Butlers Court School

Allergy Safety Policy
2026-2027

*Our Butlers Court family nurtures kind, resilient, ambitious and curious children. Our caring environment supports well-being and self-belief, encouraging **everyone** to flourish. Through a wide range of experiences and opportunities, **every** child has the chance to shine, developing a love of learning and prepared for the ever-changing world and a future of possibilities.*

Butlers Court School

Allergy Safety Policy

The staff and governors of the school have developed and approved this Allergy Safety Policy.

Vision and Values

'Our Butlers Court family nurtures kind, resilient, ambitious and curious children. Our caring environment supports well-being and self-belief, encouraging ***everyone*** *to flourish. Through a wide range of experiences and opportunities,* ***every*** *child has the chance to shine, developing a love of learning and prepared for the ever-changing world and a future of possibilities.'*

At Butlers Court school we provide all pupils with access to a broad and balanced curriculum which includes opportunities for outdoor learning, specialist art lessons, and various sporting events.
We are committed to making sure all our pupils have the chance to thrive and supporting them to meet their full potential.
We are focused on creating an inclusive environment, where provision is tailored to the needs and abilities of pupils, no matter how varied.

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1. Aims and Objectives

This policy aims to:

- Set out our school's approach to allergy safety, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion
- Promote and maintain allergy awareness among the school community

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on allergy safety in schools and supporting pupils with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

- Children's Wellbeing and Schools Act 2026
- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019

3. Roles and responsibilities

3.1 The governing board

The governing board is responsible for:

- Ensuring the school has an allergy safety policy which sets out:
    - Arrangements to reduce the risk of individuals coming into contact with their known allergens
    - Emergency response plans for cases of anaphylaxis
- Reviewing and approving the allergy safety policy at least annually
- Taking steps to ensure the allergy safety policy is:
    - Generally known within the school and to parents of pupils at the school
    - At least once a year, brought to the attention of all pupils, parents/carers, staff and volunteers
    - Published on the school's website
- Ensuring risks relating to pupils with allergies are included in the risk register and actively managed

The governing board delegates the day-to-day implementation of this policy to the allergy safety lead.

3.2 Allergy safety lead

The nominated allergy safety lead is Mrs. N Thorne.

The nominated allergy support safety leads are Mrs. S Knott and Miss L Richardson.

They're responsible for:

- Implementing this allergy safety policy
- Contributing to the review of the allergy safety policy
- Promoting and maintaining allergy awareness across our school community
- Developing and reviewing arrangements for the safe storage and disposal of adrenaline devices (AD)
- Ensuring:
    - All allergy information is up to date and readily available to relevant members of staff
    - All pupils who require support with allergies have an up-do-date individual healthcare plan (IHP)
    - All pupils with a known food or insect sting allergy have up-to-date allergy action plans issued by a medical professional, if needed.
    - All staff receive regular allergy awareness training
    - All staff are aware of the school's policy and procedures regarding allergies
    - Relevant staff are aware of what activities need an allergy risk assessment
    - Serious incidents and 'near misses' relating to allergy safety are recorded and reported as appropriate, and to consider and share with staff:
        - What lessons there are to learn
        - Any potential changes to the medical conditions and/or allergy safety policies and/or to any pupil's IHP
    - Checking spare AAIs are present and in date on a monthly basis
    - Making sure that replacement AAIs are obtained when expiry dates approach

3.3 Headteacher

The headteacher is responsible for:

- Effective implementation of this policy.
- Deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments

made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances

- Appointment of a designated Allergy Lead.
- Ensuring adequate staffing and training arrangements.
- Ensuring appropriate Individual Healthcare Plans (IHCPs) are developed and reviewed.
- Ensuring emergency procedures are established and tested.
- Ensuring allergy issues are considered during visits, trips and activities.
- Ensuring records of pupils with allergies are maintained.

3.4 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy safety policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Being aware of specific pupils with allergies in their care and following Individual Healthcare Plans (IHP)
- Reducing the risk to pupils with known allergies coming into contact with known allergens
- Ensuring the wellbeing and inclusion of pupils with allergies
- Knowing the location of emergency medicine
- Reporting any allergic reaction, case of anaphylaxis and near misses to the allergy safety lead promptly. Refer to page 60 of Allergy safety in schools statutory guidance:

3.5 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy safety policy
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis
- If required, providing their child with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition
- Providing Action Plans issued by healthcare professionals if/when received.

