

# Facilities Management (FM)


## Procedure for the provision of a specific diet in schools



## Version Control

Version	Date Issued	Author	Update Information
1	June 2021	G Fallon	
2	October 2023	G Fallon, L Richmond, J Shields & C Majury	Changes reflecting up to date branding, processes, and procedures, replacing job titles, updating management information and risk assessments.
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# Introduction

All children and young people have a right of equal opportunity in support of their learning and this includes the right to the highest attainable standard of health.

We aim to ensure that food and drink provided at school lunch and break times reflects the nutrition and healthy eating messages in the curriculum and also comply with the nutrient requirements and food standards required by the [Nutritional Requirements for Food & Drink in Schools \(Scotland\) Regulations 2020](#).

In some circumstances, this will require special arrangements due to specific dietary needs including:

- Additional support needs e.g. those with chewing and swallowing difficulties.
- Ethical reasons e.g. those wishing to follow a vegan diet.
- Religious or cultural reasons e.g. individuals from different ethnic origins.
- Medically prescribed e.g. due to coeliac disease, food allergy.

This procedure details the arrangements in place that ensure the specific dietary needs of all children and young people attending school in South Ayrshire can be satisfied.

All specific diets including additional support needs, ethical reasons, or religious/cultural reasons (hereafter referred to as non-medical diet) and medically prescribed diets will be handled through the formal procedure below.

## Scope

This procedure will apply in the event of a parent/guardian requesting a specific diet be provided for any child or young person attending school in South Ayrshire.

The procedure only applies to food provided by FM to school pupils. Other foods that may be provided during the school day including non-FM breakfast clubs, after school club, special occasions etc are out with the scope of this procedure and parents/carers should speak to the school in respect of such other foods being provided.

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# 1. Specific diets

Specific diets can be requested for several reasons including the following:

**Additional support needs e.g. those with chewing and swallowing difficulties:**

Some children with additional support needs may require food to be adapted to an appropriate texture and consistency.

**Religious, cultural, or ethical reasons e.g. individuals from different ethnic origins:**

Specific diets can be requested for ethical, religious, or cultural reasons e.g. Vegetarian, Vegan, Halal etc.

**Medically prescribed e.g. due to coeliac disease, food allergy, food intolerance:**

These diets are medically prescribed diets and can be required for a wide variety of medical conditions including diabetes, coeliac disease, cystic fibrosis, food allergies/intolerance and phenylketonuria (or PKU).

# 2. Roles and responsibilities

To ensure the effectiveness of this procedure, clarity as to the roles and responsibilities of all parties concerned is essential and will be as follows:

## 2.1. Parents/carer

- Parents/carers have prime responsibility for their child's health. Until such times as an action plan is in place, parents/carers will require to make appropriate choices for their children based on the allergen information available on the school meals website or send their child with a packed lunch. In exceptional circumstances, a caretaker plan may be implemented.
- Inform FM that their child has a specific dietary requirement and when there is any change to a specific diet being provided.
- In respect of a specific diet, complete a specific diet request form available online by clicking [here](#).
- Submit the completed specific diet request form including a letter from the dietitian or general practitioner detailing the medical dietary requirement where appropriate.
- It is the Parent/Carers responsibility to complete the specific diet application process, including providing a current photograph and providing all information requested of them. Please note that failure to complete the process may result in a basic caretaker menu being implemented.

## **2.2. School**

- Assist in cascading information on the specific diet procedure to the parent/carer.
- Inform FM immediately of any pupil with severe food allergies and intolerances, particularly pupils that carry an adrenaline auto-injector pen.
- In the event of a pupil transferring between schools, school administration will pass on the specific diet action plan to the new school and notify FM of the change.

## **2.3. FM Medical Diets Team**

- Responsible for informing schools of any changes or update on the specific diet procedure.
- Where necessary, arrange meetings to discuss a medical diet between pupil/parent/carer and school and if necessary, dietitian or another medical professional.
- Where necessary, attend meetings with parent/carer/school representative/Catering Supervisor to discuss food provision.
- Ensure copies of all action plans are recorded and held centrally.
- Obtain product information from suppliers to ensure data is held on all food to ensure compliance with specific diets provided.
- Update the specific diet register with relevant information on each pupil, detail changes as they occur.
- Prepare action plans for distribution to the parent/carer, FM Catering Team Leaders and School Mailbox.
- In the event of a change to the menu, all specific diet action plans will be reviewed to ensure compliance with the changed menu. Where the menu change affects a specific diet action plan, an adjusted plan will be prepared and issued.

