PREAMBLE

The Food Services shall be Headed by a Qualified Food Service Officer registered with the Malaysian Allied Health Professions Council and shall encompass the planning and provision of in-house and outsource Food Service of normal diets according to needs and requirements of patients. Food Services shall also prepare and deliver therapeutic diets for individual patients requiring therapeutic diet including individualized medical nutrition therapy as prescribed by the medical practitioner and dietitian based on established standards of practice and professional performance.

Components of such services may be provided by one department or through separate entities and contracts:

1. Inpatient Food Services

2. Cafeteria/Food Court/Food Outlets/ Vending Machines

TOPIC TOPIC 22.1 ORGANISATION AND MANAGEMENT

STANDARD STANDARD 22.1.1

Food Services shall be organised and coordinated with other services to provide safe, healthy and nutritious food for patients, staff and the public, in accordance with the overall objectives of the Facility. Components of such services may be provided by one department or through separate entities. In some instances, these services may be provided by external sources.

CRITERION				SELF		SURVEYOR FINDIN	IGS	
NO.		CRITERIA FOR COMPLIANCE		RATING	FACILITY COMMENTS	AREAS FOR IMPROVEMENT / RECOMMENDATIONS	SURVEYOR RATING	RISK
	objec meas the co	n, Mission and values statements of the Facility are accessible. Goals and tives that suit the scope of the Food Services are clearly documented and urable. These reflect the roles and aspirations of the service and the need ommunity. These statements are monitored, reviewed and revised as required dingly and communicated to all staff.	s of red	NA			NA	
		EVIDENCE OF COMPLIANCE						
	1.	Vision, Mission and values statements of the Facility are available, I endorsed and dated by the Governing Body.	A					
	2.	Goals and objectives of the Food Services in line with the Facility statements are available, endorsed and dated.	A					
	3.	Evidence of planned reviews of the above statements.	١A					
	4.	These statements are communicated to all staff (orientation programme, minutes of meeting, etc)	A					
	5.	Achievement of goals and objectives are monitored, reviewed and revised accordingly.	AA					
22.1.1.2	There	e is an organisation chart which:		NA			NA	

CORE	b) is a c) inc	 by ides a clear representation of the structure, function and reporting onships between the Head and the staff of the Food Services; accessible to all staff and clients; iludes off-site services if applicable; revised when there is a major change in any of the following: i) organisation; ii) functions; iii) reporting relationships; iv) staffing patterns. EVIDENCE OF COMPLIANCE Clearly delineated current organisation chart with line of functions and reporting relationships between the Head and the staff of the Food Services. Organisation chart of the service is endorsed, dated and accessible The organisation chart is revised when there is a major change in any of the items (d)(i) to (iv) 	NA NA				
22.1.1.3	suffic Food	lar staff meetings are held between the Head of Service and staff with ient regularity to discuss issues and matters pertaining to the operations Services. Minutes are kept; decisions and resolutions made during mee be accessible, communicated to all staff of the service and implemented EVIDENCE OF COMPLIANCE	tings	NA		NA	
	1.	Minutes are accessible, disseminated and acknowledged by the staff	NA				
	2.	Attendance list of members with adequate representatives of the service.	NA				
	3.	Frequency of meetings as scheduled.	NA				
	4.	Discussion and resolutions are implemented (Problems not solved to be brought forward in the next meeting until resolved).	NA				

22.1.1.4 CORE	involv	lead of the Food Services shall be a Qualified Food Service Officer and ed in the planning, management, and justification of budget and resource tion of the services.	;e	NA	NA	
		strict healthcare facility, the visiting dietitian shall be responsible and intable for the monitoring of Therapeutic Diet and Enteral Product.				
		EVIDENCE OF COMPLIANCE				
	1.	Minutes of Facility-wide management meeting	NA			
	2.	Documented evidence on request for allocation of budget and resources (staffing, equipment, etc.) for the service.	NA			
	3.	Approved budget and resources.	NA			
	4.	Letter of Appointment of Head of Food Services	NA			
22.1.1.5	The H staff.	lead of Food Services is involved in the appointment and/or assignment	of	NA	NA	
		EVIDENCE OF COMPLIANCE				
	1.	Records on staff interview (if applicable)	NA			
	2.	Assignment letter of Head of Service	NA			
	3.	Job description	NA			
	4.	Records on staff deployment	NA			
	5.	Duty roster	NA			
22.1.1.6	Food Inforr	priate statistics and records shall be maintained in relation to the provis Services and used for managing the services and patient care purposes nation on the number of meals provided (normal and therapeutic diets) a osts is kept.	S.	NA	NA	
		EVIDENCE OF COMPLIANCE				
	1.	Records are available but not limited to the following:				
	a)	workload/meals provided;	NA			
	b)	food costing;	NA			
	c)	annual report;	NA			
	d)	accident/incident reports;	NA			

					1
	e) staffing number and staff profile;	NA			
	f) staff training records;	NA			
	g) data on performance improvement activities, including performance indicators.	NA			
22.1.1.7	The quantity, quality, and variety of food offered shall be appropriate to patier staff and also meet their nutritional and food safety requirements, as well as religious and cultural preferences. The following certifications are encouraged 1. Good Manufacturing Practice (GMP) certification 2. Hazard Analysis Critical Control Point (HACCP) 3. Halal certification		NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. GMP certification	NA			
	2. HACCP certification	NA			
	3. Cycle/Choice Menus	NA			
	4. Halal certification	NA			
22.1.1.8	 Menu Engineering and Planning Committee (Dietetic And Foodservice staff) s be involved in the following aspects of food services to patients: a) formulation of menus and recipes; b) continuous training and education for food services staff. 	shall	NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Minutes of Menu Committee meeting	NA			
	2. Cycle/Choice Menus	NA			
	3. Training records	NA			
22.1.1.9 CORE	Where Food Services are provided by an external source, there is a written agreement between the external service provider and the Facility stating the requirements for the services that include the following:		NA	NA	
	a) valid license from the local authorities;				
	b) formal lines of communication and responsibilities between the external se provider and the Facility;	rvice			

