



## **St Helens Borough Council**

### **Schools Catering Service - Special Diets Procedure**

#### **Introduction**

- We cater for all Dietary Requirements due to Medical Reasons or Religious/Cultural Beliefs. We are unable to offer alternative catering provision for reasons other than these, as the menus we offer are carefully managed to ensure the offer is balanced and in line with the standards set by Government Guidelines.
- Special Dietary requirements due to medical needs may require a meeting due to how complex some needs can be. A member of the Schools Catering Service Team will contact the responsible adult to discuss further
- Evidence from a relevant Medical Professional for Additional Dietary needs will need to be presented at the school/During a meeting before the application is processed.
- All our menus do not contain NUTS\* and we operate a policy that we don't include any produce that 'May Contain Nuts' – however we cannot have any control or responsibility over items within the school such as packed lunch content or pupil snacks.
- \* We have stringent practices in place to adhere to our menus or those created specifically for additional dietary needs. We have a disclaimer that the contents of these menus are not guaranteed due to different factors such as our suppliers failing to notify ourselves of any ingredient changes to their products, product availability or delivery issues that must be signed before the Additional requirements are implemented.



## Process

### Step 1

Parents are to notify their Child's School if their child has any additional Dietary requirements for Medical or Cultural Purposes. Parents must read the procedure and complete **Section 1 of the "Additional Dietary Requirements Form"** attached to this document and return this to the school.

### Step 2

The school will email the completed form too [specialdiets@sthelens.gov.uk](mailto:specialdiets@sthelens.gov.uk). Once Received, The request will be reviewed and Responsible adult contacted via the contact details submitted

### Step 3

Children who have Additional Dietary Requirements due to Medical Reasons, may have a meeting arranged with the Parent, School Cook, School Representative, and a Member of the Catering office. This allows all parties to discuss the requirements of the child and explain what will be provided. Alternative menus will be discussed and the process of how the needs will be managed explained. This is also an opportunity to raise any concerns. Alternatively, an email or phone call may take place explaining the requirements and further instructions to finalise the request.

**Please note.** Parents will be required to provide evidence from a medical professional such as a Paediatrician/Dietitian prior to this meeting.

### Step 4

Once all parties have agreed a menu and that all elements of the procedure have been complemented, A Confirmation letter will be issued stating a date of commencement for the Dietary Request.



**Additional Dietary Requirements Form**

**Section 1**

**(Please fully complete and return to the school)**

<b><u>Childs Name</u></b>	
<b><u>School Name &amp; Address</u></b>	
<b><u>School Class year</u></b>	
<b><u>Parent/Guardian Name</u></b>	
<b><u>Parent/Guardian Daytime Contact Number</u></b>	
<b><u>Parent/Guardian Email Address</u></b>	

**Information of Ingredients **NOT** to be consumed by Child stated above and Reason** (Or managed/reduced if Diabetic)

**EXAMPLE-** *NO Milk Products. Milk Allergy*

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**Reasons For Additional Dietary Requirements**

(Please Circle the Appropriate)

**Medical/Allergy**

**Religious/Cultural**

**My Child is under the care of a Medical Professional for the purpose of Additional Dietary Requirements**

(Please Circle the Appropriate)

**YES**

**NO**



**Additional Dietary Requirements Form**

**Section 2**

**(ONLY to be completed During Meeting)**

**Meeting Date:** .....

**Meeting Location:** .....

**Proof of Medical condition Disclosed and Copy Provided to School (YES or N/A)**

**Menu/Options Discussed and Agreed with all parties with Date of commencing:**

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**Disclaimer Information Explained and Agreed (See Page 1 - Paragraph 5) -      Yes      No**

**Parents Signature :** .....

**Parents Name:** .....