

# UT COMPLIANCE

A TRADING NAME OF UNIQUE TENDERS LIMITED

POLICY DOCUMENT

## Fridge Temperatures Policy

UT Compliance

SUPPORTED LIVING

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# 1. Scope

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This policy applies to all employees, contractors, agency workers, bank staff, volunteers, and authorised personnel engaged by who carry out duties within supported living environments across England. It includes staff based on-site, those providing outreach or floating support, and any personnel involved in the storage, handling, auditing, or disposal of food and medication. This policy applies regardless of employment status or length of service.

The policy covers all supported living schemes, whether staffed 24/7 or partially supported, where refrigerators are in use for any of the following regulated purposes:

- **Storage of medication requiring refrigeration**, such as insulin, vaccines, eye drops, or any prescribed or over-the-counter medication designated for cold storage.
- **Nutritional supplements**, including prescribed or fortified products which require chilling and are managed or administered by staff.
- **Food items purchased, prepared, or stored by staff on behalf of service users**, including for meal preparation, portioning, or dietary management.
- **Biological samples or other temperature-sensitive clinical materials**, where required by specialist support plans or health professionals.
- **Communal or staff-accessible fridges**, which may be used to store shared items, staff-managed food, or medication not held individually in tenant spaces.

This policy applies where is responsible for, or contributes to, the management or monitoring of fridge temperatures in either staff-controlled or shared spaces. It does **not** extend to fridges privately owned and managed by service users in their own flats or rooms unless specific risk factors require involvement. In such cases, individual risk assessments must confirm the scope of staff responsibility.

**Exclusions:** Service users who are assessed as having full mental capacity and who manage their own medication and food independently are not subject to routine fridge checks under this policy unless:

- There is an identified risk to others in a communal area
- The service user requests support or delegates responsibility
- A specific safeguarding or health concern is identified

**Shared or communal environments**, such as kitchens used by multiple tenants, carry a heightened level of risk. In these settings, has a duty to ensure that the health and wellbeing of all tenants are protected through proactive temperature monitoring, safe food practices, and adherence to storage regulations.

This policy supports and enables compliance with the following legislative and regulatory frameworks:

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 – Regulations 12 (Safe Care and Treatment), 14 (Meeting Nutritional and Hydration Needs), and 15 (Premises and Equipment)
- The Food Safety Act 1990
- Food Hygiene (England) Regulations 2013
- Medicines Act 1968
- Control of Substances Hazardous to Health (COSHH) Regulations 2002

- UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018
- Health and Safety at Work etc. Act 1974

## 2. Legal and Regulatory Framework

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Term/Regulation	Description/Definition
<b>Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 – Regulation 12: Safe care and treatment</b>	Requires providers to deliver care in a safe manner. This includes ensuring that medication and food stored on premises are kept at appropriate temperatures to prevent harm or deterioration.
<b>Regulation 14: Meeting nutritional and hydration needs</b>	Requires providers to ensure that individuals have access to food and drink that is adequate to sustain health and meet dietary needs. Correct fridge temperatures prevent spoilage and protect health.
<b>Regulation 15: Premises and equipment</b>	Requires providers to ensure equipment (such as fridges used for medicines or food) is clean, safe, suitable, and properly maintained.
<b>Food Safety Act 1990</b>	Applies to food provided or stored on premises, including service user kitchens. Mandates the prevention of food-related harm through safe handling and storage.
<b>Food Hygiene (England) Regulations 2013</b>	Mandates the safe storage and temperature control of food in environments where food is handled, including supported living settings with communal or staff-accessible fridges.
<b>Medicines Act 1968</b>	Regulates the safe storage and handling of medicines, including those requiring refrigeration between 2°C and 8°C.
<b>Control of Substances Hazardous to Health (COSHH) Regulations 2002</b>	Requires safe storage of hazardous substances where applicable, such as controlled medications or test materials requiring refrigeration.
<b>UK General Data Protection Regulation (UK GDPR) and Data Protection Act 2018</b>	Ensures any recorded temperature data, incident logs, or related service user health records are kept securely and processed lawfully.
<b>Health and Safety at Work Act 1974</b>	Imposes a duty of care to maintain a safe environment for both staff and tenants. Includes proper use and maintenance of electrical appliances like fridges.

