



# Higher Failsworth Primary School

**'Working together for an Education for Life'**

## School Food Policy including Managing Allergens

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# School Food Policy including Managing Allergens

## Principles

Higher Failsworth Primary School recognises:

- the important connection between a healthy diet and children's ability to learn effectively and achieve high standards in school.
- that sharing food is a way to develop and strengthen relationships
- that sharing food is a way to nurture and celebrate our cultural diversity
- the role a school can play, as part of the larger community, to promote family health

We also recognise that a number of community members (pupils, parents, visitors and staff) may suffer from potentially life-threatening allergies or intolerances to certain foods.

As such, Higher Failsworth is committed to a whole school approach to the care and management of those members of the School community.

The School's position is not to guarantee a completely allergen free environment, rather to minimise the risk of exposure by hazard identification, instruction and information. This will encourage self-responsibility to all those with known allergens to make informed decisions on food choices. It is also important that the School has robust plans for an effective response to possible emergencies. This policy has been created with guidance from the kitchen Department to ensure compliance under the Food Information for Consumers Regulation (1169/2011) which came into force in December 2014.

The Governing Body will ensure that the school meals provider achieves the current nutritional standards for schools meals as set by School Food Standards.

**The named member of the Senior Leadership Team** who oversees all aspects of food in our school is Joanne Fitzgerald (Business Manager), supported by Amy Green (Healthy School Lead).

## Mission Statement

At Higher Failsworth Primary School we want to improve the health of the entire community by teaching children and their families' ways to establish and maintain life-long healthy eating habits.

We will achieve this through:

- food education and skills (such as cooking and growing food)
- serving healthy food in school
- providing guidance and support

## Aims

- To ensure that all aspects of food and drink in school promote the health and wellbeing of the pupils, staff and visitors to our school.
- To improve the health of pupils, staff and their families by helping to influence their eating habits through increasing their knowledge and awareness of food issues, including what constitutes a healthy diet and hygienic food preparation and storage methods.
- To increase pupils' knowledge of food production, manufacturing, distribution and marketing practices and their impact on both health and the environment.
- To ask the school meals provider to provide regular information about the origin of the food served at the school.
- To ensure pupils are well nourished at school and that every pupil has access to safe, tasty and nutritious food and a safe easily available water supply during the school day.
- To ensure that food provision in the school reflects the ethical and medical requirements of staff and pupils e.g. religious, ethnic, vegetarian, medical and allergenic needs.
- To make the provision and consumption of food an enjoyable and safe experience by minimising the risk of any person suffering allergy-induced anaphylaxis, or food intolerance whilst at school or whilst attending any school related activity.
- To introduce and promote practices within the school to reinforce these aims and to remove or discourage practices that negate them.
- To work towards ensuring that this policy is both accepted and embraced by governors, teachers, support staff, pupils, parents, food providers and the school's wider community.

## **Practices**

### **Playtime Snacks**

Children in Key Stage One are provided free of charge with a choice of fresh fruit and/or vegetables and milk.

Children in Key Stage Two are allowed to bring in a snack from home which must be fresh fruit or vegetables. Alternatively, children may purchase fresh fruit and/or vegetables from our KS2 Tuck Shop.

Staff model eating fresh fruit or vegetables at break times.

Children on special diets are given consideration with consultation in accordance with government policy on nutrition and alternatives sourced.

### **School Lunches**

All school lunches are prepared following the government's nutritional guidelines. The school has its own in-house Catering Team and works with the School Cook Supervisor to ensure that the school food standards are applied.

We aim to provide our children with good quality, healthy food and we actively promote healthy choices

We recognise the value of eating a hot lunch and encourage children to choose this option.

The school operates a seasonal three week menu cycle. The menus are available for parents to view on the school website. Three meal choices are made available each day, and children are supported by staff to choose which option they would like every day. Children are encouraged to try new food choices.

The school catering service regularly receives feedback on children's opinions of school lunches.

Fresh drinking water is available to all children.

Children are allowed to sit with their friends (including those children who bring a packed lunch) unless their choice of behaviour negates this. They are encouraged to use good table manners, and the Lunch Hall is made as pleasant as possible to encourage good social interaction.

### **Packed Lunches**

Packed Lunches are stored on clean trolleys in a cool location near each classroom.

We work alongside the School Health Team to promote healthy packed lunches, and have a packed lunch policy.

We audit the quality of packed lunches. This is carried out by members of staff supervising in the dining hall.

Midday supervisors promote good manners, support children in making healthy choices and reward healthy choices with positive praise and stickers.

We are supporting children and their families to eliminate fizzy drinks, sweets, chocolates and crisps from packed lunch boxes and to replace them with a healthier option.

