Blended Diet Meal Preparation Process for Chestnut Tree Hospice

1. Purpose and Scope

The information below outlines the policy for the supply and preparation of blended diet meals at Chestnut Tree Hospice (CTH) within White Oaks. It has been written for CTH following a risk analysis and should not be used within other operations and settings without consultation with HSE and the Healthcare Dietetic Team.

Its aim is to provide guidance to the White Oaks team at CTH and to align with the CTH **Enteral Feeding Standard Operating Procedure (SOP0007).**

This policy only covers blended diets and not modified texture meals. For information about modified texture meal preparation and process, please refer to the **Modified Texture Meal Preparation Process Policy**.

2. Background

Enteral tube feeding is the delivery of nutrition, fluids, and/or medication directly into the stomach or small intestine through a tube, instead of by mouth. This is used when someone cannot eat or drink enough safely.

There are different types of feeding tubes depending on how long they are needed and where they go in the body. At CTH, patients are fed via a tube which is placed in the tummy and goes into the stomach (usually for long-term use).

Enteral feeding tubes may be used to support individuals with a range of clinical conditions. This may include but is not limited to swallowing difficulties (dysphagia), reduced oral intake, gastrointestinal conditions, structural conditions like obstructions or surgery or long term neurological or developmental conditions.

A blended diet is a food that has been prepared by blending or liquidizing everyday ingredients into a smooth consistency so it can be given through a feeding tube. Blended diets via feeding tubes may be considered as an alternative to, or alongside, commercial enteral formulas where appropriate. The reported benefits of taking this approach include improvement in symptoms of vomiting, reflux and abnormal bowel habit. In addition to physical benefits, social and emotional benefits have been reported by the parents and carers of tube-fed children and young people (British Dietetic Association). However, over long term, the nutritional value may be affected by the type of foods being blended, and this must be assessed by a dietitian.

As these blended feeds are delivered directly into the stomach or intestine, there is an elevated risk of complications. Scratch cook blended meals present an increased risk if the preparation and cooking of the item not strictly controlled to prevent potential contamination. Compass operates a robust and comprehensive food safety management system; however, due to the heightened risk, the following additional controls must be implemented

3. White Oaks support to CTH approach to providing blended diet meals

A combination of scratch cook and bought in meals as a 'hybrid' offer will be provided at CTH. Before implementing the policy, a decision will need to be made about what method should be used to provide these meals and what will be provided if a blended diet cannot be made on site for a particular service day or time.

The following criteria should be considered:

- The client expectations and carers knowledge level about blended diet meals.
- How many patients /individuals required a blended diet meal.
- What type of special diets and allergies may be needed to be considered.
- The skill level of the chefs preparing those meals.
- Time required to prepare blended meals must be built into the rota, to deliver these on time and safely.
- Equipment available and ability to purchase if required.

The clinical team at CTH will provide the catering team with up to five working days' advance notice of a child's admission requiring a blended or specialist blended diet, including any relevant recipes.

4. Catering team skills and structure

White Oak chefs working at CTH must be qualified in Food Safety Level 3 as a minimum and have undertaken the White Oaks Blended Diets training on how to prepare and provide blended meals safely. The preparation of blended meals from scratch must only be conducted by individuals who have received this training. A record of their training must be kept in personal files on site. This training must be refreshed at least annually or on change of personnel.

Only White Oaks staff can provide blended meals. Any external cover, such as agency provision cannot be trained in preparing blended diets from scratch and the purchased solution must be used (as outlined in the decision tree).

Clinical teams should undergo their own training in line with their local policy.

5. Providing bought in blended meals

CTH should hold a stock of bought in blended meals on site. This allows for meals to be readily available during times of short staffing, agency or new members of staff who are yet to receive training about scratch cooking blended meals. They may also be used in an emergency scenario or out of hours.

When providing bought in blended meals, the team should follow the guidelines below:

5.1 APL

All meals should be purchased through Foodbuy and using the Compass nominated supplier for blended meals. All items must be on the APL. Units should hold a stock appropriate to the number of dishes required to provide patients with the greatest choice of meals.

5.2 Menus

Agreement should be reached between the White Oaks Culinary Team/Dietitian and the client about what food/meal items are suitable for the children on a blended diet. An a la carte menu will be offered with all the pre-prepared options available. Meal orders should be taken at each mealtime in a similar way to patients eating a normal diet.

5.3 Cooking and Service

Cooking/warming guidelines must be followed to ensure the meals are safely prepared according to the FSMS guidelines but also do not suffer from texture/thickness changes because of over cooking. Meals must be handed over to the clinical teams quickly with the minimum amount of time between preparation and administration of meals. BDA guidance is within 2 hour window. Please refer to the cooking instructions on the packaging.

6. Scratch cooking blended meals and snacks

When preparing and serving scratch cook blended diets made in the kitchen, the team should follow the guidelines below:

6.1 APL

All food items used in the production of blended meals must be procured through approved suppliers, and not from local sources, to ensure all vendor control requirements are met.

6.2 Menus

6.2.1 Establishing what items will be offered

Agreement should be reached between the White Oaks Culinary Team/Dietitian and the client about what food/meal items can be prepared from scratch, which items are suitable for blending and which mealtimes during the day that this will be served. This should be communicated to all team members on site.

There may be a selection of readymade items from the menu that fit the requirements of a blended diet and do not need preparation in the kitchen e.g. smooth yoghurt or custard pots with the agreement of the client.

6.2.2 Written Menus

Menus containing a list of the agreed blended meals should be developed to offer the children a good choice of meals at every mealtime. This should mirror the CTH standard menu. Meal orders should be taken at each mealtime in a similar way to all other children.

