

International School of London

Food Allergy Management Policy

Date reviewed:
August 2026

To be reviewed:
August 2027

Mission statement

Since 1972, we have established a welcoming and inclusive community. Our diverse cultures and languages drive all our learning experiences.

We nurture creativity and curiosity to stimulate deep thinking. We foster insight, compassion and resilience to enable us to play a meaningful part in a changing world.

Vision statement

We celebrate our stories, our worth and our purpose to make a difference in a shared world

At the International School of London, we believe in:

Empowering students to maximise their learning opportunities and to fulfil their potential.
Actively integrating cultural diversity in the curriculum.
Creating inclusive, vibrant and innovative learning communities.
Offering a diverse and extensive international programme that supports personal, social and professional growth.

1 Policy Statement

This policy will acknowledge the importance of the appropriate action being taken for pupils with a suspected or known food allergy and ensure that suitable control measures and practices are in place both at kitchen and service point level to reduce the likelihood of accidental contamination. Anyone in contact with food is required to follow this policy.

The policy will ensure that:

- Clear guidance is provided for catering staff on their responsibility for provision of food for pupils with suspected or confirmed food allergy,
- That appropriate training/education is available and implemented for any catering staff involved in providing food for pupils with food allergies,
- That appropriate information and support is available for staff.

2 Purpose

International School of London recognises that a number of community members (pupils, parents, visitors and staff) may suffer from potentially life-threatening allergies or intolerances to certain foods. International School of London is committed to a whole school approach to the care and management of those members of the School community. This policy looks at food allergy and intolerances in particular. The School's First Aid Policy looks more in depth at allergens. The purpose of this policy is to ensure that the food provided by the catering service within the school is stored, handled, prepared and served to ensure it is safe for all consumers including those who may have food allergies. Catering staff will have access to relevant training and/or education as required.

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 have robust plans for an effective response to possible emergencies.

The School is committed to proactive 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. The intent of this policy is to minimise the risk of any person suffering allergy-induced anaphylaxis, or food intolerance whilst at International School of London or attending any School related activity. The policy sets out guidance for staff to ensure they are properly prepared to manage such emergencies should they arise. It is also intended to outline how information can be accessed to food allergens in the Catering facilities.

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3 Background

What is a food allergy?

Food allergies involve the body's immune system. The body reacts to certain allergens in food by producing antibodies, which can cause immediate and sometimes severe symptoms such as swollen lips or eyes, vomiting, skin hives and in most extreme cases difficulties breathing and a severe fall in blood pressure (anaphylactic shock). In extreme case, this can prove fatal. Food allergies are an increasing concern for consumer and food producers as the incidence rises.

What is food intolerance?

This does not involve the immune system in the same way and is not usually as severe as a food allergy. Symptoms usually take longer and may include headaches, fatigue and digestive problems. Food intolerance is harder to diagnose than a food allergy. The only reliable way to diagnose it is to omit the suspected food from the diet (under the supervision of a dietician or doctor) to see if symptoms disappear. The person with a known allergen trigger may know what product (food, ingredient) will provoke a reaction. However, they may well have eaten this food or a specific dish previously and had no adverse reaction. It is essential in a School setting that standard recipes are rigorously adhered to. This will help to enable allergen avoidance and to identify a trigger allergen ingredient should a reaction occur. Any variation to an approved standard recipe could cause an adverse reaction, which may become fatal.

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
- Crustaceans, (prawns, crab, lobster, scampi, shrimp paste)
- Eggs – also, food glazed with egg
- Fish - some salad dressings, relishes, fish sauce, some soy and Worcester sauces
- Soya (tofu, bean curd, soya flour)
- Milk – 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
- Sesame Seeds - bread, bread sticks, tahini, humus, sesame oil
- Sulphur dioxide/Sulphites (dried fruit, fruit juice drinks, wine, and 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 controls that are more rigorous. 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.

So who is at risk?

Anybody can develop a food allergen or intolerance at any time in their life irrespective of whether they have consumed the food previously. A person with an allergy is at risk even if they consume a small amount of the food allergen. The response to this can be relatively mild such as small red marks on the skin or swelling of the face to a full anaphylactic shock incident, which needs immediate medical treatment. People most likely to develop food allergies include those with related conditions e.g. asthma, eczema and hay fever or with close family members with these conditions.

4 Definition

The proportion of the population (UK) with a true food allergy is approximately 1-2% of adults and 5-8% of children, which equates to around 2 million in the UK. In addition, about 1:100 of the UK population has celiac disease and needs to avoid gluten.

