



COELIAC SUCCESS STORIES 2026

FOREWORD



Every day, our member societies advocate, innovate, build partnerships and find practical ways to make life safer and more inclusive for people living with coeliac disease. Often, this work happens quietly, locally and with limited resources. Yet its impact can be profound.

This book brings together some of these inspiring examples — from Portugal's first Gluten-Free Hospital to Mexico's support for the coeliac community in Venezuela following the earthquake emergency. These projects are just a few of the many inspiring initiatives across our community. They are different in scale, context and approach, but they are united by something fundamental: **they respond to a real need and turn advocacy into action.**

We are proud to acknowledge this terrific work, which shows what we can achieve when we combine perseverance, creativity and solidarity with one another. But this book is not intended simply to celebrate success. **It is an invitation to share it.**

A solution developed in one country may inspire an idea in another. A partnership that works in one healthcare system may offer a starting point elsewhere. A campaign, a protocol, a training model or a simple practical initiative can sometimes be adapted and developed far beyond its original context.

This is the essence of AOECS: to unite the coeliac community in Europe and beyond, strengthen our collective capacity, and learn from one another — from both our successes and our challenges.

By sharing knowledge, experience and practical solutions, we become stronger and better equipped to create lasting change for people with coeliac disease. We encourage you to read these stories not only as examples of what has been achieved, but as opportunities to ask yourself: *Could this work in my country?*

We hope that these success stories will spark conversations, new partnerships and new ideas across our network.

To all the societies and individuals featured in these pages: **thank you.**

Thank you for your courage to try something new, your persistence when progress was difficult, and your commitment to making life better for people with coeliac disease.

May these stories inspire the next generation of ideas — and may we continue to learn from one another, share what works, and turn collective experience into collective success.

With warmest congratulations and appreciation,



Veronica Rubio
Secretary General, AOECS

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San Melchor Betaza, Oaxaca, Mexico

Gluten-free restoration project in La Rioja

Submitted by: Díaz de Rada E, Fernández F, Sesma J, Díaz de Cerio R, Garrido E, Olleta I, Nurses at the Garcia Orcoyen Hospital.
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Introduction

The relationship between the quality of life of coeliac patients and the availability of food dining away from home is close, direct and crucial.

To ensure that this food is safe, a good manufacturing practices manual for gluten-free catering is needed, which requires strict protocols to eliminate cross-contamination during service.

This project is implemented in La Rioja, a Spanish region with a population of 330.457, whose capital is Logroño.

Method

In our community, thanks to the work of the La Rioja Coeliac Association (ACERI), we have implemented a safe hospitality project in snack bars, restaurants, bakeries, and patisseries for people with coeliac disease.

The procedure is as follows: first, visit the establishment and meet with the owner, inspect and review the facilities, ingredients used and food preparation methods. Then provide training for the establishment staff emphasising the importance of avoiding cross-contact and reading labels, place a poster in a visible location in the kitchen, distribute a manual of good practices for gluten-free catering, obtain a signed commitment agreement, affix an identification sticker, and conduct frequent randoms checks (a sample is taken and sent to a laboratory).

If the result is negative, a positive reinforcement is applied, and if the result is positive, the establishment is notified to find the cause. This process is repeated annually and whenever necessary, maintaining continuous contact between the establishments and the La Rioja Coeliac Association.

Members of the coeliac disease association were requested to complete an anonymous ten-item Likert-scale satisfaction survey.

Results

The figures indicate that the project is booming. Survey findings demonstrate that 97% of respondents consider the initiative beneficial to their mood and emotional well-being, 88% report increased confidence when dining out, 88% indicate that it enhances their social life, and 95.5% affirm that it supports adherence to their treatment programme. Consequently, user adoption continues to rise steadily.

An increasing number of companies in the hospitality sector are showing interest in the project. Currently, there are 110 establishments in Logroño, and new venues in other cities have recently joined.