## **2.4. Catering Team Leaders**

- Ensure all catering staff receive training in the specific diet procedure and are competent in the provision of a specific diet.
- Ensure catering supervisors receive and understand the specific diet action plans produced by the FM medical diets team. On completion, sign the action plan Implementation Statement
- Distribute specific diet action plans to Catering Teams.
- Ensure all catering staff are trained in allergen awareness as follows.

- Team Leaders, Catering Supervisors, Assistant Cooks, and anyone in a position of temporary responsibility – Advanced Allergen Awareness.
- Catering Assistants – Allergen Awareness.
- Ensure all catering staff are trained in anaphylaxis awareness and how to respond in an emergency. See training section (6) for more detail.
- In the event of catering staff undertaking a temporary catering supervisor/assistant cook role, ensure the member of staff is fully aware of all specific diet action plans in that kitchen.

## **2.5. Catering Supervisor**

- Display action plans in the kitchen out of sight of customers, photo facing forward. In the event of an incident, remove action plan from the wall and follow instructions on the reverse side.
- Ensure all catering staff are aware of the specific diet action plans in the unit, ensuring the team can identify pupils with an action plan and follow accordingly.
- Inform temporary staff of any specific diets in place in that unit and any other unit for which they have supervisory responsibility.
- Once a specific diet action plan is agreed, ensure that it is adhered to and there are no product substitutions or menu deviations.
- Where there is a change to the menu for a “theme” day or other special occasion e.g. last day of term, the Catering Supervisor will ensure in all eventualities that only the recipes issued by the FM medical diet team are followed with no deviation. The Catering Supervisor may choose to change the day of service of an action plan menu item to fit with the theme.

# 3. Specific Diet Request Process

All requests for a specific diet must be submitted via the online Specific Diet Request form. This includes any amendments.

On receipt of a diet application, the FM medical diets team will contact the parent/guardian/medical professional to discuss the diet requested.

Due to the potential impact of a medical diet on a child’s short- and long-term health, the application will require to be supported as appropriate by a state registered dietitian, general practitioner, speech and language therapist or hospital consultant stating the child’s exact dietary needs.

The FM medical diets team will prepare an action plan for display purposes in the school kitchen (Appendix iv. – viii. as appropriate) with a copy also being provided to the School, Head Teacher and Parent/Carer.

In the event of a partial completion of the process or non-application for a medical diet for children with a known allergy, a care-taker menu may be provided. This could include for example soup, baked potato & filling/sandwiches, and fruit. Food availability may be restricted based on the information available.

On receipt of an application for a high-risk action plan, this will be emailed to the school for awareness. Until such times as an action plan is in place, parents/carers will require to make appropriate choices for their children based on the allergen information available on the school meals website or send their child with a packed lunch. In exceptional circumstances, a caretaker plan may be implemented.

Once the action plan is complete, the Team Leaders will arrange a meeting with the Catering Supervisors/Assistant Cooks to talk through the plan in detail. On occasion, the FM medical diet team may wish to attend these meetings. The Catering Supervisor then will notify all Catering Assistants of the action plan ensuring all staff can identify the pupil concerned.

In the event of a temporary member of staff working alone in a school or any other member of staff in a promoted capacity, the Team Leaders will ensure that the staff member is aware of and understands any action plans in that school and can identify the pupil affected/concerned.

In Primary schools, the cashless catering system will be updated by the FM medical diets team to reflect the changes.

Parents/guardians can amend an agreed specific diet action plan at any time using the online form. On agreement and completion, the amended specific diet action plan request will follow the same procedure outlined above.

Where a parent/guardian offers to provide foods to the school kitchen for the purpose of a medical diet, these will only be accepted by prior agreement and in exceptional circumstances.

