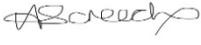




huish
NURSERIES

Allergies and Allergic Reactions Policy

This policy was adopted on	Signed on behalf of Huish Nurseries :	Date for review
January 2025	Heidi Screech Director of Nursery 	January 2026

Contents

Statement.....	p3
Our procedures.....	p3
Food Information Regulations (FIR) 2014.....	p.3
Transporting children to hospital.....	p.4

Statement

At Huish Nurseries we are aware that children may have or develop an allergy resulting in an allergic reaction.

We aim to ensure allergic reactions are minimised or, where possible, prevented and that staff are fully aware of how to support a child who may be having an allergic reaction.

Our procedures

- All staff are made aware of the signs and symptoms of a possible allergic reaction in case of an unknown or first reaction in a child. These may include a rash or hives, nausea, stomach pain, diarrhoea, itchy skin, runny eyes, shortness of breath, chest pain, swelling of the mouth and/or tongue, swelling of the airways to the lungs, wheezing and anaphylaxis
- We ask parents to share all information about allergic reactions and allergies on their child's registration form and to inform staff of any allergies discovered after registration
- We share all information with all staff and keep an allergy register in **Family**
- Where a child has a known allergy, the nursery manager will carry out a full allergy risk assessment with the parent prior to the child starting the nursery and/or following notification of a known allergy and this assessment is shared with all staff. This may involve displaying photos of the children along with their known allergies in the kitchen or nursery rooms, where applicable
- All food prepared for a child with a specific allergy is prepared in an area where there is no chance of contamination and served on equipment that has not been in contact with this specific food type, e.g. nuts, gluten
- The manager and parents work together to ensure a child with specific food allergies receives no food at nursery that may harm them. This may include designing an appropriate menu or substituting specific meals on the current nursery menu
- Seating is monitored for children with allergies. Where deemed appropriate, staff will sit with children who have allergies and, where appropriate, staff will discuss food allergies with the children and the potential risks
- If a child has an allergic reaction to food, a bee or wasp sting, plant etc. a paediatric first aid trained member of staff will act quickly and administer the appropriate treatment, where necessary. We will inform parents and record the information in the incident book and on the allergy register
- If an allergic reaction requires specialist treatment, e.g. an EpiPen, then at least two members of staff working directly with the child and the manager will receive specific medical training to be able to administer the treatment to each individual child.

Food Information Regulations (FIR) 2014

We incorporate additional procedures in line with the FIR, including displaying our weekly menus on the parent information board, website or online system identifying any of the 14 allergens that are used as ingredients in any of our dishes.

In the event of a serious allergic reaction and a child needing transporting to hospital

The nursery manager or staff member will:

- Call for an ambulance immediately if the allergic reaction is severe. Staff will not attempt to transport the sick child in their own vehicle
- Ensure someone contacts the parents whilst waiting for the ambulance and arrange to meet them at the hospital
- Arrange for the most appropriate member of staff to accompany the child, taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Redeploy staff if necessary to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together
- Inform a member of the management team immediately
- Remain calm at all times and continue to comfort and reassure the child experiencing an allergic reaction. Children who witness the incident may also be well affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the incident
- Where a serious incident occurs and a child requires hospital treatment, Ofsted will be informed.

**If a child has an accident that may require hospital treatment but not an ambulance and you choose to transport children within staff vehicles Citation advise you consider the following in your policy:*

- Request permission from parents
- Maintain ratio requirements of the setting
- Consider the age and height of the child, in regards to whether they will need a car seat. Further guidance can be found at www.childcarseats.org.uk/types-of-seat/
- There are some exceptions for needing a child seat depending on the age of the child. Further guidance can be found at www.childcarseats.org.uk/the-law/cars-taxis-private-hire-vehicles-vans-and-goods-vehicles/#under-three
- When fitting the car seat, check the individual has training in carrying this out
- Check this transport is covered under business insurance, by calling your insurance company, or check if the staff member has business insurance on their vehicle
- Ensure the child is effectively safeguarded, e.g. a designated member of staff appointed to plan and provide oversight of all transporting arrangements and respond to any difficulties that may arise
- Wherever possible and practicable it is advisable that transport is undertaken other than in private vehicles, with at least one adult additional to the driver acting as an escort. Staff should ensure that their behaviour is safe and that the transport arrangements and the vehicle meet all legal requirements. They should ensure that the vehicle is roadworthy and appropriately insured and that the maximum capacity is not exceeded

Plan emergency procedures, e.g. what will happen if the child's health begins to deteriorate during the journey.

This policy is updated at least annually in consultation with staff and parents and/or after a serious incident.