Children are not allowed to swap food, and any food left in lunchboxes is sent home.

### **Water**

The school encourages pupils to drink at frequent intervals throughout the day. Free, fresh water is available to all children throughout the day.

Children are encouraged to have a named, clear bottle of water in class. Water bottles are taken home daily to be washed.

### **Curriculum**

Healthy eating is covered within the PSHE, Design Technology and Science Curriculum.

Children study topics linked to healthy eating.

Healthy eating is addressed during Healthy Schools Week (Summer Term).

There are consistent messages across the curriculum about healthy eating.

Our rewards system is linked to this Policy i.e. sweets are never given as rewards

### **Celebrations**

Children who wish to celebrate their birthdays etc. with friends are asked not to bring sweets or chocolate. This message is regularly included in the School Newsletter and alternative choices such as a class book, stickers, or pencils are suggested.

We sometimes ask parents for contributions of food and snacks for Christmas parties. We encourage parents to choose healthier options for these special occasions.

### **Charity Events**

If the School hosts any 'coffee mornings' or 'bake events' for charity it is important that no food poses a risk to the end user, however, this is difficult for the school to monitor. Where products are not made on site, but sold by the School, appropriate signage should be in place, which states 'This item was not produced at Higher Failsworth Primary School, therefore we cannot guarantee that it does not contain nuts or any other allergen'. All products not made by school should be plated separately, and stored as such (wrapped where possible) to prevent cross contamination to other items for sale.

It will be left to the discretion of the person buying the food that they accept the risk that allergens may be present.

### **Managing Food Allergens**

The School is committed to proactive risk food allergy management through:

- The encouragement of self-responsibility and learned avoidance strategies amongst those suffering from allergies.
- The establishment and documentation of a comprehensive management plan for menu planning, food labelling, stores and stock ordering and customer awareness of food produced on site.
- Provision of a staff awareness programme on food allergies/intolerances, possible symptoms (anaphylaxis) recognition and treatment.
- We promote a nut free school and ask that packed lunches do not contain peanuts and peanut products.

The common causes of allergies relevant to this policy are the 14 major food allergens:

- Cereals containing Gluten
- Celery including stalks, leaves, seeds and celeriac in salads, stocks and sauces
- Crustaceans, (prawns, crab, lobster, scampi, shrimp paste)
- Eggs - also food glazed with egg, mayonnaise, some pasta and noodles
- Fish - some salad dressings, relishes, fish sauce, some soy, Caesar dressings and Worcester sauces
- Soya (tofu, bean curd, soya flour, soy sauce, edamame beans)

- Milk – cheeses, butter, margarine and also food glazed with milk
- Nuts, (almonds, hazelnuts, walnuts, pecan nuts, Brazil nuts, pistachio, cashew and macadamia (Queensland) nuts, nut oils, marzipan)
- Peanuts - sauces, cakes, desserts, ground nut oil, peanut flour
- Mustard - liquid mustard, mustard powder, mustard seeds, curry pastes, some mayonnaises
- Sesame Seeds - bread, bread sticks, tahini, houmous, sesame oil
- Sulphur dioxide/Sulphites (dried fruit, fruit juice drinks, wine, beer)
- Lupin, seeds and flour, in some bread and pastries
- Molluscs, (mussels, whelks, oyster sauce, land snails and squid).

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 and intolerances are treated equally as the effect to the individual can be both life-threatening and uncomfortable, if suffered.

## **Definitions**

**Allergy** - A condition in which the body has an exaggerated response to a substance (e.g. food or drug), also known as hypersensitivity.

**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 a trigger (food, stings, bites, or medicines).

**Adrenaline device** - A syringe style device containing the drug adrenaline. This is an individual prescribed drug for known sufferers which is ready for immediate intramuscular administration. This may also be referred to as an Epi-Pen/ Ana pen or Jext which are particular brand names.

## **General Aspects (pupils)**

The School will establish clear procedures and responsibilities to be followed by staff in meeting the needs of pupils with additional medical needs. This process includes:

- ☐ Effective communication of the individual Care Plans to all relevant staff.
- ☐ Ensuring staff first aid training includes anaphylaxis management, including awareness of triggers and first aid procedures to be followed in the event of an emergency.

## **General Aspects (Staff, Visitors, Members of the Public)**

Due to the diverse nature of the school, it is important that allergen information is accessible to all parties who visit the site. During bookings for external events, it is important that guests are informed of the requirements for any known person with food allergies/intolerances. This should be undertaken

during the booking process. This information should then be passed to the kitchen team to allow them to plan appropriate menus and selections of food. The kitchen department also hold dietary and allergen information folders during each service outlining the contents of all dishes at the service. This can be referred to upon request by any guests.

