

Dietary Requirement (Including Medical Diets) Policy

The EYFS 2017 Safeguarding and Welfare Requirement: 3.47, states:

“Where children are provided with meals, snacks and drinks, they must be healthy, balanced and nutritious. Before a child is admitted to the setting the provider must also obtain information about any special dietary requirements, preferences and food allergies that the child has, and any special health requirements. Fresh drinking water must be available and accessible at all times. Providers must record and act on information from parents and carers about a child's dietary needs.”

In addition to this allergen ingredients information laws which came into effect in December 2014 require early years settings (along with other food businesses) to provide allergen ingredients information for the food and drink they provide. This information helps to ensure that appropriate meals and snacks can be provided for children with allergies.

AIM

To protect all children whilst attending ICP Nurseries Limited who have a dietary or medical condition. To ensure best practice when providing food and drinks for children with allergies, intolerances and other special dietary requirements.

A dietary requirement can be anything from an allergy, intolerance, or preference. To which we must take serious as some conditions can result into a coma, severe anaphylactic shock, or death.

A medical condition is a condition that requires ongoing medication and intervention from a healthcare professional.

AN OVERVIEW OF SPECIAL DIETS: FOOD ALLERGIES, INTOLERANCES AND OTHER SPECIAL DIETS FOR MEDICAL REASONS

Food allergies are when the body's immune system reacts unusually to a specific food, because it mistakenly perceives it as a threat. In children, common food allergies are to milk, eggs, peanuts, nuts, fish and shellfish. Symptoms can include itching in the mouth, throat or ears, a raised itchy red rash (hives), swelling of the face, around the eyes, lips, tongue and roof of the mouth and vomiting. In the most serious cases, a severe allergic reaction (anaphylaxis, which can include breathing difficulties, light headedness and feeling like you are going to faint) can be life-threatening.

There is no cure for food allergies, so people with allergies need to avoid the foods to which they are allergic. It is important that children with suspected food allergies see their GP for referral to an allergy clinic for a formal diagnosis. Children with severe allergies may be given a device known as an auto-injector pen (e.g. epi-pen) containing a dose of adrenaline to be used in emergencies, the details of which should be included as part of an allergy management plan

Food intolerances are different from food allergies. Symptoms tend to appear more slowly, often several hours after eating the food. Symptoms can often include diarrhoea, bloating and stomach cramps. Unlike food allergies, food intolerances are not life-threatening.

Coeliac disease is not an allergy or intolerance. It is an autoimmune disease, where eating gluten triggers the immune system, damaging the lining of the gut and also affecting other parts of the body. Symptoms can include bloating, diarrhoea, nausea, wind, constipation, tiredness, headaches, mouth ulcers, sudden weight loss, hair loss and anaemia.

People with coeliac disease cannot eat foods containing gluten. Gluten is a protein found in wheat, barley, rye and oats (unless specified as gluten free oats). Examples of foods containing gluten include bread, pasta, flour, breakfast cereals, cakes, biscuits and pastry. Gluten can also be found in many other processed foods, such as soups, sauces, and sausages. Traces of gluten can also be found in food where gluten is not an ingredient, because of cross-contamination from gluten containing foods.

Other medical diets can include where children need to follow high energy or fat diets, or food with a modified texture to make it easier for them to chew and swallow. Settings may need to seek advice from a health professional where medical diets are required.

Religious and cultural diets Many settings cater for a diverse range of children from different backgrounds. Children from minority ethnic or religious communities may follow specific dietary customs, and may exclude or prepare food in a particular way.

Vegetarian and vegan diets Vegetarians do not eat meat, poultry, fish, shellfish or animal products such as lard or gelatine. There are three main types of vegetarian: • Lacto-ovo-vegetarians eat both dairy products and eggs; this is the most common type of vegetarian diet. • Lacto-vegetarians eat dairy products but not eggs. • Vegans do not eat dairy products, eggs, or any other products derived from animals (e.g. honey). Seek advice from a dietitian if a vegan diet is requested. Many settings include a vegetarian option as part of their menu every day, as vegetarian diets are relatively common. Vegetarian dishes can also be eaten by non-vegetarian pupils too.