3.6 Pupils with allergies

If age-appropriate, these pupils are responsible for:

- Being aware of their allergens and the risks they pose
- Understanding how and when to use their AD
- Alerting staff immediately if they feel unwell or experience symptoms.

3.7 Pupils without allergies

If age-appropriate, these pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers
- Providing support their peers and staff in the case of an emergency.

4. Identifying individuals at risk

Allergy is a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an “allergen”) they are allergic to. Common allergic conditions include:

- Hay fever (allergic rhinitis), triggered by allergens carried in the air, such as pollen, house dust mite, animal fur/feathers, or mould
- Skin allergies (e.g. eczema, contact dermatitis, contact urticaria/hives) caused by contact with allergens including house dust mite, pollen and substances like nickel, latex and some chemicals
- Food allergy, which can cause symptoms ranging from mild itching in the mouth to "whole body" reactions including anaphylaxis
- Asthma which may be triggered by airborne allergens
- Allergy to insect stings and medicines

4.1 Identifying pupils at risk

We will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any allergy the pupil has and whether they carry medication. Where a pupil has a new diagnosis and/or has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks
- Send a reminder to parents/carers at the start of each year asking them to update their child’s medical information as necessary
- We ask that parents/carers proactively inform us by either phone call to the school or an email if their child’s medical needs change during the school year.

4.2 Identifying staff and visitors at risk

The HR Officer completes this identification as part of the staff enrolment process.

- Asking new staff to provide details of their allergies in advance of their start

date

4.3 Individual healthcare plans (IHP)

Pupils should have an IHP if they:

- Have an allergy which has a functional impact on them in the school environment
- They are at risk of harm as a result of their allergy; and
- Require arrangements which are additional to or different from those made generally

It is not necessary for a pupil to have a formal diagnosis of allergy for them to have an IHP. Healthcare professionals may decide that it is more appropriate to accept that the child shows symptoms, rather than proceeding to a formal diagnosis.

The IHP will set out the additional and/or different arrangements that will be in place for supporting the pupil. The school will make every effort to make sure that arrangements are put in place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

Not all children with an allergy will require an IHP. Some allergies will have little or no impact on the pupil while they are at school, or pose no risk to the pupil. Some allergies will not require arrangements which are additional to or different from those made generally.

The headteacher is responsible for deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances.

The school will consider the following principles:

- If the arrangements or support which a pupil requires would be available to any pupil as part of normal policies, an IHP may not be required
- If the pupil only needs non-prescription medication and the school's medical conditions policy would permit them to carry and administer it, an IHP may not be required

IHPs will be reviewed at least annually and more frequently if the pupil's needs have changed. Where a pupil moves on to a new school or college, their IHP will be shared as part of the transition.

4.4 Allergy and asthma action plans

All pupils who have a known allergy to a food or insect stings should be issued with an appropriate allergy action plan by their healthcare professional.

All pupils who have asthma should be issued with an asthma action plan by their healthcare professional.

The plans include medical and parental consent for staff to administer emergency medicines, including adrenaline for anaphylaxis or reliever inhaler in the event of an asthma attack.

The allergy action plan and/or asthma action plan should be attached to the pupil's IHP. Whenever the allergy action plan is updated, the pupil's IHP should be reviewed to incorporate it.

4.5 Record of individuals with known allergies

This links to our 'supporting pupils with medical conditions' policy.

The school maintains a record of all individuals who have a known allergy. The record includes:

- Known allergens and risk factors for anaphylaxis
- Whether a pupil has an Individual Healthcare Plan and/or an Allergy Action Plan
- A photograph of each individual (where parental consent has been given)

The record is kept in the medical room and in the class red communication files

The school provides a copy of this to Dolce, the school dinner providers.

5. Assessing risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in:

- Lessons such as food technology
- Science experiments involving foods
- Crafts using food packaging
- Off-site events and school trips
- Any other activities involving animals or food, such as animal handling experiences or baking

6. Minimising risk

6.1 Hygiene procedures

- Pupils are reminded to wash their hands before and after eating
- Sharing of food, food containers, and food utensils is not allowed
- Pupils have their own named water bottles, and lunch boxes, if this is the desired lunch option. Hot school lunches provided to pupils with food allergies will be clearly labelled with the name of the child for whom they are intended

- Where food is not directly provided by the school, parental engagement and permission will be sought in advance

6.2 Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies.