5 Scope

This policy covers the action to be taken by the catering staff involved in managing the provision of food for pupils with suspected or confirmed food allergy.

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:

• Involvement with the parents and the child in establishing an Individual Medical Healthcare Plan.

• Effective communication of the Individual Healthcare Plans to all relevant staff and departments.
• 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. Folders with affected pupils pictures, names and grades are on display throughout the School, in the following locations;

- In the main staffroom on the pin board
- In the upper staffroom
- In the quiet room on the wall
- In the staff cafeteria
- In the PE Dept.
- In the Science Dept.

Due to the diverse nature of the School, it is important that allergen information is accessible to all parties who visit the site. During planning for in-school events, it is important that guests be informed of the requirements for any known person with food allergies/intolerances. This should be undertaken during the planning process. This information should then be passed to the Catering teams to allow them to plan appropriate menus and selections of food. Any parents or visitors bringing in food for an event will have to ensure that ingredients/allergens are clearly labelled and visible.

6 Legislation

This policy has been created to ensure compliance under the Food Information for Consumers Regulation (1169/2011) which came into force in December 2014.

7 Allergen communication

Signage with communication about allergens is set on each point of food provision, as follows:

FOOD ALLERGIES and INTOLERANCES

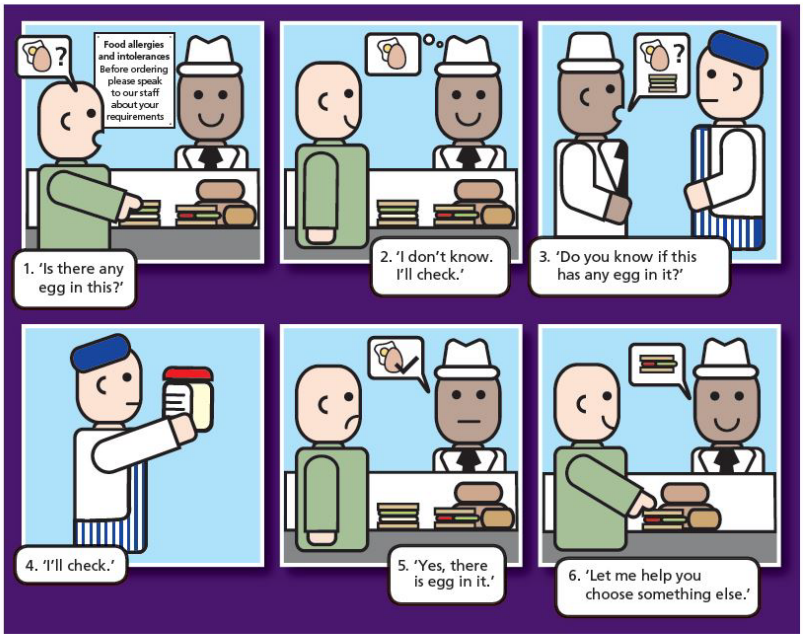
Please speak to our staff about the ingredients in your meal, when making your order.

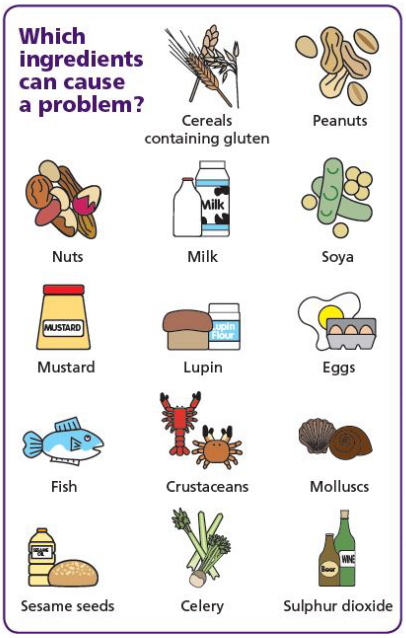
Thank you.

Think Allergy

When someone asks you if a food contains a particular ingredient – always check. From 13 December 2014, food businesses will need to provide information about allergenic ingredients in the food they serve.

Food Standards Agency
food.gov.uk





For more information and advice about allergy, visit: food.gov.uk/allergy

A booklet **Allergen information for loose foods** is also available to download.