INFORMATION

Complete and up to date records of all allergies, intolerance, preferences, and medical conditions must be kept for all children. The following forms must be completed ahead of the child's first day at Nursery:

- Child Registration Form, pre-printed
- Critical Care Plan (HS66)
- Risk Assessment (RA01)
- Allergy Alert Notice (HS43b)
- Parent consent form (HS81)
- Care Plan Review Sheet (HS66a)

- Staff Compliance Signing sheet (HS66c)

Temporary relief staff from other nurseries cannot care for children with Allergies or intolerances at mealtimes.

In the monthly Nursery Staff Meeting, the Nursery Manager must hold an agenda point entitled 'Dietary and Medical Conditions' and must check the knowledge of all staffs understanding.

The Nursery Manager must ensure that all staff have been alerted to the child's dietary and medical condition and have been made aware both of how to cater for the requirement and how to respond in the event of child having a reaction, including receiving appropriate First Aid training in administering medication prior to the child starting.

Procedure for Children with Dietary & Medical Conditions

When a child registers with ICP nurseries and is identified as having any medical condition or special dietary requirement a **Critical Care Plan and Risk Assessment** must be completed. Copies of the child's current Critical Care Plan documents must be stored in the child's Critical Care Plan medi-bag within the room, the critical care plan fold in the office and red clipboard. If the child is on a settling session in another room or the rooms have combined the child's Critical Care Plan medi-bag **MUST** be placed in the room that they are based in.

- When a child starts, we ask their parents if their child has any special dietary requirements, preferences, food allergies, and any special health requirements. This is recorded on the Registration Form.
- If the child has an allergy or intolerance, we complete a risk assessment form to detail the following
 - The allergen or intolerance (i.e. the substance, material or living creature the child is allergic or intolerance to such as nuts, eggs, bee stings, cats etc.)
 - The nature of the reactions (e.g. anaphylactic shock, including rash, reddening of skin, swelling, breathing difficulties etc)
 - What to do in a case of reaction, any medication used and how it is to be used (e.g. auto injector training)
 - Control measures – such as how the child can be prevented from contact with the allergen or intolerance
 - Review measures
- The risk assessment and all other documentations will be kept in the critical care plan folder, medi-bag and a copy **MUST** be kept on a red clip board that should be referred to at every mealtime.
- There is a **NO** nuts or nut products policy within the setting. Parents and visitors are made aware of this so that no nuts or nut products are accidentally brought into the setting.

In the anticipation of the unlikely event that a child experiences their first allergic reaction in our care, each nursery will store an emergency supply of antihistamine (Piriton for children aged 12 months to 6 years) in a lockable cabinet in the nursery office. The manufacturers guidance **MUST** be followed.

Dietary requirements will be graded into three categories:

Grade 1 Food allergy and intolerance: An allergy can be a life threatening reaction intolerance could make the child feel ill or affect their long-term health. If parents suspect either of these conditions, they should have it confirmed by a medical practitioner

Grade 2 Religious and cultural preferences: Some religions have specific dietary requirements that do not allow certain foods to be consumed. If it's agreed that we can meet the children's needs within the nursery then it is our duty to ensure that we do not compromise the family's culture or beliefs. We will also include any children who are vegetarians and vegans in this category.

Grade 3 Parental Preferences: The EYFS requires settings to have effective systems in place to ensure that they meet the individual needs of the child. This includes giving due consideration to the wishes of the child's parents, and we will endeavour to take account of a child's likes and dislikes where possible. However, we are not able to omit food groups or specific foods without written guidance from a medical practitioner. In the event of a conflict between the parent's wishes and the welfare requirements, the setting must put the safeguarding and best interests of the child as the priority. As children's palates and preferences change often, these will be reviewed regularly.

If a child is listed as grade 1 then they MUST be provided with a red place mat/ photo card

If a child is listed as grade 2 then they MUST be provided with a yellow place mat/photo card

If a child is listed as grade 3 then they MUST be provided with a blue place mat/ photo card

All other children to have white plates.

