

What is undiagnosed food intolerance or allergy?	What is a food restriction?
<ul style="list-style-type: none"> <li>A parent/guardian indicates in writing their child has a food allergy or intolerance that has not been formally diagnosed by a doctor. For example, upset tummy after drinking milk.</li> <li>An undiagnosed food allergy or intolerance is not life threatening and may be temporary.</li> <li>An undiagnosed food allergy or intolerance does not require a medical management plan.</li> </ul>	<ul style="list-style-type: none"> <li>A parent/guardian indicates in writing their child is not permitted to handle and consume certain foods due to cultural or religious reasons. For example, a child belonging to the Hindi and Islamic religion are not permitted to eat pork.</li> <li>A food restriction does not require a medical management plan.</li> </ul>

#### Director responsibilities BEFORE child commences OR IMMEDIATELY upon notification of an enrolled child

- Be responsive to child's needs and parent/guardian instructions.
- Ask parent/guardian to complete Consent to Display Dietary Information Form.
- Review centre minimisation Risk Minimising Plan - Undiagnosed food allergies, intolerances and restrictions. Only one risk minimisation plan is required for all children who have undiagnosed food allergies, intolerances and restrictions. Ensure control measures are relevant to the needs of individual children.
- Ensure all teachers, educators and kitchen staff (including casuals) are familiar with the centre risk minimisation plan and complete the acknowledgement table.
- If applicable, inform food supplier of the dietary needs without divulging the child's name.
- Scan current risk minimisation plan and Consent to Display Dietary Information Form on Kidsoft (branch only).

#### Director responsibilities throughout child's enrolment

- Regularly monitor teacher, educator and kitchen staff implementation of centre risk minimisation plan.
- Maintain open and regular communication with child's parents/guardians regarding their child's dietary needs and update the centre Risk Minimising Plan - Undiagnosed food allergies, intolerances and restrictions when needed.
- When a child's dietary needs change:
  - Inform all teachers, educators and kitchen staff (including casuals) and update centre risk minimisation plan. Ensure all teachers, educators and kitchen staff (including casuals) complete the acknowledgement table on the revised centre risk minimisation plan.
  - Update induction material to include details of child's dietary needs and centre risk minimisation plan.
  - Update displayed information about child's dietary needs.
  - If applicable, inform food supplier via email.
- When child transitions to another group within the centre, inform new teachers and educators of child's dietary needs and centre risk minimisation plan.

#### Teacher/educator responsibilities throughout child's enrolment

- Be responsive to child's needs and consistently implement the centre risk minimisation plan for undiagnosed food allergies, intolerances and restrictions.
- Respectfully support colleague knowledge of child's dietary needs and their implementation of the centre risk minimisation plan.
- Maintain current first aid qualifications, including emergency management of anaphylaxis. Training must outline how to administer the EpiPen® and Anapen®.
- Promptly advise the Director and/or the Responsible Person In Charge if there are any concerns regarding the child's dietary needs and implementation of the centre risk minimisation plan.
- When appropriate, incorporate relevant concepts within the curriculum e.g. the importance of not sharing food and washing hands before and after mealtimes.

#### Meal times and food provision

- Document and implement local level protocols to mitigate exposure risk of a food allergy, intolerance and restrictions. For example, serving children with food allergies first, coloured plates for children with food allergies and/or completing a two educator/teacher check to ensure children with food allergies are given the correct meal/lunch box.
- Closely supervise children at meal times. If appropriate, one educator to sit with the child at mealtimes to provide close supervision i.e. minimise cross contamination and prevent food sharing.
- Do not isolate children with food allergies, intolerances and restrictions from their peers at meal times.

- If appropriate/applicable:
  - If serving food from a shared platter, provide children with food allergies, intolerances and restrictions with their own plate of food to select from.
  - Store child's meals separately from other foods within a sealed container, labelled with child's name.
  - Allocate child with their own set of utensils, plates and bowls. Label with child's name and store in a sealed container.
  - Facilitate discussion with children about the serious nature of food allergies and the importance of hand washing and not sharing foods.
  - Observe precautionary allergen food product labelling statements e.g. "may contain traces of..."
- When providing children with meals:
  - When appropriate, exclude foods containing peanuts and tree nuts (such as cashew, hazelnut and almond) from centre menu as they are not essential/core foods and can be eaten at home. Do not exclude core diet foods such as wheat, dairy and egg.
  - When a child has multiple/complex food allergies, it may be appropriate for child to only eat food from home. This should be discussed/decided (and documented in the risk minimisation plan) with the child's parents/guardians prior to the child commencing or upon diagnosis.

#### Actions if child eats identified intolerance/restricted food

- Immediately contact parent/guardian. If child feels unwell, help to make feel comfortable until parent/guardian can collect the child.
- Complete Child, Centre Incident Record.
- Conduct a team meeting to review incident and if applicable amend centre protocols and risk minimisation plan.