Food Hygiene Trainer.

### 3.16 **Food Service Staff (Nursing Staff, Service Assistants, Assistant Housekeepers)**

Give correct and accurate information, staff must not guess or make assumptions when serving meals, or snacks and drinks to prevent cross contamination or the wrong meals being served. Use the Apetito Nutradata base when required.

Allergen information can be gathered from the Allergen folder or seek further advice from Hotel Services staff. Please note the information in the Allergen folder is correct at time of printing – the label or lid will be 100% accurate.

Allergenic information requested by the patient or family member **must not** be given verbally but the proper guidance shown to them in the form of the Allergen Folder or label/lid etc.

### 3.17 **Nursing**

Implement the process of alerting the Hotel Services staff and Service Assistants as soon as possible when a patient with a food allergy is being admitted.

Implement a process of alerting any beverage service staff as soon as possible when a patient with a food allergy is being admitted.

Identify on admission through the nursing assessment any allergies that a patient has, and ensure that this is documented within the individuals care plan and ensure the Hotel Services staff and Service Assistants are informed.

Make patients and visitors aware of the risks of food brought into the hospital, and the fact that this **must not be shared** with other patients.

Seek the support of someone with the correct knowledge and/or know where to access this information if required.

Communicate with the Patient, Carers, Ward staff, Caterers and Dietitians to ensure that Allergen safe food for patients is provided, while taking care that the individuals' nutritional needs continue to be met.

Ensure you wash your hands prior to service and re-wash contaminated. Wear a clean green apron before you start serving food and drink, change if contaminated.

Manage cross contamination risks by using clean separate serving utensils and oven cloths.

### 3.18 **Volunteers**

The volunteers line manager must ensure training surrounding food allergens is provided for volunteers involved in food handling and service.

Communicate immediately with clinical staff when patients or carers say the patient has an allergy.

### 3.19 **Patients and Families**

Inform the patient's care team at the point of admission of any known food allergies.

If they cannot do so, or lack capacity their family or friends should be consulted as part of care planning.

Have an awareness of the food allergen and other risks of food brought into the hospital by patients or visitors.

The onus is on the patient family member to ask about allergens present in food.

### 3.20 **Environmental Health Officers (EHO) and Trading Standards Officers (TSO)**

EHO's and TSO's are the enforcement officers for this legislation. Hospitals will be visited and any member of the team can be asked about their role and responsibility for the food.

### 3.21 **Dietetics**

Provide a Dietitian or appropriate member of the dietetic team to all food service locations as a resource for catering and nursing staff.

Assist in providing the correct information for consumers and that this information is kept up to date, however overall responsibility lies with the Facilities Manager.

Provide advice for food allergy patients to ensure food restrictions related to allergies do not harm the patients nutritionally, and that substituted foods are nutritionally adequate and sufficiently varied.

Update the Nutrition Policy to reflect the regulations surrounding the management of allergens.

## **4. DEFINITIONS**

### **4.1 Allergens**

The EU Food Information to Consumers regulation lists 14 Allergens in the legislation namely:

- Cereals containing gluten
  - Wheat
  - Oats
  - Rye
  - Barley
  - Spelt
  - Khorasan wheat / Kamut
- Crustaceans (eg. prawns, crabs, lobster)
- Eggs
- Fish
- Peanuts
- Soya
- Milk (including lactose)
- Nuts
  - Almonds
  - Hazelnuts
  - Walnuts
  - Cashews
  - Pecan
  - Brazil nuts
  - Pistachio
  - Macadamia
- Celery
- Mustard
- Sesame seeds
- Sulphur dioxide (where added at >10mg/kg or 10ml/L in the finished product)
- Lupin
- Molluscs (e.g. clams, squid, oysters, scallops)

## **5. TRAINING**

### **5.1 Primary Food Handlers**

A primary food handler is a person who is directly involved in the process of preparing and handling raw and cooked items, or who is responsible for ensuring food is safe to eat.

Within Somerset Partnership NHS Foundation Trust, the following personnel are examples of who would be categorised a primary food handlers :-

- Hotel Services Supervisor
- Housekeepers
- Support Workers
- All Catering Staff



- Service Assistants
- OT's working in Mental Health and others supervising clients undertaking cooking.