- Catering staff receive appropriate training and are able to identify pupils with allergies
- The school will engage with caterers to understand the controls in place to ensure that food service complies with relevant requirements
- School menus are available for parents/carers and pupils to view with ingredients clearly labelled, and catering staff are available to discuss the provision of allergy safe meals with parents/carers
- Where changes are made to school menus, Dolce, the school catering service makes sure these comply with legislation, and continue to meet any special dietary needs of pupils
- Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils and staff to make safer choices. Allergen information labelling will follow all legal requirements that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA)
- Where food is provided by the school, staff will understand how to read labels for food allergens
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination

6.3 Insect bites/stings

When outdoors:

- Shoes should always be worn
- Food and drink should be covered

6.4 Animals

- All pupils will always wash hands after interacting with animals to avoid putting pupils with allergies at risk through later contact
- Pupils with animal allergies will not interact with animals

6.5 Visits and trips

- No pupils with allergies will be excluded from taking part
- The school will plan accordingly for all visits and trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received appropriate training

- The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in a school trip
- Pupils at risk of anaphylaxis should have their own ADs with them
- Staff trained to administer adrenaline in an emergency will be present on the school trip
- Appropriate measures will be taken in line with the school's AD protocols for off-site events and school trips (see section 8.5)

7. Procedures for handling an allergic reaction

- All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately
- Staff are trained in the administration of adrenaline to minimise delays in an emergency
- If the pupil has an allergy action plan, this must be followed
- A spare school AD device will only be used if:
    - The pupil does not have a prescribed AD
    - The pupil's prescribed AD is not available or misfires

8. Adrenaline devices (ADs)

All ADs are stored in the medical room, a copy of the pupil's allergy action plan is kept alongside their medication, as it includes instructions on how it should be used in an emergency.

All ADs are taken on all out of school visits.

The Allergy Safety Lead keeps a list of all medication expiry dates and reviewed monthly. Parents are contacted to replace when necessary.

8.2 Spare ADs and inhalers

The allergy safety lead is responsible for sourcing spare ADs and an emergency asthma reliver inhaler and ensuring they are stored according to the guidance.

Spare ADs will be stored alongside the pupil's ADs in the medical room.

Spare inhalers are stored in the medical room.

Mrs. N Thorne and Mrs. S Knott are responsible for:

- Checking monthly that spare ADs and the emergency asthma reliver inhaler are present and in date
- Obtaining replacement ADs when the expiry date is near

8.3 Disposal

ADs can only be used once. Once an AD has been used, it will be disposed of in line with the manufacturer's instructions, in a sharps bin for collection by the local council

8.4 Using spare ADs in an emergency situation without prior consent

The Human Medicines (Amendment) Regulations 2017 do not require consent to have been obtained for spare adrenaline devices to be used in an emergency.

The school will obtain advance consent from parents/carers or pupils for spare adrenaline devices to be used, so that in an emergency, consent can be assumed to be in place.

However, in an emergency situation, anyone may take reasonable action to save a life without checking whether prior consent has been given. This avoids potentially fatal delays in treatment.

8.5 Use of ADs off school premises

Staff will take ADs and administer to any pupils when at risk of anaphylaxis on school trips and off-site events

A spare AD is taken on all school trips for use in an emergency, with any pupil, under the guidance of a Paramedic/ 999 advice.

9. Serious incidents and ‘near misses’

A **serious incident** is any event relating directly to a medical condition (including allergy) in which a pupil, member of staff or visitor with a medical condition or allergy is harmed or is placed at an immediate and significant risk of harm, including situations requiring emergency medication, urgent clinical intervention or attendance by emergency services.

A **'near miss'** is an event relating directly to a medical condition (including allergy) that did not result in harm but had the clear potential to do so – for example, where an error, omission, or system failure could reasonably have led to a serious incident had circumstances been only slightly different.

9.1 Incident recording

The school will record serious incidents and ‘near misses’ relating to allergy safety as soon as is feasible. The incident will be recorded in the accident book, including the following information:

- Who was affected.
- What happened, when and where
- Why the incident occurred (as far as is known)
- How staff and pupils responded and what was done to support the individual
- Whether emergency services were called
- How the incident concluded

The school will approach serious incidents and 'near misses' in a 'no blame' spirit of seeking to learn lessons.

9.2 Incident reporting

The parents/carers of a pupil aged up to 16 should be notified of the incident or 'near miss' as soon as possible. The school will share the report with the pupil's parents, the pupil or the individual involved.

