



ALLERGEN DECLARATION AND MEDICAL DIET REQUEST FORM INSTRUCTIONS

You will be provided with a link to access the online system for requesting a medical diet by your school. The link that will be provided is specific to your school and has been set up to comply with the requirements of GDPR. Once you activate the link, you will be directed to the Parental Child Questionnaire which contains 3 sections – permission to process your personal data, an allergen declaration and a medical diet request form.

Page 1 of the Parental Child Questionnaire (shown below) is a request to process personal data. On this page we ask for permission to process both your personal data and your child’s to ensure every child is provided with a safe meal.

PARENTAL CHILD QUESTIONNAIRE
(PAGE 1/3)

Parental consent to data processing

The personal data within this form will be gathered, stored and used to ensure that every child is served with a safe meal for them to enjoy. Where the criteria have met the requirements within our [Medical Diet Policy](#), the information will be used during future communications with the parent/carer.

More information about how your child’s personal data will be accessed and stored is available in our [Medical Diet Privacy Notice](#).

Please tick the box below to indicate that you are happy for your child’s personal data to be processed for these purposes. Consent is required even if your child does not have any allergies / intolerances. You may withdraw consent at any time, but please be advised that we will not be able to provide a medical diet, if required for your child.

Please note that if any information changes in respect of food allergens / intolerances, you must notify us by completing this form again.

We will be reviewing the information we hold on your child every year to ensure that the information is still up to date and accurate and as a result we may need to contact you direct. Please advise us if any of your contact details change.

I have read and understood the above

I wish to proceed

There are two hyperlinks available ([highlighted in blue and underlined](#)), you can follow for further information on the Impact Food Group Medical Diets Policy Statement and Medical Diet Privacy Notice. These documents provide you with information of how we gather and store your personal information including access, security and retention.

MEDICAL DIETS

- MEDICAL DIETS**
 - Upon request all parents/ carers will be provided with the allergen information for the catering menu cycle.
 - IFG will food all pupils with food allergies or intolerances where it is safe and practical to do so.
 - IFG will only provide Medical Diets for pupils who have up to 2 food allergens as identified within the Food Information Regulations.
 - IFG will not provide tailored recipes for allergens outside of the 14 allergens identified within the Food Information Regulations.
 - IFG will not participate in any partial reintroductions.
 - IFG will provide each primary school with the Impact Food Group Medical Diet procedure.
- MEDICAL DIET REQUESTS**
 - The school is to issue a Medical Diet request procedure to any parent/ carer who reports a food allergy.
 - The Medical Diet request with all relevant information is to be shared with IFG.
- RECEIPT**
 - The information is shared with the Operations Manager, who will make arrangements for the initial contact with the parent/ carer.
- MEDICAL MENU**
 - The Medical Diet menu will be developed and agreed between the Operations Manager, operations support staff and parent/ carer.
 - The Medical Diet will be issued to the school and the Catering Manager/ Executive Chef, with the child’s name and allergen requirements clearly identified at the top of the menu.
 - Where different recipes are required these will be created by the IFG Food Development Team and provided to the Catering Manager / Executive Chef.
- COMMUNICATION**
 - A copy of a Medical Diet will be issued to the parent/carer of the pupil to agree and sign before the medical menu is collected.
- IDENTIFICATION**
 - All pupils with Medical Diets must be identified by the school to IFG serving staff, prior to lunch service.
 - IFG request that a photograph of each pupil with a Medical Diet menu is provided and shared with the serving staff for identification purposes.
- REVIEW**
 - Upon receipt of a notification of any change in Medical Diet requirements the Medical Diet menu will be reviewed.
 - If changes are required the Medical Diet menu will be resubmitted to the parent/carer for agreement before sharing with the Catering Manager/ Executive Chef and the school.
 - Parent/Carer will be contacted annually to confirm that the allergen information that we hold is correct.

