Allergy New Zealand allergy advisor Penny Jorgensen sets out strategies to keep yourself safe when eating in hospital.

Hospital food is rarely highly regarded. Hospitals in the public health system have budgetary restraints and may give the impression that meals for patients are not a priority. Most patients are unwell (or they wouldn’t be there), and even if meals came from top-flight restaurants, they might still be viewed as unappetising. However, for people with food allergies, hospital food needs to be regarded in the same way as food in any food service outlet — top-flight restaurant or not — with extreme caution.

In 2012, with the help of BHSc students from Auckland University’s School of Population Health, Allergy NZ conducted a survey on safe food in hospital. The findings were that people with food allergies were often unable to access safe food while in hospital and that they experienced significant barriers to obtaining food that was both safe and of appropriate quality. They found that:
- less than half of respondents said they could always access food they felt was safe to eat while in hospital
- nearly a third said that they had to go without any food, as they were not able to obtain it through other means (e.g., through family or friends).

Barriers to accessing safe food included:
- lack of understanding and awareness of their condition
- communication breakdown within the hospital regarding their condition and their food requirements
- lack of provision of adequate information to patients about the contents of food, preparation of food and how to order food.

While these issues were raised with hospital authorities at the time, little change was noted in respect to food allergen management for patients in response.

Changes and ongoing issues
Since then, however, there have been changes in supply arrangements for food in a number of New Zealand hospitals, including contracting out to commercial suppliers (Compass Group or Spotless), although others retained, or have since moved back to, in-house provision.
In addition, the new food regulations under the Food Act 2014 now require a more stringent risk management approach by those supplying meals to ‘vulnerable populations’—including in respect to food allergen management.

However, at least some of the issues identified in the 2012 report appear to have not been resolved. Communication breakdown is understood to continue to be a key feature. There is also ongoing difficulty in preparing safe and suitable allergen-free food in a timely manner.

Meals pre-prepared in a commercial kitchen off-site are likely to be safer, in that they are labelled—so declare allergen content which the patient can check. However, the food is more likely to be delayed or not available at all, particularly meals for those with multiple food allergies. On the other hand, there is more room for human error with food prepared in a hospital or ward kitchen.

Essentially, patients (and/or their caregivers in the case of children), should regard hospital food in the same way they would any food prepared by someone else—that it is not safe to eat until proven otherwise.

Be prepared

Patients admitted to hospital may be there through an emergency, where admission will be via the Emergency Department; others will be there on an elective basis, usually for a procedure such as surgery. Whichever is your route for admission, if you have a food allergy, make sure this is recorded in the admissions form and your medical notes.

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Patients going through the elective route will often be required to go a pre-admission appointment. Take a copy of your Anaphylaxis Action Plan and ask for this to be included in the medical notes—it may help reinforce the seriousness of your food allergies. Once you are in hospital, ask for a sign stating your food allergies to be placed on the wall above your bed, along with a copy of your Anaphylaxis Action Plan.

Ask questions

Ask the nurse looking after you how food in the hospital is organised, and specifically how meals for patients with food allergies are ordered and prepared, ingredients checked, and the risk of cross-contamination managed. If they can’t answer your questions, ask to speak to someone from the hospital’s food service who can. After you have ordered a meal (usually through a health care assistant), ask the nurse looking after you to check that the meal order is correct for you.
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If you don’t feel confident they can cater for you safely, it may be best to take your own food at the beginning, and/or arrange for someone you trust to bring food in. Check with hospital staff if they have a fridge you can use, as well as heating facilities. And as with any meal served to you when eating out, always check it before eating.

Complain if needed
Finally, if something does go wrong, e.g., if you (or your child) are served an unsafe meal, or you were unable to access safe meals at all during your hospital stay, make a complaint to be reported to the food service. An immediate investigation has a better chance of finding where the error lay, and at least there is the chance of rectifying the situation for future patients.

You can also complain through the office of the Health and Disability Commissioner at hdc.org.nz/complaints. In a situation like this, it is often related to the system in place rather than a person. The system as it relates to safe food for people with food allergies in hospital won’t improve unless there is evidence that it needs to.

Penny Jorgensen is the allergy advisor at Allergy New Zealand and has had many years’ experience in the health and disability sector.

EpiPen® in hospital?
People often ask if they should take their EpiPen® to hospital with them. You can check this at the pre-admission appointment, and you may have it with you when taken to ED anyway. If medical staff agree you should have it with you, it should be written up on your (or your child’s) medication chart, so that in the event something goes wrong, nursing staff know where the EpiPen® is located and can administer it immediately. Alternatively, the doctor can write up a dose of adrenaline for administration by needle and syringe if needed.