Record keeping

- Daily, the Key Person or the most Senior Person in Charge of the room must complete a **Children with Allergies/ intolerance Daily Requirement Checklist (HS43)** for each child who has an allergy/ intolerance. The checklist should be taken to the kitchen before any meal is released into the room where the child with an allergy or intolerance is. Any child with Cultural or Preference Requirement should also be logged on the **Cultural and Preference Form (FD14)**
- Permanent staff within that room MUST sign the **Allergies/ intolerance Alert Staff Signing Sheet (HS43c)** at the beginning of the week for that child's first day within setting and then daily for any cover staff within that room to confirm they are aware there is a child with an allergy/ intolerance in the room. It is important that **ALL** staff working or covering in the room have the correct knowledge and understanding of the allergy/ intolerance regarding that child and the risk. This information is kept in the red clipboard in the room with the child.

Food allergy label

- All grade 1's will need to be plated separately covered with foil and labelled with the Food Allergy Label, which can be sourced from Creed, with the child's name, date, content and allergy/ intolerance recorded on it. In the absence of labels from Creed, the **Food Allergy Label (Appendix 35)** template may be used. Grade 2's must be plated separately and labelled unless the meal provided is suitable for them, for example, if the meal is vegetarian and the child is vegetarian there is no need to plate separately.

GRADE 1 DIETARY REQUIREMENTS - FORMULA MILK

Babies with a Grade 1 dietary requirement concerning their formula milk, including where this is added to cereal or baby rice, must have their bottles and formula milk clearly labelled following the colour coding system (see Bottle Feeding Policy and Procedure) and a critical care plan and risk assessment must be completed

RESPONSIBILITY FOR CHECKING THE FOOD / DELIVERING THE FOOD

The manager, deputy manager or person in charge of the nursery will check the food and sign it off before it leaves the kitchen and sent to the room with the form **(HS43)**. Once in the room the person who will be supervising that child will then sign to state that they are happy with the appropriate food that has been offered meeting the child's requirements

- Staff should ensure that eating areas, cutlery, cups and bibs are clean and no previous food residue is present.
- Staff should ensure that **ALL** children wash their hands prior to eating.
- All food **MUST** be served on a red plate or bowl regardless of whether the meal contains food that the child is allergic / intolerant to.
- The Nursery Chef **MUST** deliver the allergy/ intolerance meal to each room as required; food is to **ONLY** be handed over to the nominated person who will be supervising the child's meal. The staff member must then sign the **Children with Allergies/ intolerance Daily Requirement Checklist (HS43)** to take control of that meal. At this point, the labelled food is uncovered and presented to the child.
- The allergy/ intolerant child should not be isolated on a separate table but should be positioned to limit the risk.
- Please note that it is very important that staff should be extra vigilant to ensure that the child does not reach for their peer's cutlery, food, cup, etc.
- Staff are to ensure that there is no food debris left on the tables or floors between the main meal and dessert.
- On moving away from the table, the children **MUST** wash their hands.
- Staff **MUST** ensure that all food debris, dirty plates, and utensils are removed, and the area is thoroughly cleaned.
- Tables **MUST** be washed down with hot soapy water and sanitised.
- The nominated member of staff returns **Children with Allergies/ intolerance Daily Requirement Checklist (HS43)** to the kitchen and the whole process begins again at the next mealtime.

SNACK AND ROLLING SNACK

- Supervised snack should be dealt with as per the above procedure.
- Rolling Snack **MUST NOT** contain specific foods/drinks that children attending during the session are allergic/ intolerant to.

ACTION TO BE TAKEN IN THE CASE OF A SEVERE ALLERGIC REACTION / DIETARY ERRORS

Parents/carers **MUST** always be informed in the unlikely event that a child eats any restricted foods or requires any medical intervention.

The child's welfare **MUST** be treated firstly following the child's **Critical Care Plan (HS66)**, and the Nursery Manager **MUST** follow the **Serious/Major Incident Reporting Procedure (Appendix 33)**.

When a situation arises in which an auto injector pen or inhaler is required, this **MUST** be administered by a trained First Aider member of staff; that will have included training in the safe storage, handling and disposal of auto injector pen and inhalers.

Children who may need an auto injector pen or inhaler cannot be admitted to nursery unless their auto injector pen or inhaler is in date, with the child's name on, is present at the nursery and a First Aider member of staff is present who is able to administer the auto injector pen or inhaler in an emergency.