The Medical Statement Medical Diet

MEDICAL DIET PRIVACY NOTICE

- RECEIPT OF MEDICAL DIET REQUEST FORM**
 - The information is gathered electronically using a secure online platform with restricted access.
 - A medical menu will be completed, which will contain the child’s name and the signature of the parent/ carer.
- STORAGE**
 - All personal information relating to medical diet requests will be stored electronically using a secure online platform with restricted access.
 - The Medical menus will be stored in a secure online platform with restricted access.
 - Any information held in hard copy on site will be stored in a folder within a lockable drawer/ locker or safe when not in use. The folder will be at the canteen counter during service, to ensure that IFG employees have access to check upon the dietary needs of pupils during service.
- ACCESS & SECURITY**
 - The Medical Diet Request information can be accessed by the Operations Manager, Operations support staff and Operations Directors.
 - Access is allocated on a case by case basis.
 - Access is through individual and personal log ins with multi factor authentication (MFA).
 - In the event of an incident the Medical Diet information will be shared with senior management including the Group Health & Safety Manager.
 - In the event of an incident the results of any investigation may be shared with government bodies, legal representatives and/or insurers.
- RETENTION**
 - All Medical Diet Request information will be held until the end of each school year, when they will be deleted from the system.
 - Parents and carers will be asked to complete the allergen request at the start of each academic year.
 - Centrally held Medical Diets will be kept for a maximum of 5 years before being deleted.
 - Where incidents have taken place it will be necessary to hold all investigation records including the information contained within the medical diet request form for a period of 18 – 24hrs (age) + 3 years. This information will be archived in a restricted folder, accessible only to the Group Health & Safety Manager and Operations Directors.

Diet Policy The Privacy Notice



Once you have read Page 1 (Parental consent to data processing), the Medical Diet Policy Statement and Medical Diet Privacy Notice, there is a section at the bottom of the page you need you to complete:

1. Click on the tick box beside the statement “I have read and understand the above” (the tick box is indicated by the red arrow below)
2. Then click the “I wish to proceed” button (indicated by the green arrow) to proceed to the next page

PARENTAL CHILD QUESTIONNAIRE
(PAGE 1/3)

Parental consent to data processing

The personal data within this form will be gathered, stored and used to ensure that every child is served with a safe meal for them to enjoy. Where the criteria have met the requirements within our [Medical Diet Policy](#), the information will be used during future communications with the parent/carer.

More information about how your child's personal data will be accessed and stored is available in our [Medical Diet Privacy Notice](#).

Please tick the box below to indicate that you are happy for your child's personal data to be processed for these purposes. Consent is required even if your child does not have any allergies / intolerances. You may withdraw consent at any time, but please be advised that we will not be able to provide a medical diet, if required for your child.

Please note that if any information changes in respect of food allergens / intolerances, you must notify us by completing this form again.

We will be reviewing the information we hold on your child every year to ensure that the information is still up to date and accurate and as a result we may need to contact you direct. Please advise us if any of your contact details change.

I have read and understood the above

This will take you to page 2, as shown overleaf..



On the 2nd page there are a list of questions, that must be answered.

Please note that your school name is automatically populated. This cannot be altered.

For most of the questions please type in the answers.

There are a couple of drop down questions including the relation ship top the child. Click on the arrow by the answer box and a list of answers will appear. Select the answer appropriate to you.

A detailed explanation of how to record the Date of Birth is described on the following page.

PARENTAL CHILD QUESTIONNAIRE
(PAGE 2/3)

Your First Name:

Your Last Name:

Mobile Phone:

Email:

Relationship to pupil: v

Pupils First Name:

Pupils Last Name:

School Name:

Class Name:

Pupil Address Line 1:

Pupil Address Line 2:

Pupil Town / City:

Pupil Postal Code:

Pupils Date of Birth: 📅

Does your child have a food allergy / intolerance?
Yes No



Question 1. Pupil's Date of Birth

PARENTAL CHILD QUESTIONNAIRE
(PAGE 2/3)

Pupils Date of Birth: 01/12/2021

Does your child have a food...
Yes

Click on the calendar symbol to the right (indicated using a yellow arrow).

PARENTAL CHILD QUESTIONNAIRE
(PAGE 2/3)

Pupils Date of Birth: 01/12/2021

Does your child have a food...
Yes

This will prompt a pop up to appear where you can choose the year. There is scroll bar at the right-hand side to access additional years (the scroll bar is indicated using the blue arrow)

PARENTAL CHILD QUESTIONNAIRE
(PAGE 2/3)

Pupils Date of Birth: 01/12/2021

Does your child have a food...
Yes

In this example we have chosen the year 2017. Once you have chosen the year, select it by clicking on it and a pop up will appear showing the months.

