Ashbridge
INDEPENDENT SCHOOL & NURSERIES

DIETARY AND ALLERGY SAFETY POLICY (NURSERY)

(Inclusive of bottle-feeding and weaning procedures)

Approved by: SLT

Approved date: September 2026

To be reviewed by: SLT

Review date: September 2027

Scope: Ashbridge Nursery Hutton, Ashbridge-on-Ribble Nursery, Ashbridge Nursery at Maxy Farm, The Fledglings Nursery

This policy explains how we prepare and serve food safely across the nursery. It sets out how we identify and manage dietary needs and allergies and ensure high quality, safe mealtimes. We work in partnership with families and health professionals, and all staff are trained to follow these procedures consistently.

Identifying Allergies and Dietary Requirements

At enrolment:

- Parents/carers complete the enrolment form, indicating any dietary need or food allergy.
- This information is recorded on Connect.
- Where an allergy is identified, an allergy questionnaire is sent to the parent/carer to obtain further information.
- A follow-up meeting may be required between parents and nursery manager/SLT to fully understand the child's needs and agree how they will be managed.
- There may be some instances when risks can not be managed safely, e.g. some airborne or contact-triggered allergies. In this case, a place may not be offered.

Care planning:

- Parents/carers are asked to provide relevant medical confirmation of an allergy or medical dietary requirement from an appropriate healthcare professional, such as a doctor or dietitian.
- If an NHS care plan exists, we ask parents to provide us with a copy.
- An internal care plan is also agreed, written and signed by parents.
- Any necessary medication, staff training and individual risk-control measures are agreed and implemented.
- The care plan is implemented by the team, and additional training may be arranged if required.

Changes & reviews:

- Parents must inform us in writing of any changes (severity of symptoms, triggers, treatment etc).
- The care plan is reviewed and signed every 6 months, or before then if there are any changes.

Dietary Requests Without Medical Evidence

We will make appropriate arrangements for non-medical dietary requirements, including religious, cultural and ethical diets such as vegetarian diets.

Where a parent/carer requests a dietary restriction on medical grounds, appropriate medical confirmation will normally be required so that the we can accurately understand the child's needs and provide a safe and nutritionally appropriate diet.

Any parent-requested medical dietary change without supporting medical advice or evidence must be approved by SLT. Where appropriate, a temporary dietary arrangement may be agreed while parents/carers obtain the necessary documentation.

This does not prevent nursery from taking immediate precautionary action where a new allergy is suspected or where there is an immediate safety concern.

Medication

- Where medication is required (e.g., antihistamine/AAI), parents provide in-date, labelled medication and instructions (in its original container where applicable).
- We run regular expiry checks; parents are also responsible for monitoring expiry dates and replacing medication before it expires.
- The nursery management team oversees handover and review at transitions (room moves).
- Emergency allergy medication is readily accessible at all times.

Communicating Dietary Information

Accurate communication between parents/carers, practitioners, leadership and the catering team is an essential part of our allergy controls.

- All known allergies and dietary requirements are recorded on Connect/iConnect.
- The kitchen team receives a regularly updated dietary sheet identifying children with allergies and dietary requirements.
- The catering team checks the current dietary list, relevant ingredients and allergen information each day before food is prepared and served.
- Any ingredient substitutions or menu changes must be checked against the child's dietary requirements before service.
- Changes notified by parents/carers are updated on nursery systems and communicated promptly to relevant staff and the catering team.

If there is any discrepancy or uncertainty about a child's dietary information, food must not be served until the information has been checked and confirmed.

Preparing and Serving Food

Food for pupils with allergies and dietary requirements is prepared and identified in the kitchen in accordance with the school's food-safety and allergen procedures. Appropriate controls are used to minimise allergen cross-contact during storage,

preparation, cooking and service. We are a nut free nursery and children and parents/carers are not permitted to bring any food or drinks into nursery.

