

ACTIVITIES 4 KIDS: NO NUTS POLICY



OCTOBER 2026

Briony Jacobs & Daisy Jacobs-Milburn

ACTIVITIES 4 KIDS | 215 ELM DRIVE, HOVE, BN3 7JD

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NO NUTS & FOOD ALLERGY SAFETY POLICY

215 Elm Drive, Hove, BN3 7JD

Updated: 18 October 2026 | Policy owner: Briony Jacobs | Review due: October 2027

Important: This policy supports safe practice but cannot guarantee that the premises or every item of food is completely free from allergens. It must be read alongside each child's individual allergy/medical information, medication instructions, first-aid procedures, food safety procedures and safeguarding arrangements.

1. Purpose and scope

Activities 4 Kids is committed to protecting children from avoidable exposure to peanuts and tree nuts and to responding promptly to suspected allergic reactions. This policy applies to all staff, managers, volunteers, students, contractors, parents/carers and children while attending Activities 4 Kids, including trips and off-site activities.

We operate a no-nuts rule as a risk-reduction measure. This is not a substitute for individual allergy planning, careful food handling, staff awareness or emergency response. A child may have an allergy to foods other than nuts; those allergies must also be managed.

2. What the no-nuts rule means

- Peanuts and tree nuts, and foods intentionally containing them, must not be brought onto or served at Activities 4 Kids. Examples include peanut butter, nut spreads, mixed nuts, nut bars, nut toppings, nut-filled chocolates and nut-based sauces.
- As a precautionary setting rule, food labelled "may contain" or "not suitable for someone with a nut allergy" must not be brought in or served. Staff must check the actual packaging and ingredients; do not assume a product is suitable because it was safe previously.
- Do not rely on brand names, appearance, online lists or memory. Recipes, suppliers and manufacturing processes can change. Check labels each time.
- The rule covers food brought from home, food provided by the setting, party food, cooking/baking activities, rewards, gifts and food supplied on trips.

For this policy, "tree nuts" includes the regulated tree nuts such as almond, hazelnut, walnut, cashew, pecan, Brazil nut, pistachio and macadamia. Peanuts are legumes rather than tree nuts, but are included in this policy. Other foods (including sesame, coconut and pine nuts) may also cause allergies and must be managed according to the child's individual allergy plan.

3. Limits of a no-nuts policy

A no-nuts rule reduces risk but cannot remove every possibility of accidental exposure. Activities 4 Kids does not describe the setting as guaranteed "allergen-free". We will use an allergy-aware approach: identify known allergies, assess risks, reduce exposure, prevent cross-contact as far as reasonably practicable, and maintain clear emergency arrangements. Families must still tell us about diagnosed or suspected allergies and provide up-to-date plans and medication.

4. Before a child attends

- Parents/carers must disclose known allergies, previous severe reactions, relevant symptoms, prescribed medication and any advice from the child's healthcare professional before the child attends, and update us promptly if anything changes.
- The manager will obtain and review an individual allergy/medical plan where appropriate, including written instructions for recognising a reaction, emergency contacts and the use of prescribed adrenaline auto-injectors (AAIs). Where the child has an Individual Healthcare Plan from school, parents/carers should share it, but Activities 4 Kids will check that it is suitable for our setting and activities.
- Staff must know which children have allergies, the child's known triggers, signs of a reaction, the location of medication and the action to take. Information must be accessible to staff who need it while respecting confidentiality.
- Agree with parents/carers who supplies medication, how it will be transported and stored, how it remains accessible during activities and trips, and what happens if medication is missing, expired or not supplied. Escalate unresolved safety concerns to the manager before the child attends.

5. Food, labels and cross-contact

- Staff must check ingredient and precautionary allergen information before providing food. If information is missing, unclear or the product/recipe has changed, do not serve it to a child with a relevant allergy; choose a verified alternative and speak to the manager.
- Keep packaging until children have finished eating so ingredients can be checked if needed. Never remove labels before checking them.
- Wash hands with soap and water before and after food handling and eating. Hand sanitiser alone is not a substitute for handwashing for removing food allergens.
- Clean tables, preparation surfaces, utensils and equipment before food preparation and after eating. Use clean equipment and separate food/utensils where needed to prevent cross-contact. Do not share food, drinks, cutlery or containers.
- Children must eat in supervised areas. Staff should discourage food swapping and check lunchboxes where there is a reasonable concern, sensitively and respectfully.
- For cooking, baking, food play, parties and special events, staff must assess ingredients and cross-contact risks in advance and communicate clear instructions to families. Do not use loose nuts in activities.
- On outings, the responsible staff member must carry the child's emergency information and ensure prescribed medication is immediately accessible, not locked away or left on transport.

6. Staff training and responsibilities

- The manager is responsible for implementing this policy, ensuring allergy information is current, arranging staff briefings/training, checking that emergency medication arrangements are workable and reviewing incidents.
- All staff must read and follow this policy, know the children in their care who have allergies, understand how to summon emergency help and know where medication and emergency plans are kept.
- Staff expected to administer an AAI must receive appropriate instruction and follow the child's written plan and the device instructions. Staff must not assume that only one trained person will be present; cover arrangements are needed for breaks, absence and trips.
- The manager will keep a record of staff training/briefings and check that new, temporary and agency staff receive the information they need before supervising children.

7. Signs of an allergic reaction and emergency action

Allergic reactions can develop quickly and may be life-threatening. Symptoms can include hives or itching, swelling of lips/tongue/throat, coughing, wheezing, difficulty breathing, hoarse voice, dizziness, collapse, or sudden marked distress. Symptoms vary; do not wait for every symptom to appear.