Select the correct month, by clicking on it, you will then be able to select the date. In this example we have chosen June. The month June in highlighted in grey as the cursor is hovered over it.

PARENTAL CHILD QUESTIONNAIRE
(PAGE 2/3)

Pupils Date of Birth: 16/06/2017

Does your child have a food...
Yes

Select the date by clicking on the correct number. In this example we chose the 16th June 2017. The date will be highlighted in grey when the cursor is hovering over it. In this case number 16 is highlighted in grey.

Once the correct date of birth has been selected you must answer the second question.





Question 2. Does your child have a food allergy / intolerance?

PARENTAL CHILD QUESTIONNAIRE
(PAGE 2/3)

Pupils Date of Birth: 16/06/2017

Does your child have a food allergy / intolerance?
Yes No

Submit

This is the allergen declaration section. Answer yes or no by clicking on the correct tick box for your child (indicated by the green arrow)

Once you have answered press the submit button, at the bottom (indicated by the purple arrow).

If you answered no, this is the end of the questionnaire. You will receive an acknowledgement that you have completed the questionnaire (as shown below)

PARENTAL CHILD QUESTIONNAIRE
(PAGE 5/3)

Thank you, we have your data securely stored and will contact you regarding any questions we have.

If your details change in the future, please simply complete this form again.

If you answered yes, you will be redirected to a Medical Diet Request Form shown below:

1. Select the food allergens by clicking on the tick box beside the allergen (s) that are applicable to your child.
2. If your child's food allergies aren't listed, please input the food allergies within the text box at the bottom of the list. (indicated by the red arrow below)

PARENTAL CHILD QUESTIONNAIRE
(PAGE 2/3)

Pupils Date of Birth: 16/06/2017

Does your child have a food allergy / intolerance?
Yes No

What food allergens / intolerances apply?

<input type="checkbox"/> Dairy	<input type="checkbox"/> Egg
<input type="checkbox"/> Wheat	<input type="checkbox"/> Barley
<input type="checkbox"/> Rye	<input type="checkbox"/> Oats
<input type="checkbox"/> Other Cereals	<input type="checkbox"/> Mustard
<input type="checkbox"/> Celery	<input type="checkbox"/> Soya
<input type="checkbox"/> Sesame	<input type="checkbox"/> Fish
<input type="checkbox"/> Crustacean	<input type="checkbox"/> Molluscs
<input type="checkbox"/> Sulphur Dioxide	<input type="checkbox"/> Peanuts
<input type="checkbox"/> Nuts	<input type="checkbox"/> Lupin

Other:

Once you have selected or described your child's allergens then you must upload a piece of medical evidence and a colour photograph of your child.





You can upload a piece of medical evidence and a colour photograph of your child by scrolling down the page using the scroll bar to the right-hand side (indicated by the green arrow)

What food allergens / intolerances apply?

- | | |
|---|---|
| <input checked="" type="checkbox"/> Dairy | <input checked="" type="checkbox"/> Egg |
| <input type="checkbox"/> Wheat | <input type="checkbox"/> Barley |
| <input type="checkbox"/> Rye | <input type="checkbox"/> Oats |
| <input type="checkbox"/> Other Cereals | <input type="checkbox"/> Mustard |
| <input type="checkbox"/> Celery | <input type="checkbox"/> Soya |
| <input type="checkbox"/> Sesame | <input type="checkbox"/> Fish |
| <input type="checkbox"/> Crustacean | <input type="checkbox"/> Molluscs |
| <input type="checkbox"/> Sulphur Dioxide | <input type="checkbox"/> Peanuts |
| <input type="checkbox"/> Nuts | <input type="checkbox"/> Lupin |

Other:

Please upload any medical evidence for any food allergen/intolerance (eg letter from GP, nurse, dietitian, nutritionist, consultant, food allergy/ intolerance test results)

In order to assist our catering staff with the identification of the pupil during service please provide at least 1 recent colour photograph of the pupil

click here
or drag/drop
to upload

Files uploaded: (min 2)

Submit



The medical evidence can be any form of medical evidence to support your child's food allergen or food intolerance needs. For example, a letter from the doctor, GP, consultant, nutritionist, dietitian, nurse. We will accept appointment letters, diagnosis letters, or advisory information that you have received. If you are unable to provide any medical evidence at this time, you will not be able to complete the medical diet request form.