		<u> </u>	í
	external service provider contracts are monitor and evaluated by an employ site Food Service Officer and Dietitian where appropriate;	yed	
	provision of safe and nutritious food in a recommended quantity to meet the ritional requirements, religious and cultural preferences;	е	
	participation of the external service provider in appropriate committees of the comm	he	
f) ar	rrangements for after-hours and emergency services;		
	nvolvement of the external service provider in safety and quality improvem vities of the Facility, as appropriate;	ient	
h) s	space, facilities and equipment are provided by the Facility.		
	EVIDENCE OF COMPLIANCE		
1.	Terms of written Agreement include items (a) to (h) and evidence of compliance.	NA	
2.	License from local authority, e.g. local health department.	NA	ł
3.	Halal certification (if included in the terms of the contract)	NA	
4.	GMP certification (if included in the terms of the contract)	NA	
5.	HACCP certification (if included in the terms of the contract)	NA	ł

TOPIC TOPIC 22.2 HUMAN RESOURCE DEVELOPMENT AND MANAGEMENT

STANDARD STANDARD 22.2.1

The Food Services is managed by Qualified Food Service Officer and staffed by appropriately qualified staff to achieve the goals and objectives of the Food Services; and to ensure competency in handling, preparing, serving of food including supervision and management of food handlers.

			сгіг		SURVEYOR FINDIN	IGS	
CRITERION NO.	CRITERIA FOR COMPLIANCE		SELF Rating	FACILITY COMMENTS	AREAS FOR IMPROVEMENT / RECOMMENDATIONS	SURVEYOR RATING	RISK
22.2.1.1	The Head and staff of the Food Services shall be individuals qualified by educ training, experience and certification to commensurate with the requirements various positions.		NA			NA	
	The Head of Food Services shall be registered following the requirements of t Allied Health Professions Act	he					
	EVIDENCE OF COMPLIANCE						
	1. Records on credentials of Head of Service and staff required to fill up the posts within the service (to match the complexity of the Facility and services) and certification/registration.	NA					
	2. Appointment/assignment letters	NA					
	3. Certification	NA					
	4. Training and competency records	NA					
22.2.1.2 CORE	The Person In Change (PIC) of the Facility shall ensure the availability of a Qualified Dietitian who shall be responsible to evaluate the therapeutic diet ar enteral product in district healthcare facility without resident Qualified Dietitian		NA			NA	
	EVIDENCE OF COMPLIANCE						
	1. Appointment/approval letter of visiting dietitian	NA					
	2. Attendance and record of visits by visiting dietitian	NA					
22.2.1.3	The authority, responsibilities and accountabilities of the Head of Food Servic clearly delineated and documented.	es are	NA			NA	
	EVIDENCE OF COMPLIANCE						
	1. Appointment/assignment letter for Head of Service.	NA					

	2. Description of duties and responsibilities.	NA	
22.2.1.4	Sufficient numbers of personnel and support staff with appropriate qualifications	are	NA
	employed to meet the need of the services.		
	There shall be regular review of staffing needs and staff utilisation.		
	EVIDENCE OF COMPLIANCE		
		NA	
	· · · · · · · · · · · · · · · · · · ·	NA NA	
	5	NA NA	
	, , , , , , , , , , , , , , , , , , ,	NA NA	
22.2.1.5	There are written and dated specific job descriptions for all categories of staff th		NA
ZZ.Z.1.3	include:	al	NA
	a) muslifications training superions and satification required for the modification		
	a) qualifications, training, experience and certification required for the position;		
	b) lines of authority;		
	c) accountability, functions and responsibilities;		
	d) reviewed when required and when there is a major change in any of the following:		
	nonowing.		
	• i) nature and scope of work;		
	 ii) duties and responsibilities; iii) general and specific accountabilities; 		
	 in) general and specific accountabilities; iv) qualifications required and privileges granted; 		
	• v) staffing patterns;		
	vi) Statutory Regulations.		
	EVIDENCE OF COMPLIANCE		
		NA	
	includes but not limited to as listed in (a) to (d).		
		A	
	3. Relevant privileges granted where applicable	A	

	4. The job description is acknowledged by the staff and signed by the	ne NA			
	Head of Service and dated.				
2.2.1.6	Personnel records on training, staff development, leave and others are r for every staff.	maintained	NA		NA
	Note: Staff personal record may be kept in Human Resource Department as p	er Facility			
	policy.				
	EVIDENCE OF COMPLIANCE				
	1. Staff personal records include:				
	a) staff biodata;	NA			
	b) qualification and experience;	NA			
	c) evidence of current registration;	NA			
	d) training record;	NA			
	e) competency record	NA			
	f) leave record;	NA			
	g) confidentiality agreement.	NA			
2.2.1.7	There is a structured orientation programme where new staff are briefed services, operational policies and relevant aspects of the Facility to prep for their roles and responsibilities		NA		NA
	EVIDENCE OF COMPLIANCE				
	1. Policy requiring all new staff to attend a structured orientation programme	NA			
	2. Records on structured orientation programme	NA			
	3. Orientation Brief	NA			
	4. List of attendance	NA			
2.2.1.8	There is evidence of training needs assessment and staff development provides the knowledge and skills required for staff to maintain compete current positions and future advancement.		NA		NA
	EVIDENCE OF COMPLIANCE				
	1. Training needs assessment is carried out and gaps identified.	NA			

