

Dear Parent / Carer,

My name is Clare Hanna and I am the Health and Safety Manager for abm catering Ltd. Within my remit I manage and oversee food safety, food standards, allergens and nutrition across the company. At abm catering Ltd. we are very conscious of varying dietary requirements and needs of the young people we serve food to.

At the very core of abm catering Ltd. is the desire to provide a service of safe, fresh, nutritious food. We are a contract catering service that holds strong values to ensure that our young people have the opportunity to receive a healthy and filling meal at school every day.

With this in mind we believe that it is very important that every child has the opportunity to receive a balanced and wholesome meal irrespective of their dietary requirements or needs. For this reason, we have devised a procedure for special diets were the needs of a young person require that our staff are provided with the knowledge and understanding of the young person's needs and that alternatives can be provided where it is necessary to deviate from the regular menu.

It is very important that this special diet procedure is followed for every young person who has any food allergies or other medical requirements, to ensure that every young person receives food that is safe for them to eat.

Please find enclosed the special diet procedure and special diet request form. I ask that you ensure that a special diet request form is completed for every young person, with dietary requirements, by the parents/guardian or carer. Once completed, the special diet request form must be provided to the catering manager on site whom will share it with the operations manager/director, the abm nutritionist and myself. All information will be treated in confidence and in line with the General Data Protection Regulations.

I thank you in advance for your cooperation in this matter. If you have any concerns, queries or comments please advise me through any of my contact details below.

Yours sincerely

Clare Hanna
Health and Safety Manager
abm catering ltd.
channa@abmcatering.co.uk
07710653603

Special Dietary Request Form

UNIT:.....



Student Information	
Name:	Photo:
Address:	
Date of Birth:	
Class/Form:	

Allergy/Intolerance Information
Allergy/Intolerance Details:
Symptoms:
Daily Care Requirements:

Contact Information	
Parent/Guardian Name:	GP Name:
Home Telephone Number:	Telephone Number:

Date special diet form passed to abm catering ltd.:
Signature of School Representative:

Date special diet issued by abm catering ltd:	Review Due:
Signature of abm representative:	

Receipt and agreement of Special Diet:	Signature of Parent/Guardian:
Date:	