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THIS POLICY IS FOR:	Staff including Agency Workers (temporary workers), Commissioners and Service Users

FOOD HYGIENE

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FOOD HYGIENE POLICY AND PROCEDURE

1. PURPOSE

- 1.1 The Service User's food is stored, cooked, and served to ensure that food handling and hygiene requirements are met where food preparation is part of the agreed Care Plan.
- 1.2 The Service User is well nourished, has the food that they enjoy and that meets their needs.
- 1.3 To ensure that Nursing Direct consistently meets the Care Quality Commission's (CQC) Key Lines of Enquiry (Safe, Effective, Caring, Responsive and Well-led) and the associated Quality Statements, in line with regulatory requirements.
- 1.4 To meet the legal requirements of the regulated activities that Nursing Direct is registered to provide:
 - Regulation (EC) No.852/2004 on the hygiene of foodstuffs
 - The Care Act 2014
 - Food Safety Act 1990
 - The Food Safety and Hygiene (England) Regulations 2013
 - The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
 - Health and Safety at Work etc. Act 1974

2. SCOPE

- 2.1 The following roles may be affected by this policy:
 - Staff including Agency Workers
- 2.2 The following Service Users may be affected by this policy:
 - Service Users
- 2.3 The following stakeholders may be affected by this policy:
 - Family
 - Local Authority/ICB
 - Commissioners

3. OBJECTIVES

- 3.1 To protect Service Users from food-related illnesses including, but not limited to, food allergies and intolerances.

4. POLICY

- 4.1 Nursing Direct will seek guidance from Local Authorities, ICB's, and other service users to determine whether Local Authorities, ICB's and other service users requires Nursing Direct to register as a Food Business.
- 4.2 Nursing Direct will ensure that the Staff including Agency Worker has the relevant training in Food Hygiene and that this training reflects the requirements of their role. This includes:
 - Nutrition and hydration
 - Hand hygiene
 - Appropriate and safe food storage
 - Health needs such as Service Users with diabetes or dysphagia
- 4.3 Staff including Agency Worker clothing will be protected in order to minimise the risk of cross-contamination between care and food preparation. Appropriate Personal Protective Equipment (PPE) will be available.
- 4.4 Nursing Direct recognises that, when working in a Service User's home, the staff including Agency Worker must respect a Service User's right to live the life they choose, and this includes the right to take risks. Where Nursing Direct is responsible for shopping and preparing or storing food as part of the agreed Care Plan, Nursing Direct must ensure that the Agency Worker follows best practice to ensure that the Service User is safe and well.

Nursing Direct understands that this may, from time to time, present as a challenge and Nursing Direct will ensure that Service Users understand the reasons for ensuring good food handling and hygiene is practiced. Where a Service User lacks capacity, a best interest decision will be taken in line with the Mental Capacity Act.

Nursing Direct understands that this may, from time to time, present as a challenge in terms of suitable space available to prepare food. Nursing Direct will ensure that a risk assessment for this is undertaken and that an agreement regarding a safe space for food preparation is agreed with the Service User.

5. PROCEDURE

5.1 Food Shopping

If Staff including Agency Workers shop for Service Users as part of the agreed plan of care, the following principles of good food safety apply:

- Ensure that all packets of food are sealed and tins are not dented
- To purchase any frozen items last
- When packing the shopping into bags, group related items together
- Cold and frozen foods (be sure to keep cooked and raw meats separately)
- Vegetables and fruits
- Frozen foods
- Food is to be brought back as soon as possible to the Service User's home and put away immediately. Chilled food must be placed in the fridge and frozen food in the freezer first.

If the staff including Agency Worker is receiving a food delivery on behalf of the service user, they must liaise with the service user regarding substitute items and check the quality of the best before and use by dates.

5.2 Food Storage

- Food which is unsafe for consumption (eating) will not be prepared by staff including Agency Workers and the Service User will be advised that it must be thrown away. Care needs to be taken with 'Sell By' and 'Use By' dates (there are also 'Best Before' dates)
- Checks may not have been made on how efficient a Service User's fridge or freezer is to maintain a safe temperature. Staff including Agency Workers must advise Nursing Direct if they think the fridge/freezer is not working properly and record this in the daily care records.
- The staff including Agency Workers will encourage the Service User to keep cold/chilled food in the fridge
- The staff including Agency Workers will be aware that chilled or fresh food must be kept at room temperature for the shortest possible time (never more than 2 hours)
- If food is prepared by the staff including Agency Worker, e.g. sandwiches, and left for the next meal or snack, these will be covered, labelled with date prepared and name of staff including Agency Worker and left in a cool place. No high-risk fillings will be used, e.g. eggs, or mayonnaise
- The staff including Agency Worker must aim to serve cooked food as soon as possible
- If food has been cooked and is left to cool, the staff including Agency Worker will find a cool, clean place to do this and then refrigerate, ensuring that flies/insects/animals cannot access the cooling food
- Food from broken packages or swollen cans, or food with an abnormal appearance or smell will not be served
- When storing raw meat, the staff including Agency Worker will ensure that it is kept in a clean, sealed container and placed on the bottom shelf of the fridge where it cannot touch or drip on to other foods
- Food that has been taken out to defrost will be clearly labelled with the date it was taken out to defrost
- Opened perishable food will be clearly labelled with the date it was opened and name of staff including Agency Worker

