

ALLERGY SAFETY POLICY

Applies to	Brookhill, Hampden Way and St Margaret's Nursery Schools, and relevant BEYA Children's Centre provision
Policy lead	Deputy Headteacher – Janine Medway-Smith
Overall responsibility	Executive Headteacher
Approved	Autumn 2026
Review	Autumn 2027
Review sooner if	There is a significant incident, near miss or change in national guidance

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1. Our commitment and status of this policy

At BEYA, the safety, wellbeing and inclusion of every child is central to our practice.

Allergies can range from mild reactions to anaphylaxis, which is a potentially life-threatening emergency. Young children may not be able to recognise, communicate or manage their own symptoms and therefore rely upon adults to identify risks, prevent exposure wherever reasonably possible and respond quickly and appropriately in an emergency.

BEYA is committed to creating an allergy-aware culture in which:

- children with allergies are able to participate fully in nursery life;
- allergy information is accurate, accessible and shared appropriately;
- staff understand allergies and know how to respond to an allergic reaction;
- risks are anticipated and reduced;
- emergency medication is readily accessible where required;
- parents and carers are active partners in keeping their child safe; and
- incidents and near misses are recorded and used to improve practice.

Status of the 2026 DfE guidance

The Department for Education's July 2026 Allergy Safety in Schools guidance is statutory for the schools specified within that guidance but expressly excludes local-authority-maintained nursery schools. It states, however, that the guidance is relevant to early years settings and should be treated as good practice. BEYA has therefore chosen to adopt its principles and template as best practice across the Alliance, alongside the statutory EYFS framework and BEYA's wider duties of care, safeguarding, health and safety and equality.

This policy is deliberately written for an early years context and should be applied in a way that reflects children's age, development, communication and dependence on adults.

2. What is an allergy?

An allergy occurs when the body's immune system reacts to a substance that would normally be harmless.

Allergens may include, but are not limited to:

- foods such as milk, egg, peanuts, tree nuts, sesame, wheat, fish and shellfish;
- medicines;
- insect stings;
- latex;
- animals;
- pollen; and
- other contact or airborne allergens.

Food intolerance is different from allergy and cannot cause anaphylaxis. Coeliac disease is an autoimmune condition triggered by gluten; it is not an allergy or a food intolerance, although it also requires robust dietary and cross-contamination controls.

Anaphylaxis is a serious and potentially life-threatening allergic reaction affecting the airway, breathing and/or circulation and requiring immediate action.

3. Responsibilities

Governing Body

The Governing Body will provide appropriate oversight of allergy safety and seek assurance that effective arrangements are in place. It will receive appropriate information about serious allergy incidents and significant near misses, while protecting individual children's confidentiality.

Executive Headteacher

The Executive Headteacher has overall responsibility for ensuring that BEYA has effective arrangements to support children with allergies.

Allergy Safety Lead

The named Allergy Safety Lead is the Deputy Headteacher, Janine Medway-Smith.

The Allergy Safety Lead will:

- oversee implementation of this policy across BEYA;
- ensure appropriate systems are in place to identify children with allergies;
- ensure staff receive appropriate training;
- support consistent practice across BEYA sites;
- monitor allergy-related incidents and near misses;
- ensure lessons learned result in appropriate changes to practice; and
- contribute to the annual review of this policy.

Day-to-day responsibility for implementing individual arrangements is shared by site leaders, room leaders, key persons and all staff caring for the child.

4. Identifying children with allergies

Parents and carers will be asked to provide information about their child's medical needs, including known or suspected allergies, as part of the admissions process.

Parents must inform BEYA promptly if:

- their child is diagnosed with an allergy;
- the nature or severity of an existing allergy changes;
- medication is prescribed or changed;
- an Allergy Action Plan is issued or updated; or
- any other information relevant to their child's allergy changes.

Information may also be received from healthcare professionals or a child's previous setting. A suspected allergy will not be disregarded simply because a formal diagnosis is still being sought.

When BEYA becomes aware that a child has an allergy, the following pathway will be followed: identify → gather information → obtain/review healthcare documentation → confirm medication and emergency arrangements → inform relevant staff → check arrangements.