	2.	A staff development plan based on training needs assessment is available.	NA				
	3.	Training schedule/calendar is in place	NA				
	4.	Training module	NA				
22.2.1.9		e are continuing education activities for staff to pursue professional inte to prepare for current and future changes in practice.	rests	NA		NA	
		EVIDENCE OF COMPLIANCE					
	1.	Continuing education activities schedule	NA				
	2.	Contents of training programme	NA				
	3.	Training records on continuing education activities are kept and maintained for each staff.	NA				
	4.	Certificate of attendance/degree/post basic training.	NA				
22.2.1.10		Certificate of attendance/degree/post basic training. receive evaluation of their performance at the completion of the probation and annually thereafter, or as defined by the Facility.		NA		NA	
22.2.1.10		receive evaluation of their performance at the completion of the probati		NA		NA	
22.2.1.10		receive evaluation of their performance at the completion of the probation of and annually thereafter, or as defined by the Facility.		NA		NA	
22.2.1.10 22.2.1.11 CORE	perio	receive evaluation of their performance at the completion of the probation of and annually thereafter, or as defined by the Facility. EVIDENCE OF COMPLIANCE Performance appraisal for staff is completed upon probationary	ionary NA	NA		NA	
22.2.1.11	perio	receive evaluation of their performance at the completion of the probation of and annually thereafter, or as defined by the Facility. EVIDENCE OF COMPLIANCE Performance appraisal for staff is completed upon probationary period and as an annual exercise. bod handlers shall undergo medical screening, immunisation and Food I	ionary NA				
22.2.1.11	perio	receive evaluation of their performance at the completion of the probation of and annually thereafter, or as defined by the Facility. EVIDENCE OF COMPLIANCE Performance appraisal for staff is completed upon probationary period and as an annual exercise. Dood handlers shall undergo medical screening, immunisation and Food I ning as required by relevant statutory requirements.	ionary NA				
22.2.1.11	perio	receive evaluation of their performance at the completion of the probation of and annually thereafter, or as defined by the Facility. EVIDENCE OF COMPLIANCE Performance appraisal for staff is completed upon probationary period and as an annual exercise. Dod handlers shall undergo medical screening, immunisation and Food I hing as required by relevant statutory requirements. EVIDENCE OF COMPLIANCE EVIDENCE OF COMPLIANCE	NA Handler				

TOPIC TOPIC 22.3 POLICIES AND PROCEDURES

STANDARD STANDARD 22.3.1

Food Services shall be provided in accordance with the policies of the Facility and statutory requirements where applicable. Documented policies and procedures appropriate to the provision of safe and quality food services shall be made accessible to all staff.

CRITERION				SELF		SURVEYOR FINDIN	GS	
NO.		CRITERIA FOR COMPLIANCE		RATING	FACILITY COMMENTS	AREAS FOR IMPROVEMENT / RECOMMENDATIONS	SURVEYOR RATING	RISK
22.3.1.1 CORE	cons curre and o	e are written policies and procedures for the Food Services which are istent with the overall policies of the Facility, regulatory requirements and ent standard practices. These policies and procedures are signed, authori dated. There is a mechanism for and evidence of a periodic review at leas a in every three years	zed	NA			NA	
		EVIDENCE OF COMPLIANCE						
	1.	Documented policies and procedures for the service	NA					
	2.	Policies and procedures are consistent with regulatory requirements and current standard practices.	NA					
	3.	Evidence of periodic review of policies and procedures.	NA					
	4.	The policies and procedures are endorsed and dated.	NA					
22.3.1.2	medi provi Cros	ties and procedures are developed by a committee in collaboration with st ical practitioners, Management and where required with other external ser iders and with reference to relevant sources involved. It departmental collaboration is practised in developing relevant policies a edures where applicable.	rvice	NA			NA	
		EVIDENCE OF COMPLIANCE						
	1.	Minutes of committee meetings on development and revision on policies and procedures	NA					
	2.	Minutes of meeting with evidence of cross reference with other departments	NA					
	3.	Documented cross departmental policies	NA					
22.3.1.3	Curre	ent policies and procedures are communicated to all staff.		NA			NA	

	EVIDENCE OF COMPLIANCE		
	1. Training and briefing on the current policies and procedures/Minutes NA of meetings		
	2. Circulation list and acknowledgement NA		
22.3.1.4 CORE	There is evidence of compliance with policies and procedures.	NA	NA
	EVIDENCE OF COMPLIANCE		
	1. Compliance with policies and procedures through:		
	a) interview of staff on practices; NA		
	b) verify with observation on practices; NA		
	c) results of audit on practices; NA		
	d) practices in line with established policies and procedures NA		
22.3.1.5	Copies of policies and procedures, protocols, guidelines, relevant Acts, Regulations, ByLaws and statutory requirements are accessible to staff.	NA	NA
	EVIDENCE OF COMPLIANCE		
	1. Copies of policies and procedures, protocols, guidelines, relevant Acts, Regulations, By-Laws and statutory requirements are accessible on-site for staff reference.		
	2. Copy of guidelines on current "Hospital Catering" by Ministry of Health or other recognised bodies is available for reference.		
22.3.1.6	Fire precautions, disaster plans and safety procedures shall be documented and followed.	NA	NA
	EVIDENCE OF COMPLIANCE		
	1. Manuals/Protocols on safety include:		
	a) Internal fire drill NA		
	b) Disaster plan NA		
	c) Evacuation plan NA		
	d) Safety procedures in the kitchen NA		
22.3.1.7	Stock control, ordering and stock taking arrangements shall be in place to promote effective management of the Food Services and deter pilfering and theft.	e NA	NA

	1	EVIDENCE OF COMPLIANCE Stock control card	NA	
	1. 2	Stock control card Stock taking records (monthly or quarterly)	NA	
00.0.1.0	Ζ.			N 1 A
22.3.1.8	Doci	umentation of policies for storage and handling of food shall be evident.		NA
		EVIDENCE OF COMPLIANCE		
	1.	Standard operating procedures for storage and handling of food	NA	
	2.	Standard operating procedures for monitoring of temperatures	NA	
	3.	Cleaning schedule for storage facilities.	NA	
22.3.1.9	Food	I ready for consumption and raw food shall be stored and handled sepa	rately.	NA
			-	
		EVIDENCE OF COMPLIANCE		
	1.	Policies and procedures on handling cooked and raw food	NA	
	2.	Compliance to procedures as evidenced by work process	NA	
	3.	Designated storage and handling areas	NA	
22.3.1.10		preparation of food for long term holding such as freezing shall be carr if trained staff are available to establish the standards and supervise th		NA
		lling, preparation, and processing of food stuff.	е	
		EVIDENCE OF COMPLIANCE	-	
	1.	Staff training records on bulk preparation and holding	NA	
	2.	Standard operating procedures for bulk preparation	NA	
	3.	Compliance to procedures as evidenced by work process	NA	
22.3.1.11		us shall be planned to provide meals that meet the needs of patients, s		NA
		ts and staff on normal and therapeutic diets. Menus shall also provide f Is of staff and suit religious and cultural preferences.	or the	
		EVIDENCE OF COMPLIANCE		
	1.	Policies and standard operating procedures for food preparation	NA	
			NA	
	2.	Standard Recipes Book/Cycle/Choice Menus, e.g. vegetarian	NA	
	2. 3.	Standard Recipes Book/Cycle/Choice Menus, e.g. vegetarian Compliance to procedures as evidence by records	NA	