Conclusion

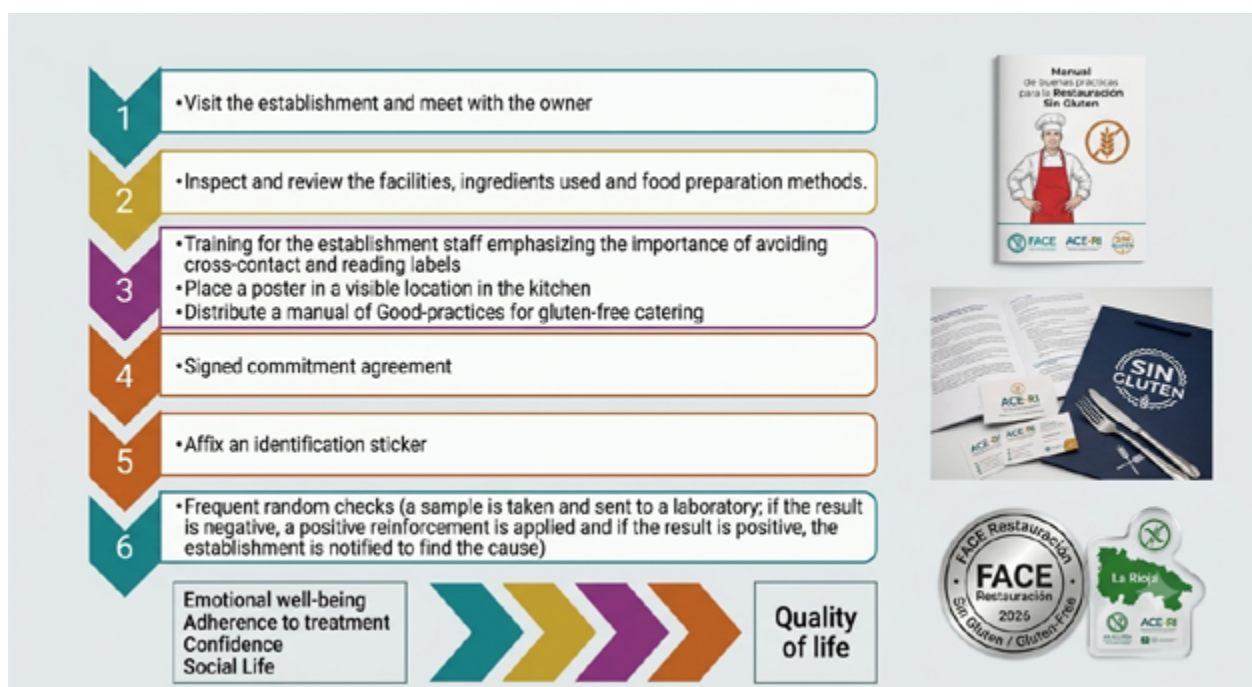
This project helps improve the quality of life of coeliac patients, producing benefits such as: health risk reduction, increased confidence and emotional well-being, normalisation of social life and improved adherence to treatment in coeliac patients.

References

1. Federation of Coeliac Associations of Spain (FACE). Manual of Good Practices in Gluten-Free Catering. Madrid: FACE 2020
2. De la Calle, I., Peñalver, R., Nieto. "Coeliac Disease: Causes, Pathologies, and Nutritional Assessment of the Gluten-Free Diet. Review." Rev. Nutrición Hospitalaria. 2020. Vol. 37, No.

Chart 1

Restoration process outline



Advancing Inclusive School Nutrition for Children with Medical Dietary Needs in Bulgaria

Submitted by: Association of Bulgarian Coeliacs - Gluten-Free Life



Introduction

Children in Bulgaria who require medically prescribed diets face practical barriers to suitable food at school. In March 2025, the Association of Bulgarian Coeliacs - Gluten-Free Life (ABC) submitted a joint proposal to the Ministry of Health during preparation of a new national regulation.

The goal was clear provisions for pupils whose diet is determined by a medical diagnosis and a doctor's instructions. Although the initiative originated within the coeliac community, it was designed from the outset to address a broader range of medical dietary needs.

Method

ABC initiated the process and invited other patient and civil society organisations, as well as healthcare expertise, to join the initiative. This led to a coalition with Za Hranata ("For the Food") Foundation, the National Association of Children and Young People with Diabetes, the Bulgarian Patient Forum Federation, the Phenylketonuria Bulgaria Association, and clinical dietitian Dr Derya Husein. Together we developed coordinated, technically specific proposals covering several medical dietary needs. This allowed us to combine the experience of different patient communities in one practical proposal.

Proposed measures

Medically appropriate menus; regional kitchens or external catering when needed; ingredient, storage and preparation controls; cross-contact prevention; staff training; and suitable products in school shops and vending machines. The measures focused not only on access to suitable food, but also on ensuring that it could be prepared and provided safely in practice.