BEYA will maintain an up-to-date record of children with known allergies.

5. Individual Healthcare Plans and Allergy Action Plans

An Individual Healthcare Plan (IHP) will be put in place where a child's allergy requires BEYA to make specific supportive arrangements to enable the child to attend safely and participate fully.

The IHP will describe the child's individual needs and the arrangements necessary to support them safely. It will be developed with parents/carers and, where appropriate, with the child and relevant healthcare professionals.

Where a healthcare professional has provided an Allergy Action Plan, Asthma Action Plan or similar clinical plan, this will be attached to or clearly referenced within the child's IHP.

Plans will be reviewed:

- at least annually;
- when information about the child's allergy changes;
- when medication changes;
- when an updated professional Action Plan is received; and
- following a relevant incident or near miss where this indicates that arrangements should be reconsidered.

Parents and carers share responsibility for ensuring that BEYA receives current information and prescribed medication.

6. Sharing allergy information

Information about children's allergies will be shared with staff who need it to keep the child safe. Relevant information will be readily accessible to staff caring for the child, including staff providing food and staff covering rooms.

BEYA will ensure that temporary, agency, supply and cover staff are made aware of relevant allergy information before taking responsibility for children.

Children's health information is special category personal data. It will be handled respectfully and in accordance with BEYA's data protection arrangements, on a need-to-know basis, while ensuring confidentiality does not prevent staff from having the information necessary to keep a child safe.

7. Staff training

All staff who may have responsibility for children will receive allergy awareness and emergency-response training at least annually. This includes, as appropriate, permanent staff, temporary and agency staff, catering staff, staff working in breakfast, tea or extended-day provision, and regular volunteers. First aid training alone is not a substitute for allergy awareness training.

New staff will receive allergy safety information as part of induction. Supply and cover arrangements will ensure that staff taking responsibility for children understand the relevant allergy arrangements.

Training will enable staff to:

- understand allergy, the risks it poses and the difference between allergy, food intolerance and coeliac disease;
- recognise common symptoms of an allergic reaction and signs of anaphylaxis;
- Where a child has asthma or another medical condition alongside an allergy, staff caring for that child will be made aware of the child's individual healthcare needs and emergency arrangements.
- understand individual children's allergens and plans;
- know how to reduce the risk of exposure;
- know where emergency medication is kept;
- understand how and when emergency medication should be administered, including practical familiarity with the devices used at BEYA;
- know how to summon emergency assistance and inform parents/carers;
- understand the importance of acting promptly; and
- know how to report an allergy incident or near miss.

Staff with responsibility for administering prescribed emergency medication will receive appropriate instruction and training. Where a child requires healthcare support beyond school-level allergy safety arrangements, any necessary clinical competency, delegation and governance arrangements will also be followed.

8. Reducing the risk of exposure

BEYA will take reasonable and proportionate measures to reduce children's exposure to their known allergens. Staff planning activities must consider whether materials or ingredients could present a risk to a child with a known allergy and make appropriate adjustments.

This includes considering risks arising from:

- meals and snacks;
- food brought into the setting;
- celebrations and special events;
- cooking and baking;
- playdough and sensory materials;
- messy play;
- craft materials and reused food packaging;
- gardening;
- animals, animal feed and bird seed;
- Forest School and outdoor activities;
- visits and trips; and
- any other activity involving a known allergen.

Individual risk assessments will be undertaken where necessary.

BEYA is allergy aware – not 'allergen free'

BEYA will not generally describe its settings as 'allergen-free' or 'nut-free', because it is not possible to guarantee the complete absence of a particular allergen and such descriptions can create a false sense of security. Instead, our approach is to understand individual children's allergies, reduce the likelihood of exposure and ensure staff are prepared to recognise and respond immediately to an allergic reaction.

Where a child's individual risk assessment requires particular restrictions, these will be implemented and communicated appropriately.