All primary food handlers must pass the Food Standards Agency Allergen training. Food Allergen training is also contained within the Level 2 Award in Food Safety and Hygiene. All primary food handlers must gain a Level 2 Award in Food Safety and Hygiene Certificate. In year 1 – Level 2. In year 2 – Online Refresher. In year 3 – Online Refresher. Year 4 – Level 2

Undertake the Allergen awareness training from the Food Standards Agency (FSA) webpage as a one off. Thereafter allergen information is included in all Level 2 Training Courses.

## 5.2 **Secondary Food Handlers**

A secondary food handler is a person who is involved in the process of transporting prepared food and or serving prepared food and drinks.

All secondary food handlers must undertake a Secondary Food Handling course every 3 years which will include Allergen training.

Within Somerset Partnership NHS Foundation Trust, the following personnel are examples of who would be categorised a secondary food handler:

- Assistant Housekeepers
- Porters
- Ward Based HCA
- Nursing Staff
- OT/Community Staff (Where handling food is part of the role)
- OT's in Mental Health (Working one to one with patients)
- Support Workers in Mental Health

## 5.3 **Facilities Manager and Leads**

Facilities Manager and the Facilities Leads must pass the Food Standards Agency Allergen training.

# 6. **APPLICATIONS OF GENERAL PRINCIPLES**

## 6.1 **Procurement and Purchasing of Food**

Food will be purchased from suppliers who provide product specifications including the full ingredient lists that include the allergens. Alternatively the information on the food labels will also provide information surrounding the allergens.

Any substituted or alternative item must be recorded on the Allergen Ingredient Log - Appendix A

Do not deviate from order sheets – product specification sheets will be available for all additional items.

## 6.2 **Safe Storage and Preventing Cross Contamination**

Once the allergen contents of all ingredients are known and logged, safe storage practices must be used to avoid the cross contamination of foodstuffs: for example sugar could be contaminated by other allergens in the environment if stored near wheat flour and milk powder. Food items need to be kept in sealed containers and accessed using clean utensils to minimise the risk of cross contamination. Where possible store allergenic ingredients e.g. nuts, peanuts, sesame on bottom shelves to prevent them falling into other foods.

The safe storage of ingredients should be included as part of the food safety management system, or Hazard Analysis Critical Control Points (HACCP) and staff trained accordingly.

Separate toaster to be purchased for gluten free bread (toast) only, ensures storage and usage is appropriate to avoid cross contamination.

## 6.3 **Protocols**

This refers to the HACCP and safe storage procedure and will be audited on a 6 monthly basis.

## 6.4 **Sharing the Allergen Information with Consumers**

Consumers, (including patients) must be advised that the information is readily available upon request.

## 6.5 **Advising the Customer, Patients and Others**

For patients – a statement on all menus ‘Please Note: You must inform ward staff if you know you have an allergy’. You must inform ward staff if you know you have an allergy. Poster displayed at ward level.

When meals are sold to staff and visitors including vending a poster will be displayed stating ‘Further information regarding food allergens is available on request’.

## 6.6 **Supplying the Information**

The Allergen information must be in a form accessible to the staff member to enable them to provide the information to the consumer accurately and consistently. It must be clear and conspicuous, not hidden away, easily visible, and legible.

The Trust uses the following methods:-

- By verbal communication from an appropriate member of staff.
- Poster that states the information is available from staff upon request.
- Allergen Information Folder
- Labels on pre-packed food and drink.
- On internal or external websites such as Apetito Nutradata
- Vending machines labels produced at sites with vending operation

## 6.7 **Food Brought in for Patients by Visitors**

The onus is on the visitor and patient to make Trust staff aware of allergens in food.

Food for special dietary requirements will be provided by Somerset Partnership NHS Foundation Trust Catering Department. Supplementary food can be brought in for patients provided that it complies with this policy, and the Food Hygiene Policy.

## 6.8 **Meetings, Buffets, Functions**

All food provided for meetings, buffets and functions must comply with this policy, and the Food Hygiene Policy.

## 6.9 **Staff Food**

Food for personal consumption should be stored in a separate fridge to Somerset Partnership NHS Foundation Trust food. All such food should be named and dated. Food should not be stored in the staff fridge for more than 24 hours. Any out of date food will be disposed of.

## 6.10 **Patient Take Away Meals (Mental Health Sites Only)**

Take Away Meals brought into the ward by patients. It can be assumed that the onus is on the patient to ask the Take Away Establishment about allergens in the food.

Take Away Meals brought into the wards by staff as part of rehabilitation must be assessed by the Healthcare staff supervising this activity and the onus to ask about allergens is on the Healthcare staff supervising.