Why collaboration mattered

A shared proposal connected common barriers across several medical conditions and turned individual family difficulties into a national policy issue. By working together, the participating organisations were able to present these challenges as a shared need requiring a national solution.

Analysis

The initiative deliberately went beyond a single diagnosis. By identifying shared barriers and presenting one coordinated position, patient organisations, healthcare expertise and civil society framed medical dietary needs as a system-wide school nutrition issue. This strengthened both the technical quality and the public-interest case for regulatory change. Importantly, the coalition translated the everyday challenges faced by families into concrete, practical measures that could be incorporated directly into the regulatory framework.

The combination of patient experience and clinical expertise also helped ensure that the proposals were both medically relevant and applicable in the everyday school environment.



The joint proposal was submitted to Bulgaria's Ministry of Health in March 2025



Patient organisations and a clinical dietitian presented coordinated practical measures to the Ministry of Health.

Results

On 3 October 2025, Bulgaria adopted Ordinance No. N-3. Article 5(3) requires school menus to take account of dietary requirements arising from a medical diagnosis and a doctor's instructions. Article 22, item 7 explicitly includes dietary foods - gluten-free, lactose-free and low-glycaemic-index products, among others - in the mandatory minimum assortment for school food outlets. These provisions create a legal basis for appropriate meals and food options for children requiring medically prescribed diets. The result is significant because medically required diets are now explicitly recognised

Conclusions

The new provisions are an important first step toward inclusive school nutrition in Bulgaria. The next challenge is consistent implementation by municipalities, schools, caterers and control authorities. Turning the regulatory provisions into everyday practice will require awareness, clear procedures and cooperation at local level.

The initiative shows that coordinated, technically grounded advocacy across patient groups can achieve policy change beyond one diagnosis. For ABC, the next step is to support implementation so that this regulatory progress results in meaningful change for children and families.

References

1. Ordinance No. N-3 of 3 October 2025 - Art. 5(3) and Art. 22(7).
2. Association of Bulgarian Coeliacs - Gluten-Free Life, "What we did in 2025", coeliac.bg.

Our First Children's Camp For Coeliac Disease

5-9 July, 2026

Submitted by: Cyprus Coeliac Association



Introduction

In July 2026, the Cyprus Coeliac Association organised its first children's camp at Rodon Hotel in Agros, bringing together children aged 9–16 for a week of safe, inclusive and educational experiences.

Nine children participated:

- 6 children with coeliac disease
- 3 children living with both coeliac disease and type 1 diabetes, through the Cyprus Diabetic Association.



A safe supportive environment

The camp provided 100% gluten-free meals, with dietary safety and the children's well-being at the heart of everyday camp life



Multidisciplinary support

A multidisciplinary team worked alongside the children throughout the week, combining medical, nutritional and psychological support with education and everyday camp activities.



Inclusion & participation

Children could participate fully in camp life, share experiences, build confidence and make new friendships in an environment where they could simply be themselves.



Education & empowerment

- Understanding coeliac disease
- Reading and understanding food labels
- Preventing cross-contamination
- Making safe food choices
- Nutrition and healthy eating
- Understanding and managing hypoglycaemia



A week of learning, friendship & fun

- Swimming
- Sports
- Games
- Excursions
- Movie Night
- Disco



Summary

Our first children's camp was more than a week away from home. It was an opportunity to learn, connect, belong and grow in confidence — safely and without limitations.

A first step towards making inclusive camp experiences a reality for children living with coeliac disease.

Bread is Bread: Achieving Equality for Spain's Coeliac Community

Submitted by: Federación de Asociaciones de Celiacos de España (FACE), Madrid, España



Introduction

Spain has a population of approximately 48 million people, with the prevalence of coeliac disease estimated at 1%, affecting around 480,000 individuals. However, the diagnosis rate remains a significant challenge, as an estimated 75% of cases go undiagnosed.

For decades, the key hurdle for the Spanish coeliac community has revolved around the disproportionately high cost of gluten-free products — introducing an extra annual expense of over €1,000 per family — coupled with a complete lack of official state subsidies.

The Regulatory Flaw and the Fight for Change

This financial burden was heavily compounded by a critical regulatory flaw dating back to 2019, when the Spanish Bread Quality Standard (Norma de Calidad del Pan) excluded gluten-free bread from both its “standard” and “special” categories. Legally classified as a luxury dietary product rather than an essential staple, the gluten-free industry faced heavy regulatory fines for using the commercial name “bread.” More importantly, this legal loophole excluded gluten-free bread from the basic food safety protections and tax benefits tailored for essential foods.