9. Food and mealtimes

Food allergies require particular care in an early years environment. BEYA will ensure that:

- accurate information about children's food allergies is available to relevant staff and catering staff;
- parents/carers can access clear and accurate information about relevant allergens in food provided by BEYA or its caterers;
- food labels and ingredients are checked where required and substitutions or menu changes are checked before food is served;
- appropriate controls are in place to reduce cross-contact during food preparation, handling and serving;
- children with known food allergies are identified reliably at mealtimes using at least two appropriate safeguards, for example staff knowledge/checking alongside a current kitchen or serving-area allergy record;
- children are appropriately supervised while eating and are discouraged from sharing or swapping food, utensils or containers;
- appropriate handwashing and cleaning procedures are followed;
- food used for cooking, sensory or play activities is considered as carefully as food intended for eating; and
- staff know what action to take if a child is accidentally exposed to a known allergen.

Children with allergies will not routinely be segregated from their peers at mealtimes. Where BEYA cannot be confident that food is suitable for a particular child, it will not be given until its suitability has been established.

Parents and carers must not send food into nursery without prior agreement where this could affect allergy arrangements. Food provided during celebrations and special events will be managed in accordance with children's individual allergy arrangements and, where relevant, allergen information requirements.

10. Emergency medication

Emergency medication prescribed for an individual child must be:

- readily accessible to staff;
- clearly identifiable;
- stored safely at room temperature and in accordance with manufacturer's instructions;
- available wherever the child is being cared for; and
- checked regularly to ensure that it remains in date.

Emergency medication must not be inaccessible because it is locked away. Where it presents a physical risk because it contains a needle, it will be kept out of children's reach while remaining immediately accessible to staff.

For a child at risk of anaphylaxis, arrangements must ensure that their prescribed adrenaline devices can be brought to the child and administered as soon as possible and within five minutes of anaphylaxis being identified.

Where two adrenaline devices have been prescribed, both will be available. Parents/carers are responsible for providing prescribed medication and replacing it before it expires; BEYA will monitor expiry dates and alert parents in good time.

Emergency medication must accompany the child when participating in activities that are off the premises.

Emergency medication is stored in the child's classroom.

11. BEYA emergency adrenaline auto-injectors

BEYA maintains emergency adrenaline auto-injectors (AAIs) at each of its nursery school sites as an additional emergency safeguard. Each site holds two child-dose AAIs and two adult-dose AAIs. The adult-dose devices are an additional BEYA safety provision for adults on site or where their use is appropriate in an emergency, in accordance with current guidance and staff training.

The spare AAIs will:

- be readily accessible and not locked away;
- be kept together in a clearly identified emergency anaphylaxis kit/location;
- be clearly distinguished from medication prescribed for an individual child;
- be stored at room temperature and in accordance with the manufacturer's instructions;
- be capable of being brought to the person needing them within five minutes, and sooner wherever possible;
- be checked regularly to ensure that both devices are present, in date and in good condition;
- be replaced promptly following use or before their expiry date; and
- be safely disposed of following use or expiry through appropriate arrangements for devices containing needles.

All relevant staff will know the location of the spare AAIs. Their location and emergency use will form part of staff induction and annual allergy awareness and emergency-response training.

Location of AAIs: BEYA AAIs are located in the school office on each site

Children with prescribed adrenaline devices

Where a child has been prescribed their own adrenaline devices, these remain their primary emergency medication. Both prescribed devices will be clearly identified, readily accessible to staff, stored in accordance with the child's IHP and Allergy Action Plan, checked to ensure they remain in date, and taken with the child whenever they leave their usual nursery environment, including visits and off-site activities.

Parents/carers remain responsible for supplying their child's prescribed medication and replacing it before it expires.

Use of BEYA's spare AAI's

BEYA's spare AAI's provide an additional safeguard and do not replace a child's individually prescribed medication. They will be used in accordance with current national guidance, staff training and the child's plan where one exists. Advance parental consent for emergency use will be sought as good practice where appropriate; however, emergency action to save a life must not be delayed while consent is checked.

