



Food safety procedure

December 2025



Title of Procedure	Food safety procedure
Approved by	Head of Supported Living
Approval Date	17/12/2025
Owner	Director of Customer Experience
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Version	2.0
Period of Review	12 months
Date of Review	09/12/2026
Lead Directorate	Customer Experience
Stakeholders	<input type="checkbox"/> Partnership Forum <input type="checkbox"/> Human Resources <input type="checkbox"/> ICT <input type="checkbox"/> Staff Forum <input type="checkbox"/> Property <input type="checkbox"/> Other <input type="checkbox"/> Finance <input type="checkbox"/> BR24 <input checked="" type="checkbox"/> Operations <input type="checkbox"/> Business Development

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1 Introduction

- 1.1. This procedure provides guidance on food hygiene practices for community care staff, ensuring safe food handling and preparation for service users in their own homes.
- 1.2. By following these steps, staff protect both themselves and service users from foodborne illnesses, allergies and intolerances.

2. Purpose

- 2.1. The purpose of this procedure is to equip staff with the knowledge and tools to maintain high standards of food hygiene when preparing and handling food for service users.
- 2.2. It highlights critical practices to ensure safety, meet legal obligations, and support the provision of person-centred care

3. Scope

- 3.1. This procedure applies exclusively to community care staff who are involved in food preparation, storage, and handling for service users in their homes.
- 3.2. It does not apply to staff working within Bield developments, where food safety is managed under the [Food Safety Management System](#).

4. Context

- 4.1. As Bield Housing & Care is committed to maintaining the health and safety of service users through robust food hygiene practices.
- 4.2. This procedure aligns with national standards, including the **Food (Scotland) Act 2015** and HACCP principles, which focus on identifying and controlling potential food safety hazards and complies with the Food Hygiene (Scotland) Regulations 2006, which establish mandatory food hygiene requirements in Scotland
- 4.3. Good food hygiene is critical to protecting service users from risks such as contamination, spoilage, and foodborne illnesses.
- 4.4. This procedure ensures that community care staff understand and consistently implement these essential practices.



5. Definition

- 5.1. **Food Hygiene:** The practices that prevent the spread of bacteria during food preparation, storage, and handling.
- 5.2. **Service User:** An individual receiving care services in their home.
- 5.3. **HACCP:** A proactive system for identifying and mitigating food safety hazards during food production and handling.
- 5.4. **Food Allergies and Intolerances:** Adverse reactions to certain foods that may result in health complications. Allergen management must comply with the Food Information (Scotland) Regulations 2014, which require accurate identification and communication of the 14 regulated allergens

6. Mandatory procedures and practice guidance

Personal hygiene

- 6.1. personal hygiene is the foundation of safe food handling and preparation.
- 6.2. Good hygiene practices minimise the risk of contamination and protect the health of service users and staff. To Maintaining ensure high standards of personal hygiene, staff must:
 - Wash hands thoroughly with soap and warm water for at least 20 seconds before and after handling food
 - Wear clean clothing and use gloves when appropriate, especially when handling ready-to-eat food.
 - Staff must follow Food Standards Scotland's exclusion guidance, which requires food handlers to remain off work for 48 hours after symptoms cease
- 6.3. Following a return to work after a sickness absence, staff must record any illnesses that prevent food handling using the **Return to Work Questionnaire** (Appendix 1).

Food storage

- 6.4. **Effective** food storage is essential for maintaining food safety and preventing spoilage.
- 6.5. Proper storage methods protect food from contamination and help ensure that service users receive safe, high-quality meals. To ensure good food storage practice, staff should:
 - By law, chilled foods must be kept at 8°C or below, however Bield's standard is 5°C or below to reduce risk. Store frozen foods in a freezer operating at –18°C or below



- Keep raw meat, poultry, and seafood separate from ready-to-eat foods to prevent cross-contamination.
- Label all food items with the date of storage and their use-by dates, adhering to the "First In, First Out" principle.
- Use clean, airtight containers for food storage to prevent contamination and preserve freshness.
- Store dry goods in a cool, dry, and pest-free environment, away from direct sunlight.