To combat this discrimination, the Spanish Federation of Coeliac Associations (FACE), alongside local groups and the gluten-free bakery sector, launched a nationwide advocacy campaign running from 2021 to 2024. FACE conducted pricing studies and public awareness campaigns while engaging in intense institutional dialogue, technical roundtables, and lobbying with the Ministry of Agriculture, Fisheries and Food.

By presenting rigorous economic data and consolidated medical evidence, they demanded a revision of a regulation that unfairly penalized the only medical treatment available for coeliac patients.

A Breakthrough in Fiscal and Legal Equality

This retrospective study, conducted as part of the CD SKILL project, This sustained political pressure achieved its first breakthrough in 2025, resulting in the **immediate reduction of the Value Added Tax (VAT) on gluten-free bread** from 10% down to the super-reduced rate of 4%, a bracket strictly reserved for first-necessity foods. This structural change directly lowered financial barriers for families and ensured tighter regulatory oversight on production quality.

The momentum of this fiscal victory drove final action within the government. In 2026, the initiative successfully culminated in the official amendment and enforcement of the Bread Quality Standard, legally cementing gluten-free bread under the statutory definition of “common bread” (pan común). By overcoming deep-seated administrative hurdles, FACE achieved a landmark legal transformation that dismantled a historical bias, finally guaranteeing equality and dignity for coeliac consumers across Spain.

Safe Plate Gluten-Free Hospital Catering: From Advocacy to Implementation

Submitted by: Elpida Galanopoulou, Hellenic Coeliac Society



Introduction

Access to safe gluten-free food remains a significant challenge for people with coeliac disease during hospitalisation, where patients depend entirely on the healthcare facility for their meals and where cross-contamination can compromise the safety of a gluten-free diet.

The certification of the Public Hospital of Larissa through the Safe Plate – Gluten Free programme represents an important milestone for coeliac care in Greece, establishing the first certified gluten-free food service within a Greek public hospital.

Method

The initiative moved beyond simply offering a “gluten-free option”. It introduced a structured food-safety approach covering the entire process of meal provision. Hospital personnel received targeted training on coeliac disease, gluten-free food preparation and cross-contamination prevention, while specific procedures were implemented for the handling, preparation and serving of gluten-free meals. Compliance with the programme requirements was subsequently evaluated through on-site inspection and laboratory testing.

Conclusions

The successful implementation demonstrates that safe gluten-free catering is both feasible and achievable within a public healthcare environment, when clear procedures, appropriate staff training and systematic verification are combined.

More importantly, the Larissa experience provides a practical and replicable model for other public hospitals and healthcare institutions in Greece, showing how advocacy can be translated into concrete institutional change and improved access to safe food for people with coeliac disease.

This success story represents an important step towards a broader goal: ensuring that a patient with coeliac disease can be admitted to hospital without having to worry about whether the food provided as part of their healthcare is safe.



Improving Access to Gluten Free Food in Jordan

Submitted by: Celiac Care Providers Society (CCCPS)

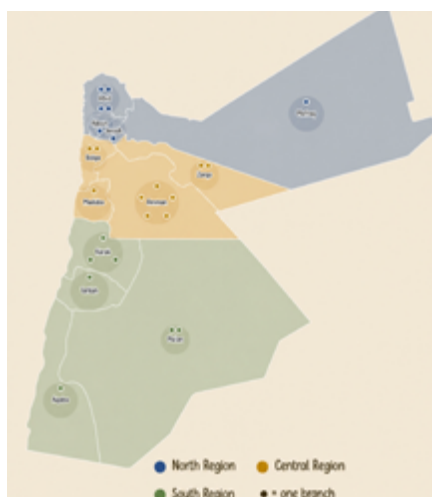


Introduction

Jordan is a country in the Middle East with a population of approximately 12 million. Celiac disease is estimated to affect 1.5–2% of the population, meaning that an estimated 180,000–240,000 people in Jordan may be living with celiac disease. CCCPS, through its work, has identified several strategic challenges that affect the development of a comprehensive national celiac disease care ecosystem in Jordan.