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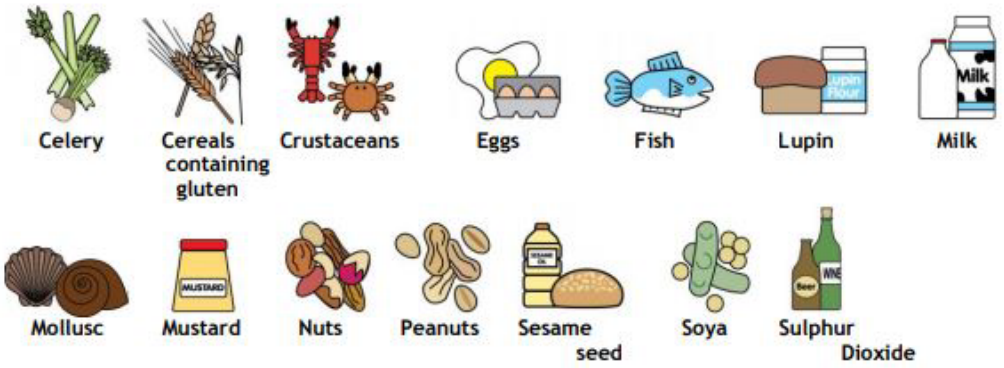
Staff are trained to escalate any concerns a pupil may have regarding food allergy or food intolerance to a Head of Department if they are unsure of product content. Where dishes contain potentially allergens, they are clearly identified with labels at point of service, with the following labels:



8 Staff training and responsibilities

All kitchen staff, food handlers and catering assistants serving food have received a training of ‘allergy awareness’ from the local authorities. The catering management keeps records of staff training.

Medical information for pupils is private and confidential. However, it is the Front Office’s responsibility to pass any information on to the Catering Manager concerning food allergies of pupils. Staff will be made aware of these pupils via:

· Staff training and instruction in the Catering Department. Homeroom tutors/tutors will be made aware by the Front Office.
· Information regarding medical information is available on the iSAMS system for staff to refer to and download during trips and activities.
· The Front Office is responsible for supplying the relevant pupil medication (adrenaline device). Pupils are responsible for ensuring that they have their medication with them at all times.

Additional devices are located in the Medical Room. It is the responsibility of the Front Office team to keep these up to date.

Educational visits:

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 iSAMS system. Where food intolerance has been identified, this must be relayed to the Catering Department if they are ordering packed lunches/refreshments/food.

All staff undertaking an offsite trip must have attended the Schools First Aid training. This is part of the risk assessment. Staff must also:
· Physically check that pupils have their medication before leaving site.
· Ensure that all food collected from the Catering 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).

Where there is an open event inviting parents to bring food in for the pupils, it is important that all foods be clearly labelled with potential allergens. The Catering Department does not have any control over the food brought in during this time so it is hard to monitor.

Where products are not made on site, but sold by the School, appropriate signage should be in place. All products should be plated separately and stored as such (wrapped where possible) to prevent cross contamination to other items for sale. It should be left to the discretion of the person buying the food that they accept the risk that allergens may be present.

9 Catering procedures and responsibilities

The Catering Staff are responsible for:
· Being the controlling point and contact for all purchases of foodstuffs 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 foodstuffs 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 foodstuffs that may contain nuts.
Working closely with suppliers to enable up to date and clear labelling of all products that may contain potentially harmful allergens.

Kitchen practices

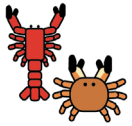
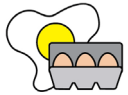
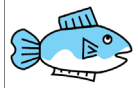
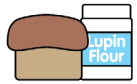
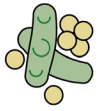
The Head of Catering has the responsibility to update the food allergen chart ensuring to mention on it all the allergens present in each recipe. This information is displayed at the counter service area, next to the food.

Managing cross contamination

Maintaining rigid food hygiene standards throughout food handling areas. Where allergenic ingredients are packaged openly/loosely, they are stored separately to reduce the risk of cross contamination.
Physical segregation within the production area is sought at all times

Appendix 1: Dishes table and their allergen content

DISHES AND THEIR ALLERGEN CONTENT – International School of London

DISHES														
	Celery	**Cereals containing gluten**	**Crustaceans**	**Eggs**	**Fish**	**Lupin**	**Milk**	**Mollusc**	**Mustard**	**Nuts**	**Peanuts**	**Sesame seeds**	**Soya**	**Sulphur Dioxide**
Beef burger and chips, coleslaw		✓										✓		
Japanese lamb curry, salad		✓												
Chicken and pasta in cheese sauce		✓					✓							
Lamb goulash and rice							✓							
Oven-baked cod filet and tomato sauce		✓		✓	✓									
Baked potato and baked beans														
Meatballs and rice		✓		✓										
Spaghetti bolognese		✓												
Chicken vol au vent and rice		✓					✓							
Shepherd's pie		✓					✓							