	5. HACCP certification	NA		
	6. HALAL certification	NA		
22.3.1.12	There shall be designated staff to deliver and serve the food to the patients supervised and monitored by the nursing staff.		NA	NA
	EVIDENCE OF COMPLIANCE			
	1. Cross departmental policy	NA		
	2. Compliance to policy as evidenced by work process	NA		
22.3.1.13	There is an appropriate documented procedure to ensure safe provision of r infectious patients.	neals to	NA	NA
	EVIDENCE OF COMPLIANCE			
	1. Documented policy on safe provision of meals for infectious patients	NA		
	2. Evidence of compliance upon onsite inspection	NA		
22.3.1.14	Documented procedures shall be evident for the cleaning of all equipment.		NA	NA
	EVIDENCE OF COMPLIANCE			
	1. Documented policy and procedures for cleaning of all equipment	NA		
	2. Records on cleaning of equipment	NA		
22.3.1.15	Procedures for machine and hand dishwashing shall be documented and av	/ailable.	NA	NA
	EVIDENCE OF COMPLIANCE			
	1. Documented policy and procedures for machine and hand washing.	NA		
	2. Compliance to procedures for machine and hand washing as evidenced upon on site inspection.	NA		
22.3.1.16	Garbage shall be held in covered containers and removed from the Food Se area daily as per schedule.	ervices	NA	NA
	EVIDENCE OF COMPLIANCE			
	1. Documented policy on waste disposal	NA		
	2. Compliance with the policy on waste disposal.	NA		
22.3.1.17	There is a proper procedure for the disposal of food refuse.		NA	NA

	EVIDENCE OF COMPLIANCE		
	Documented policy and procedures for disposal of food refuse.	NA	
	 Compliance with policy and procedures for disposal of food refuse. 		
22.3.1.18	There is a continuing programme on pest and vermin control.	I	NA
	EVIDENCE OF COMPLIANCE		
	1. Policy and procedures on pest and vermin control	NA	
	2. Inspection and treatment records on pest and vermin control	NA	-
22.3.1.19 CORE	There is evidence of inspection and certification by the Health Authority a annually and the rating should be 75% and above.	at least	NA
	EVIDENCE OF COMPLIANCE		
	1. Certificate by Health Authority	NA	
	2. Monitoring records	NA	
22.3.1.20	All food services staff shall comply with good hygienic and safety practice personal hygiene and clothing while on duty. EVIDENCE OF COMPLIANCE		NA
	1. Policy and procedures on appropriate clothing of staff/food handle		
	2. Compliance to policies and procedures on hand washing technique		
	3. Representation of the Food Services in Hospital Infection and Antibiotic Control Committee/Team	NA	
22.3.1.21	The Head of Food Services shall ensure that no staff with the following c shall work in any area of food preparation and services during the duration illness:		NA
	a) infected with or who is a carrier of a communicable disease;		
	b) having boils;		
	c) with open or infected skin lesions;		
	d) with an acute respiratory infection.		
	EVIDENCE OF COMPLIANCE		

TOPIC TOPIC 22.4 FACILITIES AND EQUIPMENT

STANDARD STANDARD 22.4.1

Appropriate and adequate physical layout, mechanical, electrical facilities, and equipment shall be available for the efficient operations of the Food Services

CRITERION		SELF		SURVEYOR FINDIN	GS	
NO.	CRITERIA FOR COMPLIANCE	RATING	FACILITY COMMENTS	AREAS FOR IMPROVEMENT / RECOMMENDATIONS	SURVEYOR RATING	RISK
22.4.1.1 CORE	The layout of areas for Food Services shall allow for the following:	NA			NA	
	a) receiving of food stocks;					
	 b) storage of food ensuring adequate separation of dry ration from perishable and adequate segregation of perishable by type; 					
	 c) food handling prior to cooking with separate process areas for meat, fish and vegetables to prevent cross contamination; 					
	d) separate areas for preparation of salad, pastries and confectionaries; m					
	e) preparation of food including cooking or reconstitution;					
	f) separate area for preparation and handling of therapeutic diet as well as special menus to suit religious and cultural preferences;					
	g) holding of prepared food;					
	h) tray line for plating of food;					
	i) distribution of food or meals;					
	j) dishwashing and scullery activities;					
	k) storage for crockery, cutlery and other items;					
	I) waste disposal;					
	m) adequate hand washing facilities for staff, separate from those utilised for food preparation;					

					-
	n) staff rest and changing areas should be outside any food preparation area.				
	EVIDENCE OF COMPLIANCE				
	1. Kitchen design and layout plan shall address all items in (a) to (n) and evidenced upon on-site inspection.	NA			
	2. Clear signage and labelling of designated areas	NA			
	3. Work process as prescribed in the layout plan	NA			
22.4.1.2	Floors, walls, and ceilings finishes shall be easily cleaned, non-skid, impervio kept in good repair.	us and	NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Floors, walls and ceilings comply with standard materials and kept in good repair as evidenced upon inspection.	NA			
	2. Regular cleaning and maintenance reports	NA			
22.4.1.3	Lighting shall be adequate and appropriate to provide safe work environment		NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Adequate lighting; electrical lightings are covered.	NA			
	2. Report on regular inspection of lightings	NA			
	3. Maintenance report	NA			
22.4.1.4	Appropriate ventilation, temperature and humidity control shall be available to provide comfortable working condition and promote cleanliness.)	NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Temperature and humidity monitoring records,	NA			
	2. Kitchen hood /air extractor maintenance reports	NA			
	3. Comfortable working condition as evidenced upon onsite inspection	NA			
22.4.1.5	There is evidence of compliance with fire safety requirements.		NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Appropriate fire suppression system	NA			
	2. Evacuation plan	NA			
	3. Fire safety inspection records	NA			