## 3. Definitions of Key Terms

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Term	Description/Definition
<b>Fridge Temperature Monitoring</b>	Routine checking and logging of fridge temperatures to ensure safe storage of food and medicines.

Term	Description/Definition
<b>Safe Temperature Range (Food)</b>	5°C or below for chilled food to prevent growth of harmful bacteria, as advised by the Food Standards Agency.
<b>Safe Temperature Range (Medication)</b>	A range between 2°C and 8°C for refrigerated medications, such as insulin.
<b>Service User (Tenant)</b>	A person living in a supported living environment and receiving care or support from .
<b>Communal Fridge</b>	A fridge shared by tenants, staff, or both in a supported living setting. Monitoring responsibility lies with where risk assessed.
<b>Staff-Access Fridge</b>	A fridge used only by staff to store medication, food supplements, or specimens for or on behalf of service users.
<b>Out-of-Range Event</b>	An occurrence when a fridge's temperature falls outside its safe threshold and poses a risk to stored contents.
<b>Incident Log</b>	A written or digital record documenting an adverse event such as fridge malfunction or stock spoilage.
<b>Calibration</b>	Verification and adjustment of thermometers or monitoring equipment to ensure accurate readings.
<b>Data Logger</b>	An electronic device that records and stores temperature data over time, often used in medicine fridges.

## 4. Policy Statement

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The purpose of this policy is to establish a robust and detailed framework for the safe monitoring, storage, and management of fridge temperatures in all supported living environments operated or managed by . This includes communal fridges, medication-specific refrigerators, and staff-accessible cold storage facilities. The policy applies to all situations where is directly responsible for, or has a delegated duty of care relating to, the safe preservation of perishable goods, medicines, nutritional products, or clinically sensitive items requiring refrigeration.

It is the legal and regulatory duty of to ensure that all refrigeration equipment used within supported living services operates consistently within defined safe temperature thresholds. Fridges storing food must maintain a temperature at or below 5°C, while fridges used to store medicines must remain within the range of 2°C to 8°C. These thresholds are mandatory under food hygiene legislation, pharmaceutical guidance, and CQC compliance expectations.

Deviation from these temperature ranges presents a significant risk of:

- Spoiled food leading to foodborne illness or reduced nutritional intake.
- Compromised medication efficacy, which may result in avoidable harm to service users.
- Cross-contamination or bacterial proliferation impacting infection control.
- Potential safeguarding concerns due to missed doses or undetected spoilage.

This policy outlines the specific operational standards that must be met, including:

- Daily temperature monitoring procedures.

- Use of approved refrigeration equipment and calibration of thermometers.
- Step-by-step responses to temperature breaches, including quarantining and reporting.
- Incident escalation and documentation requirements.

is committed to delivering person-centred, safe, and high-quality care. This includes maintaining exemplary standards in infection prevention and control, medication safety, nutritional care, and safeguarding. Effective temperature monitoring, accurate documentation, and timely escalation are essential components of this commitment.

All staff have a shared responsibility to ensure fridge safety and must follow this policy without exception.

## 5. Roles and Responsibilities

Role	Responsibilities
	<ul style="list-style-type: none"> <li>– Oversees the implementation and ongoing management of this policy.</li> <li>– Ensures that temperature monitoring is consistent, accurate, and acted upon.</li> <li>– Reviews and responds to incidents where fridge temperatures fall outside the safe range.</li> </ul>
	<ul style="list-style-type: none"> <li>– Ensures that fridges are maintained in line with manufacturer guidance.</li> <li>– Coordinates servicing, repairs, and replacements.</li> <li>– Ensures calibration of thermometers and installation of data loggers where necessary.</li> </ul>
	<ul style="list-style-type: none"> <li>– Ensures that fridge logs and incident reports that contain service user information are stored securely and shared appropriately.</li> <li>– Maintains GDPR compliance across temperature monitoring and related recordkeeping.</li> </ul>
	<ul style="list-style-type: none"> <li>– Investigates fridge-related risks which may impact a tenant’s health, safety, or wellbeing.</li> <li>– Assesses whether safeguarding concerns need to be raised due to temperature failures affecting food or medication.</li> </ul>
<b>Team Leaders / Senior Support Workers</b>	<ul style="list-style-type: none"> <li>– Monitor fridge temperatures in communal areas and staff-only fridges.</li> <li>– Ensure temperature logs are completed and actioned in real time.</li> <li>– Ensure support staff are trained and supervised in line with this policy.</li> </ul>
<b>Support Workers</b>	<ul style="list-style-type: none"> <li>– Follow safe food and medicine storage practices in service user homes.</li> <li>– Where required, assist with temperature checks or escalate concerns.</li> <li>– Report malfunctioning fridges or unsafe conditions without delay.</li> </ul>
<b>Maintenance Personnel / Appliance Contractors</b>	<ul style="list-style-type: none"> <li>– Service, repair, and test fridges regularly in line with servicing schedules.</li> <li>– Provide service reports to .</li> <li>– Ensure compliance with electrical safety testing protocols.</li> </ul>

