

HC3S Medically Identified Special Diets Policy – Primary Schools

Introduction	
1.0	Policy statement
1.1	HC3S aim to provide children in contracted primary schools, with medically proven special dietary requirements and food allergies with the same opportunities as other pupils at school. Although food allergies are not a stated Disability Discrimination Act (DDA) requirement, we work beyond the four main allergies, wheat and gluten, dairy, soya and egg. We work continuously to make reasonable adjustments and improve what we do to give children a nutritious diet.
1.2	To ensure the provision of special diets is successful and to meet with safeguarding requirements, this policy sets out the responsibilities of schools, parents and caterers' requirements.
1.3	All our standard primary school menus are nut free. Our ingredients are manufactured in a nut free environment, meaning all children with a nut allergy can eat our primary menu without having to register for a special diet.
1.4	Withdrawing a food group from a child's diet should always be monitored by a health professional. Special diets, therefore, are only provided for pupils with a medical problem, not just a dislike of certain food.
1.5	HC3S will take every possible precaution, to ensure that food items detailed in the menus for children with medically proven special diets, will be given to the identified children and that HC3S will manage all appropriate processes. There is, however, always a risk that traces of allergens may be transferred to items from our menu during processing, storage or preparation in our kitchens. For these reasons HC3S is unable to guarantee that any item on any of our menus is free from trace allergens.
1.6	Only food purchased from nominated suppliers, in accordance with Hampshire County Council specifications will be used in HC3S kitchens.
1.7	As our food development team devote their resource on feeding a hot healthy and nutritious lunch, we are unable to cater for specific special diets for schools that choose to offer a breakfast or morning break/tuck shop service or picnic lunch. We can, however, provide a full list of ingredients for all the items we offer. For those schools that require this information, please email our Food Development team at HC3Sfooddevelopment@hants.gov.uk
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Parental responsibility for their children

2.0 Special Diet Application

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2.1	Children who have medical needs will usually be under the care of medical professionals. It is the responsibility of parents/guardian to provide accurate information relating to any allergies/special diets that their child may have or require and that this is backed up with medical evidence.
2.2	HC3S will always require medical evidence to support the application confirming the child's allergy or intolerance and parents/guardians must specify what food item/group is to be removed from the menu.
2.3	The Medically Identified Special Diet Application form (HC300) is available to download from www.hants.gov.uk/educationandlearning/hc3s/primaryschools/specialdiets for completion.
2.4	Once the application has been completed and signed by a GP/Dietician, parents are required to take the form into the school admin office to scan over to HC3S office <u>HC3Sfooddevelopment@hants.gov.uk</u>
3.0	Severe allergies – adrenaline auto injector (i.e. EpiPen)
3.1	If a child requires an adrenaline auto injector for food allergies (other than nut allergies) parents/guardians must advise both the school admin office, on school enrolment and HC3S via, the Medically Identified Special Diet Application form (HC300)
3.2	We strongly recommend to schools, that children requiring an adrenaline auto injector, (other than nut allergies), are escorted to the service counter at lunch time by a member of school staff to ensure they are easily identified.
4.0	Special Diet Menu
4.1	Once a child is registered as requiring a special diet menu and the menu has been produced, they will remain on this menu for the duration of the menu cycle.
4.2	A menu change will only be made if a child develops additional allergies during the
	menu cycle. Supportive medical evidence will be required along with a letter/email from the parent/guardian. This should be emailed to <u>HC3Sfooddevelopment@hants.gov.uk</u> and the school notified.
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School's responsibilities	
6.0	Special Diet application
6.1	It is the school's responsibility to make parents/guardians aware that they are required to provide HC3S with the information and evidence of their child's special dietary needs, for children registered at their school.
6.2	The school admin office must direct the parents/guardians to HC3S website <u>www.hants.gov.uk/educationandlearning/hc3s/primaryschools/specialdiets</u> to complete form Medically Identified Special Diet Application (HC300).
6.3	The school admin office are required to scan and email the completed HC300 application form to HC3S Office <u>HC3Sfooddevelopment@hants.gov.uk/hc3s</u>
7.0	Special Diet Menu
7.1	Once the Medically Identified Application form (HC300) has been processed and a menu developed, HC3S Food Development team will email the menu to the school. The school admin office are then required to print off the menu and hand this to the Head of Kitchen.
7.2.	The school must notify the parent/guardian of the date the child can start eating from their menu, once this has been agreed with the kitchen.
.8.0	Identification of children requiring a special diet
8.1	All children registered with HC3S for a medical special diet meal are required to wear an orange silicon band to aid in the identification of the child during the lunch service. These bands are provided by HC3S and it is the school's responsibility to ensure the correct children wear them each day to the service counter in exchange for their meal.
8.2	In addition to an orange band, schools are required to sign Medically identified special diets – Identification at Service Time form (HC301) to confirm what additional identification method they will use. This is available from HC3S Food Development team (HC3Sfooddevelopment@hants.gov.uk)
8.3	It is also recommended as best practice that all children requiring a medical special diet are served first and escorted to the counter in addition to wearing an orange band.
9.0	Severe allergies – adrenaline auto injector (EpiPen)
9.1	For safeguarding reasons, it is strongly recommended for children, who require an adrenaline auto injector (EpiPen) for all food allergies other than nut allergies, should be escorted to the service counter by a member of school staff during the lunch service. This should be in addition to the child wearing an orange band.
10.0	Allergy awareness training
10.1	HC3S offer school lunchtime supervisory staff a free one-hour training briefing on food allergies. The briefing covers: allergic reaction responses; the requirements of Food

