

Dear Parent/Guardian

**Re: Requesting a special menu**

**Notes for completing the medical diet- school meals request form**

Please complete the medical diet – school meals request form, if your child either has an allergy or intolerance to a food(s), or they need to follow a special diet for another medical reason. All the sections on the form need to be filled out including the Health Professional details; **\*it will need to be signed by a Health Professional (e.g. Doctor, School Nurse, Practice Nurse, Dietitian or Health Visitor) before a special diet can be provided.**

Once the form has been completed, please return to the address at the bottom of the form; and keep a copy for your records. Once we have received the form, you will either receive a special menu for your child by post or be contacted by phone to discuss your child's special diet requirements and then a menu will be sent out to you.

Please allow 15 school days for your menu to arrive (**Please note at certain times of the year this maybe longer due to an increase in the number of forms being sent in this tends to be September & October**).

Once you have received your child's menu we ask that you contact us to confirm that you are happy with the menu and discuss a start date. Your child's school cook will also get a copy of the menu and once we have discussed the menu and start date we will inform your child's school cook.

To protect the health of your child until you have confirmed the start date for your child's special menu or you have completed a disclaimer form (see next page for more information on the disclaimer form), your child should be having a packed lunch provided from home.

Thank you for taking the time to read this information and please do not hesitate to contact us if you have any further queries or concerns.

Yours sincerely,

School Nutrition and Improvement Officer

## Frequently asked questions

**My child is following a vegetarian, meat or fish free diet?** If your child is following a vegetarian, beef, pork, lamb, poultry or fish free diet and does not have a food allergy or intolerance please do not complete this form but contact your school catering team.

**My child is following a vegan diet?** If your child is following a vegan diet and does not have a food allergy or intolerance please contact us for a Vegan form and then return to the address at the bottom of the form, it does not need to be signed by a Health Professional.

**\*Why does a Health Professional need to sign the form?** The form needs to be signed by a Health Professional to confirm that your child needs to follow a special diet; this is to prevent parents/guardians requesting a very restricted special diet school meal which could be life threatening to their child without the support of a Healthcare Professional. Although your child's special diet requirements may not be too restrictive, the same rules have to apply for all special diets that are requested, in order to protect the health of the child.

In the past we have also received special diet requests from parents/guardians due to their child disliking a certain food, as you can imagine if a special diet were provided, the school cooks would not be able to cope with the extra volume of work. It would be hard to separate the special diets needed for an allergy/intolerance or other medical reason compared to a fussy eater.

**I cannot get this form signed by a Health Professional?** We will also accept a copy of a letter from a Health Professional stating the food(s) that must be avoided or the type of special diet needed (e.g. puree/ soft options) if it is less than 6 months old.

Your doctor or other Health Professional should not charge you to sign this form as the dietitian who completes the special menus works for the NHS.

**My child can manage their special diet without needing a special menu (Disclaimer Form).** We understand that for some children they are able to manage their dietary requirements without following a special menu. If this is the case there is a disclaimer form you can complete, which is available from your school office. (Please note school menus cannot be altered with this option).



Dumfries and Galloway Facilities Operations

MEDICAL DIET – SCHOOL/NURSERY MEALS REQUEST FORM CHILD’S DETAILS

Please tick the box if you agree for Dumfries and Galloway Council to store and share your child’s information with the school and catering team.

Child’s Name..... Date of Birth..... Male Female

Address.....

.....Post Code.....

To identify your child, it would help if the kitchen had a photo of your child. Please tick the box if you are providing a photo of your child and that you give your consent for it to be displayed in the school/nursery kitchen along with their name and dietary requirements. Please note other school related staff and contractors may have access to the school kitchen. You can withdraw this consent at any time by contacting your school catering team. (Please send photo to your school/nursery kitchen)

PARENT / GUARDIAN DETAILS

Contact Name.....

Contact Address.....

(If different from above) Contact Phone Number.....

In making this request for a medical diet, I acknowledge that whilst employees of Dumfries and Galloway Council will make every reasonable effort to comply with my child’s dietary requirements, this is not always possible because of manufacturers’ variations to food items, which are outside our control.

Signed.....

SCHOOL/ NURSERY DETAILS

Name of School/Nursery .....

School/Nursery Address .....

Please state which school/Nursery class your child is in.....

DIETARY DETAILS

Details of Special Dietary Requirements .....

.....

As well as requiring a special menu is your child following a (Please tick all that apply)

Vegetarian Diet

Vegan Diet      Beef Free Diet      Pork Free Diet      Lamb Free Diet      Fish Free Diet

**HEALTH PROFESSIONAL DETAILS PLEASE NOTE - THIS REFERRAL MUST BE SIGNED BY A HEALTH PROFESSIONAL (e.g. doctor, consultant, dietitian, school nurse, practice nurse, speech & language therapist)**

Name of Doctor, Dietitian or Contact Health Professional.....

Signature of Doctor, Dietitian or Contact Health Professional.....

Address.....

.....\*Tel No:.....

Please return to:

School Nutrition and Improvement Officer, Facilities Services, Dumfries & Galloway Council – EnterprisingDG,  
Cargen Tower, Garroch Business Park, Garroch Loaning, Dumfries, DG2 8PN.

(updated May 2019)