One of the key challenges that we have successfully addressed and managed in 2026 was the limited access to suitable gluten-free food. Access to safe and affordable gluten-free food remains a significant challenge for individuals with celiac disease in Jordan. Key barriers include the high cost of gluten-free products, limited product variety, inconsistent availability, geographic differences in access, and concerns regarding food safety, cross-contamination, and appropriate food handling.

For individuals with celiac disease and their families, these challenges can result in significant practical and financial burdens. Patients may need to search across multiple outlets to find suitable products, while the higher cost and limited availability of gluten-free foods can make it difficult to maintain a safe diet consistently.



Map of Jordan showing the distribution of MCE branches selling gluten free products

Our Success Story

The Celiac Care Providers Society (CCCPS) signed Two Memoranda of Understanding with the Military Quality Control Laboratories and the Military Consumer Establishment, two institutions of the Jordan Armed Forces. The partnership aims to provide high-quality food, consumer goods, and gluten-free products at competitive prices, serving all segments of society, including both military personnel and civilians.

The Military Quality Control Laboratories are responsible for testing all products supplied to the Military Consumer Establishment, including locally produced and imported gluten-free products, to ensure their safety and compliance with the required standards. A dedicated display section bearing CCCPS's logo and the phrase "Gluten-Free Products" has been placed to showcase these products. Most importantly, the products are sold at subsidized prices that are lower than those available in the local market.

The Military Consumer Establishment operates more than 135 branches across Jordan. Based on The Celiac Care Providers Society's (CCCPS) data base regarding the celiac patients across

Jordan, the society (CCCPS) identified and chose the branches located in areas with the highest concentration of patients to ensure the availability of gluten-free products throughout all governorates of the Kingdom.

CCCPS also serves as a liaison between suppliers and the Military Consumer Establishment's management to ensure the continuous supply of gluten-free products.

To evaluate the project's impact, we developed a survey and shared it through our social media platforms to gather feedback from members of the celiac community. We also maintain regular communication with the Military Consumer Establishment and various suppliers to obtain their feedback on product availability and implementation. This ongoing evaluation enables us to measure the project's success, identify challenges, and continuously improve the availability and accessibility of gluten-free products across the Kingdom.

Conclusion

Overall, this partnership has significantly improved access to affordable and safe gluten-free products for people with celiac disease across Jordan. By combining quality control, wider distribution, subsidized prices, and ongoing collaboration with suppliers, the project has helped address important challenges faced by the celiac community, particularly those living outside major cities. Continued feedback and monitoring will help strengthen the initiative and ensure that it remains responsive to the needs of people with celiac disease throughout the Kingdom.



The ACELMEX Model for Gluten-Free Food Handling in Mexico

2026 Visual Case Study: Arrullo Oaxaca

Submitted by: ACELMEX, Asistencia al Celíaco de México A.C., Cecilia Fonolla



Introduction

For people with coeliac disease, eating out is a food safety issue in Mexico. Limited awareness of coeliac disease, cross-contact and hidden sources of gluten remain major challenges in restaurants, hotels and foodservice settings.

ACELMEX developed the Gluten-Free Food Handling Distinction to improve safer eating out through education, technical review, operational support, on-site in-person audit and follow-up during the certification period.

Method

Staff training and knowledge

- Training for all staff involved in guest safety: kitchen, service, dishwashing, reception, purchasing, quality and management.
- The course explains coeliac disease, gluten and hidden gluten, gluten-free ingredients, cross-contact, certification, storage, preparation, service, and communication between kitchen and front-of-house.
- Each participant takes an individual exam.
- After training, the establishment defines the gluten-free menu or offer.

Technical review and controls

- Based on that menu, ACELMEX reviews raw materials, suppliers, labels, technical sheets, allergen declarations and preparation procedures.
- The process is documented with shared checklists and follow-up tools.
- During the certification year, new ingredients or menu changes must be reviewed and authorised.

Analysis

Arrullo Oaxaca is the 2026 visual case study of the ACELMEX Model. Oaxaca is a leading destination for gastronomy and tourism. Arrullo Oaxaca represents a strong implementation of the ACELMEX Model with a dedicated gluten-free kitchen and a clearly defined gluten-free menu.

The model can also be applied in shared-kitchen operations when controls are stricter and properly documented.