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	Safety Law and the procedures HC3S have in place; to ensure the safety of customers who require a special diet for food allergy or intolerance reasons. To book this training email a request through to: <u>hc3straining@hants.gov.uk</u>
11.0	School leaver/transfers
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11.	.1	Schools are required to notify the HC3S Food Development team the names of those
		children who receive a special diet who are a) moving to Junior school or b)
		transferring to secondary school, or c) moving to another school.

	ers (HC3S) responsibilities
12.0	Special Diet Application
12.1	On receipt of the Medically Identified Special Diet Application form (HC300), HC3S Food Development team will check that the form has been completed correctly. Onc HC3S is satisfied that the form has been completed correctly, the Food Development team will devise a menu according to the special medical diet needs. This will either be a standard generic special diet menu or named specific diet menu.

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13.0	Special diet menu compilation
13.1	Special diet menus are normally produced by the Food Development team within 10 working days from receipt of application. Once the menu is completed, it is emailed securely to the school.
13.2	Medical Special Diet applications received by the Food Development Team within 28 days of the end of a menu cycle, may be delayed due to the production of the new menu cycle. This should only affect new applications received during March and September.
13.3	Personal food preferences, or dislikes of food on the child's special diet menu, cannot be accommodated as this can cause confusion and increase the risk of error.
13.4	HC3S medical special diet menus are based on the 14 main allergens; these menus are produced for pupils who regularly have a school lunch. We are unable to provide individual allergen menus for children who only have a school meal on an ad hoc basis.
13.5	On HC3S planned food theme days (including Christmas lunch) an allergen sheet is produced and sent to kitchens. Parents/guardians can request this information from the Head of Kitchen, allowing the parent to make an informed decision as to whether the menu is appropriate for their child. We are unable to guarantee a specific meal.

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13.6	HC3S Food Development devote their resource on feeding a healthy and nutritious lunch, this means that we are unable to cater for specific special diets for schools that choose to offer a breakfast or morning break/tuck shop service, picnic or 'Streets menu'. We can however provide a full list of ingredients for all the items we offer for breakfast or morning break/tuck shop service. Registration for a medical special diet for these menus only is therefore not necessary.
14.0	Allergy matrix
14.1	An allergen matrix for the current HC3S menu is available on our website for those parents who wish to manage their child's choice of meal http://hc3sprimarymenu.mysaffronportal.com

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15.0	Preparation of special diet meals
15.1	Special diet menus will be followed exactly, and substitutes will not be made except in the event of unforeseen circumstances (e.g. supplier availability). The Food development team will only authorise substitutions under unforeseen circumstances.
15.2	Prior to any preparation of special diet meals, work surfaces are thoroughly cleaned with a detergent and then disinfected.
15.3	Special diet meals are prepared using different baking sheets, cooking and serving utensils. The same equipment or utensils will not be used to prepare other food items, unless thoroughly cleaned first to prevent cross contamination.
15.4	Due to the possible risk of contamination, school kitchens cannot be classed as 'free from'.
15.5	All catering staff however, are trained in allergy awareness and food safety to a level commensurate with their role.
16.0	Serving of special diet meals
16.1	A Special Diet Daily Register is completed in the kitchen. Details are recorded on the daily register to identify which special diet meals are to be prepared that day. The register also acts as a log to record what meal the child was served.
16.2	Children requiring a special diet meal are asked for their orange band on arrival at the service counter.
16.3	The Head of Kitchen (or member of staff acting as Head of Kitchen) will take responsibility on a daily basis to serve all special diet meals.

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16.4	In the case of multi-site kitchens (e.g. production and serveries) the Head of Kitchen will nominate another member of the team to support with assisting in the serving of special diets meals in the other site/s.
16.5	Whenever the meal is served, the Special Diet Daily Register will be referred to before handing over the child's special diet meal.

HC3S Medically Identified Special Diets Policy Primary Schools May 2019