1. Stop the activity and assess the child immediately. Follow the child's allergy/emergency plan.
2. If anaphylaxis is suspected, call 999 immediately and state that anaphylaxis is suspected. Do not delay calling for an ambulance while looking for medication or waiting to see whether symptoms improve.
3. Administer the child's prescribed adrenaline auto-injector promptly in accordance with their plan, the device instructions and staff training. If symptoms persist and a second prescribed device is available, follow the emergency plan/999 call-handler advice regarding a further dose.
4. Keep the child under close observation. If breathing is difficult, allow them to sit in a position that helps breathing; otherwise lay them flat and do not allow them to stand or walk. If unconscious but breathing normally, place them in the recovery position. Follow the 999 call-handler's instructions.
5. Send a staff member to meet the ambulance and bring the child's medication and written plan. Do not leave the child alone.
6. Inform the parent/carer as soon as practicable without delaying emergency care. Record the incident, medication and timings, actions taken, advice received and outcome. Review the event and any near miss, and update risk controls.

If a reaction is suspected but does not appear severe, seek urgent medical advice and follow the child's plan. If symptoms are progressing or there is any concern about anaphylaxis, call 999. Staff must not attempt to diagnose or dismiss symptoms.

8. Medication storage and checks

- Prescribed AAls and other emergency medicines must be clearly labelled for the child, in date, protected from extremes of temperature and stored securely but readily accessible to authorised staff in an emergency.
- Medication must accompany the child on trips and outdoor activities. A designated staff member must confirm it is present before leaving and returning.
- Parents/carers are responsible for providing replacement medication before expiry and notifying the setting of changes to prescriptions. Staff must tell the manager immediately if medication is absent, damaged or out of date.
- Only use medication in line with the child's written instructions and applicable consent/medication procedures. Record administration promptly.

9. If nuts or unsuitable food are found

- Do not allow the food to be eaten. Calmly remove it from the child's reach, avoid unnecessary handling, seal or dispose of it safely and clean any affected surfaces.
- Inform the manager and parent/carer as appropriate. If exposure may have occurred, monitor the child and follow their allergy plan; seek emergency help where indicated.
- Record significant breaches, possible exposure and near misses. Use the record to review how the food entered the setting and how recurrence can be prevented. Do not shame or punish a child for a parent/carer's mistake.

10. Communication with families and inclusion

Parents/carers will be given this policy and reminded not to bring nuts or foods with precautionary nut warnings. Families should contact the manager if they are unsure about a product. We will work with families to make reasonable, practical arrangements so children with allergies can participate safely in meals, celebrations, cooking and trips. We will not promise that risk can be eliminated entirely.

11. Records, incidents and review

- Maintain current allergy/medical information, consent and care plans, medication records, staff training records, risk assessments and incident/near-miss records in line with the setting's record-keeping and confidentiality procedures.
- The manager will review this policy at least annually and sooner after a serious reaction, near miss, change in guidance/law, change in the service or a child's needs. Staff and parent/carer feedback will inform reviews.
- This policy should be read with the setting's safeguarding, first aid, medication, health and safety, food safety, outings and complaints procedures.

12. Legal and guidance framework

This policy is intended to support compliance with applicable requirements and good practice. The precise statutory duties depend on Activities 4 Kids' registration, the ages of children cared for and whether food is supplied or handled as a food business. The manager must check the version that applies to the service and seek advice from Ofsted/local authority/environmental health where needed.

- Early Years Foundation Stage (EYFS) statutory framework, applicable version for the provider type (current framework effective 1 September 2026, where the provision is within scope).
- Food Safety Act 1990 and applicable food hygiene and allergen-information requirements, including the Food Information Regulations 2014 where relevant.
- Food Standards Agency guidance: Allergen guidance for food businesses; precautionary allergen labelling; and food allergen labelling and information requirements technical guidance.
- Department for Education, Allergy safety in schools statutory guidance (July 2026). This is statutory for the school categories specified in that guidance; it is useful good-practice reference for other childcare settings but does not automatically apply as a statutory duty to every out-of-school provider.
- Children Act 1989 and Children Act 2004, where relevant to the setting's safeguarding duties.

The Children and Families Act 2014 and Keeping Children Safe in Education are not listed here as universal legal duties for every childcare provider; they apply in their relevant contexts. Activities 4 Kids should not describe this policy as "Ofsted approved". Ofsted inspects against the requirements applicable to the service; it does not approve individual policies.

13. Policy control

Policy owner: Briony Jacobs, Activities 4 Kids

Responsible manager for implementation: Setting manager / designated lead (confirm current postholder)

Approved by: ____ Briony Jacobs _____

Approval date: ____ 15th October 2026 _____

Version: 4 (updated October 2026)

Next review: October 2027, or earlier if guidance, law, service arrangements or children's needs change.

Official sources checked

- EYFS statutory framework (updated 1 September 2026): <https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2>
- Allergy safety in schools (published 6 July 2026): <https://www.gov.uk/government/publications/allergy-safety-in-schools>
- School food standards: allergy guide (published 14 September 2026): <https://www.gov.uk/government/publications/school-food-standards-allergy-guide/school-food-standards-allergy-guide>
- Food Standards Agency, allergen guidance for food businesses (updated 17 July 2026): <https://www.gov.uk/government/publications/allergen-guidance-for-food-businesses>
- Food Standards Agency, precautionary allergen labelling: <https://www.gov.uk/government/publications/precautionary-allergen-labelling>

Staff and families should refer to current official guidance and the child's own medical plan. In an emergency, call 999.