## 6. Procedures

All fridge-related procedures implemented by are designed to ensure the safe storage of temperature-sensitive items in line with legal, clinical, and regulatory expectations. This includes food, medicines, nutritional supplements, and any other regulated materials requiring refrigeration. These procedures apply to all fridges used within supported living settings, whether located in communal spaces, staff offices, or areas accessible to service users.

Fridges used for storing regulated items must be of domestic or medical grade, fully operational, and compliant with relevant British Standards. They must have functional door seals, secure closures, and shelving that permits adequate air circulation. Fridges designated for medication must not be used to store food and vice versa, unless a formal risk assessment has permitted shared use with clear labelling and separation. All fridges must contain a reliable thermometer—manual, digital, or integrated—and, where identified in the care plan or risk assessment, may require max-min thermometers or automated data loggers that track temperature trends and alert to unsafe fluctuations.

Temperature monitoring must take place at least once every calendar day and must be recorded consistently. In higher-risk environments—such as where medicines or vulnerable service users are involved—temperature checks should occur twice daily. Staff must log the temperature, the time of check, their name and initials, and confirm that the fridge contents are in good condition. Target temperature ranges are 2°C to 8°C for medications and temperature-sensitive clinical items, and 5°C or below for food and nutritional supplements. Staff must verify internal thermometer readings directly, rather than relying on any digital display built into the fridge exterior.

Where a fridge temperature falls outside of the designated safe range, staff must treat the situation as an urgent risk. The staff member must immediately notify the Team Leader or , conduct a full visual inspection of all fridge contents for spoilage or contamination, and take a second reading after allowing the fridge door to remain closed for at least 15 minutes. If the second reading also remains out of range, potentially compromised items must be quarantined with clear “Not for Use” labelling pending risk assessment or disposal. The staff member must also complete a Fridge Temperature Incident Log detailing all actions taken, and must be contacted to arrange immediate maintenance or equipment inspection. If compromised medication or food poses a health risk, the appropriate healthcare professional must also be contacted (e.g. pharmacy, GP, or dietitian).

Fridges must be serviced at least annually, or more frequently if specified in manufacturer guidance or following repeated incidents. Thermometers and data loggers must be calibrated regularly in accordance with manufacturer instructions—typically every 6 to 12 months. Records of all servicing, calibration, and repairs must be retained for audit purposes. Any reported fault must be followed up within 24 hours, and temporary alternative arrangements must be made to preserve essential items until the issue is resolved.

Service user involvement must be appropriately managed and supported. Where service users manage their own medication or food and use a private fridge, will ensure that safe fridge use is promoted through information, signposting, and support where required. In communal or staff-accessed spaces, staff must ensure that food and medication belonging to individuals are clearly labelled and stored in accordance with health and safety guidance. While respecting autonomy, staff have a duty to intervene if there is a significant risk to the health or wellbeing of the individual or others resulting from unsafe fridge use.

Infection control standards must be upheld through routine cleaning and hygiene practices. Fridges must be cleaned thoroughly at least once a week using antibacterial cleaning products approved for food or medical use. Any spillages or contamination must be cleaned immediately. All food must be checked for expiry or contamination and removed promptly. Any food opened by staff must be clearly dated and stored in a safe manner. Medication must always be stored in its original packaging unless there is a specific clinical instruction to do otherwise.