Avoiding cross-contamination

- 6.6. Preventing cross-contamination is a critical aspect of food safety, particularly when preparing meals for service users with allergies or weakened immune systems.
- 6.7. By following strict procedures, staff can reduce the risk of harmful bacteria spreading between foods.
- 6.8. To minimise cross-contamination risks, staff must:
- Use separate cutting boards and utensils for raw and cooked foods, ideally colour-coded for easy identification (e.g., red for meat, green for vegetables).
 - Wash hands thoroughly before and after handling raw food, and after any activity that may contaminate hands.
 - Clean and sanitise all surfaces, utensils, and cutting boards immediately after use with hot, soapy water and disinfectant.
 - Cook foods to a core temperature of at least 75°C for 30 seconds (or equivalent time/temperature combination), verified using a food thermometer.
- 6.9. If staff are informed by a service user that they have a food allergy that Bield Housing & Care is unaware of or they have concerns about a potential allergen, they should contact their manager immediately.
- 6.10. When preparing food for service users with allergies, staff must prepare food separately, using cleaned equipment and avoiding any contact with allergenic ingredients
- 6.11. The manager will conduct a risk assessment and ensure the care plan is updated to reflect any necessary precautions required to keep the person safe.



Reporting concerns

6.12. Addressing food safety concerns promptly is essential to maintaining a safe environment for service users. Staff must remain vigilant and proactive in identifying and addressing potential issues. If staff encounter food safety concerns, they should:

- Report any issues, such as improperly stored food or signs of pests, to a manager immediately.
- Document incidents involving food-related illnesses or safety concerns for review and follow-up using the **Incident Reporting Template** (Appendix 2).

Outside caterers and takeaways

6.13. When using outside catering or takeaway services, it is crucial to ensure that the food provided meets safety standards.

6.14. Staff are responsible for verifying the reliability of external food providers to protect service users from potential risks.

6.15. To ensure safe use of external food services, staff must:

- Check the Food Hygiene Information Scheme result for caterers (Pass or Improvement Required). Do not use providers without a Pass.
- Ensure all external providers supply allergen information in compliance with the Food Information (Scotland) Regulations 2014.
- Follow the **Communal Kitchen Use Disclaimer** on the intranet if external caterers are arranged by service users.

7. Monitoring and review

7.1. Bield Housing & Care will conduct regular audits and gather feedback from staff and service users to evaluate the effectiveness of this procedure. This procedure will also be reviewed following food-related incidents, Environmental Health advice, or legislative updates.”

7.2. Annual reviews will ensure it remains aligned with best practices and regulatory requirements. Any necessary updates will be implemented based on findings or changes in legislation.

8. Source information used to support development of procedure

- Food (Scotland) Act 2015:
Source - <https://www.legislation.gov.uk/asp/2015/1/contents>
- Food Hygiene (Scotland) Regulations 2006
Source: <https://www.legislation.gov.uk/ssi/2006/3/contents>
- Food Information (Scotland) Regulations 2014



Source: <https://www.legislation.gov.uk/ssi/2014/312/contents>

- Food Law Code of Practice (Scotland) 2019:

Source - <https://www.foodstandards.gov.scot/publications-and-research/publications/food-law-code-of-practice-scotland-2019>

- Food and Feed Codes of Practice | Food Standards Agency:

Source: <https://www.food.gov.uk/about-us/food-and-feed-codes-of-practice>

- Best Practices for Allergen Management in Food Production:

Source - <https://cpdonline.co.uk/knowledge-base/food-hygiene/allergen-management/>

- Food Hygiene Information Scheme | Food Standards Agency:

Source - <https://www.foodstandards.gov.scot/consumers/food-safety/buying-food-eating-out/food-hygiene-information-scheme>

- Preparing and Cooking Food Safely:

Source: <https://www.nhsinform.scot/healthy-living/food-and-nutrition/food-safety-and-hygiene/preparing-and-cooking-food-safely>

- NHS Inform – Food Safety and Hygiene Guidance

Source: <https://www.nhsinform.scot/healthy-living/food-safety-and-hygiene>



Appendix 1 Food handler return to work questionnaire

FOOD HANDLER RETURN TO WORK QUESTIONNAIRE

Part 1 to be completed by all food handlers when returning to work after an illness

Name _____ Date of return _____

During your absence from work, did you suffer from any of the following (please tick and date when the symptoms ceased)

