

Catering Service

Allergen-Managed Medical Diet Policy

Policy Statement

SIPS Catering are committed to reducing the risk to our customers with regard to the provision and consumption of allergens in food.

We endeavour to provide dishes with as few allergens as possible. However, we cannot guarantee that food will be available each day for customers with complex dietary requirements or where the risk or consequence of an allergic reaction has been assessed as to make food provision unfeasible.

This documentation relates only to allergies or food allergen avoidance diets requiring the removal of specified ingredients. It does not cover lifestyle choice, cultural or religious diets, or medical diet requests unless requiring allergen management. We seek to identify individuals only for reasons of food safety.

We prepare and serve our food for our customers each day using a wide range of ingredients in an environment where food is prepared for customers that have allergies and those that have none. Whilst we do our best to manage our food and ingredients, we cannot guarantee that our food is allergen free.

Please note that this policy relates to schools, other learning and student-centred settings, unless SIPS provides information to the contrary,



Objectives of this Policy

To provide guidance and information to all relevant stakeholders on their responsibilities in the provision and consumption of food, to or by anyone using SIPS catering services who may have a food allergy, food intolerance or coeliac disease.

To signpost policyholders to other relevant information held by SIPS that will enable them to undertake their responsibilities with regard to food allergy and allergen management.

Please note that the interpretation of, or omission of, any information from or relating to this policy does not deem SIPS to be responsible by association for actions taken as a consequence.

This policy will be reviewed from time to time.

Allergy Labelling Legislation

From 13 December 2014, legislation (the EU Food Information for Consumer Regulation 1169/2011) requires food businesses to provide allergy information on food sold unpackaged. Amendments 2019 (Natasha's Law) became effective from 1st October 2021.

Background

Medical diet

The term 'medical diet' is used to refer to food allergies, intolerances and medically-required food allergen avoidance diets, whereby adjustments are required to make food safe for a person or persons. These may also commonly be called 'Special Diets', however this documentation **does** not cover non-food allergies, metabolic, sensory, autoimmune or other disorders (unless



requiring allergen management, e.g. removal of gluten for Coeliac disease), and it **does not** cover cultural and religious diets or lifestyle choices which may affect a person's diet.

What is a food allergy?

Food allergies affect the body's immune system. The body reacts to certain allergens in food by producing antibodies which can cause immediate and sometimes severe symptoms, such as: itching or strange metallic taste in the mouth, swelling of the throat and tongue; difficulty in swallowing or speaking; abdominal cramps, nausea and vomiting; skin hives (nettle rash) anywhere on the body. In most extreme cases, difficulties in breathing and a severe fall in blood pressure (anaphylactic shock) can prove fatal.

What is a food intolerance?

This does not involve the immune system in the same way and is not usually as severe as a food allergy. Symptoms usually take longer to appear and may include headaches, fatigue and digestive problems.

Food intolerance is harder to diagnose than a food allergy. The person with a known allergen trigger may know what food ingredient will provoke a reaction. However, they may well have eaten this food or a specific dish previously and had no adverse reaction.

Coeliac Disease

Coeliac disease is a lifelong auto-immune disease caused by a reaction to gluten.



- 1 in 100 people have the condition
- Symptoms include bloating, diarrhoea, nausea, wind, constipation tiredness, sudden or unexpected weight loss, hair loss and anaemia
- Once diagnosed, it is treated by following a gluten free diet for life.

Who is at risk?

Anybody can develop a food allergy or intolerance at any time in their life, irrespective of whether they have consumed the food previously. A person with an allergy is at risk even if they consume a small amount of the food allergen.

Food allergies and intolerances are life-changing. In the UK they affect around 8% of children and 2% of adults. In December 2014, the law on how allergen information is provided by food businesses changed to make it easier when buying food or eating out with an allergy or intolerance. Pupils can be vulnerable and may be at higher risk if they have allergies.

Food Allergens

Food allergens fall into one of two categories.