All fridge temperature records must be stored securely and retained for a minimum of 12 months. Each log entry must include the date and time of check, the temperature reading, the name and signature of the staff member, and any actions taken. Where incidents occur, a detailed Incident Log must be completed, including investigation notes, notifications, and final outcomes. These records will be used for audit, inspection, and quality assurance purposes. Persistent patterns of fridge failure or recording inconsistencies must be reported to for review and potential revision of procedures.

## 7. Training and Development

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All staff involved in the use, management, monitoring, or oversight of fridges must receive appropriate and targeted training to

ensure competence, regulatory compliance, and a consistent approach to safety and quality.

All new staff, including permanent, temporary, and agency personnel, must complete a comprehensive induction before engaging in any task involving food or medication storage. Induction training covers the core principles of food hygiene and infection prevention, the significance of safe temperature ranges for both food (5°C or below) and medicines (2–8°C), and practical demonstrations on using thermometers, data loggers, and manual logs. Staff are also trained on what to do in the event of temperature breaches, fridge malfunction, and their roles and responsibilities as outlined in this policy.

Ongoing training is essential to maintain high standards and ensure all staff remain up to date with best practice. All staff are required to complete refresher training annually, including Food Hygiene Level 2 (renewed every three years or sooner), safe handling and storage of medicines, and health and safety training which incorporates COSHH and infection control. These courses also reinforce compliance with the CQC Fundamental Standards of Care, particularly Regulations 12, 14, and 15.

Team Leaders, Senior Support Workers, and Coordinators responsible for audits or escalation must complete role-specific training to enhance their ability to oversee fridge temperature management. This training includes guidance on how to review and quality-check temperature logs, how to conduct investigations when a breach occurs, and how to implement root cause analysis and corrective measures. These staff members must also be confident in communicating with external professionals—such as GPs, pharmacies, or dietitians—when the safety or effectiveness of stored items is in question.

Where specialist monitoring equipment such as data loggers, max-min thermometers, or remote sensors are in use, designated staff must receive technical training in how to install, operate, and interpret the equipment. This ensures staff can respond to alerts and generate appropriate audit reports as needed.

In addition to training, conducts annual competency assessments for all staff with responsibilities for fridge monitoring. These assessments include both practical and written elements to verify each staff member's ability to record accurate readings, recognise risk, escalate concerns appropriately, and understand the regulatory implications of fridge safety. If a staff member fails a competency assessment, they must undergo retraining and be reassessed before resuming fridge-related duties.

Supervision and reflective practice are core elements of 's training approach. Managers use 1:1 supervision sessions and team meetings to reinforce expectations, identify knowledge gaps, and review recent incident logs for learning opportunities. Where fridge-related incidents occur, staff must complete a reflective log, which is reviewed and used as evidence of learning and improvement.

All training and competency activities are documented and stored securely. Records are maintained in the staff member's file and summarised in 's training matrix. These records include course completion dates, attendance, assessment outcomes, and supervision notes. Compliance is monitored quarterly by and , and training files must be available during audits, inspections, and internal reviews.

Training on fridge temperature management is a mandatory component of health and safety and is directly linked to the prevention of harm. is committed to ensuring that no staff member engages in regulated activity involving the use of fridges unless they are competent, confident, and supported to follow the correct procedures consistently.

## 8. Monitoring and Review

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All staff working within 's supported living services are trained to ensure they understand the importance of safe fridge usage and the associated clinical, nutritional, and safeguarding implications. During induction, all new staff receive mandatory training that covers the correct operation of fridges, the safe storage of medication, food, and nutritional supplements, and the significance of maintaining strict temperature control. This includes an understanding of the safe temperature ranges for both food (5°C or below) and medications (2°C to 8°C), the use of different types of thermometers (digital, manual, max-min, and data loggers), and the specific responsibilities around monitoring, logging, and escalating temperature-related issues. Staff are

also made aware of how fridge safety links to wider infection prevention protocols and risk management across supported environments.