Picture 1

ACELMEX Certification Process



Picture 2

Arrullo Oaxaca in practice



Results

- Increased awareness of coeliac disease among foodservice staff.
- Better identification of hidden risks and cross-contact points.
- Technical review of menu, raw materials, kitchen and service procedures.
- Support for staff turnover through additional training when needed.
- Access to ACELMEX web app with certified gluten-free products.
- Synergy between certified manufacturers and foodservice establishments.
- In some trainings, staff request medical guidance; ACELMEX can refer them to medical resources.

Conclusion

The ACELMEX Gluten-Free Food Handling Distinction shows how a patient association can improve food safety by combining education, individual assessment, technical review, on-site audits and rigorous operational support.

Its impact is not only certification. It changes daily practices and helps people with coeliac disease eat out and travel with greater confidence in Mexico.

Continuation - What's next?

Menu and service protocol

The gluten-free offer is defined after training and before technical review.

ACELMEX reviews the actual ingredients, brands and suppliers used for that menu.

The protocol must be followed from guest request to final service, including plate elements, accompaniments, decoration and service utensils.

Shared vs. dedicated kitchen

In dedicated kitchens, the focus is verification and documentation of the gluten-free operation.

In shared kitchens, controls must be stricter for space, storage, surfaces, utensils and communication.

Annual follow-up

Any new raw material or relevant menu change must be reviewed and authorised during the certification year.

Additional training can be delivered when there is staff turnover.

Venezuela Case:

From Emergency Response to a Global Coeliac Crisis Protocol

Submitted by: ACELMEX – Asistencia al Celíaco de México A.C., Cecilia Fonolla. In collaboration with: Fundación Celíaca de Venezuela, Anaeva Aleo, President, Célida Matute, Director



Introduction

After earthquakes affected Venezuela in 2026, ACELMEX contacted Fundación Celíaca de Venezuela to support the local response. The priority was to locate affected people, confirm access to safe gluten-free food and register medical, family and emotional vulnerabilities. It quickly became clear that food was essential, but not enough: the crisis also required psychosocial support and clear rules for therapeutic care.

Method



Analysis

- Safe food was essential, but it did not resolve the whole crisis.
- Vulnerability was not defined by coeliac disease alone; other health and care needs appeared.
- Local leaders also needed support in order to continue supporting their community.
- Therapeutic support required professional verification, case assignment, continuity, supervision, handover and closure.
- Goodwill does not replace organisation.

Emergency census snapshot

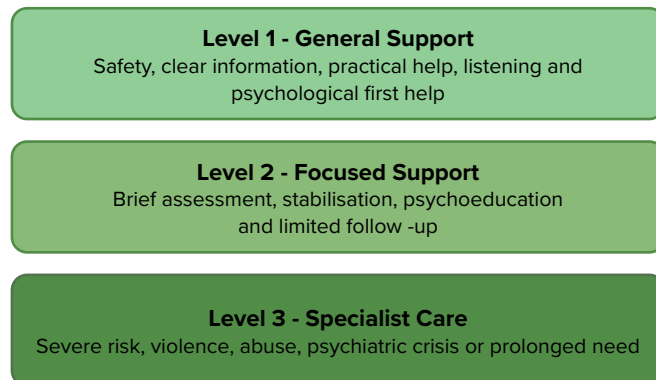
The census showed that aid had to combine safe food, health and emotional support.



Donations and preparation of aid for affected people with coeliac disease.

Psychosocial response

The Venezuela experience led to a three-level response model: general support, focused support and specialist referral.



Results

- An operational census was created to locate and prioritise affected people.
- Gluten-free food, health and emotional-support needs were integrated into one response.
- Psychosocial and therapeutic support was incorporated when the need became clear.
- The experience defined rules for continuity, supervision, handover and closure.
- The lessons from Venezuela became the practical basis for the global crisis protocol.



Delivery of safe food



Collection centre and supplies managed locally by Fundación Celíaca de Venezuela.

Venezuela Case: From Emergency Response to a Global Coeliac Crisis Protocol

Continued



Conclusion

Safe gluten-free food remains essential, but effective response also requires rapid identification, prioritisation, local coordination, support for leaders, attention to other health conditions and clear professional rules.

