

## ALLERGY AND INTOLERANCE PROCEDURE

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At WilsonJones we aim to cater for the majority of the school, however some pupils may require a modified diet for allergy or medical reasons and therefore need to be catered for individually.

### Important Information

#### Referral Process:

1. Parents/guardians should request a copy of the allergies and intolerance form from the school reception if their child has a diagnosed allergy or intolerance and would like to use the catering facility.
2. One form must be completed per child and should be returned to the school along with the supporting medical documentation (this should be no more than 3 years old). **Please note, any form received without supporting medical documentation will not be processed.**
3. The school will scan a copy of the completed form and medical documentation to their operations manager.
4. Upon receipt of the completed form, WilsonJones Catering food development team will devise a suitable menu (it may be necessary to contact the parents if more information is required). Unfortunately, it is not possible to take into consideration likes and dislikes when choosing menu items. Choices are based upon the current menu, this assists the kitchen manager but also provides inclusive meals that are similar to the rest of the school.
5. All allergy modified menus will be emailed to the school by the operations manager. The school will send a copy of the allergy modified menu to the parents/guardians for their reference.

The modified menu will only be implemented once the kitchen has received notification to do so by their operations manager and full training has been provided.

### General Policies

#### Nuts and Sesame

At WilsonJones we **do not** use nuts or sesame in our kitchens. Whilst we complete all the necessary controls to minimise the risk and ensure our recipes are nut and sesame free, a small number of the products we use, from some manufacturers are produced in factories where nuts and sesame have or may have been present. We therefore advise parents/guardians to inform us and the school if their child has any of the aforementioned allergies, so their condition is known to WilsonJones and the school staff. If you do require a menu to be created to avoid all products stating 'may contain' please indicate this on the referral form.

#### Additional Serving Points

Due to the variance of serving points, it is possible that a serving counter will not be serviced by a member of kitchen or school staff. Therefore, it is vital that children with allergies are made aware to a member of the kitchen staff by the school staff so they can get assistance when choosing from our salad and dessert options in these instances.

#### Renewal of Menus

At the start of a new menu cycle, all pupils with existing modified menus will be automatically reissued with an updated menu in line with the new menu. It is not necessary to complete another allergy and intolerance form. However, if your requirements change, you will need to complete another allergy and intolerance form and provide new medical documentation indicating the changes.

## ALLERGY AND INTOLERANCE REFERRAL FORM

Please complete and return this form to the school reception staff, along with any supporting medical documentation.

**PLEASE COMPLETE ALL PARTS OF THE FORM AS REQUIRED (IN BLOCK CAPITALS).**

**Pupil Name:** ..... **Male/ Female:** ..... **Form/ Class:** .....

**School Name and Address:** .....

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### Allergy/Intolerance (please tick all that apply)

<input type="checkbox"/> <b>Mi</b> Milk	<input type="checkbox"/> <b>E</b> Eggs	<input type="checkbox"/> <b>G</b> Gluten	<input type="checkbox"/> <b>P</b> Peanuts	<input type="checkbox"/> <b>T</b> Tree nuts	<input type="checkbox"/> <b>S</b> Sesame
<input type="checkbox"/> <b>Ce</b> Celery	<input type="checkbox"/> <b>Mu</b> Mustard	<input type="checkbox"/> <b>So</b> Soy	<input type="checkbox"/> <b>F</b> Fish	<input type="checkbox"/> <b>Mo</b> Mollusc	<input type="checkbox"/> <b>L</b> Lupin
<input type="checkbox"/> <b>Su</b> Sulphur Dioxide/Sulphites	<input type="checkbox"/> <b>Cr</b> Crustaceans	<input type="checkbox"/> <b>O</b> Other: .....			

We/I require an allergy modified diet to exclude the allergies ticked above:  **Y** or  **N**

**PLEASE ENSURE YOU HAVE ENCLOSED SUPPORTING MEDICAL DOCUMENTATION WITH THIS REFERRAL FORM. FORMS WITHOUT OFFICIAL MEDICAL DOCUMENTATION WILL NOT BE PROCESSED IN ACCORDANCE WITH COMPANY POLICY.**

### Parent/Guardian Contact Details

**Name:** .....

**Email:** ..... **Mobile:** .....

**Address:** ..... **Postcode:** .....

**Comments:**

Please note, you may be contacted by WilsonJones should we need to clarify any details.

**Parent/Guardian Signature:** ..... **Date:** .....

Please allow 2 weeks from submission of this form to WilsonJones for a suitable menu to be available.