

SOUTH EASTERN TRUST

Title:	Food Allergen Policy		
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Ownership:	South Eastern Trust		
Approval by:	Ratified Directors as per signatory list	Approval date:	May 2022
Operational Date:	June 2022	Next Review:	May 2025
Version No.	1.0	Supercedes	N/A
Key words:	Food allergy		
Links to other policies	Food Safety Policy		

1.0 INTRODUCTION / PURPOSE OF POLICY

1.1 Purpose

The purpose of this policy is to outline the South Eastern Health and Social care Trusts (the Trust) processes for management of food allergy and the provision of safe food to all service users (Children and Adults). This policy will provide guidance for all relevant staff on the management of a service user with a new/known food allergy.

The aim is to reduce the risk of a service user experiencing an adverse reaction from a known food allergen found in food or fluids consumed from the Trust's food service system.

2.0 SCOPE OF THE POLICY

- 2.1 Staff preparing and serving food to patients and visitors.
- 2.2 Staff that assist service users with menu selection.
- 2.3 Staff involved in purchasing, storing, handling, preparing or serving food or beverages to service users.
- 2.4 Staff that assist service users with the preparation of food and beverages including those in service users' homes.

- 2.5 Staff who accompany service users to restaurants / cafes.
- 2.6 Staff who assist service users with their shopping or purchase food for service users at local shops or takeaways.
- 2.7 Staff that provides therapeutic cooking sessions and health improvement programmes.

3.0 ROLES/RESPONSIBILITIES

- 3.1 Directors are responsible for the dissemination and implementation of this guidance within their directorates.

Line Managers are responsible for ensuring that staff have a working knowledge of and adhere to the guidance.

- 3.2 This Policy is applicable to all staff in the acute and community setting who have direct service user contact and staff involved in catering provision. All staff to whom the policy applies are responsible for familiarising themselves with and adhering to this guidance.

4.0 KEY POLICY PRINCIPLES

4.1 Key Policy Statement

The purpose of this policy is to provide guidance for relevant staff on the management of food related allergens to ensure the provision of safe food and beverages for service users (Children and Adults), staff and visitors.

The aim is to reduce the risk of a service user, staff or visitor experiencing an adverse reaction from a known food allergen found in food or beverages.

This policy will also set out the training required by staff to help manage allergens.

4.2 Policy Principles

4.2.1 Patient Experience will

- Ensure that appropriate systems and processes are in place so that food within main production kitchens is sourced,

stored, prepared, distributed and served safely to minimise the risk of cross-contamination and comply with current food safety and food labelling legislation, regulations and guidance

- Ensure all staff involved in the preparation and handling of food receive appropriate online allergen training provided by the Food Standards Agency.
- Ensure that systems and processes are in place in the main production kitchens to ensure allergen free food is not cross-contaminated.
- Ensure food and beverages sent to the wards for a service user with a suspected or confirmed food allergy is appropriate for their needs and labelled with the patient's name and ward, and the allergy type for the individual concerned.
- All items on the service user / staff menus are created using standard recipes with ingredients from 'approved' suppliers and there is a system in place to record any deviations to the standardised recipes.
- Ensure there is a system in place to have recipes analysed for allergens and updated allergen information for any ingredient / supplier change to be communicated across the Trust as appropriate.
- Ensure allergens are listed against each menu item on an electronic format and that this is accessible to anyone assisting in ordering meals on behalf of patients
- Ensure up-to-date allergen information in respect of non pre-packaged food items ordered direct by the wards is displayed in the ward kitchens.
- Ensure allergen files in the kitchens and at catering outlets are kept up-to-date and that staff working in the area know where they are located.
- Ensure allergens are declared on food sold in catering outlets and vending machines to fulfil legal requirements.
- Ensure signage is clearly displayed at catering outlets inviting consumers to ask about allergenic ingredients and that staff are aware who to ask and/or how to access the information.

- Ensure allergen information is provided with hospitality services.

