



# Good care for vegetarians and vegans

Self-evaluation tool and guidance for care services  
and inspectors looking at quality indicator 1.3:  
People's health benefits from their care and support

October 2023

Date of next review October 2026

# Introduction

---

## Health and Social Care Standard 1:

### I experience high-quality care and support that is right for me

## Quality indicator 1.3:

### People's health benefits from their care and support

---

## What good care for vegetarians or vegans might look like

We developed this self-evaluation and improvement tool with [Vegetarian for Life](#), a UK charity working on behalf of older vegans and vegetarians, to help care homes and inspectors understand what good care for vegetarians or vegans might look like in relation to quality indicator 1.3: People's health benefits from their care and support. Inspectors may use it to inform an inspection.

Veganism or vegetarianism can be a large part of someone's identity and more than just their diet. When considering changes to capacity and unusual requests, it is important to recognise that a vegan or vegetarian may have lived this way for decades of their life, and while they have the right to change their mind, it is unlikely that they have changed their belief system. The right to follow dietary practice in line with religious or philosophical beliefs is fundamental and enshrined in law (veganism is a protected characteristic of religion or philosophical belief under the Equality Act).

Someone who describes themselves as plant-based may or may not follow such a practice-based system. For this reason, it is recommended that care staff are familiar with a person's preferences, especially in relation to when their capacity or cognition is affected or changes.

Key areas include the extent to which people experience:

- care and support based on relevant evidence, guidance, best practice and standards; in particular, the Health and Social Care Standards
- food and drink that meets their needs and individual preferences
- a positive attitude from others towards their vegetarian or vegan identity.

## Vegan and vegetarian diets:

Vegetarian dishes must not contain:

- animal flesh (meat, fish or shellfish)
- meat, fish, or bone stock, or stock cubes containing same
- animal carcass fats (including suet, lard or dripping)
- gelatine, gelatine-based jelly, or aspic (jelly made from meat stock)
- products with ingredients derived from slaughterhouse, for example calf rennet used in some cheeses
- cochineal, used in some products as a colouring.

Battery or intensively produced eggs should be avoided wherever possible. Please consult individuals regarding their opinion about eggs.

Vegan dishes must not contain:

- anything on the vegetarian list above
- dairy products including cheese, milk, butter, cream, yoghurt and whey
- eggs
- products with ingredients derived from eggs or dairy, for example albumen, casein, ghee, lactose or whey
- honey
- shellac, used in some products (mainly sweets) as a glazing agent or a moisture barrier.



## Quality illustrations

### Standard 1.15: My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices

#### Very good

During the initial conversation in a new care setting, a person will be specifically asked about their dietary requirements. This information is clearly detailed in the personal plan and staff ensure that dietary requirements are met.

This information would be reviewed four weeks after the initial settling-in stage and a date agreed for the next review date.

During the conversation, the person will be asked if they express their vegetarian or vegan belief in any other ways, for example clothing or toiletries.

If the person's capacity is affected or their cognition changes, communication tools such as Talking Mats™ that cover vegetarian and vegan topics should be used to facilitate the exchange of information.

#### Weak

People are not specifically asked about their dietary preferences, and assumptions are made about what they will or won't eat.

Information gathered at the point of admission has been lost and does not inform the personal plan.

The care service is aware of a person's dietary requirements but takes no action to meet those needs and preferences.

There is no consideration given to any other aspects of a person's vegetarian or vegan identity and no effort is made to discuss subjects such as cruelty-free toiletries.



## Standard 1.37: My meals and snacks meet my cultural and dietary needs, beliefs and preferences

### Very good

Care and catering staff understand the terms vegetarian and vegan and have received training appropriate to their role on how to cater for vegetarian and vegan diets. People experiencing care are offered a good choice of well-balanced, healthy and nutritious vegetarian or vegan meals. Caterers understand how to cater well for vegetarian or vegan diets. Staff are trained to use vegetarian or vegan symbols on their menus.

There is a vegetarian/vegan-specific menu with a range of choices that everyone can choose from. These change regularly, offering a genuine variety of dishes.

People benefit from a choice of vegetarian or vegan meal options. When biscuits, sweets and communal snacks are offered to people, they are similarly provided with a choice of vegetarian or vegan snack options with appropriate signage and explanation.