Mealtime Safety and Supervision

Mealtimes are carefully managed to ensure the safety and wellbeing of every child.

During all meals:

- Children must remain within sight and hearing of staff at all times.
- Appropriate staff-to-child ratios must be maintained.
- Practitioners must remain fully focused on the children, with no distractions.
- Practitioners should be positioned appropriately amongst the children and, wherever possible, sit facing them to monitor eating closely, identify signs of choking and prevent food sharing.
- Children will be supported to develop safe eating habits, including sitting appropriately while eating and chewing food thoroughly.
- All practitioners are trained in paediatric first aid.
- Any choking incident or near miss must be reported immediately to the Manager and recorded on CPOMS.

Dietary Identification

Each child has an individual placemat displaying their name, photograph and dietary requirements.

Children are identified using the following system:

- **Red** – Medical dietary requirement (e.g. allergy or intolerance)
- **Blue** – Non medical dietary requirement (e.g. vegetarian)
- **Green** – no dietary requirements

Children identified as red or blue also wear a corresponding wristband.

Safety Server

At every mealtime, an identified Safety Server must be appointed and wear a red tabard. This will generally be the Room Leader or, in their absence, the next most senior member of staff.

The Safety Server has overall responsibility for health and safety throughout the meal and must ensure that practitioners remain focused and children are appropriately supervised.

The Safety Server is responsible for:

- Ensuring children wash their hands before eating.
- Checking each child is seated at their correct placemat.
- Checking that red and blue children are wearing the correct wristband.

- Cross-checking the dietary list before every meal.
- Ensuring meals and drinks are served in the correct order: red first, followed by blue, then green.
- Ensuring food is prepared and served in an appropriate size, shape and texture to minimise choking risks.
- Ensuring practitioners are appropriately positioned and spread amongst the children.
- Ensuring practitioners are actively supervising children and, wherever possible, facing them while they eat.
- Monitoring throughout the meal to prevent food sharing and reduce the risk of allergic reactions.

Red plate system - medical dietary requirements

Pupils with a food allergy, food intolerance, coeliac disease or other medically identified dietary requirement are served using red plates/bowls/cups.

- The meal is prepared in accordance with the pupil's recorded dietary requirements.
- It is clearly identified and labelled in the kitchen with the pupil's name and dietary requirement.
- It is checked against the current dietary information before leaving the kitchen.
- The member of staff serving the meal confirms that the name and dietary requirement correspond with the correct child before the food is given to them.

Blue plate system - non-medical dietary requirements

Pupils with a non-medical dietary requirement, for example a vegetarian diet, wear a blue wristband and are served using a blue plate or bowl.

- The meal is prepared in accordance with the pupil's recorded dietary requirements.
- It is clearly identified and labelled in the kitchen with the pupil's name and dietary requirement.
- It is checked against the current dietary information before leaving the kitchen.
- The member of staff serving the meal confirms that the name and dietary requirement correspond with the correct child before the food is given to them.

Quality practice at mealtimes:

Mealtimes are an important time for children to develop a positive and healthy approach to food and eating. They are also important times for developing children’s social skills and independence.

- Practitioners should always sit down at the table with the children, rather than standing up. children learn good eating habits and appropriate manners from the practitioners.

- Mealtime should never be rushed; it is a social occasion which should be enjoyed.
- Practitioners should explain to the children what they are eating for each meal. It also helps to explain to children the nutritional benefit of certain foods, for example:
    - “Milk helps make our bones and teeth strong’’
    - “Fish helps our brains grow so we can learn lots of things”
    - “Chicken helps our muscles grow so we can be strong”
    - “Pasta gives us lots of energy to play”
- All food should be talked about in a positive manner, no foods should be described as ‘bad’, and foods should not be described as ‘unhealthy’
- Practitioners should always encourage children to eat and try new foods, however children should never be forced to eat food they do not want to.
- Children are naturally very good at deciding when they are full or have eaten enough, so children should never be encouraged to finish a meal if they do not want to, and children should not be praised for finishing their meals. This can lead to unhealthy relationships with food. However, children should always be offered further helpings if they would like more.
- Fruit and yoghurt should always be offered to children regardless of whether they have eaten their main meal or not.