	_					-
	4.	Maintenance report	NA			
	5.	Reports on fire drill	NA			
	6.	Extension of Public Address (PA) system to the kitchen	NA			
22.4.1.6		d storage in dry stores, refrigerated stores, and freezers shall comply with opriate health regulations and standards of good storage practice.	h	NA	NA	
		EVIDENCE OF COMPLIANCE				
	1.	Temperature monitoring records and trending	NA			
	2.	Standard operating procedures on types of food storage facilities	NA			
	3.	Storage practices comply with relevant standards	NA			
22.4.1.7		e is documented evidence that equipment complies with relevant nal/international standards and current statutory requirements.		NA	NA	
		EVIDENCE OF COMPLIANCE				
	1.	Testing, commissioning and calibration records (certificates or stickers)	NA			
	2.	Certification of equipment from certified bodies, e.g. Standards and Industrial Research Institute of Malaysia (SIRIM), etc as evidence of compliance to the relevant standards and Acts.	NA			
22.4.1.8 CORE	such	e is evidence that the facility has a comprehensive maintenance program as predictive maintenance, planned preventive maintenance and calibra ities, to ensure the facilities and equipment are in good working order.		NA	NA	
		EVIDENCE OF COMPLIANCE				
	1.	Planned Preventive Maintenance records (schedule, stickers) including calibration and grease trap inspection records	NA			
	2.	Planned Replacement Programme where applicable	NA			
	3.	Complaint records	NA			
	4.	Asset inventory	NA			
22.4.1.9	Whe train	re specialised equipment is used, there is evidence that only staff who a ed and authorised by the Facility operate such equipment.	re	NA	NA	
		EVIDENCE OF COMPLIANCE				
	1.	User training records	NA			

2	2.	Competency assessment record	NA	
3	3.	Letter of authorisation	NA	
4	1.	List of staff trained and authorised to operate specialised equipment	NA	

TOPIC TOPIC 22.5 SAFETY AND PERFORMANCE IMPROVEMENT ACTIVITIES

STANDARD STANDARD 22.5.1

The Head of Food Services shall ensure the provision of quality performance with staff involvement in the continuous safety and performance improvement activities in Food Services.

CRITERION		SE			SURVEYOR FINDIN	IGS	
NO.	CRITERIA FOR COMPLIANCE	RAT		FACILITY COMMENTS	AREAS FOR IMPROVEMENT / RECOMMENDATIONS	SURVEYOR RATING	RISK
22.5.1.1 CORE	There are planned and systematic safety and performance improvement activiti to monitor and evaluate the performance of the Food Services. The process includes:	es N/	A			NA	
	a) Planned activities						
	b) Data collection						
	c) Monitoring and evaluation of the performance						
	d) Action plan for improvement						
	e) Implementation of action plan						
	f) Re-evaluation for improvement						
	Innovation is advocated.						
	EVIDENCE OF COMPLIANCE						
	1. Planned performance improvement activities include (a) to (f).	A					
	2. Records on performance improvement activities.	A					
	3. Minutes of performance improvement meetings	A					
	4. Quality improvement studies	A					
	5. Records on innovation if available	A					
22.5.1.2	The Head of Food Services has assigned the responsibilities for planning, monitoring and managing safety and performance improvement to appropriate individual/personnel within the respective services.	N	A			NA	
	EVIDENCE OF COMPLIANCE						

	_			
	1.	Minutes of meetings	NA	
	2.	Letter of assignment of responsibilities	NA	
	3.	Job description	NA	
22.5.1.3	incide with F Facili	Head of the Food Services shall ensure that the staff are trained and co ent reports which are promptly reported, investigated, discussed by the earning objectives and forwarded to the Person In Charge (PIC) of the ty. ents reported have had Root Cause Analysis done and action taken wit ed time frame to prevent recurrence.	staff	NA
		EVIDENCE OF COMPLIANCE		
	1.	System for incident reporting is in place, which include:		
	a)	Training of staff	NA	
	b)	Policy on incident reporting	NA	
	c)	Methodology of incident reporting	NA	
	d)	Register/records of incidents	NA	
	2.	Completed incident reports	NA	
	3.	Root Cause Analysis	NA	
	4.	Corrective and preventive action plans	NA	
	5.	Remedial measure	NA	
	6.	Minutes of meetings	NA	
	7.	Acknowledgment by Head of Service and PIC/Hospital Director	NA	
	8.	Feedback given to staff regarding incident reporting.	NA	
22.5.1.4 CORE		e is tracking and trending of specific performance indicators not limited two (2) of the following:	to but at	NA
		rcentage of ready to serve food tested negative for pathogenic microorg r schedule (Target: 100%)	ganism	
	b) oc event	currence of physical contamination of food served to patients (Target: s ;)	sentinel	
	c) cli€	ent food satisfaction survey (Target: above 85%)		

	1	EVIDENCE OF COMPLIANCE		
	1.	Specific performance indicators monitored.	NA	
	2.	Records on tracking and trending analysis.	NA	
	3.	Remedial measures taken where appropriate	NA	
22.5.1.5		dback on results of safety and performance improvement activities are re- municated to the staff.	gularly	NA
		EVIDENCE OF COMPLIANCE		
	1.	Results on safety and performance improvement activities are accessible to staff.	NA	
	2.	Evidence of feedback via communication on results of performance improvement activities through continuing education activities/meetings.	NA	
	3.	Minutes of service/unit/committee meetings	NA	
22.5.1.6		ropriate documentation of safety and performance improvement activities and confidentiality of medical practitioners, staff and patients is preserve		NA
		EVIDENCE OF COMPLIANCE		
	1.	Documentation on performance improvement activities and performance indicators.	NA	
	2.	Policy statement on anonymity on patients and providers involved in performance improvement activities.	NA	

TOPIC TOPIC 22.6 SPECIAL REQUIREMENTS

STANDARD STANDARD 22.6.1 CAFETERIA SERVICES/FOOD COURT/FOOD OUTLETS/VENDING MACHINES

Cafeteria Services/Food Court/Food Outlets/ Vending Machines shall be appropriately staffed, organised and managed to provide safe food for staff and public, in accordance with the overall goals and objectives of the Food Services.