They will be given the opportunity to discuss what happened and to contribute their views to the consequent lessons learned review. The school will then confirm what we have learnt from the incident and outline any actions we are taking as a result.

In some cases, the impact of exposure to an allergen at school may be delayed and not recognised until the pupil is at home. This means that incident reporting is not limited to staff – the pupil, parents/carers or others (such as healthcare professionals) will need to report to the school if there has been an incident with a delayed reaction.

Staff will always share the incident report with Mrs. N Thorne. The allergy safety lead will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the pupil's IHP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident reoccurring.

The school will also share the report with other agencies in the following circumstances:

- With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalization. For example, where a pupil has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff. (how to make a RIDDOR report)

In the event that the incident or 'near miss' was related to the delivery of a care plan or action plan issued by a healthcare professional, the relevant healthcare professional will be notified.

10. Allergy awareness

10.1 Staff training

The school ensures that all staff expected to be present during times when pupils are scheduled to be on site receive allergy awareness training, through First Aid Training, at least every three years. New starters will be made aware of all pupil needs, procedures and the location of medication as part of their induction.

This includes permanent staff, temporary staff and any supply teachers. It does not include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad hoc maintenance personnel.

Allergy awareness training will ensure that all staff:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist
- Understand the difference between food allergy, coeliac disease and food intolerance
- Know where to find information on allergy triggers
- Can identify the range of symptoms of allergic reactions
- Understand and can recognise anaphylaxis
- Know how to respond in an emergency, including:
    - Calling emergency services and informing parents/carers
    - How to locate and administer emergency medication
    - How to use the medication/device in an emergency
- Understand the impact allergy can have on a pupil's wellbeing
- Understand the school's allergy safety policy
- Know how to check whether an individual is on the record of those with known allergy, and how to use an allergy or asthma action plan
- Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens
- Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or a 'near miss')

10.2 Awareness of allergy safety policy

This allergy safety policy will be published on the school's website and shared with parents/carers at the start of the school year.

All staff should be aware of and understand the policy as part of annual allergy awareness training.

11. Wellbeing and Inclusion

Butlers Court School recognises that allergies can have a significant impact on emotional wellbeing.
The school will:

- Promote an inclusive environment.
- Provide reassurance through effective safety arrangements.
- Encourage pupil involvement in decisions affecting them.
- Prevent discrimination.
- Address allergy-related anxiety.
- Promote awareness amongst staff and pupils.

Bullying

The school will not tolerate bullying associated with allergies including:

- Deliberate exposure to allergens.
- Threats involving allergens.
- Derogatory comments.
- Exclusion from activities.

Incidents will be managed in accordance with the Behaviour and Anti-Bullying Policies.

12. Information sharing

Information about an individual's health is considered special category data under UK GDPR. It will therefore be handled in line with our data protection policy.

13. Monitoring arrangements

The arrangements set out in this policy will be monitored by the Allergy Safety Lead.

The governing board will review and approve this policy annually, or more frequently if a serious incident or 'near miss' identifies an area for improvement.

14. Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy
- Supporting pupils with medical conditions policy
- First Aid Policy
- Data protection policy
- Behaviour policy
- Educational Visits Policy

- Further support can be provided by healthandsafety@buckinghamshire.gov.uk

Approved by: June Moon
Position: Deputy Headteacher

Date: September 2026
Review Date: September 2027

Appendix

1. Allergy management at before and after school care (Wrap Around Care 4 U)
2. Allergy management by Dolce, school dinner provider.

Appendix 1

www.wraparoundcare4u.com
office@wraparoundcare4u.com
karen@wraparoundcare4u.com

Dear Steve,

New Statutory Guidance under Benedict's Law

Rather than await all the information on how Benedict's Law impacts wraparound services at present and in the future, I thought I would pre-empt your questions and explain exactly what we currently have in place and what our plans are for the future.