## 4. Response to incidents

Incidents may include but not be limited to the following for specific groups of pupils.

### 4.1. Pupils who carry adrenaline auto-injector pens

#### 4.1.1. *Anaphylaxis*



In the event of someone suffering a severe allergic reaction (anaphylaxis) to a food allergen, it is vital that they receive an adrenaline injection immediately in accordance with the school procedures.

Catering staff have a duty of care to respond to a severe allergic reaction situation in the dining hall and as such should be aware of the signs to look out for and how to respond in an emergency when required.

In preparedness for our response in such an event occurring within the dining hall, all catering staff will receive anaphylaxis training on an annual basis to identify the signs of anaphylaxis and how to respond in accordance with the school procedures including the administering of adrenaline.

To remind staff to be vigilant as to the signs of anaphylaxis, the Anaphylaxis Campaign's 'Be Allergy Aware and Save a Life' [poster](#) will be prominently displayed in all kitchens.

#### 4.1.2. *Near Miss*

For the purpose of this procedure, a near miss means an unplanned incident that could have caused harm or injury but is caught before it has the chance to do so.

For the avoidance of doubt, if the pupil is administered with an antihistamine, this will be considered an anaphylactic reaction.

In the event of an anaphylaxis reaction or near miss possibly linked to school meal food, the Catering Supervisor will contact the FM medical diets team by telephone immediately, who will commence an investigation. If the Supervisor is unable to reach the FM medical diets team, this should be escalated to a member of the FM Management team (including Catering Team Leaders). In any event, FM senior management must be informed by email marked for high importance by the officer who has been notified.

Any remaining food or drink being consumed by the person suffering anaphylaxis including any similar food remaining in the kitchen will be retained for analysis purposes if required by the staff teams on site.

On completion of the investigation by the FM medical diets team, a report will be compiled and submitted to the FM senior Management team for review and action of any recommendations. At this point, the report may be shared with the central education team or school management teams.

Once the report has been reviewed by the FM senior management team, a further response to the report will be compiled detailing action(s) taken, and thus closing out the incident.

## **4.2. Pupils who do not carry adrenaline auto-injector pens.**

### *4.2.1. Allergic/intolerance reaction*

In the event of someone suffering an allergic or intolerance reaction to a food allergen, the emergency response protocol on the reverse of the action plan should be followed.

### *4.2.2. Near Miss*

For the purpose of this procedure, a near miss means an unplanned incident that could have caused harm or injury but is caught before it has the chance to do so.

For the avoidance of doubt, if the pupil is administered with an antihistamine, this will be considered an allergic/intolerance reaction.

In the event of a reaction or near miss possibly linked to school meal food, the Catering Supervisor will contact the FM medical diets team by telephone immediately, who will commence an investigation. If the Supervisor is unable to reach the FM medical diets team, this should be escalated to a member of the FM Management team (including Catering Team Leaders). In any event, FM senior management must be informed by email marked for high importance by the officer who has been notified.

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Once the report has been reviewed by the FM senior management team, a further response to the report will be compiled detailing action(s) taken, and thus closing out the incident.

In all cases, a review of procedures will be carried out to determine any changes necessary because of any lessons learned. These changes will be implemented, and the procedure and any action plans (as appropriate) updated as necessary.

## **5. Risk management**

In accordance with SAC Risk Management Strategy (June 2021), a risk assessment (see appendix ix.) of the risk of severe adverse reaction/anaphylactic shock in the event of a

pupil consuming food unknowingly containing an ingredient to which the pupil is allergic has been carried out.

A further risk assessment in respect of the risk of a reaction suffered by a pupil with a specific medical diet requirement has been carried out.

To identify pupils with severe allergy and who may require medicine to be administered in the event of a severe allergic reaction, such pupils action plans will be identified by a red dot on the bottom left-hand corner on the front face of the action plan.