						SURVEYOR FINDIN	IGS	
CRITERION NO.			self Rating	FACILITY COMMENTS	AREAS FOR IMPROVEMENT / RECOMMENDATIONS	SURVEYOR RATING	RISK	
22.6.1.1 CORE	Cafet	e shall be a formal contract agreement between the Facility managemen teria Services/Food Court/Food Outlets/Vending Machines operator (if burced) stating the requirements of the services	t and	NA			NA	
		EVIDENCE OF COMPLIANCE						
	1.	Food Service contract include subcontractor contract, where applicable	NA					
	2.	The service contract includes:						
	a)	the requirements for provision of safe and quality food as per MSQH Accreditation Standards for Food Services;	NA					
	b)	specific requirements;	NA					
	c)	Key Performance Indicators.	NA					
	d)	Certification ie Kafetaria Sihat / BESS	NA					
22.6.1.2	22.6.1.2 Service provider has a valid licence(s) from the relevant local authority to operate the Cafeteria Services/Food Court/Food Outlets/Vending Machines. All food handlers must undergo medical examination and immunisation as well as Food Handlers Training required by relevant statutory requirements. Where the food is prepared off-site, the supplier shall register with the hospital and where appropriate have a valid licence.		NA			NA		
		EVIDENCE OF COMPLIANCE						
	1.	Valid licence from local authority	NA					
	2.	Immunisation record (Typhoid)	NA					
	3.	Food Handlers Training Certificate	NA					

22.6.1.3	The Head of the Food Services shall oversee the operations of the Cafeteria Services/Food Court/Food Outlets/Vending Machines.	١	NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Letter of Appointment of Head of Food Services as overseer of operations of cafeteria/food court/food outlets/Vending Machines.	NA			
	2. Minutes of meeting	NA			
	3. Monitoring schedule and reports	NA			
22.6.1.4	Sufficient numbers of trained personnel and support staff are employed to allow the services to meet its documented purposes.	for N	NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. List of employee	NA			
	2. Duty roster	NA			
	3. Staff training certificate	NA			
22.6.1.5	There is a structured orientation programme where new staff are briefed on the services, operational policies and relevant aspects to prepare them for their role and responsibilities.		NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Orientation programme schedule and contents	NA			
	2. Attendance list	NA			
22.6.1.6	There is clear evidence of appropriate quality assurance mechanism and adherence to standards and regulations on Food Quality as stipulated by the lo authority, including microbiological testing on food samples.		NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Records and results of food sampling and inspection	NA			
	2. Food sampling schedule	NA			
22.6.1.7	There is a process to ensure that no staff with the following conditions shall wor any area of food preparation and services during the duration of the illness:	kin N	NA	NA	
	a) infected with or who is a carrier of a communicable disease;				
	b) having boils;				

-	n open or infected skin lesions; h an acute respiratory infection.	
	EVIDENCE OF COMPLIANCE	
1.	Instructions on prohibition of staff with specific illness/conditions working in food preparation and services areas include but not limited to items (a) to (d)	NA
2.	Monitoring records	NA
3.	Deployment records	NA

STANDARD STANDARD 22.6.1.1

The Cafeteria Services/Food Court/Food Outlets/Vending Machines shall make available the delivery of safe and quality food services for the staff and public.

						SURVEYOR FINDIN	IGS	
CRITERION NO.		CRITERIA FOR COMPLIANCE		Self Ating	FACILITY COMMENTS	AREAS FOR IMPROVEMENT / RECOMMENDATIONS	SURVEYOR RATING	RISK
22.6.1.1.1	Outlet	are written policies and procedures for Cafeteria Services/Food Court/F is/Vending Machines (in outsourced services terms of contract) that are stent with the overall policies of the Facility.		NA			NA	
		EVIDENCE OF COMPLIANCE						
	1.	Written policies and procedures for cafeteria services/food court/food outlets/Vending Machines	NA					
22.6.1.1.2		and revised policies and procedures are communicated to members of eria Services/Food Court/Food Outlets management.		NA			NA	
		EVIDENCE OF COMPLIANCE						
	1.	Circulation list and acknowledgement on policies and procedures	NA					
	2.	Briefing and attendance records	NA					
	3.	Minutes of meetings	NA					
22.6.1.1.3	There	is evidence of compliance with policies and procedures.		NA			NA	
		EVIDENCE OF COMPLIANCE						
	1.	Compliance with policies and procedures through:						
	a)	interview of staff on practices;	NA					
	b)	verify with observation on practices;	NA					
	c)	audit report on compliance with policies and procedures;	NA					
	d)	adherence to Good Manufacturing Practice (GMP) guidelines.	NA					
22.6.1.1.4	"Hosp Sihat a	s of relevant regulations and statutory requirements including guidelines ital Catering" and current "Garis Panduan Penilaian Pengiktirafan Kafet and Pelaksanaan Mesin Layan Diri/Vending Machine by Ministry of Hea ther recognised bodies are available for reference and are complied with	eria alth or	NA			NA	
		EVIDENCE OF COMPLIANCE						