Technically the advice doesn't currently apply to wraparound services or clubs operating on a school site although we would all want to ensure that a child or adult survives an anaphylactic incident. Legally, where we have a service level agreement, we can use the school's spare adrenaline auto injectors providing we have access (DfE via OOSA)

At present we have the following in place:

- Managers and at least 50% of the remaining team have 12-hour paediatric first aid that is fully compliant with anaphylaxis identification and administration of adrenaline devices.
- Any staff or child coming to WAC4U should always have their medication (2 adrenaline autoinjectors) with them and we will refuse them access if this is not the case. For information, parents' complete details of allergies in Magicbooking and provide consent. Occasionally they do not update this information, and we must chase them.
- All staff have L2 in Food handling and allergy awareness
- We have risk assessments for food handling and allergy management including remaining hyper vigilant regarding cross contamination

- We always use latex free gloves
- We have medical condition and allergy action plans for every child and adult that have been diagnosed with serious allergies and illnesses.
- Where a child or staff member has a new anaphylaxis reaction, we will call 999 and state anaphylaxis. The dispatcher will advise and we will follow their advice – it may be that we need to know where your spares are located and that these are readily available and not locked in the office.

Within the next 3 weeks we will have undertaken the following:

- All staff will have completed High Speed training on allergy and anaphylaxis
- Discussion with you as to whether we can share autoinjectors and an agreement on who pays for the cost of replacement (we would suggest if we used it, then we pay for it) and that the replacement is available within an appropriate period.
- Review of all Medical and Allergy action plans for correctness and completeness and cross reference these to your records to ensure that we all have the same information.

I hope that alleviates some concerns and possible requests for information. Our main concern will remain new cases of anaphylaxis and our ability to respond rapidly to a life-threatening situation. This is the main reason that we will be sourcing our own autoinjectors.

As we have an SLA with you it would be sensible to share spare autoinjectors and adhere to the child always having two autoinjectors with them at any point in time. We are happy to share costs for any additional installation works to make this happen.

Appendix 2

ALLERGEN INFORMATION AND COMMUNICATION

WHAT CAN GO WRONG

- **Incomplete, unverified or out of date pupil information is used**
- **The recipe, product, label or matrix does not match the food served**
- **A pupil or meal is not positively identified before handover**
- **An employee guesses, relies on memory or gives unsupported verbal advice**

If the pupil, declaration, approved meal, label or matrix cannot be confirmed, or anyone is unsure, stop service to that pupil and escalate to the Catering Manager and school allergy lead. Serve only when safety is confirmed through the approved process.

1.CONTROLLED ALLERGEN INFORMATION

- **Use only** the approved digital platform or controlled IFG record as the single source of truth.
- **Only approved** recipes and products may be used for pupils with food allergy.
- The current recipe, ingredient information, matrix and label must match the food actually prepared and served.
- **Never rely** on memory, screenshots, outdated printouts, informal notes or unverified school-system flags.
- Full ingredient and regulated-allergen information must be available for every item offered.

Never use substitute products for meals provided for allergen children.

2. DECLARTION,VERIFICATION AND CHANGES

- Parents/carers must complete the approved declaration, including all relevant allergens or dietary conditions, requested evidence and a current photograph.
- **Parents must submit meal orders by 8.45am on the day**
  Until the Allergen Declaration has been verified and the most appropriate menu assigned to the child, they must remain on the Safe Meal option.
- Declarations must be verified by the Nutrition Team.
- The site must not make a local suitability decision or change a pupil's allergen record outside the approved process.
- New information or changes must be submitted through the declaration process. The existing approved arrangement remains until the change is verified, unless provision is suspended for safety.
- Incomplete, conflicting, expired or urgent information must be escalated .
- **There must be an agreed Safe Meal for pupils with allergies**

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SAFE MEAL PROVISION

A suitable **Safe Meal** option must be identified and agreed in advance for every pupil with a food allergy. This provides a safe default meal where the pupil's usual meal cannot be provided, including when the parent or carer has not submitted the meal order by the 08.45 am deadline.

The Safe Meal will typically be a jacket potato with an approved topping that is suitable for the pupil's declared allergens and dietary requirements.. The Safe Meal is agreed with the parent or carer.

The Safe Meal must only be provided following confirmation against the pupil's verified allergen information and approved menu arrangements. Staff must never guess or make an unapproved substitution.

3. ONLINE AND MANUAL ALLERGEN IDENTIFICATION

- Approved recipes, ingredients and allergen information/matrices are supplied to the kitchen team by the Food Team via email and Sharepoint. Exploded Allergen matrices must be printed and available at the service point. Chefs must follow the approved recipe exactly.

Parents order food through the Primary Online Meal Ordering Service. They get full visibility of all ingredients within the recipe allowing them to make safe and informed menu choices for their child.

