

ACTIVITY A.T3.2 IMPLEMENTATION OF PILOT PROJECT

D.T3.2.11 Testing of real life environment use of gluten free offer in restaurants - Final Report







1. RESULTS ACHIEVED ACCORDINGLY TO OBJECTIVES

Please review the objectives you have set up in your D.T3.1.1 description, in the Status report Phase 1 and describe activities and results achieved by your pilot. Give an overview of the processes that are part of your pilot project.

We had 2 events in secondary schools (10.02.2018 in Budapest and 07.03.2018 in Kiskunhalas) where cooks, bakers, confectioners and waiters are learning. The topic of the events was the gluten-free food in restaurants. The presentations were about the reason of the gluten-free diet and about the present legal regulations and rules for informing the consumers. Detailed practical advises were in other speakers' talk, where they went through the different kind of meals and explained how to make them safely gluten-free, avoiding the cross-contamination

Our pilot project fits to the Eating Out Gluten-free of the Association of European Coeliac Societies. This Working Group now finalizes the minimum criteria of a safe restaurant environment for coeliac patients. The group works on harmonizing the different systems which are already used In Italy, Spain, the UK, Finland and Germany. Thanks to the harmonized system, our restaurants could became later easily part of the "Gluten-free European network".

We had a kick-off event on 20.04.2018 in Budapest. The speakers of the meeting covered up all part of the restauration. We had a talk about the disease diagnosis and treatment, than about the legal rules and regulation for gluten-free food in general and especially in the restauration.

The professor of the Budapest Business School spoke about the relevance of the "Special hospitality" and she presented preliminary result of a survey about the importance of having gluten-free meals in restaurants. There were talks about the "Consumers' information in restaurants", and some practical advises, going through the different kind of food groups and technological steps for resulting safe gluten-free meals and foods. QM of McDonalds presented their strong safety system as a good practice even for big restaurant chains.

On 23.05.2018 - joining to the ICD - we had a stakeholder meeting for the Eating Out GF project with participation of media representatives and employees of a gluten-free restaurant.

We finalized the Instruction booklet for restaurants in Hungarian and the text was translated into English.

The restaurant booklet were printed in 500 pcs Hungarian and 100 pc English version.

The content of the booklet is the basis for trainings, both for restaurants' employees, and also for the volunteers, who will be the contact persons for the restaurants, after their training and joining to the Gluten-free Restaurant Project.

We had one event in a secondary school in Debrecen (09.11.2018) where cooks, waiters, bakers, confectioners are learning.

We managed to meet the dietetic service of Honved Hospital in Budapest (24.09.2018), where we went through the dietetic food preparation in a hospital kitchen environment.

We organised a "Safe- Quality- Free" conference in Budapest, with participation of different stakeholders. The even was hosted by the Budapest Business School (BBS) Department of Tourism, who has an aim to educate their students for needs of "sensitive" guests.





The participants came from the university (students and teachers), dieticians, gluten-free food producers, commercial companies of HO-RE-CA sector, restaurants' managers and owners.

The last part of the program was a panel discussion with 5 persons (a dietician, a gluten-free restaurant owner, a director of a C+C commercial chain and the leader of our Gluten-free Restaurant Project. The questions that we discussed were important to understand the trends of the Free-from food and special dietetic foods with or without a real medical necessity.

We made a survey among our members, asking them about their opinion of gluten-free experiencies and views.

We got 20 answers and the most interesting results are:

- 1- The average time from the diagnosis: 13,9 (1-21) year
- 2- 40% usually eat out GF, 60% not
- 3- who eats out vary from daily (kindergarten and workplace) others monthly and the majority rarely
- 4- Who goes restaurants they are usually more than 2 (3, 5 and 10)
- 5- The most important facts when they choose a GF restaurant is the safety, and no extra costs for the GF food, han the positive opinions/experiences either their own or others from facebook and coeliac patient group members.
- 6- The amount that they would pay for on soup/first course: 500 HUF(2 EUR), main course: 1200-1500 HUF (4-5 EUR) and for desserts: 400-500 HUF (1,5-2 EUR)

We planned involve volunteers from our society's members, who will be later the contact persons to each involved restaurants. We had 3 training (19/01/2019, 26/01/2019 and 26/ and 16/02/2019). 2 were in Budapest and one in Debrecen. We trained totally 22 volunteers about the legal background and the safe rules of gluten-free food preparation.

We planned also include restaurants, where the owners and the staffs are well trained about the strict rules of the gluten-free food preparation. We managed to include 3 restaurants, one in Debrecen and 2 in Budapest. We had 3 training, one of each restaurant (12/01/2019, 23/01/2019 and 13/02/2019). We also print out an A3 chart for helping to choose the safest gluten-free food in restaurants for the coeliac customers.