				1		
	1. Copies of policies and procedures, protocols, guidelines, relevant Acts, Regulations, By-Laws and statutory requirements are accessible on-site for staff reference.	NA				
	 Copies of relevant documents including guidelines on "Hospital Catering" by Ministry of Health or other recognised bodies is available for references. 	NA				
22.6.1.1.5	Fire precautions, disaster plans and safety procedures are documented and followed.		NA		NA	
	EVIDENCE OF COMPLIANCE					
	1. Fire detection and suppression system	NA				
	2. Evacuation plan	NA				
	3. Fire safety inspection records	NA				
	4. Maintenance report	NA				
	5. Reports on Fire drill	NA				
	Planned preventive and corrective maintenance programmes for equipment records shall be in place.					
	EVIDENCE OF COMPLIANCE					
	EVIDENCE OF COMPLIANCE 1. Planned preventive maintenance records	NA				
		NA NA				
22.6.1.1.7	1. Planned preventive maintenance records	NA	NA		NA	
22.6.1.1.7	 Planned preventive maintenance records Corrective maintenance records Documentation of policies and procedures for storage and handling of food storage 	NA	NA		NA	
22.6.1.1.7	1. Planned preventive maintenance records 2. Corrective maintenance records Documentation of policies and procedures for storage and handling of food sevident.	NA	NA		NA	
	1. Planned preventive maintenance records 2. Corrective maintenance records Documentation of policies and procedures for storage and handling of food sevident. EVIDENCE OF COMPLIANCE	NA shall be	NA		NA	
	1. Planned preventive maintenance records 2. Corrective maintenance records Documentation of policies and procedures for storage and handling of food sevident. EVIDENCE OF COMPLIANCE 1. Policies and procedures for storage and handling of food	NA shall be				
	1. Planned preventive maintenance records 2. Corrective maintenance records Documentation of policies and procedures for storage and handling of food sevident. EVIDENCE OF COMPLIANCE 1. Policies and procedures for storage and handling of food Cooked food and raw food shall be stored and handled separately.	NA shall be				
22.6.1.1.7 22.6.1.1.8	1. Planned preventive maintenance records 2. Corrective maintenance records Documentation of policies and procedures for storage and handling of food sevident. EVIDENCE OF COMPLIANCE 1. Policies and procedures for storage and handling of food Cooked food and raw food shall be stored and handled separately. EVIDENCE OF COMPLIANCE 1. Policies and procedures for storage and handling of food Cooked food and raw food shall be stored and handled separately.	NA shall be NA				

	EVIDENCE OF COMPLIANCE				
	1. Policy and procedure on waste disposal	NA			
	2. Garbage disposal schedule	NA			
22.6.1.1.10	A clear procedure shall be established and documented as regards to the c of food refuse.	disposal	NA		NA
	EVIDENCE OF COMPLIANCE				
	1. Policy and procedures for disposal of food refuse.	NA			
	2. Food refuse disposal schedule	NA			
22.6.1.1.11	There shall be a continuing programme of pest and vermin control.		NA		NA
	EVIDENCE OF COMPLIANCE				
	1. Policy and procedures on pest and vermin control	NA			
	2. Inspection and treatment records on pest and vermin control	NA			
22.6.1.1.12 CORE	There is evidence of inspection and certification by the Health Authority at I annually and the rating should be 75% and above.	least	NA		NA
22.6.1.1.12 CORE	There is evidence of inspection and certification by the Health Authority at I annually and the rating should be 75% and above. EVIDENCE OF COMPLIANCE	least	NA		NA
	annually and the rating should be 75% and above.	least NA	NA		NA
	annually and the rating should be 75% and above. EVIDENCE OF COMPLIANCE		NA		NA
CORE	annually and the rating should be 75% and above. EVIDENCE OF COMPLIANCE Certificate by Health Authority	NA NA	NA		 NA
CORE	annually and the rating should be 75% and above. EVIDENCE OF COMPLIANCE 1. Certificate by Health Authority 2. Monitoring records Appropriate clean, protective clothing shall be worn by all staff and this clot	NA NA			
CORE	EVIDENCE OF COMPLIANCE 1. Certificate by Health Authority 2. Monitoring records Appropriate clean, protective clothing shall be worn by all staff and this clot shall be changed daily and as required. EVIDENCE OF COMPLIANCE 1. EVIDENCE OF COMPLIANCE 1. Policy and procedures on appropriate clothing of food handlers evidenced upon onsite inspection	NA NA			
CORE	annually and the rating should be 75% and above. EVIDENCE OF COMPLIANCE 1. Certificate by Health Authority 2. Monitoring records Appropriate clean, protective clothing shall be worn by all staff and this clot shall be changed daily and as required. EVIDENCE OF COMPLIANCE 1. Policy and procedures on appropriate clothing of food handlers	NA NA hing			
CORE	EVIDENCE OF COMPLIANCE 1. Certificate by Health Authority 2. Monitoring records Appropriate clean, protective clothing shall be worn by all staff and this clot shall be changed daily and as required. EVIDENCE OF COMPLIANCE 1. EVIDENCE OF COMPLIANCE 1. Policy and procedures on appropriate clothing of food handlers evidenced upon onsite inspection	NA NA hing NA			
CORE	EVIDENCE OF COMPLIANCE 1. Certificate by Health Authority 2. Monitoring records Appropriate clean, protective clothing shall be worn by all staff and this clot shall be changed daily and as required. EVIDENCE OF COMPLIANCE 1. Policy and procedures on appropriate clothing of food handlers evidenced upon onsite inspection 2. Records on consumables on Personal Protective Equipment	NA NA thing NA NA NA			
CORE 22.6.1.1.13	EVIDENCE OF COMPLIANCE 1. Certificate by Health Authority 2. Monitoring records Appropriate clean, protective clothing shall be worn by all staff and this clot shall be changed daily and as required. EVIDENCE OF COMPLIANCE 1. Policy and procedures on appropriate clothing of food handlers evidenced upon onsite inspection 2. Records on consumables on Personal Protective Equipment 3. Audit record on practice	NA NA thing NA NA NA	NA		NA
CORE 22.6.1.1.13	EVIDENCE OF COMPLIANCE 1. Certificate by Health Authority 2. Monitoring records Appropriate clean, protective clothing shall be worn by all staff and this clot shall be changed daily and as required. EVIDENCE OF COMPLIANCE 1. Policy and procedures on appropriate clothing of food handlers evidenced upon onsite inspection 2. Records on consumables on Personal Protective Equipment 3. Audit record on practice All food services staff shall comply with good hygienic practices while on due	NA NA thing NA NA NA	NA		NA