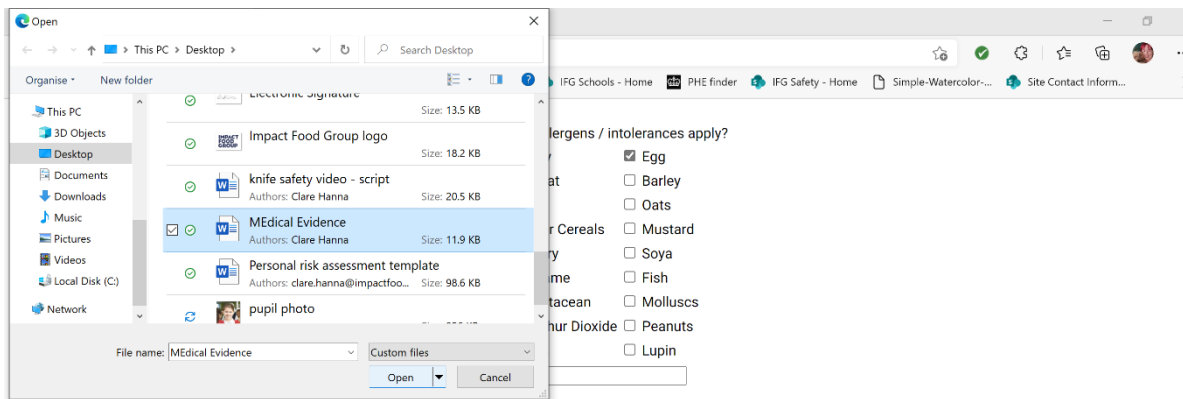
How to upload the medical evidence and photograph

There are 2 methods of completing this, both methods require an uploaded copy of the the medical evidence and photo from your computer.

Method 1 – Search and Upload

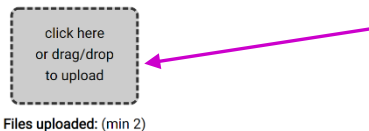
Click on the grey button with a perforated border (indicated by the pink arrow)

Once you have clicked the button, a pop up will appear. This pop up will allow you to search for your uploaded evidence as shown below.



Please upload any medical evidence for any food allergen/intolerance (eg letter from GP, nurse, dietitian, nutritionist, consultant, food allergy/ intolerance test results)

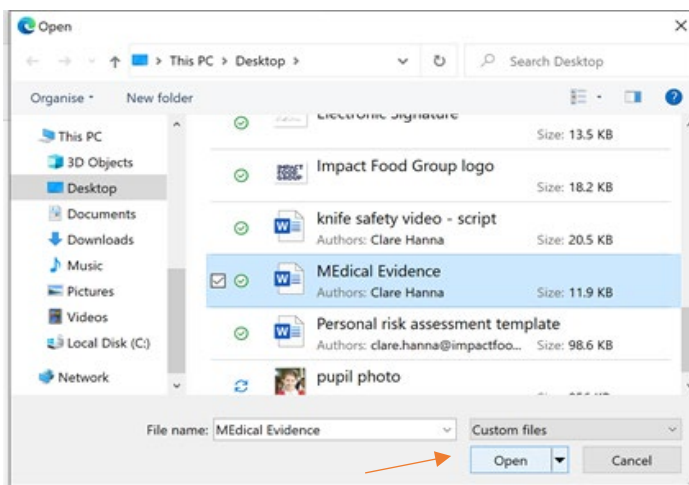
In order to assist our catering staff with the identification of the pupil during service please provide at least 1 recent colour photograph of the pupil



Files uploaded: (min 2)

Submit

In the below example, the medical evidence was stored on the desktop of the computer:



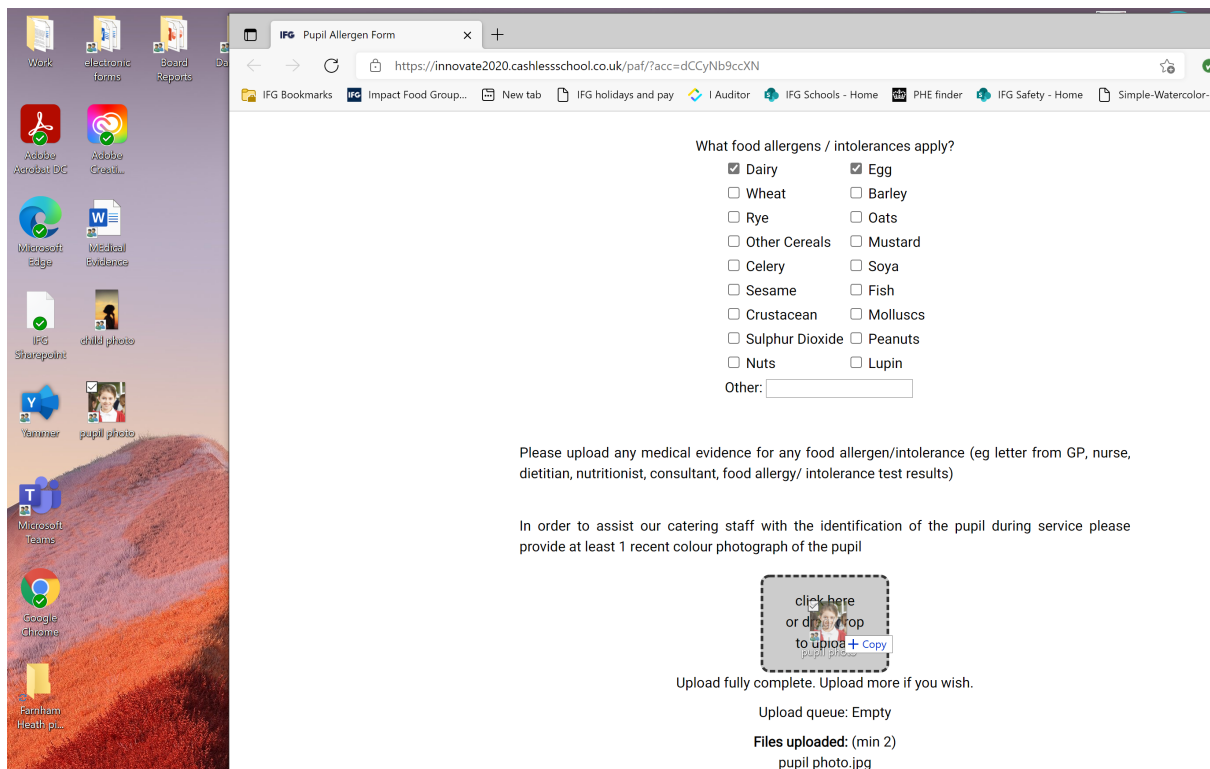
1. Click on **“Desktop”** in the left-hand column (highlighted in grey). This will bring up all the files available on the desktop.
2. Using the right-hand scroll, scroll through the files until you find the medical evidence files. In this example the required file was called **“Medical Evidence”**.
3. Once you have located the medical evidence file, select it by clicking on it. Once it has been selected, click on the open button (indicated by the orange arrow). Once you have clicked open the evidence will be uploaded onto the form.



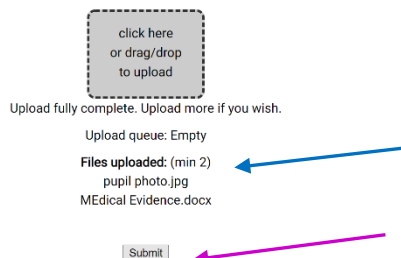
Method 2 - Drag and Drop

In this example we are dragging and dropping the child's picture into the form:

1. Decrease the size of the open window on your desktop and select the file that you want to drop onto the form.
2. Select the file by left clicking, then whilst keeping your finger down, use your mouse to move the item across into the form as shown below.
3. Once your file is over the grey upload box then you can lift your finger from the mouse and the file will drop into the form.



You will know that you have successfully uploaded or dropped your evidence and photos into the form as they will be listed under the **"Files uploaded"** title underneath the grey box (indicated by the blue arrow).



Once you have uploaded the evidence and photos you will be given the option to submit the form. Please make sure you are happy with the information you have provided and then click on the Submit button (indicated by the pink arrow).





PARENTAL CHILD QUESTIONNAIRE

CPAGE 1/12

Thank you, we have your data securely stored and will contact you regarding any questions we have.

If your details change in the future, please simply complete this form again.

You will receive an acknowledgement email (shown above) following the submission of your medical diet request form. The medical diet request will be automatically sent to the Operations Manager who will make arrangements for you to be contacted within 5 working days.