## 7. **AUDITS**

### 7.1 **Main and Ward Kitchens**

Both kitchens must be inspected at six monthly intervals by the following team; Facilities Manager and or Facilities Lead for that location, and a member of the Catering team to ensure food is being prepared in accordance with the Allergen Regulations. The Inspection sheet in Appendix B will be used and

any results/actions will be reported back to the Hotel Services Implementation Group and the Nutrition Group responsible to the Estates and Facilities Governance Group.

An external inspection will be completed by the local EHO or TSO at a period determined by the standard found at the previous inspection. All inspection reports are to be held locally and centrally by Estates & Facilities. The Facilities Manager and Facilities Leads will be responsible for ensuring any remedial actions are completed.

## **8. LIMITATIONS**

This Policy applies to all staff employed by Somerset Partnership NHS Foundation Trust including volunteers.

## **9. TRAINING REQUIREMENTS**

The Trust will work towards all staff being appropriately trained in line with Section 5 of this policy.

## **10. MONITORING COMPLIANCE AND EFFECTIVENESS**

10.1 This policy will be posted on the internet for all staff and will be announced through the briefing system. Staff with specific duties surrounding food preparation and service will be briefed surrounding the contents of the policy at local induction.

10.2 Monitoring and evaluation will be in accordance with the Somerset Partnership NHS Foundation Trust policy and catering procedures in the HACCP document. Details of monitoring referred to as inspection are presented in section 7 of this policy.

10.3 All shortfalls identified will be recorded in the Action Plan part of Appendix B and managed to completion by the Facilities Manager or Facilities Leads in conjunction Ward Managers/Matrons and local caterers.

10.4 All results will be monitored at the Hotel Services Implementation Group responsible to the Estates & Facilities Governance Group.

10.5 All learning from audit will be shared within the Hotel Services Implementation Group.

## **11. REFERENCES, ACKNOWLEDGEMENTS AND ASSOCIATED DOCUMENTS**

### **11.1 References**

Food Safety Act 1990  
Food Hygiene Regulations (England) 2006  
Management of Food Hygiene and Food Services in the NHS HSG (96)

### **11.2 Cross reference to other procedural documents**

Development & Management of Organisation-wide Procedural Documents  
Policy and Guidance

Learning Development and Mandatory Training Policy  
Risk Management Policy and Procedure  
Staff Mandatory Training Matrix (Training Needs Analysis)  
Training Prospectus  
Serious Incident Requiring Investigation (SIRI) Policy  
Hazard Analysis Critical Control Points  
Allergen Toolkit for Healthcare Catering BDA  
Trust Food Hygiene Policy

- 11.3 All current policies and procedures are accessible in the policy section of the public website (on the home page, click on 'Policies and Procedures'). Trust Guidance is accessible to staff on the Trust Intranet.

## **12. APPENDICES**

For the avoidance of any doubt the appendices in this policy are to constitute part of the body of this policy and shall be treated as such. This should include any relevant Clinical Audit Standards.

**ALLERGEN - CHANGE OF PRODUCT INGREDIENT LOG**

Site:.....

Date	Product/Product Code	Company/Brand	Allergens	Pack Size	Comments	Signature/Name

Review Jan 18

**This Log must be completed every time a product is substituted from our standard order sheets.  
 This must be completed at time of delivery**

**ALLERGEN AUDIT****Suggested questions for officers to ask when auditing allergen control measure during an inspection of catering premises**

Name and address of premises.....

Name of inspector.....Date.....

	Yes (give evidence)	No	Not applicable
Do staff know what food allergy is and what the risks are? To find out, ask general questions like, 'which foods are most commonly associated with allergy?' and, 'what symptoms might occur if someone were to have an adverse reaction?'			
Which Foods are most commonly associated with allergies?			
Have staff completed FSA training/refresher training?			
Are contents of deliveries checked for allergenic ingredients?			
Are deliveries checked for substituted items and log sheet completed?			
Are open allergenic items stored below other items?			
Are open allergenic items stored in sealed labelled appropriate containers?			
Are all items of stock purchased from issued stock sheets?			
Do any additional items have a product spec sheet?			
Is Food Allergen Poster displayed in ward area?			
Is Food Allergen Poster displayed next to vending machine?			
Is '14 Allergen Poster' displayed in kitchen?			
Check Vending labels include allergens and are clear to view			
Is Menu Allergen Best Practice Guide being adhered to?			
Is Patient Meal Service Guide being adhered to?			
Is Allergen Folder available for reference?			