- 1. Reportable by law: There are currently 14 allergens which must be clearly stated if they are present in the food on offer. They are listed in the table below.
- 2. Other allergens: Customers may have medically diagnosed allergies to foods, other than these 14. Manufacturers, suppliers, and caterers do not have to publish this allergen information for foods that are not pre-packed. Some are not easily identifiable on food labelling and declarations, or they may have not come into contact with other foods.



Celery	Gluten including sub- allergens	Mustard	Soya
Crustaceans	Lupin	Nuts including sub- allergens	Sulphur dioxide
Eggs	Milk	Peanuts	
Fish	Molluscs	Sesame	

Who does this policy relate to?

Here we detail the responsibilities and actions of the parties involved when a student appears to have a food allergy.

Process Stage	Parent / Carer	School	SIPS
1. Medical diagnosis of Student's Food Allergies	• Be responsible for their child's food allergy requirements, as professionally medically diagnosed.	• Proactively communicate to parents and carers that food allergies must be medically diagnosed in order for food provision by	• To provide the means to receive medically diagnosed catering provision requests from schools.



Process Stage	Parent / Carer	School	SIPS
	 Inform the school of symptoms whilst awaiting diagnosis Obtain diagnosis from qualified medical professional. 	SIPS to be risk assessed.	• To ensure that parent/carers are aware that food cannot be prepared in a non-allergen environment.
2. Notification of Food Allergies Note: any evidence to be considered must be dated within the last six months.	• Communicate clearly the professional medical diagnosis evidence to the school.	 Be data controllers for information relating to medical diets, allergies and intolerances. Collect medical diagnosis information relating to students with allergies. Provide written details in a format acceptable to SIPS as soon as diagnosis received or updated, in order for SIPS to assess feasibility of food provision, 	• Signpost enquiries from parents and carers regarding food allergies to their school in the first instance.



Process Stage	Parent / Carer	School	SIPS
3. Risk Assessment and Evaluation	 In conjunction with the school and the parent / carer, SIPS to undertake a risk assessment on receipt of a medical diet request, to determine feasibility of catering for the individual by the means of reasonable adjustments. If alerted to a case where a medical diagnosis is pending, the risk assessment will be completed using available information and may be placed on hold until evidence of diagnosis is received. SIPS to use the findings of the risk assessment to inform the provision for the individual student and communicate this to the school. SIPS to inform the kitchen of information sufficient for them to cater for the individual. Dependant on initial evidence and perceived risk, SIPS may choose to offer an interim menu to the individual comprising of a jacket potato with a suitable filling, together with a suitable dessert. This menu may remain in place until the full findings of the risk assessment become evident. If, at any stage, SIPS deem the risk is too great, SIPS reserve the right to decline the request to cater for the individual student. Should this be the case, the school shall support the decision of SIPS. Should the school deem the risk be too great for the individual to be catered for in school, SIPS will adhere to the decision of the school. 		
4. Should Food Provision be Feasible: Agree menu	• Accept, or otherwise, the catering provision offer made by SIPS and / or the school.	 Communicate information to the parent, including any specific arrangements to the support the individual, which 	• Make reasonable menu adjustments, where feasible.



Process Stage	Parent / Carer	School	SIPS
		must also be shared with SIPS.	
5. Ordering of Meals	• School to determine with the parent / carer on which days the student will be staying for meals and inform SIPS of this pattern.		
		_	me that is deemed to be any day that they have as a
6. Preparation of Food for Students with Medically Diagnosed Allergies, where food provision is feasible and agreed by SIPS.	N/A	N/A	• Kitchen staff to utilise information provided by SIPS in order to prepare food.



Process Stage	Parent / Carer	School	SIPS
7. Point of Service	_	 To identify pupils with a confirmed medical diet at the point of service by a means agreed with SIPS. Implement student support as agreed and communicated to SIPS. 	• Serve food to individuals using food information provided by SIPS.
8. Duty of Care	• To work in partnership to support the student to feel safe and enjoy the school lunch experience.		
	• Encourage their child to discuss their lunchtime experience and any concerns, to build confidence.	• Ensure that resources and control measures are in place in order to fulfil their responsibilities.	• Ensure that resources and control measures are in place in order to fulfil their responsibilities.