STANDARD STANDARD 22.6.1.2

To meet its goals and objectives the physical facilities and equipment appropriate to the needs of the Cafeteria Services/Food Court/Food Outlets/Vending Machines shall be available

				SURVEYOR FINDIN	IGS	
CRITERION NO.	CRITERIA FOR COMPLIANCE	Self Rating	FACILITY COMMENTS	AREAS FOR IMPROVEMENT / RECOMMENDATIONS	SURVEYOR RATING	RISK
22.6.1.2.1	The layout areas for Cafeteria Services/Food Court/Food Outlets/Vending Machines shall allow for the following:	NA			NA	
	a) storage of food ensuring adequate separation of dry ration from perishables and adequate separation of perishables by type;					
	 b) food handling prior to cooking with separate process areas for meat, fish and vegetables to prevent contamination; 					
	c) receiving of food stocks;					
	d) holding of prepared food;					
	e) preparation of food including cooking or reconstitution;					
	f) serving of meals;					
	g) dishwashing and scullery activities;					
	h) storage for crockery and cutlery and other items;					
	i) waste disposal;					
	j) staff rest and changing areas should be outside any food preparation area;					
	k) there shall be separate areas for preparation of salads, pastries, confectionaries;					
	 adequate hand washing facilities for staff, separate from those utilised for food preparation in the main kitchen area. 					
	EVIDENCE OF COMPLIANCE					
	1. Design and layout of the Cafeteria/food court/food outlets/Vending NA Machines address items (a) to (I)					
	2. Clear signage and labelling of designated areas NA	-				

	· · · · · · · · · · · · · · · · · · ·			1	<u> </u>
	3. Work process comply with layout plan as evidenced upon onsite inspection	NA			
22.6.1.2.2	Floors, walls, and ceilings finishes shall be easily cleaned, non-skid, impervio kept in good repair.	ous and	NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Floors, walls and ceilings comply with standard materials and kept in good repair as evidenced upon inspection	NA			
	2. Regular cleaning and maintenance reports	NA			
22.6.1.2.3	Appropriate lighting to allow safe work environment shall be available.		NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Adequate lighting; electrical lightings are covered.	NA			
	2. Report on regular inspection of lightings	NA			
	3. Electrical lightings should be covered.	NA			
22.6.1.2.4	Appropriate ventilation, temperature and humidity to provide comfortable wo conditions and promote cleanliness.	orking	NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Comfortable environment for staff/public as evidenced upon onsite inspection	NA			
	2. Monitoring of temperature records, e.g. Data logger/manual recording	NA			
	3. Maintenance of hood/extractor report	NA			
22.6.1.2.5	There is evidence that the Cafeteria Services/Food Court/Food Outlets/Venc Machines has complied with fire safety requirements.	ding	NA	NA	
	EVIDENCE OF COMPLIANCE				
	1. Fire detection and suppression system	NA			
	2. Evacuation plan	NA			
	3. Fire safety inspection records	NA			
	4. Maintenance report	NA			
	5. Reports on fire drill	NA			

	6. Training records NA		
22.6.1.2.6	Refrigeration and storage of food in dry storage, refrigerated storage and in freezers shall comply with appropriate health regulations and standards of good practice.	NA NA	
	EVIDENCE OF COMPLIANCE		
	1. Temperature monitoring records on freezer/refrigerator and trending NA		
	2. Compliance to standard operating procedures as evidenced onsite. NA		
22.6.1.2.7	There is documented evidence that equipment complies with relevant standards and current statutory requirements.	NA NA	
	EVIDENCE OF COMPLIANCE		
	1. Testing, commissioning and calibration records (certificates or NA stickers)		
	2. Certification of equipment from certified bodies, e.g. Standards and Industrial Research Institute of Malaysia (SIRIM), etc as evidence of compliance to the relevant standards and Acts.		
22.6.1.2.8	There is evidence that the facilities and equipment are maintained in good working order and subject to ongoing planned preventive maintenance and calibration.	NA NA	
	EVIDENCE OF COMPLIANCE		
	1. Planned preventive maintenance records NA		
	2. Calibration records NA		
22.6.1.2.9	Where specialised equipment is used, there is evidence that only staff who are trained and authorised by the Facility operate such equipment.	NA NA NA	
	EVIDENCE OF COMPLIANCE		
	1. User training records NA		
	2. Competency assessment record NA		
	3. Letter of authorisation NA		
	4. List of staff trained and authorised to operate specialised equipment NA		

STANDARD STANDARD 22.6.1.3

The Facility management ensures the provision of quality food services in the Cafeteria Services/Food Court/Food Outlets/Vending Machines through ongoing safety and performance improvement activities of the Facility.

		SELF		SURVEYOR FINDIN	IGS	
CRITERION NO.	CRITERIA FOR COMPLIANCE	RATING	FACILITY COMMENTS	AREAS FOR IMPROVEMENT / RECOMMENDATIONS	SURVEYOR RATING	RISK
22.6.1.3.1	The management through the Head of Food Services shall be responsible for safe and performance improvement activities within the Cafeteria Services/Food Court/Food Outlets/Vending Machines.	y NA			NA	
	There is a mechanism on handling of food safety related complaints and corrective actions taken.					
	EVIDENCE OF COMPLIANCE					
	1. Records on complaints and feedback NA					
	2. Records on safety and performance improvement activities i.e. food NA safety initiatives, menu improvements, etc					
22.6.1.3.2	Appropriate documentation of safety and performance improvement activities is kept, e.g. client satisfaction survey.	NA			NA	
	EVIDENCE OF COMPLIANCE					
	1. Records on client food satisfaction survey NA					

	SERVICE SUMMARY
-	
OVERALL RATING :	NA
OVERALL RISK :	-