For specialist diets provided by the child's dietitian e.g. ketogenic, the CTH clinical teams must provide information to the kitchen staff on what meals need to be prepared, including recipes, to ensure complete compliance with the diet.

6.3 Cooking and Meal Preparation

All meal preparation must be completed as per the Compass FSMS with the additional controls:

- Segregated area of the kitchen to reduce risk of cross contamination from other products being produced for service.
- Equipment used to produce blended meals must be dedicated exclusively to blended diet preparation. Where a regular patient has a known severe allergy, separate equipment should be considered to minimise the risk of cross-contamination.
- Decontamination of equipment /surfaces must be suitable and sufficient, and machines must be suitable for decontamination via dishwashers with rinse cycle of 82c.
- Surfaces must be sanitiser frequently with approved food safe sanitiser (Aseptopol E76- supplied via Ecolab/compass supply chain)
- Regular validation swab testing must be carried out to confirm that complex equipment has been effectively cleaned, preventing microbiological and allergen contamination. Any failed swab results must trigger an immediate review and corrective action (see section 7.3)
- All meals must achieve a cooking temperature of 75c and be handed to care team within 2 hours for feeding

Once food has been prepared to a blended consistency, it should be assessed using the Blended Diet Audit Tool to confirm it meets the required texture standards, adjusting if necessary. A final kitchen check must then be completed prior to handing the food over to the clinical team. The kitchen team member must sign the Blended Diet Audit Tool, checking the texture and correct dietary requirements are followed including any allergen controls.

No additional items are to be added to the blended meal e.g. sauces, condiments, dressings, gravy or garnish such as dry herbs, fresh herbs, black pepper once the product has been checked against the checklist.

Cooking in advance and reheating blended food items is not allowed.

The blended meal must be put into the right serving equipment, in this case a heatproof jug with a vented lid and be served in an appropriate portion size for each individual. Each meal must be labelled, using the approved White Oaks labels, to inform the clinical teams, or person delivering the meal, of the recipient's name and name of the blended meal.

Whiteoak's operational staff will not prepare/heat /store any meal produced outside of the hospice kitchen, Meals provided by family will need to be stored, heated and served directly by the hospice staff following their own risk assessment.

6.4 Equipment

Blended meals can only be prepared from scratch if the essential equipment is available to prepare these. A minimum list of equipment before blended meals can be safely prepared safely includes:

- Robot coupe Blixer (appropriate size for the unit)
- Sieves (including fine drum sieves – to be used only where a recipe states it is needed)

- Sieve scrapers
- Digital scales
- Cutlery including forks and teaspoons for texture testing
- Approved heatproof jug with vented lid

All equipment must be suitable for decontamination via dishwashers with rinse cycle of 82c. Equipment used for blended meal production must not be used for any other food preparation purposes. Blended food equipment must be stored in a designated area, separate to other equipment used for general food production.

6.5 Service

All scratch cooked food items must be prepared and served hot at the appropriate mealtime. The BDA recommend this is fed within the 2-hour window from cooking. Food that has not been used within the 2-hour window should be discarded and replaced.

The blended meal will be handed over to a clinical team member who must sign the Blended Diet Audit Tool, checking the texture and correct dietary requirements are followed including any allergen controls.

It is the responsibility of the clinical team to check the blended meal texture before it is administered into the feeding tube. Clinical responsibilities and processes are outlined in the **Enteral Feeding CTH Standard Operating Procedure SOP0007.** This and supporting documents should be adhered to.

7.0 Audits & Reviews

7.1 Meal Audits

Meal preparation should be regularly reviewed and observed by the White Oaks Management Team, including the Culinary/Dietetic Team. The audit should review that the patients are being offered a good choice of blended meals and that they are being prepared and presented and served in line with this policy and Compass Group processes and guidelines.

7.2 Client Feedback

Any feedback from the CTH client team on blended diets being produced must be discussed with the White Oaks site manager and appropriate actions be taken.

7.3 Periodic Kitchen and Hygiene Audits

Compass operates a robust HACCP system to ensure the safe production of food across the business. To maintain this, regular reviews of HACCP documentation are carried out by the Compass Regional Manager (RM) team, with support from the HSE team.

Due to the use of complex equipment (e.g. blenders), periodic swab testing must be carried out every six months to assess the effectiveness of the cleaning processes in place. It is recommended that swab provider ALS Testing, as used within Compass Group central production units, is undertaken, with a full report provided following the swabbing analysis and receipt of swab test results.

8.0 Resources and Information

8.1 Catering Teams Preparing Blended Meals

Catering teams must have access to the folder of approved information:

1. Patient's blended diet requirement
2. Recipes including blend time for equipment in use
3. Blended Diet Audit Tool

8.2 General Resources

The below resources should be used alongside this document

1. Blended Diet Audit Tool
2. Purchased in Blended Diets Menu
3. White Oaks Blended Diet Training
4. Enteral Feeding CTH Standard Operating Procedure SOP0007 (clinical teams only)

Appendix 1: Guidelines for providing purchased blended diet meals

If a patient requires a blended meal and one cannot be made from scratch, they should be provided with a readymade blended meal sourced from the Compass approved supplier. The guidelines below should be followed to access and prepare the meals.

Request is made by the clinical team and/or dietitian for a patient to be provided with blended meal.

Speak to the clinical team to find out the meal preferences of the patient, any other special dietary requirements they may have and how long this is likely to be required for.

Offer a choice of available meals to the patient before each meal service.

Follow the cooking / warming guidelines for each meal cooked.

Ensure that the clinical team checks the meal when collecting and signs the blended diet audit tool.

Only items on the White Oaks APL should be ordered. Items will be available to order on Foodbuy. If you have any questions about the products and their availability, please contact the White Oak Culinary Lead or Dietitian.