4. COMMUNICATION TO STAFF AND CUSTOMERS

- Display the statutory allergy/intolerance notice and make current written allergen and full ingredient information available at the point of choice or service.
- Communicate material menu, recipe, product or process changes before implementation and repeat the Daily Allergen Briefing whenever information changes.
- The Allergen Buddy helps pupils locate and understand information but does not replace the written record.
- A vegan or vegetarian description is not an allergen-safety statement. Do not use broader suitability or 'free from' claims unless specifically approved.

ALLERGEN INFORMATION AND COMMUNICATION

WHAT CAN GO WRONG

- **A child may suffer on a severe allergic reaction (Anaphyalxis)**
- **In most serious cases, the reaction could be fatal**
- **Incorrect child identification**

Every allergen meal should be checked using the child's name, dietary requirement, allergen information and meal label before it is served. If in doubt, stop and check—never guess.

5 CUSTOMER ENQUIRIES

- **Refer** the customer to the Catering Manager, Chef Manager, Executive Chef or designated Allergen Buddy.
- **Show** the customer the current written allergen and full ingredient information. Verbal information must always be supported by the written record.
- **Never** answer from memory, guess, improvise or reassure a customer without verified information.
- If suitability cannot be confirmed, explain that the item cannot be confirmed as suitable and do not serve it.
- If an enquiry or complaint suggests an allergen control failure, escalate it as a potential incident until triaged by the Safety Team.

6. DAILY PREPARATION AND SERVICE CONTROLS

- Before every service, complete and record the Daily Allergen Briefing: expected pupils and photographs; approved meals; changes or unavailable items; the person in charge of service and Allergen Buddy; meal/information location; two identification checks; handover method; and emergency arrangements.
- Prepare allergen-controlled meals to the approved recipe in a controlled area/time using clean hands, equipment and utensils. Protect, seal and label each meal and complete the required independent check.
- Primary: prioritise and pre-plate the full meal, side and dessert; keep protected and labelled.
- Secondary: provide clear written allergen and full ingredient information at the point of choice; use approved labels, tickets or matrices and provide Allergen Buddy support.
- Use at least two robust checks to confirm both pupil identity and the approved meal. Handover must be direct; never rely on visual recognition alone.

7 LABELS, CHECKS AND RECORDS

- PPDS food must show the food name, full ingredients list and emphasised regulated allergens.
- An individually prepared allergen-controlled meal must be protected and clearly labelled with the required pupil, school, meal and service details.
- A missing, damaged, illegible or mismatched label invalidates the meal. Do not serve; correct it through the authorised verification process and report the near miss in Evotix.
- Record briefings, matrices, labels, preparation/service checks, changes and corrective actions must be recorded in the **Impact Safety Logbook.**

8. INCIDENTS, NEAR MISSES AND COMPETENCE

- Report every allergen reaction, incorrect meal, inaccurate label or information event, control failure and near miss immediately. This includes delayed symptoms and parent-reported events.
- Stop the affected service, protect the pupil, preserve food, packaging, labels, recipes, utensils and relevant records, and notify the Catering Manager, Operations Manager, Safety Business Partner and school allergy lead.
- Record the event promptly on the **Food Safety Incident Form** on **Evotix** and the required site/school records. Do not speculate about cause or liability.
- **Staff must complete required training before unsupervised allergen duties. Annual training does not replace the recorded Daily Allergen Briefing or role-specific competence checks.**

IFG use the menu management system, Fourth. This system is connected to suppliers and is refreshed every 24 hours to ensure all allergen information is accurate.

IMPACT FOOD GROUP

ALLERGEN SAFE SERVICE

Name - Pedal - Serve

Every child deserves to eat safely and confidently.

1. BEFORE SERVICE: PREPARE

PRE-PLATE

All elements of the allergen meal must be pre-plated before service, using clean equipment.

SEAL

Seal every item to protect it from cross-contact.

LABEL

Label every item with the pupil's:

Full name
Year group
Allergens
Meal being served
Signature of who plated it

Every allergen meal: Main meal + Side salad + Dessert

2. AT SERVICE

1 NAME

The pupil selects their name on SchoolGrid. **Double check the name with the pupil.** Pupils with food allergens will also have a school identifier: a band or lanyard, or a member of the school team will present them to you.

2 PEDAL

Only press the pedal **once the name is confirmed.**

3 SERVE

Serve the sealed, labelled meal to **that pupil.**

NAME DOESN'T MATCH? DO NOT SERVE.
Can't find their name or not sure? Escalate to the Allergy Lead.

Never skip a step, even when it's busy.