If an AAI is administered:

1. Administer adrenaline promptly in accordance with current training; do not delay treatment while contacting emergency services.
2. Call 999 immediately and state 'anaphylaxis'.
3. Ensure a second AAI is immediately available in case a further dose is required.
4. Do not leave the child alone; follow current emergency guidance on positioning and monitoring.
5. Inform the child's parent/carer as soon as possible without delaying emergency treatment.
6. Record the medication administered, timing and circumstances of the incident.
7. Inform the Allergy Safety Lead/site leadership.
8. Replace any used spare AAI as soon as possible.
9. Review the incident and the child's arrangements to identify learning or changes required.

A named member of staff at each site will routinely check the emergency anaphylaxis kit and record the number, dose, condition and expiry dates of the AAI's.

12. Responding to an allergic reaction

ANAPHYLAXIS IS A MEDICAL EMERGENCY.

Staff must be familiar with the child's individual Allergy Action Plan/IHP and follow it. If anaphylaxis is suspected, staff will act immediately. Adrenaline should be administered as soon as possible and within five minutes; treatment must not be delayed while attempting to contact parents or emergency services.

10. Bring the child's prescribed adrenaline devices to them and administer without delay where indicated. If these are unavailable, cannot be used or the child has no prescribed device, use BEYA's spare AAI in accordance with current guidance and training.
11. Call 999 and state 'anaphylaxis'.
12. Follow the child's emergency plan and current training regarding positioning and further treatment.
13. Administer a second adrenaline device where required in accordance with the child's plan/current emergency guidance and staff training.
14. Ensure the child is continuously supervised.
15. Contact the child's parent/carer without delaying treatment.
16. Ensure the ambulance crew receives the child's relevant information and details/timing of medication administered.

A child who has an allergic reaction that does not meet the threshold for anaphylaxis will still be monitored closely and managed in accordance with their individual plan and current training because symptoms can progress.

13. Visits, Forest School and off-site activities

Children with allergies will be supported to participate fully in BEYA activities wherever reasonably possible.

Planning for trips, visits, Forest School and other off-site activities will consider the child's allergy. Where appropriate, an individual risk assessment will be completed.

Before leaving the setting, staff will ensure:

- both prescribed emergency adrenaline devices, where prescribed, are present and in date;
- the child's Action Plan/IHP is accessible;
- relevant staff understand the child's allergy and emergency response;

- food arrangements have been considered; and
- foreseeable exposure to known allergens has been considered and reduced.

A child requiring emergency medication will not leave the setting without that medication and appropriately informed staff. BEYA will consider, through the trip risk assessment, whether a spare AAI should also accompany a visit without leaving the nursery site without appropriate emergency cover.

14. Children's wellbeing and inclusion

BEYA recognises that living with an allergy can affect a child's and family's emotional wellbeing. Children with allergies will be included in nursery life and should not be unnecessarily excluded from food, play, celebrations, trips or other experiences because of their allergy.

Staff will make reasonable adjustments wherever necessary to enable participation safely. Children will not be made to feel different, blamed or singled out because of an allergy, and allergy-related teasing, threats or deliberate exposure will be treated seriously in line with BEYA's Behaviour and Safeguarding arrangements.

BEYA will work sensitively with families to help children develop an age-appropriate understanding of their own needs as they grow.

15. Incidents and near misses

BEYA will record and review significant allergy-related incidents and near misses, including information reported after the child has left the setting where an exposure or reaction only becomes apparent later.

A near miss might include:

- a child almost being given food containing their allergen;
- incorrect allergy information being available;
- emergency medication being found to be inaccessible;
- medication being out of date;
- a known allergen being unintentionally introduced into an activity; or
- an agreed allergy-control measure not being followed.

The purpose of reporting a near miss is to enable BEYA to learn and improve practice.

Serious incidents and significant near misses will be brought to the attention of the Allergy Safety Lead and Executive Headteacher and reported to the Governing Body in an appropriate, confidentiality-preserving way. Any statutory reporting requirements, including food-safety, health-and-safety or safeguarding reporting where applicable, will also be followed.

BEYA will use the cycle: record → review → identify learning → take action → communicate changes → check improvement.

Following an allergic reaction, the child's arrangements and IHP will be reviewed where appropriate and parents/carers involved.