The new logo of the project:







The booklet in Hungarian and English





The information chart for kitchen staff

			ky and not allo				
	Safe gluten-free		Not allowed: not gluten-free		Safe gluten-free		Not allowed: not gluten-free
	Corn, rice, Corn flour, rice flour, (GF, safer with 'Crossed Grain Symbol'),	Flavoured rice, corn and	Wheat, bulgur, durum wheat, wheat bran, wheat rusk, wheat starch, wheat flour, wheat starch (not GF), modified wheat starch (not GF), but the starch (not GF), the starch (not GF), the starch (not GF), which is the st	Fats and oils	Butter, margarine, lard, cooking oils	Flavored butter creams	Recycled frying oils, mixed use for gluten-free and gluten-containing food
Cereals, oseudo-cereals and flours	corn starch, rice starch, amaranth, buckwheat, millet, teff, quinoa, sorghum, soya flour, potato starch, modified starch, potato flour, gram flour, polenta (cornmeal), sago, 'pure' (uncontaminated) oat, gluten-free wheat starch,	other cereal products, including flours Flavoured pseudo-cereals products, including grains and flours		Vegetables	All fresh, frozen, canned and dried pure vegetables. Vegetables pickled in vinegar, all peas, including mushy and processed	Potato products, ready- to-eat French fries (frozen, too), instant purees, chut- neys, ready-to-eat mixed salads, convenience foods with vegetables	Vegetables and potatoes in batter, breadcrumbs or dusted with flour, potato croquette, vegetable meals thickened with wheat flour
	gluten-free flour mixtures Gluten-free breads, biscuits,		All breads, chapattis, biscuits, crackers, cakes, pastries, scones, muffins, pizzas bases made from wheat, rye or barley flour	Fruits	All fresh, frozen, canned, mashed, concentrated and dried fruits	Fruit pie fillings, chutneys	
Bread, cakes and biscuits	cakes, pizza bases, rolls (safer with 'Crossed Grain Symbol')	Macaron, meringues		Nuts, seeds and pulses	All pulses (beans, peas and lentils), plain nuts and seeds	Dry roasted nuts, peanut butter, creams	
Pasta and noodles	Gluten-free corn pasta, rice pasta, gluten-free pasta (with or without eggs), rice noodles	Corn pasta, rice pasta (without Crossed Grain	Fresh, dried and canned wheat or other cereal based pasta, noodles	Savory snacks	Homemade popcorn	Plain potato chips, Flavored popcorn	Snacks made from wheat, rye, barley or oats, pretzels, stickers
	(safer with 'Crossed Grain Symbol')	symbol)		Preserves and spreads	Sugar (cane, beet), jams, conserves, honey, marmalade		
Breakfast cereals	Gluten-free muesli, cereal flakes (safer with 'Crossed Grain Symbol')	Malted breakfast cereals, porridge oats	Breakfast cereals and mueslis with wheat, barley, rye, oats	Soups, sauces, pickles and seasonings	Puree (tomato, garlic, onion, vegetables, etc.), vinegar, herbs and spices (fresh, dried, frozen, mixed), ground pepper, mustard, Worcestershire sauce	Ready-to-eat sauces, gravy granulates, stock cubes, canned and pocket soups, tamari (Japanese soy sauce), mayonnaise, salad cream and dressings, Canned and ready- to-eat foods, mustard sauces, mayonnaise sauces, blended seasonings	
Meat and poultry	All fresh meats and poultry, smoked meats, cured pure meats, plain cooked meats	Meat sausages, pastes, pàtés burgers, Minced meats	Meat and poultry cooked in batter or bread-crumbs, traditional sausages, pâtés				Chinese soy sauce
Fish and seafood	All fresh fish and seafood, smoked, kippered and dried fish, fish canned in oil or brine	Fish in sauce, fish pastes and pâtés	Fish in butter or breadcrumbs, fish cakes, fish salads, fish fingers				
Cheese	All cheeses	Cheese analogues, flavored cheese creams, (check the labels)	Cheese creams and analogues with ingredients	Confectionary and puddings	Jelly, gluten-free sweets, cacao powder, coffee (plain, ground), Nescafé	Chocolates, ice-cream, mousses, coffee powders	Puddings made of wheat flour and/or semolina
Eggs	All eggs	Convenience food with eggs	of gluten-containing cereals		Tea, coffee, 100% fruit juices, clear fizzy drinks	Drinking chocolate, cloudy fizzy drinks, vending machine hot chocolate	Malted milk drinks, barley water, beers (bavarian, ale, stout, lager, etc.)
	All milk (liquid and dried), all cream (single, double, whipping, clotted), sour cream, cream fraiche, plain	Coffee and tea whiteners, oat milk, fruit and flavored	Milk with added gluten-containing fibers,	Drinks	Wine, champagne, cider, liqueurs, distillates/alcoholic drinks (cognac, whisky, grap- pa, palinka, etc.)		
Milk and milk products	yoghurt, kefir, buttermilk, plain fresh cheese, cottage cheese (single, double), ricotta Lactose-free versions, too	yoghurts, flavored fresh cheese, cottage cheese desserts/creams, soya des- serts	yoghurt/fresh cheese/cottage cheese containing muesli or cereals	Miscellaneous	Gelatin, bicarbonate of soda, tartaric acid, fresh and dried yeast, artificial sweeteners, yeast extracts	Tofu, cake decorations, marzipan, baking powder, ready to use icings	Ice-cream cones and wafers, pudding powders, ready-to-bake cak powders, drink powders, et