### Weak

Care and catering staff are unclear about what vegetarians or vegans do and don't eat. For example, they may not realise that Worcester sauce may contain anchovies and so be unacceptable for both vegetarians and vegans, or that products containing honey are not suitable for vegans. When catering for vegetarians, they rely heavily on cheese and eggs, and vegans are not offered good sources of protein. Vegetarian or vegan dishes may just consist of meat-based dishes without the meat.

There may be a range of vegetarian/vegan options, but these don't change.

People may be offered only one meal choice. There is no consideration given to providing vegetarian or vegan biscuits, sweets or snacks.

If snacks are actually vegetarian or vegan this isn't clear and is not explained.



## Standard 4.2: The organisations that support and care for me help tackle health and social inequalities

### Very good

Vegetarians and vegans who are experiencing care are catered for during celebrations. Vegans are offered similar vegan alternatives to birthday cake and festive meals. Vegetarians are offered similar vegetarian alternatives.

At events such as barbecues, vegans and vegetarians are fully included and are offered suitable alternatives to meat, such as vegan and vegetarian sausages and burgers. These have been cooked separately from meat products, for example on a disposable barbecue.

There is a good process to communicate between all staff groups including kitchen and catering staff and staff in the residential areas (for example, managers, care staff and activity co-ordinators). Those serving food know what dishes are suitable for vegetarians and vegans. For example, if the chef has provided both meat and vegan cottage pie, they know clearly which is which, and they are fully informed about the ingredients of the food they serve.

### Weak

People experiencing care are not offered comparable festive fare and are therefore not fully included in festivities. They may be unable to join others in eating birthday cake because it contains ingredients such as gelatine, butter, milk or eggs. Birthday cake that is suitable for vegetarians or vegans has not been provided.

At barbecues, vegetarians and vegans are not offered meat alternatives such as veggie/vegan burgers or sausages. Instead, they are only offered bread or salad options.

Staff are uncertain of what food they are serving. They are not sure about the food's ingredients and make assumptions that it is suitable for vegetarians or vegans. There are no clear lines of communication between the kitchen and residential areas.



**Standard 3.13: I am treated as an individual by people who respect my needs, choices and wishes, and anyone making a decision about my future care and support knows me**

**Very good**

If the person experiencing care’s capacity or cognition is affected, or changes, they will still be offered a choice of meals, drinks and snacks that uphold their beliefs. If they accidentally choose a dish or appear to ask for food that does not meet their inherent beliefs, there will be a meal plan in place to ensure that people continue to be served food according to their beliefs.

This might mean they would be offered an alternative dish that may look the same but uses alternatives to meat and dairy products.

If vegans require fortified food caterers will provide appropriate vegan fortification, for example by using foods such as pea protein, chickpea powder, soya yoghurt, peanut butter or creamed coconut.

If texture-modified diets are required, then any thickening agents used will be suitable for vegetarians or vegans.

**Weak**

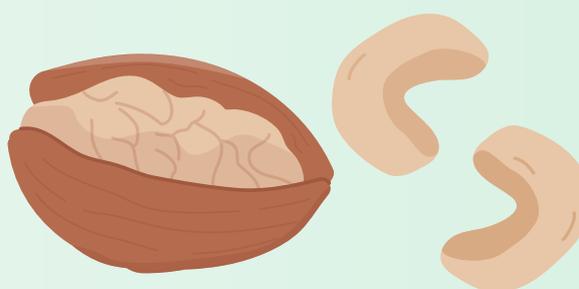
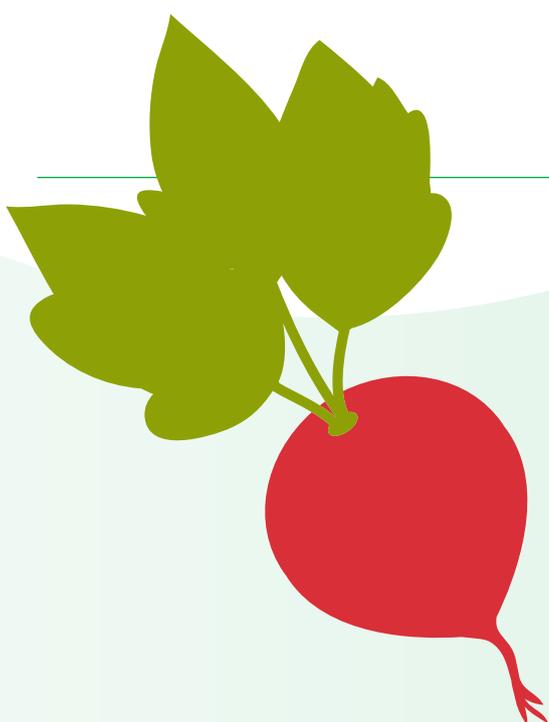
Staff offer meat-based dishes to a person whose capacity or cognition is affected or changed. Dishes containing meat are promoted with little attention given to vegetarian or vegan meal choices or the person’s inherent belief before they became incapacitated.