5.3 Cooking and Reheating Procedure

- Thorough cooking and reheating of food is an important way of killing bacteria that can cause food poisoning
- The Staff including Agency Worker must avoid using frozen food that requires defrosting, especially meat and poultry (chicken) wherever possible
- If the Staff including Agency Worker does need to defrost food, they will make sure it is completely defrosted before use
- A microwave is not usually suitable for defrosting other than for items such as bread or other low-risk foods
- The Staff including Agency Worker must make sure that the food is cooked through properly
- If using a microwave, follow the instructions
- The Staff including Agency Worker will avoid reheating food, particularly poultry, meats, and gravy – any foods to be reheated will be treated as raw food and subjected to the same amount of heating
- Cooking food at the right temperature will ensure that any harmful bacteria are killed. Staff including Agency Workers will check that food is piping hot throughout before it is served but ensure that it will not burn the Service User's mouth when serving

The foods below need to be cooked thoroughly before eating:

- Poultry
- Pork
- Offal, including liver
- Burgers
- Sausages
- Rolled joints of meat
- Kebabs

When cooking burgers, sausages, chicken and pork, the Staff including Agency Worker will cut into the middle to check that the meat is no longer pink, that the juices run clear, and it is piping hot (steam is coming out). When cooking a whole chicken or other bird, the Staff including Agency Worker must pierce the thickest part of the leg (between the drumstick and the thigh) to check that there is no pink meat and that the juices are no longer pink or red.

Pork joints and rolled joints must not be eaten pink or rare. To check when these types of joints are ready to eat, put a skewer into the centre of the meat and check that there is no pink meat and the juices run clear. It is safe to serve steak and other whole cuts of beef and lamb rare (not cooked in the middle) or blue (seared on the outside) as long as they have been properly sealed (cooked quickly at a high temperature on the outside only) to kill any bacteria on the meat's surface.

If the staff including Agency Worker has cooked food that the Service User is not going to eat immediately, it will be cooled at room temperature (ideally within 90 minutes) and then stored in the fridge. Putting hot food in the fridge means it does not cool evenly, which can cause food poisoning.

5.4 Avoiding Cross-Contamination Procedure

Nursing Direct will ensure that the Staff including Agency Worker understands that they must:

- Always wash their hands before preparing food and cover any cuts or wounds with a waterproof plaster in accordance with the Infection Control Policy and Procedure at Nursing Direct
- Always wear appropriate personal protective equipment (PPE) to minimise the risk of cross- contamination between care and food preparation and replace these regularly between each Care activity. PPE includes, but is not limited to, disposable plastic gloves and aprons
- Make sure that any utensils are clean and, if necessary, wash in hot soapy water first
- Always prepare food on a clean surface (this may mean washing a chopping board or plate before they start)
- Thoroughly wash any surface used to prepare raw food using hot water and washing up liquid before it is used for raw food
- Wrap/cover and label any food to be stored in the fridge. If food covering is not available, cover with a clean plate/ saucer
- Place raw food on a lower shelf than cooked food
- Not leave dirty dishcloths, tea towels on the surface where food is prepared

5.5 Food Served Raw Procedure

- Some foods, such as fruit and vegetables, are eaten raw and are perfectly safe if washed in cold water. Vegetables that are covered with soil will not be allowed to contaminate other foods

5.6 Food Presentation

- Food will be presented in an appetising way, not mixed up, and the main course will be separate from the dessert
- Nursing Direct will ensure that any food allergies, intolerances, or dietary requirements are documented in the Care Plan and clearly communicated to the Staff including Agency Worker

5.7 Cleaning Up

- The staff including Agency Worker must wash all worktops and chopping boards before and after cooking, as these can be a source of cross-contamination. The average kitchen chopping board has around 200% more faecal bacteria on it than the average toilet seat
- Damp sponges and cloths are the perfect places for bacteria to breed. Studies have shown the kitchen sponge to have the highest number of germs in the home. Nursing Direct must ensure that there is an agreed process in place to wash and replace kitchen cloths, sponges, and tea towels frequently

Staff including Agency Worker can also refer to the National Standards of Healthcare Cleanliness 2021 for further cleanliness guidance.