2. ADDED VALUE OF THE DEVELOPED & TESTED PILOT SOLUTION IN YOUR REGIONAL ENVIRONMENT

 Please describe shortly, what is the gained added value for the end-user of pilot service solution

This pilot is beneficial for different generation groups (coeliac disease is a lifelong disease) and different stakeholders (public, university (students and teachers), dieticians, gluten-free food producers, commercial companies of HO-RE-CA sector, restaurants' managers and owners), and support the coeliac patients.

Added value: raise a quality of life of the coeliac patients, train the concerned stakeholders and raise awareness of coeliac disease and the gluten-free food safety and security.

ADDED VALUE for END-USER

Short term effects and long-term effects

- 1. The pilot puts the patients in the centre, gives them support, helps them to better cope with the disease, to better manage their condition, and also give knowledge and skills to other stakeholders to reduce problems, risks, diet compliance, complications.
- 2. Improvement of CD society service: offers CD society a tool to improve their services, involves more interested volunteers, which leads to sustainability of the society.
- 3. Better quality of life of chronic celiac disease patients.

3. DEVIATION AND PROBLEMS ENCONTERED

• In case your outcomes are different from the planned, please give an explanation of the reasons and formulate your modified results achieved. Was your planned model working or did you had to make modifications, if yes, describe? Did you had any problems in you pilot implementation? If yes, which was the solution adopted?

We anticipated some problems listed below:

- Volunteers from our society's members, who will be later the contact persons to each involved restaurants has limited time, time lack problems may occur
- non-participation, indifference or mistrust of stakeholders in catering sector may occur
- financial problems may influence sustainability of the pilot
 but did not influence the implementation very much. We successfully managed all these risks.





4. LESSON LEARNED RELATED TO CO-CREATION OF PILOT SOLUTIONS WITH ENGAGED STAKEHOLDERS

 Please describe what were the benefits and setbacks related to co-creation of pilot project with stakeholders.

LESSONS LEARNED					
Benefits	Setbacks				
experienced knowledge input (trained stakeholders)	1. number of risks associated with co-creation				
2. interaction between coeliac societies.	2. no guarantee that the service will be sustainable				
3. co-creation of new service - new patient participation in new service development					
4. better quality of service					

5. FURTHER ACTION PLAN (ACTIVITIES FOR THE FUTURE)

- What are your further activities of the pilot project development?
- > On the local level?
- > On transnational level?

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The booklet could be translated into other languages by request of the national societies.

- How did you plan to ensure sustainability to your pilot? Have you plan any action for the maintenance/follow up/development of the actions implemented, after the project ends?
- Sustainability: all activities will hopefully be led to a new social innovation service. Volunteers are educated and well-motivated.





- We will, based on available knowledge, plan activities to ensure sustainability of the results.
- Transferability and cooperation: Pilot activities and achievements were transferred to other regions and countries through our participation at transnational events (D.C.6.2): AOECS, ESPGHAN, UEG and other events and project communication channels. Our pilot will be introduced to other target groups, regions.
- Deliverable D.T3.3.1 "Transnational transferability plan of pilot solutions" Upon exchange of needs of participating regions, transnational transferability plan will be prepared to transfer best solutions among project participating regions.
- Deliverable D.T3.3.2 "Pilot project recommendations for transfer to other users/regions" -Based on a feedback from pilot stakeholder group and end users, pilot project recommendations will present development process, experience and results related to pilot projects to other possible users.

Tasks for future:

- the model could be upgraded and improved tailored to target group needs in other regions and for other chronic diseases,
- promoting of pilot for those with celiac disease,
- education and motivation of volunteers,
- suggestions for the updating and improvement of restaurant booklet (change of law),
- to ensure funds for the successful permanent implementation.
- harmonizing with the European Eating Out Project