

All-Party Parliamentary Group  
on Vegetarianism and Veganism

Christina Rees MP, Chair  
Henry Smith MP, Vice-Chair  
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Darren Jones, MP, Vice-Chair

13 April 2022

Dear Members of the All-Party Parliamentary Group on Vegetarianism and Veganism,

Thank you for your letter of 25 January 2022 regarding the findings and recommendation of your All party group's Inquiry report into Respect for religious and philosophical beliefs while eating in care. Please accept our apologies whilst we prepared this response which we hope will provide a response to all the issues raised within your correspondence.

We recognise the fundamental importance that the choice of food and the experience of eating has to peoples' quality of life. The food we eat and the experience of eating can be a significant part of our sense of identity, community and well-being. Providers must ensure they meet peoples' nutritional and dietary needs, which absolutely includes their religious or cultural requirements or preferences.

### **1. Assessment framework**

In your Recommendation 2, you ask for the wording of our guidance for care providers to be altered to remove the reference to 'religious beliefs' to use the word 'philosophical' instead.

Over the last year we have been undertaking a review of our assessment framework, which has focused on reducing several assessment frameworks down into one. This Single Assessment Framework will cover all services we regulate. As part of that review, all the previous 'key lines of enquiry' have been replaced with Quality Statements, including Effective 3.1, which had made reference to religious preferences, as you raise, omitting reference to broader philosophical beliefs.

Whilst this work is still ongoing, it is likely that it will be replaced with this Quality Statement on treating people as individuals:

### **Treating people as individuals**

We treat people as individuals and make sure their care, support and treatment meets their needs and preferences, taking account of their strengths, abilities, aspirations, culture and unique backgrounds and protected characteristics.

We expect to be rolling this new framework out in the autumn.

## **2. Improving guidance on display in catering areas**

You ask us to consider improving the guidance on display in catering areas to ensure that clear, easy to digest information about specific diets is readily available to caterers at the point of food preparation.

[Regulation 14 of the Health and Social Care Act 2008 \(Regulated Activities\) Regulations 2014](#) sets out what providers must do to support people with their nutritional and dietary needs. This includes the requirement to:

- Assess a person's nutrition and hydration needs
- Ensure people can make choices about their diet
- Identify and meet people's religious and cultural needs, this includes specific dietary requirements relating to moral or ethical beliefs
- Have a food and drink strategy that addresses the nutritional needs of people using the service

Your proposal would come under this final bullet point. However, it is for the provider to determine how they meet the requirements of the regulation and to assure themselves and us that they have effective approaches in place. It is beyond our scope to direct providers in how they must meet this regulation. We would be unable to legally enforce this. To instruct providers on how they must comply would require a change to the regulations to specifically set this out.

We would also expect providers to be mindful of people's privacy, for example in some services people may be able to access the kitchen area. Some people might object to having their personal dietary info displayed and would have the right to not consent to this

## **3. Mandatory qualifications**

You rightly state that there are currently no standardised mandatory qualifications or training requirements in the adult social care sector. The [Care Certificate](#) is recognised as an initial benchmark for the induction into the sector for new workers, and we do signpost to this as an expectation of providers as a foundation for induction.

However, the learning and development needs of staff should be monitored and assessed in an ongoing way by providers and met accordingly, in order to support staff to carry out their role well and safely, to provide people with appropriate, quality, safe care and support. The Care Certificate does include standards relevant to the issues you have raised, including equality & diversity, working in a person-centred way, fluids and nutrition.

We are aware that the Care Certificate may be undergoing review so we await the outcome of that process and what it might look like in practice for providers and staff. If you wanted to explore if there was any possibility of influencing that review, we would suggest you contact Skills for Care and/or NHS England for further information.

You might also be aware that the Department for Health and Social care published the government's social care reform white paper in December 2021, [People at the Heart of Care: adult social care reform - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/people-at-the-heart-of-care), which included a section on the government strategy for the social care workforce.

This set out intentions to invest in new training opportunities, learning and development and career structures. We await the details of what this might mean in practice, whether it might include mandated qualifications or training, and we will need to consider whether any changes will need to be reflected in how we assess care providers in the future. At the moment there is no regulation of the adult social care workforce in the same way as there is for certain registered health professions or registered Social Workers. This may, again, be something that is further explored by the government as part of its workforce strategy.

As things currently stand, we would be most likely to pick up on issues related to staff skills, competencies and training as we corroborate the range of evidence and information we might gather through our existing monitoring and inspection activities. This could include staff training records, interviews with staff and managers, interviews with people using the service and families or friends, receiving information from visiting professionals, observing practice on site, etc.

Where we find concerns about people's needs, rights and preferences not being met, lack of person centred care, poor practice, care plans not being followed, this could lead us to explore the skills, competency and training of members of staff, and to explore with the provider how they are assuring themselves they are equipping their staff to fulfil their roles appropriately.

Where shortfalls or concerns are found in such areas, we are able to signpost them to relevant bodies such as Skills for Care for further support and guidance on assessing learning and development needs and accessing appropriate training providers or other opportunities to improve. This could be in addition to any regulatory action we deem necessary based on what we have found.

We are strengthening the link between the culture of the service respecting the rights of people they support, and linking to staff training, but also crucially enabling the right culture and environment for staff to be able to always deliver person centred care.

These are the new quality statements being considered:

<b>Safe and effective staffing</b>
We make sure there are enough qualified, skilled and experienced people, who receive effective support, supervision and development and work together effectively to provide safe care that meets people's individual needs.
<b>Workforce wellbeing and enablement</b>
We care about and promote the wellbeing of our staff, and we support and enable them to always deliver person centred care.
<b>Shared direction and culture</b>
We have a shared vision, strategy and culture that is based on equity, equality and human rights, diversity and inclusion, engagement, and understanding and meeting the needs of people and our communities.

#### **4. Culture**

Thank you for your feedback on our 2020 guidance on supporting religious and cultural beliefs.

The intention was to provide a resource to providers based on existing regulatory requirements, but we have also used it in training our inspection staff. We do ask in our regulatory processes about how care services meet the needs of people using the service, including how they meet the needs of people in different equality groups.

We have not yet made any changes to methodology on the basis of the resource, but it is something that we can consider for required evidence for residential care services, when that is developed in our new regulatory model.

I hope that this covers each of your areas you have raised and thank you again for contacting us.

Yours sincerely,



**Ian Trenholm**  
**Chief Executive**