5.8 Food Business Registration

- Nursing Direct will seek guidance from Local Authorities, ICB's, and other service users to determine whether the service is required to register as a Food Business under food hygiene legislation
- Where confirmation is received to register, steps must be followed to either register on the Local Authority's website or complete a food business registration form
- Where there is no requirement to register, written confirmation of this must be obtained by the service and stored as proof

5.9 Training and Education

- Nursing Direct will ensure that food hygiene and infection control training is available for staff including Agency Workers to access as part of the mandatory suite of training
- It will be the Staff including Agency Worker's responsibility to attend mandatory training when required, as well as ensuring that they have an understanding of the local policies and procedures related to this subject
- All training will be logged on the training matrix at Nursing Direct
- As a minimum, staff including Agency Workers will learn about the dangers of poor food handling and about proper handwashing techniques. Such training must be designed to raise awareness and must form part of the induction process for any new staff.
- Training will be subject to review to ensure that it remains current and reflects the needs of Nursing Direct
- Additional development and learning may be in the form of team meetings, supervisions and by direct observation in practice

6. DEFINITIONS

6.1 Staff including Agency Workers

6.1.1 Staff

Denotes the employees of Nursing Direct Healthcare Limited.

6.1.2 Agency Workers

Refers to individuals who are contracted with Nursdoc Limited or another employment business as an Agency Worker (temporary worker) provided to Nursing Direct Healthcare Limited to perform care services under the direction of Nursing Direct.

6.2 **Nursing Direct**

Nursing Direct, also known as Nursing Direct Healthcare Limited, is the entity regulated by the CQC (Care Quality Commission) and responsible for the care service provision, contracted to provide homecare services to service users in their homes, in placements, essential healthcare facilities and in the community.

6.3 **Nursdoc Limited**

As the sister company to Nursing Direct Healthcare Limited, Nursdoc Limited acts as an employment business, specialising in providing staffing solutions to the healthcare sector.

6.4 **CQC (Care Quality Commission)**

CQC throughout this policy, the term "CQC" refers to the Care Quality Commission (CQC) which is the independent regulator of health and social care in England.

6.5 **Food Business Registration**

In cases where the operations relating to domiciliary care or assisted living fall within the legal definition of a food business, local authority authorised officers have responsibility for official controls under the hygiene regulations. This may require Nursing Direct to register as a Food Business with Local Authorities, ICB's, and other service users

6.6 **High-Risk Food**

- Foods that are ready to eat, foods that do not need any further cooking and foods that provide a place for bacteria to live, grow, and thrive, are described as high-risk foods. Examples of high-risk foods include:
 - Cooked meat and fish
 - Gravy, stock, sauces, and soup
 - Shellfish
 - Dairy products such as milk, cream, and soya milk
 - Eggs
 - Cooked rice

6.7 **MUST**

'MUST' is a five-step screening tool to identify adults who are malnourished, at risk of malnutrition (undernutrition), or who are obese. It also includes management guidelines which can be used to develop a Care Plan

6.8 **Sell By**

This label is aimed at retailers, and it informs them of the date by which the product must be sold or removed from shelf life. This does not mean that the product is unsafe to consume after the date. Typically, one-third of a product's shelf life remains after the sell-by date for the consumer to use at home

6.9 **Use By**

This label is aimed at consumers as a directive of the date by which the product must be eaten; mostly because of quality, not because the item will necessarily make you sick if eaten after the use-by date. However, after the use-by date, product quality is likely to go down much faster and safety could be lessened

6.10 **Best Before or By**

This is a suggestion to the consumer regarding the date that the product must be consumed by to assure ideal quality

6.11 **Personal Protective Equipment (PPE)**

Personal protective equipment (PPE) refers to protective clothing or other garments or equipment designed to protect the wearer's body from injury or infection


6.12 **Cross-Contamination**

The process by which bacteria or other microorganisms are unintentionally transferred from one substance or object to another, with harmful effect

OUTSTANDING PRACTICE

To be 'outstanding' in this policy area you could provide evidence that:

- Care Plans are regularly updated and reflect the Service User's needs in relation to food and nutrition. A nutrition scoring tool such as 'MUST' is used
- Nursing Direct undertakes risk assessments and, where incidents, near misses or changes in circumstances arise, the risk assessments are reviewed and updated
- There is evidence that Nursing Direct has contacted Local Authorities, ICB's and other service users to ascertain whether Local Authorities, ICB's and other service users require Nursing Direct to register as a Food Business in line with FSA guidelines
- Staff including Agency Workers are knowledgeable and well trained in infection control practices and safe food hygiene
- Thematic audits of practice take place to ensure compliance with this policy. Findings are actioned and changes to practice embedded and sustainable
- Feedback sought and gathered in relation to this policy from Service Users, Staff including Agency Workers, and families, is reviewed and used as a means of quality assurance
- Nursing Direct seeks evidence-based best practice guidelines, and national initiatives to stay at the forefront of changing practice

COMPLETED DATE:	18.12.2025
SIGN OFF DATE:	18.12.2025
REVIEW DATE:	18.12.2026
SIGNED:	 Marc Stiff – Group Managing Director