Training is not limited to induction. ensures ongoing professional development through a combination of refresher training (at least annually), targeted workshops following incident trends or audits, and competency-based observations conducted by senior staff. Where specialist equipment such as automated data loggers or vaccine-grade fridges are in use, additional tailored training is delivered to staff working directly with those items. All training is documented within the staff member's personnel file and monitored through our workforce development and quality assurance systems.

Day-to-day responsibilities for fridge safety are clearly defined within shift handovers and service protocols. At least one named staff member per shift is responsible for recording fridge temperatures, inspecting the internal condition of the fridge, and flagging any concerns. However, all staff are collectively responsible for ensuring unsafe practices are challenged, unsafe items removed, and anomalies reported immediately. Any staff member who notices a temperature breach or functional issue is expected to initiate the escalation process without delay, including completion of the Fridge Temperature Incident Log, visual inspection of stored contents, and appropriate isolation of affected items.

In supported living environments, it is essential that staff not only carry out these tasks competently, but also support service users in developing safe habits when accessing shared or personal fridges. Where a service user manages their own medication or food storage, staff must provide clear guidance tailored to the individual's capacity and needs, ensuring safe practice while upholding their independence. If unsafe behaviours or misunderstandings arise, staff are trained to address them sensitively, using person-centred and strengths-based communication to reduce risk without undermining autonomy.

The and are jointly responsible for monitoring staff adherence to fridge safety protocols, reviewing training records, and ensuring that all incidents and trends inform continuous improvement. Failure to comply with training or procedural expectations is addressed through supervision and, where necessary, formal capability or disciplinary procedures. Staff are made aware that safe fridge management is a critical part of their duty of care and a fundamental standard of the service's regulatory obligations.

## 9. Quality Assurance and Continuous Improvement

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At , the quality assurance framework for fridge temperature management is integral to ensuring that all practices remain compliant, effective, and aligned with CQC's expectations under the Key Lines of Enquiry (KLOEs). At , we treat fridge temperature control not as an isolated procedure but as a component of its wider clinical governance, health and safety, and service quality strategies.

Auditing of fridge temperature records and related procedures is carried out monthly by the Team Leader or designated quality assurance personnel. These audits include a full review of temperature logs, incident reports, maintenance schedules, and cleaning records. Any discrepancies, gaps in logging, recurring anomalies, or unaddressed faults are flagged for immediate action. Where trends or patterns emerge—such as regular out-of-range readings at specific times or days—an investigation is launched to identify systemic issues such as overstocking, frequent door opening, or mechanical faults.

Findings from these audits are formally documented and shared with and . Outcomes feed directly into the service's quality improvement cycle, prompting changes to practice, additional staff training, or updates to risk assessments. Where relevant, issues are also discussed at team meetings and incorporated into supervisions, ensuring that lessons learned are disseminated across the staff team.

To further embed quality assurance, ensures that all equipment used for monitoring temperatures—such as data loggers, max-min thermometers, and fridge alarms—is subject to routine checks for accuracy and reliability. Calibration of equipment is monitored via a dedicated log, and compliance is reviewed as part of 's annual internal audit.

Feedback from external inspections, such as those from the CQC or Environmental Health, is also incorporated into quality

assurance processes. Recommendations or actions are logged, assigned to relevant staff, and tracked through to completion. Corrective actions may include the revision of cleaning schedules, enhancement of signage, changes to staff induction materials, or procurement of improved equipment.

In supported living settings where service users may participate in food or medication management, quality assurance activities also include reviewing how well staff support service user involvement and autonomy without compromising safety. Where relevant, individualised assessments and care planning are adjusted to better promote person-centred care alongside robust risk management.

Ultimately, is committed to continuous improvement. This includes responding proactively to incidents, learning from audits, and updating policies and procedures in line with best practice, clinical guidance, and any changes to regulation or inspection standards. Regular reviews of the Fridge Temperature Policy are conducted to ensure ongoing relevance and effectiveness, with all revisions clearly dated and communicated to staff through structured handovers and policy briefings.

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# Policy Approval & Review

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APPROVED BY	SIGNATURE <i>No signature on file</i>
REVIEW DATE <b>1 January 1970</b>	NEXT REVIEW DATE <b>19 February 2027</b>