Review date:	Term 1	Reviewed by:	David Dalzell	Food Standards Agency food.gov.uk	You can find this template, including more information at www.food.gov.uk/allergy

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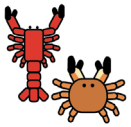
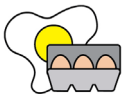
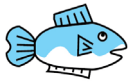
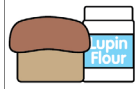
DISHES														
	Celery	**Cereals containing gluten**	**Crustaceans**	**Eggs**	**Fish**	**Lupin**	**Milk**	**Mollusc**	**Mustard**	**Nuts**	**Peanuts**	**Sesame seeds**	**Soya**	**Sulphur Dioxide**
Chicken burger and fries	✓	✓										✓		
Thai green curry and rice			✓											
Lasagne		✓					✓							
Ragout of lamb and rice		✓												
Roast chicken and pasta		✓												
Margherita pizza with chicken salad		✓					✓							
Chili con carne with rice							✓							
Pasta with salmon and broccoli in white sauce		✓			✓		✓							
Chicken fried rice with yoghurt salad							✓							
Spaghetti bolognese		✓												

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Appendix 2: 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 allergic reaction requiring immediate medical attention. The reaction usually occurs within minutes of exposure to the “trigger” substance although in some cases the reaction may be delayed for as much as a few hours. Common trigger substances include peanuts, tree nuts, eggs, shellfish, insect stings and drugs such as penicillin and aspirin.

Signs and symptoms

The signs and symptoms of anaphylaxis vary from one person to another and may include some or all of the following.

The early symptoms of allergy

- Itchy, urticarial rash anywhere on the body
- Runny nose and watery eyes
- Nausea and vomiting
- Dizziness

The danger signs of anaphylaxis are

- Swelling of lips, tongue and throat
- Cough, wheeze, tightness of chest or shortness of breath
- Sudden collapse or unconsciousness

Treatment

Treatment depends on the severity of the reaction and may require emergency injection of adrenaline.

For mild symptoms:

- If you know your child is an allergy sufferer, please pay particular attention to weather conditions/ pollen count and administer the appropriate dosage **BEFORE** coming to school.
- Piriton or inhaler may be given by the **Designated First Aider**, by any first aider in his/her absence and on trips by any attendant adult. The agreed health care plan will be in the named medical box taken on the trip or stored in the medical centre.
- The child should be monitored in the medical room to ensure their medical condition doesn’t worsen.

For severe symptoms:

- This is usually given via an auto-injector device (EpiPen) into the thigh muscle and may be given through clothing. The adrenaline quickly reverses the effects of the allergic reaction, but it is short- acting. If necessary, a second EpiPen can be used.
- **The child must go to hospital by ambulance if the EpiPen is used.**

Emergency procedure

If a child shows signs of symptoms of a severe allergic reaction, the **Designated First Aider** should be informed immediately.

Call an ambulance without delay, stating “child with anaphylaxis” (follow procedure for calling an ambulance). If the **Designated First Aider** is not available for any reason, follow these procedures:

- Send a responsible person to get the child’s emergency box from the medical room
- Monitor the child’s condition carefully.
- Administer, if necessary, the EpiPen as follows:
    - Remove all packaging and pull off safety cap
    - Place orange tip on the upper outer thigh midway knee to hip at right angles to the skin
    - Inject using a quick motion; the auto-injector mechanism functions with an audible click and works through clothing if necessary. Hold for approximately 10 seconds. Massage the area injected for 10 seconds afterwards.
- Ensure the child’s parents or next of kin are contacted (details inside emergency box)
- Monitor the child’s condition carefully; a second dose of EpiPen may be needed after 10 minutes, if help has not arrived and the child’s condition is not better
- Give all used EpiPens to the ambulance crew for safe disposal
- It may be necessary for a member of staff to accompany the child to hospital until the parents arrive
- The **Designated First Aider** will record the incident on an accident report form.
- Parents must replace medication as necessary.

Appendix 3: Staff allergy update form

Food Allergen Management Training Document and Information

I…… have received, read and understood the attached policy on Food Allergen Management.

I have a copy for my own information and referral

Signature:

Print name:

Date:

At ISL London, Safeguarding and promoting the welfare of children is everyone's responsibility. Everyone who comes into contact with children and their families has a role to play. In order to fulfil this responsibility effectively, all practitioners should make sure their approach is child-centred. This means that they should consider, at all times, what is in the best interests of the child.