If the person’s capacity or cognition is affected or changes and they ask for a meat-based dish, staff give them this without trying to find an alternative. They do not ascertain whether the person is genuinely asking for meat or this is a mistake.

There is a belief that vegetarians or vegans whose capacity or cognition is affected or changed ‘won’t know any differently’ if given meat or dairy.

Caterers have little knowledge of vegan alternatives to dairy-based products, and instead use dairy-based products or honey.

There is no awareness of whether a thickening agent used is suitable for vegans or vegetarians.



**Standard 1.38: If appropriate, I can choose to make my own meals, snacks and drinks, with support if I need it, and choose to grow, cook and eat my own food where possible**

Very good	Weak
<p>People are supported to choose vegetarian or vegan meals, snacks and drinks that they themselves might make. They have access to simple vegetarian or vegan menu cards, or Talking Mats™ or equivalent to help with this. People are supported to prepare simple meals, drinks or snacks such as soups and smoothies. Kettles or microwaves are available.</p> <p>Where possible, people can grow their own food and use this to make their own meals.</p>	<p>People do not have access to kettles, microwaves or any kitchen facilities, and where there are facilities, people are not supported to make their own meals or snacks if they wish to. There are no specific vegetarian or vegan menu cards that reflect a range of good food choices.</p> <p>There is no opportunity for people to engage in growing their own food.</p>

**Standard 1.10: I am supported to participate fully as a citizen in my local community in the way that I want**

Very good	Weak
<p>There is peer support from outside the care setting, for example local vegetarian or vegan groups have been invited to link up with people experiencing care.</p> <p>Staff are encouraged to use memory aids to support people to maintain their vegetarian or vegan identity. Where magazines are provided, these will include magazines related to vegetarian and vegan matters.</p>	<p>People have no links to any outside support. There are no magazines or other memory aids to help those who have cognitive losses to remember their vegetarian or vegan identity.</p>

**Standard 2.3: I am supported to understand and uphold my rights**

**Standard 1.2: My human rights are protected and promoted, and I experience no discrimination**

Very good	Weak
<p>People are supported to understand their rights and staff also know and understand these. For example, staff are aware that veganism is a protected belief, and they know what they should do if they see people experience discrimination.</p>	<p>Staff don't fully respect people's vegetarian or vegan beliefs and do not support people experiencing care to understand their rights. Discrimination goes unrecognised or where it is noticed, nothing is done.</p>

**Standard 1.4: If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected**

Very good	Weak
<p>In all household goods and personal care, the person's clothing, toiletries, bedding and so on are provided following consultation with the person experiencing care because they may wish these to be animal-free and to not have been tested on animals.</p>	<p>Soap, shampoo and similar products are provided with little regard to their contents or whether they have been tested on animals. Staff are unaware of whether products are animal-tested or what they contain.</p>

**Standard 1.7: I am supported to discuss significant changes in my life, including death or dying, and this is handled sensitively**

Very good	Weak
<p>The persons care team encourages them to make an advance or anticipatory care plan in case their capacity or cognition is affected, or changes in the future.</p> <p>Formulation of the care plan includes a discussion of how they would wish their carers to protect their beliefs in the future and whether they wish to be supported to remain vegetarian or vegan without compromise.</p>	<p>Any advance care planning has not included any consideration of the person's vegetarian or vegan identity. There has been no discussion about how to manage any contradictory food requests in the case that the person's capacity or cognition is affected, or changes</p>

**Standard 4.27: I experience high-quality care and support because people have the necessary information and resources**

Very good	Weak
<p>The care service can demonstrate that staff training includes best practice in meeting the needs of people who are vegetarian or vegan, including those whose capacity or cognition is affected, or changes.</p> <p>Staff demonstrate learning, understanding, and/or professional memberships in relation to catering for vegetarians and vegans.</p>	<p>Staff have no evidence of learning, understanding or professional memberships in relation to catering for vegetarians and vegans. Best practice has not been considered.</p>

---

## Scrutiny and improvement toolbox

---

### Scrutiny and improvement support actions

---

- Assess how well the person experiencing care is supported in their vegetarian or vegan beliefs.
- Contact Vegetarian for Life for support and advice.
- Review how care plans are used to enhance the experience of vegetarians/vegans experiencing care.
- Interview people experiencing care, staff, relatives and carers.

