

Consultation Paper

Catering Service Review

Introduction

The Catering Services have been provided in-house for Patients, Staff & Visitors since the Hospital opened in early 1970's. The kitchen is equipped to use conventional production methods for Patient Catering & for the main restaurant. The workload has significantly increased in recent years due to the opening of the Jubilee Wing (and a 30% increase in activity) and the Cardio Thoracic Centre (resulting in a 25% increase in activity). Little investment has been made within the infrastructure of the service in the last 20 years. This, compounded by the additional activity has put increased pressure on the service and has made, the then favoured, conventional production method an increasingly unviable system.

In order to evaluate the current service, an independent report was commissioned to identify the available options for taking the Catering Service forward for the Trust. The options were fully evaluated and it was decided to proceed with the implementation of an in-house Steam Cuisine concept for our Patient Catering Service and to re-model the Restaurant Services.

What is the Steam Cuisine concept?

The Steam Cuisine concept involves purchasing pre-plated meals, with all of the meal components (including the vegetables, potatoes, sauces etc) presented on a plate and sealed with a plastic film containing a pressure valve. These pre-plated meals are then individually cooked by a microwave process which heats up the water molecules inside the food, thus creating the steam to cook the food. Integral pressure valves allow the process to be controlled and safe, providing optimum cooking conditions.

The key benefits to the steam cooking are:

- Nutrients are retained
- The food is cooked freshly at the point of service
- Higher serving temperatures are maintained
- The products hold texture & presentation better
- Colours are retained, particularly in vegetables

The plates are recyclable and will be managed via a dedicated waste stream from ward level.

How will this work?

The Steam Cuisine will be sourced from a nominated NHS supplier and delivered to the hospital in chilled delivery vehicles. The meals are transferred directly into our chilled walk-in holding units within the main kitchen facility. These deliveries are expected to be made 6 days a week, with most products holding a minimum of a 3 day shelf life.

Salads and sandwiches will be produced in-house within a dedicated chilled production area in the main kitchen facility.

Patients will have a bed side menu, on the breakfast rounds they will be asked to choose their lunch & dinner for that day. After breakfast the Patient Related Domestic will provide the beverage service, at which stage, the menu choice will also be taken via a hand held electronic PDA device. This is then processed into a bulk order, firstly agreed by the Nurse in Charge and then relayed to the kitchen facility by approximately 10.00am.

Upon receipt in the kitchen facility, the Catering Storekeeper and Patient Services Production team will 'pick' the orders from the holding units, including the salads and sandwiches and deliver them to the chilled packing room. Dedicated ward trolleys will then be loaded in the packing room as per the bulk ward orders and delivered to the wards by our General Porters. The General Porter will decant the trolley contents into the respective ward fridges and return the trolley to the main kitchen facility for sanitisation.

At the agreed lunch service period, the Patient Related Domestic will prepare the kitchen for meal service. This will involve placing the meals in the microwaves for steam cooking, and probing and presenting the meal on the tray for service to the Patient. This will be completed within the current hours allocated to provide a meal service with the assistance of the ward staff under the Protected Mealtime Policy (Nov '09).

All crockery & cutlery will be placed in ward based dishwashers and the recyclable steam cuisine plates will be processed via dedicated waste streams at ward level.

The process will be repeated for the dinner service.

A refrigerated storage area, positioned in the restaurant area will be identified to hold a stock of Steam Cuisine meals and ancillary menu items for new patients and choice adjustments etc.

How will this be managed in the Ward Kitchens?

Each ward kitchen is currently under a re-design programme so they can be adjusted to provide the Steam Cuisine concept. This means that each kitchen will have as a minimum:

- 2 x under counter fridges (to hold 30 meals each)
- 3 x microwaves (1 per 10 beds)
- 1 x dishwasher (plus a sink)
- 1 x silver trolley for service
- 1 x tray stacker
- Sufficient crockery, trays & cutlery for bed numbers
- Food temperature probe
- Appropriate waste receptacles
- Hand wash facilities

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The proposal is for all the wards to become self sufficient in terms of non food items within the patient catering needs.

How will this affect the Main Kitchen?

