



CLINICAL POLICY

FOOD BROUGHT IN FROM THE OUTSIDE

A. EFFECTIVE DATE :

June 21, 2022

B. PURPOSE :

To provide expectations for the handling of patient food brought into the hospital from the outside.

C. POLICY :

Patients are encouraged to utilize food prepared by of the Food and Nutrition Services (FNS) Department. When food is brought in from the outside the procedure below will be followed.

D. SCOPE :

This policy applies to the Emergency Department, inpatient units & The Food & Nutrition Services Department (FNS).

E. DEFINITIONS :

NONE

F. MATERIAL(S) NEEDED :

NONE

G. PROCEDURE :

1. If food prepared outside of the Food and Nutrition Services Department is permitted, nursing must verify that the patient has been prescribed a regular diet, has no food allergies or sensitivities and the food is appropriate for the patient.
 - a. If the patient has been prescribed a modified diet, the Dietitian or designee shall be consulted to verify that the food is appropriate for the patient. In the absence of the Dietitian or designee with authority to make decisions on modified diets, the nurse may accept responsibility for the decision. The Diet Manual shall be consulted in forming the decision. <insert LINK>
2. Nursing shall document in the patient's chart the food items that were consumed by the patient.
3. Food from the outside that needs refrigeration must be taken directly to nursing, or designee, if the patient is not ready to eat it. Food that has been in a patient's room cannot be stored in the nursing units designated patient refrigerator.
4. The food will be clearly labeled with the patient's name and medical record number (or other hospital approved patient identifier), as well as the date and time the food was brought into the hospital. Food items will be stored in a designated patient refrigerator using proper sanitation, temperature, light, moisture, ventilation and security. If not eaten within 24 hours, the refrigerated foods will be discarded.
5. Food brought in from the outside may not be stored in the Food and Nutrition Services Department.
6. Only plastic/disposal storage containers are permitted.

7. If any question exists about the safety of the food brought from the outside, the food will be immediately discarded by the questioning staff member.

H. ATTACHMENTS :

NONE

I. REFERENCES :

NONE

J. SEARCH WORDS :

NONE

K. ENFORCEMENT:

Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

L. STAKEHOLDER APPROVALS :

On File

M. COMMITTEE APPROVALS :

NONE

N. FINAL APPROVAL :

1. Bruce T. Liang, MD (Signed) 06/27/2022
Bruce T. Liang, MD Date
Interim Chief Executive Officer & EVP for Health Affairs
Dean, School of Medicine
2. Anne Horbatuck (Signed) 06/27/2022
Anne D. Horbatuck, RN, BSN, MBA Date
Clinical Policy Committee Co-Chair
3. Scott Allen, MD (Signed) 06/27/2022
Scott Allen, MD Date
Clinical Policy Committee Co-Chair
4. Caryl Ryan (Signed) 06/24/2022
Caryl Ryan, MS, BSN, RN Date
Chief Operating Officer, JDH
VP Quality and Patient Service & Chief Nursing Officer

O. REVISION HISTORY :

Date Issued: 4/12

Date Revised: 7/16, 06/22

Date Reviewed: 6/10, 7/11, 2/12, 5/21