4.2.2 Ward Sisters / Charge Nurses and Heads of Home / Facility Managers will:

- Identify food allergies as part of the admission process and record information (type of reaction eg rash and to what allergen eg strawberries) in the Person Centred Care Plan.
- Ensure there is a system in place for alerting all staff working in the area that a service user has a known or suspected allergy including any Agency / bank / ad hoc or new staff, Volunteers and Work Placements, and information is shared during each staff handover.
- Ensure all staff involved in assisting patients/clients choose meals receive appropriate allergen awareness training
- Advise visitors not to bring in food for allergen sufferers. Should they still wish to do so, the Ward/Facility Manager must ensure that any food placed into the ward/department refrigerator for consumption by a patient is covered and labelled with patient's name and date placed in the refrigerator. This food must be consumed or removed and disposed by the use-by date and removed and disposed of food when the patient is discharged/transferred.
- Complete an incident recording form on Datix for any potential or actual ingestion of any food/beverages which may contain the known allergen, and ensure next of kin are made aware of the incident.
- Liaise with Catering staff to ensure suitable meals are available for patients and agree an individualised meal plan if there are no or limited suitable items on the patient menu.
- If a patient has an acute food allergy, inform the Catering Department so that they can implement any additional control measures required to prevent cross-contamination, e.g. segregated transportation of meal.
- Ensure that up-to-date information on patient dietary requirements is provided to Services Assistants in a timely manner.
- Ensure that completed patient menus are checked before being sent to the kitchen to ensure the choices selected by

the patient are suitable and that all relevant patient details including full name and allergen are recorded.

- Ensure someone checks that any special meal ordered for a patient with a suspected or confirmed food allergy has been supplied and is appropriate for the patient.
- Ensure all allergies including food are recorded in the admission documentation and included at all safety briefings /handovers.
- Ensure staff supporting outings are familiar with service users' allergies, are trained in recognition and management of allergic reactions and ensure any food/beverages are checked before consumption to ensure they do not contain a known allergen. Ensure the environment/utensils to be used are clean and free from potential allergen contaminant.

If someone with a food allergy is on an outing, a risk assessment should be completed prior to the outing to determine the need for that patient to be accompanied by a registered nurse in order to administer rescue medication if required.

4.2.3 The Food Safety Committee and Clinical Nutrition Subgroup is responsible for:

- Monitoring and reviewing food allergy related incidents and overseeing implementation of remedial action plans where appropriate.
- Monitoring allergen training compliance across the Trust.

5.0 IMPLEMENTATION OF POLICY

5.1 Dissemination

5.1.1 List the groups of staff for whom this policy has relevance. Provide a realistic time scale for implementation and highlight any potential barriers.

5.1.2 Indicate who should be notified (usually the author) if there are significant barriers and timescales are not being met.

5.2 Resources

5.2.1 This should include training, awareness raising, testing of new documentation associated with the policy etc and who is responsible for this.

5.3 Exceptions

5.3.1 The scope should detail all areas where the policy is to apply - this is to note any area that has been noted as exempt because it is currently unable to comply with or implement the policy.

6.0 MONITORING

6.1 Effectiveness of this policy work to be audited through the review of complaints and reported food allergy incidents on DatixWeb. The adherence to the Food Allergen Policy will be verified in audits completed by a multidisciplinary group comprising of nursing, catering and dietetics. Audit results will be reported to the Clinical Nutritional Subgroup.

7.0 EVIDENCE BASE / REFERENCES

Food Information Regulations 2014 and Regulatory Guidance June 2020

8.0 CONSULTATION PROCESS

Clinical Nutrition Sub Committee

9.0 APPENDICES/ATTACHMENTS

N/A

10.0 EQUALITY STATEMENT

In line with duties under the equality legislation (Section 75 of the Northern Ireland Act 1998), Targeting Social Need Initiative, Disability discrimination and the Human Rights Act 1998, an initial screening exercise to ascertain if this policy should be subject to a full impact assessment has been carried out. The outcome of the Equality screening for this policy is:



Major impact





Minor impact

No impact.

SIGNATORIES

(Policy – Guidance should be signed off by the author of the policy and the identified responsible director).

Policy Name 	Author Endorsement	Modified 	<input type="checkbox"/> Modified By
P-292: Food Allergen Policy	Yes	25/05/2022 02:09 PM	McNeill, Deborah

Policy Name 	Approval	Modified 	<input type="checkbox"/> Modified By
P-292: Food Allergen Policy	Endorsed	06/06/2022 01:57 PM	 Robinson, David
P-292: Food Allergen Policy	Endorsed	30/05/2022 08:54 AM	 Patterson, Nicki