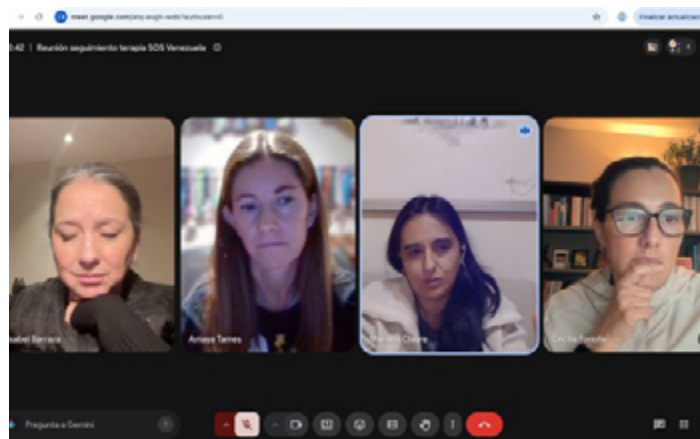
The main result was not a longer manual, but a concise, adaptable model for rapid action.

Participants and collaboration

Coordination and development	ACELMEX – Asistencia al Celíaco de México A.C. · Cecilia Fonolla
Local counterpart	Fundación Celíaca de Venezuela · Anaeva Aleo, President · Célica Matute, Director
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International collaboration	Susanna Neuhold · Italian Coeliac Association (AIC), Italy Dan Solomon · Celiac Rights, Israel
Technical collaboration	María van der Hofstadt Rovira · AOECs Veronica Rubio · AOECs Cristina De Abreu · AOECs

Continuation: from emergency response to a global protocol

EARTHQUAKES IN VENEZUELA Real emergency and need for rapid response
FUNDACIÓN CELÍACA DE VENEZUELA + ACELMEX Local coordination, direct contact and organisation of support
EMERGENCY CENSUS People, location, safe food, ability to cook and vulnerabilities
NEEDS IDENTIFIED Food, water, medication, medical support, emotional support
PSYCHOSOCIAL / THERAPEUTIC SUPPORT Stabilisation, accompaniment, follow-up and referral when required
LESSONS LEARNED Governance, professional continuity, ethics, case handover and team protection
GLOBAL CRISIS PROTOCOL A concise and adaptable model for other societies to act rapidly



Therapeutic follow-up meeting with ACELMEX and the psychosocial team

Closing statement

The Venezuela case showed that coeliac emergency response must go beyond food distribution. Its strength lies in combining rapid identification, safe gluten-free food, local coordination, psychosocial support, professional accountability and continuity of care.

The experience became the practical foundation for a concise global crisis protocol designed to help coeliac societies act quickly, safely and consistently in future emergencies.



Aid transport and local logistics.



Direct delivery of gluten-free food to affected families.

More than food — How Poland's first 100% gluten-free Food truck influences holiday choices of families living with coeliac disease

Submitted by: Anna Prusaczyk-Danilczyk, Michał Danilczyk



Introduction

People with coeliac disease often report difficulties finding safe food while travelling, which may affect destination choice, participation in tourism and overall quality of life.

Since 2020, “Coś Innego” has operated as Poland's first 100% gluten-free food truck, serving families visiting Grzybowo on the Baltic Sea.

Our objective was to explore whether access to a dedicated gluten-free food service influences travel decisions and holiday experiences among families affected by coeliac disease.

Method

A qualitative thematic analysis was conducted on customer messages and testimonials collected between 2022 and 2026.

- Sources included:
- Facebook Messenger
- Instagram messages
- Customer feedback
- Testimonials displayed in the
- food truck

Messages referring to travel decisions, holiday planning, food safety and emotional experiences were reviewed and grouped into thematic categories. Messages were anonymised before analysis.

Results

1. Families planning holidays because of gluten-free food availability

Several families reported that the availability of safe gluten-free food influenced their destination choice.

- “We would visit Grzybowo especially because of you”
- “Your food truck is a treasure for families with coeliac disease.”
- “Thank you for helping us enjoy our first gluten free holiday”
- “Your presence here is a lifesaver.”
- “Without you, we wouldn't be able to eat safely anywhere.”

2. First stress-free holiday

Families frequently described feeling safe and relaxed during holidays because they no longer had to worry about food contamination.

3. Children and emotion impact

Children regularly left drawings, thank-you cards and personal messages, demonstrating strong emotional attachment and trust.

4. Safe food and social inclusion

Customers highlighted the importance of being able to eat together with family and friends without fear of gluten exposure or social exclusion.

Discussion

Access to certified gluten-free food appears to play a significant role in travel planning among families living with coeliac disease.

The findings suggest that access to certified gluten-free food influences not only dietary safety but also destination selection, social participation and emotional wellbeing.

