



Food Allergy Policy

Plan Administration

Version	
Date	
Responsibility for the Plan	
Approved by	
Date of review	

RECORD OF AMENDMENTS

[illegible]

Statement

Cascade MAT is committed to the wellbeing and safety of pupils, staff and visitors with regard to the provision of food and the consumption of allergens in food, which could lead to an allergic reaction.

Aims

The intent of this policy is not to guarantee a completely allergen free environment, rather to minimise the risk of any children or staff suffering food allergy-induced anaphylaxis whilst in school, and plan for effective response to possible emergencies.

That appropriate training/education is available and implemented for school staff and catering staff involved in providing food for pupils with food allergies.

Ensure the Trust complies with the statutory guidance for supporting pupils with food related medical conditions.

This policy applies to all members of the school community: pupils, school staff, parents/carers, volunteers & visitors.

Definitions

Food Intolerance – Either the body cannot properly digest the food that is eaten, or that a particular food might irritate the digestive system, such as lactose intolerance (dairy) and coeliac disease (gluten). Symptoms can include nausea, bloating, cramps, abdominal pain, and diarrhoea.

Allergy – A condition in which the body's immune system has an exaggerated response to a substance (e.g. food or drug) also known as hypersensitivity, and can be fatal.

Allergen – A normally harmless substance that triggers an allergic reaction in the immune system of a susceptible person.

Anaphylaxis – Anaphylaxis, or anaphylactic shock, is a sudden, severe and potentially life-threatening allergic reaction to food, stings, bites, or medicines.

The 14 major food allergens:

Gluten–flour, cereals

Celery– including stalks, leaves, seeds and celeriac in salads

Crustaceans– prawns, crab, lobster, scampi, and shrimp paste

Eggs – flans, glazes, sponges

Fish – some salad dressings, relishes, fish sauce, some soy and Worcester sauces

Soya –tofu, bean curd, soya flour

Milk – milk powder, spreads

Nuts – almonds, hazelnuts, walnuts, pecan nuts, Brazil nuts, pistachio, cashew, Macadamia

Peanuts – sauces, cakes, desserts, ground nut oil, peanut flour

Mustard – liquid mustard, mustard powder, mustard seeds

Sesame – bread, bread sticks, tahini, hummus, sesame oil

Lupin – seeds and flour, in some bread and pastries

Molluscs –mussels, whelks, oyster sauce, land snails and squid.

Sulphur dioxide – (sometimes known as sulphites) dried fruit such as raisins, dried apricots, prunes, wine and beer.

Responsibilities

Parents/carers are asked to provide details of medical dietary requirements of a child before joining school by completing a Medical diet enquiry form. Upon determining that a child attending school has an allergy, a meeting will be set up with the Catering manager/Cook, Parent/carer and a member of the admin team to assess the child's needs (menu etc.) Parent/carer must provide written medical evidence from a GP, Dietician or Medical professional. The school will ensure that a Health Care Plan is established and updated for each child with a known allergy, along with the involvement of parents and staff. Any change in a child's medical condition during the year must be reported to the school by the Parent/carer.

School staff and catering staff are made aware of pupils and staff who have food allergies, and are required to familiarise themselves with the medical information of children with allergies. Action plans with a recent photograph for pupils with allergies will be posted in the school kitchen and staff room with parental permission.

School staff should liaise with Parents/carers before any food is brought into school if it is intended to be shared with the class e.g. birthday cakes. A risk assessment is carried out by the teacher/competent person for all food related activities.

Apply the local Food Safety Management System Hazard Analysis Critical Control Point (HACCP) for safe storage of ingredients and preparation. Adhere to the approved buying list of suppliers and products; do not deviate from any standard recipes.

Equipment/utensils used in the preparation of food for people with a food allergy are cleaned according to standard procedures.

A specific area of the kitchen is to be used for the preparation of any food for someone with a food allergy. The area and equipment will be sanitised before it is used to prepare food.

Allergen information is available at the point of sale in the dining room from catering staff and signage. Foods that may contain nuts will be clearly labelled. 'Natasha's Law' will come into force in October 2021 where all Pre-packed direct for sale food will need full labelling with full list of ingredients. An example of this is sandwiches or desserts for school trips.

Medical Information

The school requires Parents/carers to provide written confirmation, which explains the condition, defines the allergy triggers and any required medication.

It is the responsibility of the Parent/carers to provide the school with the correct medication/equipment, clearly labelled in a suitable container. Where an AAI (auto-adrenalin injector) is identified as required in the Health Care Plan, Parents/carers are responsible for the provision and timely replacement of the AAI. The AAI's are located securely in relevant locations as indicated by the risk assessment.

Parents/guardians are responsible for providing in writing, ongoing, accurate and current medical information to the school. Parents/guardians are required to provide up to date emergency contact information.

Standards

Children are not permitted to share food. Snacks and lunches brought to the school by children should be nut free. Emergency medication should be easily accessible, especially at times of high risk E.g. lunchtime.

All staff will promote hand washing before and after eating. All tables are cleaned before and after service.

Food brought from home intended for sharing with class mates in school e.g. a birthday cake, must be shop bought, unopened, with clear labelling of ingredients, date code and allergens. However, the final decision to allow food (that meets the criteria) into school is at the discretion of the Head Teacher.

Symptoms and Action

The allergy to nuts is the most common high-risk allergy and as such, demands more rigorous controls. However, it is important to ensure that all allergies are treated equally as the effect to the individual can be both life-threatening and uncomfortable, if suffered.

Anaphylaxis has a whole range of symptoms. Any of the following may be present, although most people with anaphylaxis would not necessarily experience all of these:

Generalised flushing of the skin anywhere on the body

Nettle rash (hives) anywhere on the body Difficulty in swallowing or speaking Swelling of tongue/throat and mouth

Alterations in heart rate Severe asthma symptoms Abdominal pain, nausea and vomiting

Sudden feeling of weakness

Collapse and unconsciousness.

In the event of a child suffering an allergic reaction, medication will be administered as per training and in conjunction with the Medication Policy. If a child becomes distressed or symptoms become more serious, telephone 999. Telephone/contact the child's parents or emergency contact. If Parents/carers emergency contact has not arrived by the time ambulance attends, a member of staff will accompany the child to hospital.

Reporting

All incidents including near misses should be reported via the current accident reporting procedure (Health and Safety Policy)



Medical diet enquiry form

Pupil name:	
Date of Birth:	
School/Year:	
Parent/carers name:	
Parent/carers address:	
Parent/carers contact number:	
Parent/carers email address:	
Brief details of child's medical/dietary needs:	
Signature of parent/carers:	

Office use only

Date Medical evidence received:	
Date Menu sent to parent/carer:	
Date Menu approved by parent/carer:	
Signature of parent/carer:	