## **Responsibilities**

Medical information for pupils is private and confidential. However, it is the school's responsibility to pass any information on to the Cook Supervisor with regards to food allergies of pupils. Staff will be made aware of these pupils via:

- ☐ The kitchen department are sent a list at the start of the term outlining pupils with medical conditions, or as soon as a pupil is confirmed as having a specific food related medical condition. The class teacher is also made aware.
- ☐ This medical information will be on the schools system for staff to download during trips and activities.

· Staff have completed food allergy and intolerance training from the food standards agency.

Staff have received training in regards to the administration of the medication, including anaphylaxis recognition and treatment. Adults within the class are responsible for supplying the relevant pupil medication (adrenaline device). Pupils are responsible for ensuring that they have their medication with them at all times.

### **The Kitchen Staff are also responsible for:**

- ☐ Using only authorised suppliers and being the controlling point and contact for all purchases of food stuffs for School catering.
- ☐ Ensuring suppliers of all foods and catering suppliers are aware of the School's food allergy policy and the requirements under the labelling law.
- ☐ Ensuring suppliers of food stuffs are nut free or labelled 'may contain nuts'.
- ☐ Being aware of pupils and staff who have such food allergies and updating this training every three years. All staff must be informed of this during their in-house induction training. Clear labelling of items of food stuffs that may contain nuts.

Educational Visits, school Events (for example packed lunches, School fairs / fetes etc.) All academic staff must check the requirements of all pupils they are taking off site. This is part of the offsite risk assessment. All pupils' information is on the school system. Where food intolerance has been identified, this must be relayed to the Kitchen Department if they are ordering packed lunches/refreshments/food.

All staff undertaking an offsite trip must have attended the School's Medication and Anaphylaxis training. This is part of the risk assessment. Staff must also:

- ☐ Physically check that pupils have their medication before leaving the site.

- ☐ Ensure that all food collected from the kitchen Department has been clearly labelled and they are aware of any foods that should not be given to pupils (also any foods that pupils may purchase outside of the School during the trip).

## **Appendix A**

### **School Management of severe allergies (ANAPHYLAXIS)**

All staff must make themselves aware of the School First Aid Policy. This outlines Anaphylaxis and the recognition and treatment that should be followed. Below is the extract from the School First Aid Policy.

Anaphylaxis is a severe and potentially life-threatening allergic reaction at the extreme end of the allergic spectrum. Anaphylaxis may occur within minutes of exposure to the allergen, although sometimes it can take hours. It can be life-threatening if not treated quickly with adrenaline.

Any allergic reaction, including anaphylaxis, occurs because the body's immune system reacts inappropriately in response to the presence of a substance that it perceives as a threat. Anaphylaxis can be accompanied by shock (known as anaphylactic shock): this is the most extreme form of an allergic reaction. Common triggers of anaphylaxis include:

- ☐ Peanuts and tree nuts – peanut allergy and tree nut allergy frequently cause severe reactions and for that reason have received widespread publicity
- ☐ Other foods (e.g. dairy products, egg, fish, shellfish and soya)
- ☐ Insect stings (bees, wasps, hornets)
- ☐ Latex (gloves and PPE)
- ☐ Drugs (illegal and prescription) 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
  - ☐ Sense of impending doom
  - ☐ Sudden feeling of weakness (due to a drop in blood pressure)
  - ☐ Collapse and unconsciousness



When symptoms are those of anaphylactic shock the position of the pupil is very important because anaphylactic shock involves a fall in blood pressure.

☐ If the patient is feeling faint or weak, looking pale, or beginning to go floppy, lay them down with their legs raised. They should not stand up.

☐ If there are also signs of vomiting, lay them on their side to avoid choking (recovery position).

☐ If they are having difficulty breathing caused by asthma symptoms and/or by swelling of the airways, they are likely to feel more comfortable sitting up. Action to take: (Ask other staff to assist, particularly with making phone calls, one person must take charge and ensure that the following is undertaken)

☐ Ring 999 immediately to get the ambulance on the way.

. Locate the nearest member of staff to come and assist. Request the person's medication to be brought to the location immediately, there should be no delay in using the person's medication.

☐ Use the person's adrenaline device\*, or their spare one if identified on the allergy equipment register

-Ask a member of staff to ring parent of the child

☐ Ensure that the Office Staff is aware that an ambulance is coming onto site.

☐ Stay in the immediate area to assist staff and/or direct the Emergency Services

☐ Ensure that accident forms are filled out if applicable. \*Staff should update their training to use the adrenaline device every 3 years as a minimum. This will be delivered as part of first aid training, and by staff attending training.

### **Monitoring of this Policy**

- This Policy will be reviewed every two years