Milk and bottle-feeding policy

We work in partnership with families to meet individual feeding needs and support both breastfeeding and formula feeding, including weaning processes.

A designated area is available for mothers who wish to breastfeed or express milk.

Feeding Guidelines:

- Parents must provide sterilised, clearly named bottles daily.
- Formula milk must be provided in named containers and bottles are made fresh as required.
- Recently boiled water (70°C or above) is used to make up formula.
- Bottles are cooled to body temperature and tested before feeding.
- Parents may provide sealed, premade formula in cartons. These are warmed using a bottle warmer or jug of warm water.
- Any unfinished milk is discarded after one hour. Bottles and teats are cleaned and returned to parents.
- Key persons feed their assigned babies whenever possible, offering comfort, reassurance, and eye contact.

Expressed Breast Milk:

All expressed breast milk brought into nursery must:

- Be provided in a clean, suitable, sealed container or breast milk storage bag.

- Be clearly labelled with the child's full name and the date the milk was expressed.
- Be handed directly to a member of staff on arrival and stored immediately in the fridge.
- Chilled milk must be used within 3 days.
- Frozen milk must have been frozen for no longer than 6 months and should be defrosted overnight at home.
- Breast milk is warmed as per NHS guidelines.

Due to the individual nature of expressed breast milk, robust procedures must be followed to ensure that breast milk is stored, prepared and administered safely.

A 'Breast Milk Administration Form' will be completed for children receiving expressed breast milk at nursery. Before every breast milk feed, a two-person identity check must be undertaken. The practitioner administering the feed and a second practitioner must independently check:

- The identity of the child.
- The milk container is clearly labelled with the name and date of expression.
- The child's full name against the name on the breast milk container.
- The child's full name against the name on the bottle.
- That the milk has been stored and prepared appropriately.

Weaning and Introduction of Solid Foods:

Weaning will be managed in partnership with parents/carers and in accordance with current EYFS and NHS guidance, taking account of each child's age, developmental readiness, and dietary requirements.

Solid foods should normally be introduced from around 6 months, alongside breast milk or infant formula. Babies should demonstrate developmental readiness for solid foods. The NHS identifies three signs which should be present together:

- The baby can remain in a sitting position and hold their head steady.
- The baby can coordinate their eyes, hands and mouth to look at food, pick it up and bring it to their mouth.
- The baby can swallow food rather than automatically pushing it back out.

Parents/carers should inform the nursery when weaning has commenced and provide information regarding foods, textures and allergens already introduced, together with any feeding difficulties or professional advice.

Where a baby was born prematurely, has a medical condition, swallowing or feeding difficulties, developmental needs, or has been advised to begin weaning differently by a healthcare professional, an individual feeding plan will be agreed with parents/carers and relevant healthcare professionals as appropriate.

Children will be supported to progress through appropriate textures, including mashed, lumpy and finger foods, according to their developmental readiness. Food will be prepared to an appropriate size, shape and texture to minimise choking risk.

Common allergens may be introduced from around 6 months, one at a time and in small amounts. Parents must inform the nursery of known or suspected allergies or previous reactions.

Breast milk or first infant formula will remain the child's main drink throughout the first year of life. From around 6 months, children may be offered sips of water with meals from an appropriate open or free-flow cup.

Cow's milk may be used in cooking or mixed with food from around 6 months but must not be given as a main drink before 12 months of age.

During all meals and snacks:

- Children will be safely seated upright and appropriately positioned.
- Children will be within sight and hearing of staff at all times and never left alone while eating.
- Food will be prepared appropriately to minimise choking risks.