	Yes	No	Date symptoms ceased
Diarrhoea	<input type="checkbox"/>	<input type="checkbox"/>	_____
Vomiting	<input type="checkbox"/>	<input type="checkbox"/>	_____
Discharge from gums / mouth, ears or eyes	<input type="checkbox"/>	<input type="checkbox"/>	_____
A sore throat with a fever	<input type="checkbox"/>	<input type="checkbox"/>	_____
A recurring bowel disorder	<input type="checkbox"/>	<input type="checkbox"/>	_____
A recurring skin ailment	<input type="checkbox"/>	<input type="checkbox"/>	_____
Any other ailment that may present a risk to food safety	<input type="checkbox"/>	<input type="checkbox"/>	_____

Have you recently taken medication to combat diarrhoea or vomiting? ☐ Yes ☐ No

Signature of food handler _____ Date _____

Part 2 to be completed by the manager / supervisor

If the answer to all the above questions was 'No', the person may be permitted to return to food handling duties. (Complete and sign below)

However, if the answer to any of the questions was 'Yes', the person should not be allowed to handle food until they have been free of symptoms for 48 hours or, if formally excluded, medical advice states that they can return to their duties. Alternatively, in the case of food handlers with lesions on exposed skin (hands, neck or scalp) that are actively weeping or discharging, they must be excluded from work until the lesions have healed. (See PART 3)

I confirm that _____ May resume food handling duties

Signature (Manager / Supervisor) _____ Date _____

Part 3 to be completed by Manager / Supervisor after medical advice has been taken

What medical advice was received by the employee?

- (a) Exclusion from work until medical clearance is given ☒
- (b) Move to safe alternative work until clearance given ☐
- (c) Return to full food handling duties ☐

If (a) or (b) is ticked, appropriate action must be taken. If (c) is ticked, the food handler may resume duties immediately.

I confirm that _____ May resume food handling duties

Signature (Manager / Supervisor) _____ Date _____



Appendix 2 Incident reporting form

ACCIDENT & INCIDENT REPORTING FORM

- Please use this form to report all work-related injuries, diseases, ill health and near misses.
- Complete the form immediately after the incident.
- Email the completed form to your line without delay.
- Your line manager will complete an investigation if required to ensure that steps are put in place to minimise future risk.

Section 1 – About the Incident

Description of incident					
When did it happen	Day		Date		Time
Where did it happen					
What happened? Please describe the near miss, accident, incident, dangerous occurrence including events that lead to it. Include any information about equipment, substances or materials that were involved.					
Witnesses Name(s) and contact details of anyone who witnessed the incident					

Section 2 – About the person involved (if applicable)

Who was involved? Name, role and contact details (include staff number and function). Please include the full address of any third party, visitor or contractor if involved. If near miss reported – please go to section 3 after completing this element	
What type of injury, illness or disease has been sustained? Please include which part or side of the body was affected	
What treatment was provided? Please include whether first aid and/or hospital treatment was needed	
Did the injured person go straight to work afterwards? If no, please give duration of absence if known	

Section 3 – Person completing this form

Details of person completing this form (if different to those given in section 2)	
Name, role and contact details including staff number and job function. If volunteer, third party or visitor, include full address	
Date form completed	



Section 4 – Health & Safety Report (Office use only)

Follow up investigation required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
No. of lost workdays				
Care Inspectorate Reportable Incident?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Date sent to Care Inspectorate				
RIDDOR Report Required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Date sent to Health & Safety Executive				
Duty of Candour Incident?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Duty of Candour Register Updated	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Date report completed				

RIDDOR Classification

Please
tick

- The death of any person
- Specified injuries to workers
- Over-seven-day incapacitation of a worker
- Over-three-day incapacitation
- Non-fatal accidents to non-workers (e.g., members of the public)
- Occupational diseases
- Dangerous occurrences

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Actions taken:



Speaking your language - we are happy to translate our policies on request.

يمكن ترجمة سياساتنا عند الطلب
إذا كنت بحاجة إلى مساعدة ، فيمكننا توفير مترجم

**Nasze zasady mogą być przetłumaczone na żądanie.
Jeśli potrzebujesz pomocy, możemy zapewnić tłumacza**

**我们的政策可以应要求翻译。
如果您需要帮助，我们可以提供翻译**

ہماری پالیسی کا درخواست پر ترجمہ کیا جاسکتا ہے۔
اگر آپ کو مدد کی ضرورت ہو تو ہم ایک ترجمان فراہم کرسکتے ہیں