16. Parents and carers

Keeping children with allergies safe requires close partnership between BEYA and families. Parents and carers are expected to:

- provide accurate and current information about their child's allergy;
- provide professional Allergy Action Plans where available;
- provide prescribed medication in its original packaging and appropriately labelled;
- ensure medication remains in date;
- notify BEYA immediately of changes;

- attend meetings to develop or review their child's IHP where required; and
- follow BEYA arrangements regarding food brought into the setting.

BEYA will listen to parents' knowledge and experience of their child's allergy while ensuring that arrangements remain consistent with appropriate professional advice.

17. Staff and visitors with allergies

BEYA also recognises its responsibilities towards staff and visitors with allergies. Staff should inform their manager of allergies that may require workplace adjustments or emergency arrangements. Reasonable measures will be taken to reduce identified risks in accordance with BEYA's health and safety procedures.

Visitors who will be participating in activities where allergy risks are relevant should make BEYA aware of any necessary arrangements. Individually prescribed medication for staff or visitors remains personal medication and should be managed in accordance with the individual's medical advice and BEYA workplace arrangements.

18. Unacceptable practice

BEYA will not:

- prevent a child from having prompt access to prescribed emergency medication;
- ignore a child's or parent/carer's views, medical evidence or professional advice;
- assume that all children with allergies require the same support, or dismiss a suspected allergy simply because diagnosis is pending;
- send an unwell child away from appropriate adult supervision or require a child with suspected anaphylaxis to walk to where medication is stored – help and medication must come to the child;
- require parents/carers to attend nursery to administer routine or emergency medication where trained staff should reasonably be able to provide the agreed support;
- unnecessarily exclude a child from meals, celebrations, trips, Forest School or other nursery experiences because of allergy; or
- penalise a child for allergy-related absence or treatment.

19. Monitoring and review

This policy will be reviewed at least annually and sooner where:

- there is a serious allergic reaction;
- a significant near miss occurs;
- monitoring identifies a weakness in practice;
- legislation or national guidance changes; or
- local arrangements affecting allergy management change.

Review will consider incidents and near misses across all BEYA sites so that learning in one part of the Alliance can improve practice everywhere. The Governing Body will receive appropriate assurance regarding implementation of this policy.

20. Communicating this policy

This policy will be:

- available to all staff;
- included within relevant staff induction and annual training;
- made available to parents and carers;
- published on the BEYA website; and
- available in hard copy on request.

The principles of allergy awareness will also be communicated to children and the wider BEYA community in age-appropriate ways where relevant.

21. Related BEYA policies and procedures

- Supporting Children with Medical Conditions / Healthcare arrangements
- Administration of Medicines procedures
- First Aid Policy and procedures
- Safer Eating guidance
- Health and Safety Policy
- Educational Visits procedures
- Risk Assessment procedures
- Data Protection Policy
- Safeguarding and Child Protection Policy
- Behaviour Policy
- Staff Induction procedures
- Complaints Policy

22. Key BEYA allergy pathway

Step	Action	What this means
1	IDENTIFY	Parent/carer informs BEYA or information is received from a professional/previous setting.
2	GATHER INFORMATION	Establish the allergen, likely reaction, level of risk, medication and professional advice.
3	PLAN	Complete/review the child's IHP and attach the professional Allergy Action Plan where applicable.
4	MEDICATION	Obtain prescribed medication, check expiry dates and agree where it will be kept so that it is immediately accessible.
5	INFORM	Brief relevant room, catering, extended-day and cover staff and update BEYA allergy records.
6	REDUCE RISK	Consider food, routines, activities, environment and individual risk assessment.
7	CHECK	Before the child is left in BEYA's care, ensure the necessary information, medication and arrangements are in place.
8	REVIEW	Review at least annually and whenever information changes or an

		incident/near miss indicates that arrangements need strengthening.
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BEYA PRINCIPLE

Know the child. Know the allergen. Know where the medication is. Know what to do.

Appendix 1. Monthly emergency anaphylaxis kit check

Each maintained nursery school site should complete and retain a monthly check of its spare AAI kit.

Date	Child AAI x2	Adult AAI x2	Expiry dates	Condition / accessible	Checked by