---

### Key improvement resources

Vegetarian for Life website for resources, menu plans, nutrition, fortification, texture-modified guidance, self-advocacy pack:

<https://vegetarianforlife.org.uk>



Vegetarian for Life Dietary Diversity Guide:

[https://vegetarianforlife.org.uk/files/Dietary\\_diversity\\_guide.pdf](https://vegetarianforlife.org.uk/files/Dietary_diversity_guide.pdf)



Vegetarian for Life Memory Care Pledge:

<https://vegetarianforlife.org.uk/pages/pledge>



Vegetarian for Life Veg\*nism: More Than Just a Diet Guide:

<https://vegetarianforlife.org.uk/resources/publications/vegnism-more-than-just-a-diet>



## Scrutiny and improvement toolbox

### Scrutiny and improvement support actions

#### Key areas

- Are people supported in choosing vegetarian and vegan meals, and are these meals varied and balanced?
- Is there an advance care plan detailing a person's wishes regarding vegetarian and vegan food in the event of their capacity or cognition being affected or changed?
- If fortification is required, is this in accordance with their dietary preferences (for example non-dairy)?
- If a texture-modified diet is required, is the thickener used vegetarian or vegan?

### Key improvement resources

#### Vegetarian for Life in-person training and webinars:

Caterer training courses:

<https://vegetarianforlife.org.uk/caterers/training-courses>



British Dietetic Association-accredited Care Catering for Older Vegetarians and Vegans webinar series:

<https://vfl-store.myshopify.com/products/care-catering-for-older-vegetarians-and-vegans-webinar-series>



Meat-free 101 webinar series:

<https://vfl-store.myshopify.com/collections/frontpage/products/meat-free-101-webinar-series-single-user>



The Health and Social Care Standards:

<https://www.gov.scot/publications/health-social-care-standards-support-life/>



Care Inspectorate Food and Fluid online resource on The Hub:

<https://hub.careinspectorate.com/how-we-support-improvement/care-inspectorate-programmes-and-publications/eating-and-drinking-well-in-care-good-practice-guidance-for-older-people/>



Care Inspectorate Food and Fluid guidance document:

<https://hub.careinspectorate.com/media/1493/eating-and-drinking-well-in-care-good-practice-guidance-for-older-people.pdf>



---

## Key improvement resources

---

### Vegetarian for Life in-person training and webinars:

Food and Fluid pocket guide:

<https://www.careinspectorate.com/images/documents/4666/Food%20and%20Fluid%20Pocket%20Guide.pdf>



Talking Mats™:

<https://www.talkingmats.com/>



The Vegetarian Society:

<https://www.vegsoc.org/>



The Vegan Society:

<https://www.vegansociety.com/>



Alzheimer Scotland:

<https://www.alzscot.org/what-is-dementia>



Understanding Personal Outcomes, from the Scottish Social Services Council:

<https://lms.learn.sssc.uk.com/course/view.php?id=11>



Supported Decision Making, from the Mental Welfare Commission for Scotland:

<https://www.mwcscot.org.uk/publications?type=39>





Vegetarian for Life  
 83 Ducie Street  
 Manchester  
 M1 2JQ  
 Tel: 0161 257 0887

Website: [www.vegetarianforlife.org.uk](http://www.vegetarianforlife.org.uk)



Vegetarian for Life is a charity registered in England and Wales, number 1120687  
 Company number 6294709



Headquarters  
 Care Inspectorate  
 Compass House  
 11 Riverside Drive  
 Dundee  
 DD1 4NY  
 Tel: 01382 207100  
 Fax: 01382 207289

Website: [www.careinspectorate.com](http://www.careinspectorate.com)

This publication is available in alternative formats on request.



© Care Inspectorate 2023 | Published by: Communications | COMMS-0723-429