Small community-based food initiatives may therefore contribute to reducing barriers faced by people with coeliac disease.

Conclusion

- Access to trusted gluten-free food can directly influence tourism decisions among families living with coeliac disease
- Families with coeliac disease actively seek reliable food providers when travelling.
- Dedicated gluten-free services reduce stress and improve holiday experiences.
- Community-focused initiatives can positively affect quality of life for people living with coeliac disease.





Introduction

The Portuguese Coeliac Association (APC) has created a Gluten Free Certification for Hospitals in Portugal. To obtain Certification, the Hospital must fulfill specific requirements, ensuring the implementation of practices that guarantee strict compliance with a gluten-free diet (GFD) and the prevention of cross-contamination across all provided services. Consequently, individuals with coeliac disease can safely consume meals within the Hospital.

Objectives

- a) Promote the accessibility and inclusion of individuals with coeliac disease in healthcare;
- b) Guarantee the availability of safe, cross-contamination-free gluten-free meals;
- c) Raise awareness and train healthcare professionals and hospital staff regarding coeliac disease (CD) and the GFD;
- d) Improve the quality of life of patients with CD and their families;
- e) Increase the coeliac community's trust in certified healthcare institutions.

Scope of application

This regulation applies to all hospital services, including:

- a) Inpatient care;
- b) Emergency Department;
- c) Appointments;
- d) Canteens, bars and vending machines;
- e) Internal events organized by the hospital.

Certification criteria

Patient Identification

- a) Implement a clear identification system for patients with coeliac disease upon hospital admission, accessible to all involved professionals (physicians, nurses, nutritionists, and kitchen staff).

Nutrition and Food Services

- a) Ensure that inpatients with celiac disease receive safe, gluten-free meals without cross-contamination;
- b) Provide gluten-free products in vending machines located within the hospital;
- c) Ensure that healthcare professionals working at the hospital who have meals in the canteen have cross-contamination-free gluten-free options;
- d) Ensure that hospital-organized events involving coffee breaks or lunches include cross-contamination-free gluten-free options;
- e) The Nutrition Department commits to reviewing procedures with the kitchen staff whenever a cross-contamination incident is reported.

Training and Awareness

- a) Provide educational materials created by the APC (such as leaflets) regarding CD and the GFD in nutrition and gastroenterology appointments;
- b) Conduct annual training for healthcare professionals and healthcare assistants on CD and the GFD, facilitated by APC dietitians/nutritionists;
- c) Provide training for kitchen staff on CD, the GFD, and the

necessary precautions to prevent cross-contamination from storage to service;

- d) Organize activities that promote health literacy at least once a year, such as cooking demonstrations and workshops aimed at the general public;
- e) Mark World Coeliac Day with a session dedicated to the coeliac community.

Information and Support

- a) Make APC educational materials available in nutrition and gastroenterology appointments;
- b) Highlight the Gluten Free Certified Hospital on the APC website, Sem Glúten Magazine, newsletter, and social media platforms;
- c) Raise awareness about CD on World Coeliac Day across the Gluten-Free Certified Hospital's social media platforms.

Food Safety and Quality

- a) Conduct an annual audit of the hospital kitchen through an accredited certification body suggested by the APC to ensure procedures are correctly implemented.

Certification process

- 1. Application:** The hospital submits a formal application to the APC.
- 2. Implementation:** The hospital implements the required procedures and safety protocols.
- 3. Report:** The certification body issues an assessment report and, if applicable, recommendations for improvement.
- 4. Decision:** Hospitals that meet all requirements are awarded a certification valid for one year.
- 5. Certificate:** The APC issues the Gluten Free certificate.
- 6. Renewal:** Certification Renewal requires a new annual audit.

Inspection and revocation of certification

- a) The APC reserves the right to conduct extraordinary audits in cases of complaints or non-compliance.
- b) Repeated failure to comply with standards may lead to the suspension or revocation of certification.

Conclusion

The Gluten-Free Certification for Hospitals represents a decisive step in ensuring safety for individuals with coeliac disease. It combines the provision of cross-contamination-free gluten-free meals with ongoing training for healthcare professionals, such as doctors, dietitians, and nurses. This is a fundamental step toward promoting inclusion, fostering trust, and improving the quality of life for people with coeliac disease and their families.





CONTACT

If you have any questions regarding the content in this brochure, please contact us at helpdesk@aoecs.org, or visit our webpage www.aoecs.org



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