The Main Kitchen on level B will be re-designed in line with the Steam Cuisine concept & the development of the Restaurant Kitchen on level C. The current proposals include, but are not limited to:

- Walk-in chilled storage (various)
- Freezer storage
- Dry stores area
- Salad/sandwich production area – chilled
- Chilled packing room
- Pot wash area
- Trolley/equipment sanitising room
- Current lift & stairs access to restaurant.

The cooking of any foods will be limited, with the majority transferred to the Restaurant Kitchen.

What will happen with the Restaurant?

The Main Restaurant will be totally refurbished to provide a 'food court' style facility. The trading hours will be very similar, with the exception of closing half an hour earlier each evening (8.00 pm).

A bespoke production kitchen will be created at the rear of the existing servery area, thus creating a dedicated hot food production kitchen providing a balance of conventional cooked food and bulk Steam Cuisine.

The kitchen will also provide hot therapeutic diets, cooked items required for salads/ sandwiches and Trust Hospitality.

A dishwashing system will be in place for the kitchen requirements and to provide the through put of cutlery & crockery for the restaurant.

How will these plans affect staff?

These changes to the service will have implications on the levels of staffing, the roles and responsibilities of the staff and the department structure.

Current service and department structure

The current Catering Service has a staffing establishment of 59.84 WTE. 60 staff, working full and part time hours are currently in the department, equating to 48.6 WTE. 11.20 posts are currently held as vacant.

The current structure is enclosed as Appendix 1.

Proposed

The paper proposes to review the remit and responsibility of all posts within the new service model in order to enhance jobs within the directorate and provide a model that best fits the needs of our patients.

A draft structure, revised job descriptions and rosters have been proposed with the intention of optimal service provision. These are enclosed as follows:

Proposed structure – Appendix 2

Job descriptions:

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| • Catering Services Manager | Appendix X |
| • Restaurant Services Manager | Appendix X |
| • Patient Services Manager | Appendix X |
| • Administration Officer | Appendix X |
| • Store Keeper | Appendix X |
| • Restaurant Chef Supervisor | Appendix X |
| • Catering Supervisor – Patient Services | Appendix X |
| • Catering Supervisor – Retail | Appendix X |
| • Assistant Chefs | Appendix X |
| • Catering Asst – Restaurant | Appendix X |
| • Catering Asst – Patient Services | Appendix X |
| • Kitchen Porters | Appendix X |

Rosters:

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|-----------------------------|------------|
| • Management & Admin | Appendix X |
| • Patient Catering Services | Appendix X |
| • Restaurant Staff (days) | Appendix X |
| • Restaurant Staff (eve) | Appendix X |
| • Restaurant Chefs | Appendix X |
| • Kitchen Porters | Appendix X |
| • Orsett OPD Tea Bar | Appendix X |
| • PGMC Tea Bar | Appendix X |

The proposal envisages displacements within the current establishment (approximately 30 WTE across the various job roles) and these will be managed through the Staff Affected by Change policy. In an attempt to minimise the effect of displacements the department will, with immediate effect, cease recruitment to any of the existing vacant posts.

Consultation with staff

As per Trust Policy, we will consult widely with the staff affected with regard to the impact of these proposals. There will therefore, be a 30-day consultation period in line with the Staff Affected by Change Policy, which will commence on 16th November 2009 and end on 31st December 2009. The purpose of the consultation period is to allow staff an opportunity to comment on the

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proposals, put forward alternative options for consideration and discuss the way in which the changes will affect them personally.

To ensure that all staff are treated fairly and equitably, it is proposed that all staff affected by this consultation will be placed at risk on the date of commencement of this consultation. All staff will be given the opportunity to express their interest in the positions available in the proposed structure. It is proposed that selection criteria for the various posts will be determined jointly with the representatives on the Catering Service Review Workforce Group. The composition of the interview panels will be agreed with the representatives of the Workforce Group.

All staff will be offered an opportunity to meet on an individual basis with Donna Hudson, a Personnel representative and either a colleague/ trade union representative if they so wish, in order to discuss the impact of these proposals. Meetings will be scheduled for the following **dates xxxx**, in the Personnel Department at Basildon Hospital and staff wishing to book a meeting should contact the Personnel Team Secretaries on extension 3785 in order to arrange a suitable time.