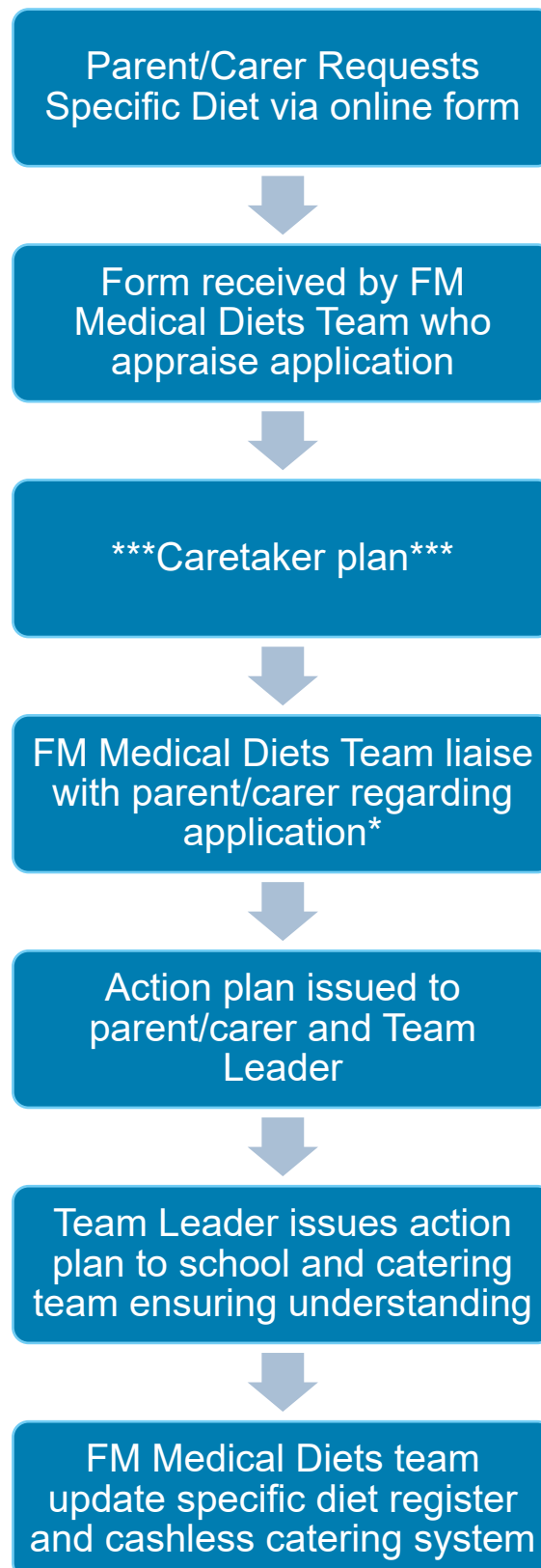
## 6. Staff training

Catering Supervisors and Team Leaders must ensure that all catering staff are trained in this procedure, the COAST module on anaphylaxis and the modules on allergen awareness. This should be refreshed before the first school term each year. Training records will be maintained on COAST.

## 7. Data protection

With regard to any personal information provided in support of a request for a specific diet and our responsibilities under the General Data Protection Regulation 2016 (GDPR), our Specific Diet Privacy Notice is attached (see appendix iii) and is also available online at: <https://www.south-ayrshire.gov.uk/privacy-notices/>

## Appendix i – SPECIFIC DIET REQUEST PROCESS



## **Appendix ii – Specific diet privacy notice**

[Catering - Specific Diet privacy notice - South Ayrshire Council \(south-ayrshire.gov.uk\)](https://www.south-ayrshire.gov.uk)

## **Appendix iii – Medical diet action plan (food allergy - Epipen)**



NEW -  
Epipen-A4-action-pl

## **Appendix iv – Medical diet action plan (food allergy - Emerade)**



NEW -  
Emerade-A4-action-|

## **Appendix v – Medical diet action plan (food allergy - Jext)**



NEW -  
Jext-A4-action-plan-

## **Appendix vi – Medical diet action plan II (food allergy/food intolerance/medical condition)**



Medical diet action  
plan II v3 DRAFT.pdf

## Appendix vii – Non-Medical diet action plan



Non Medical Diet  
Action Plan v2 DRAF

## Appendix viii: Risk Assessments

### Severe food allergy



RA - Catering for  
school pupils with a

### Other medical dietary requirements



RA - Catering for  
school pupils with oth