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Abbots Farm Preschool

Safer Eating Policy

September 2025

Review by September 2026

Contents:

- [1. Purpose](#)
- [2. Key Principles](#)
- [3. Supervision During Snack and Mealtimes](#)
- [4. Dietary Requirements and Allergy Management](#)
- [5. Allergy Action Plans](#)
- [6. Food Checking Procedures](#)
- [7. Food Preparation and Choking Prevention](#)
- [8. Staff Training](#)
- [9. Communication with Parents](#)
- [10. Record Keeping](#)
- [11. Monitoring and review](#)

Appendices:

[Appendix A.](#) - Paediatric First Aid trained staff 2025-26

[Appendix B.](#) - Food hygiene trained staff 2025-26

[Appendix C.](#) – Safer Eating Questionnaire

Signed by:



Headteacher

Date: 16/9/25



Chair of governors

Date: 16/9/25

1. Purpose

To ensure the safety, health, and well-being of all children during snack and mealtimes in line with the updated EYFS 2025 safer eating requirements.

2. Key Principles

- To promote safe eating habits and reduce the risk of choking.
- Ensure all dietary and allergy needs are met.
- Maintain high standards of hygiene and supervision.
- Foster a calm, inclusive and supportive eating environment.

3. Supervision During Snack and Mealtimes

- Children must be within sight and hearing of staff at all times while eating.
- Children must remain seated whilst eating.
- Children must not swap/share food.
- A paediatric first aid (PFA) trained staff member must be present in the room or hall during all meals and snacks.
- Reception children will have their morning snack in the classroom with at least one TA for each class present. All Reception TA's are PFA trained. In the unlikely event of these TA's being absent another PFA trained member of staff will supervise snack. Please see appendix a.
- Pre school children will have their snack in the room at the snack table with at least one member of staff present. In the unlikely event of these TA's being absent another PFA trained member of staff will supervise snack. Please see appendix a.
- Pre school children will sit on the two circular tables at lunch time with a PFA trained member of staff sat facing them at each table to monitor for choking, allergic reactions, and food swapping.
- Reception children will sit on allocated tables at lunchtime and PFA trained MDS's will monitor children closely for choking, allergic reactions, and food swapping; but not sit with them. If parents have highlighted that their child struggles to chew/swallow or frequently over fills their mouth then they will sit with a PFA trained member of staff.

4. Dietary Requirements and Allergy Management

Allergy and dietary information must be collected before admission and reviewed regularly.

This information must be:

- Shared with class teachers, TA's, MDS, Bug club staff and catering staff in a font size that is legible
- Allergies & intolerance must be documented on an Allergy Action plan
- Reviewed and updated regularly, especially when introducing new foods.

5. Allergy Action Plans

- For children with allergies, an Allergy Action Plan must be created in consultation with parents and healthcare professionals prior to them staying at school for mealtimes.
- Plans must include:
 - Symptoms of allergic reactions and anaphylaxis.
 - Emergency procedures and medication (e.g., EpiPen).
- All staff must be trained to recognize and respond to allergic reactions.

6. Food Checking Procedures

- A nominated staff member (ideally the child's key person) must check all food and drink before it is served to ensure it is safe for the child in the classroom.
- At lunchtime preschool staff or reception MDS must check all food and drink before it is served.
- In the absence of the key person, the class teacher will designate an alternative who will be informed and responsible.
- Coloured bands are used to identify children with dietary needs.

7. Food Preparation and Choking Prevention

Food must be:

- Cut into age-appropriate sizes.
Pre school snacks will be prepared (see chopping fruit poster) in the pre school room by a member of the pre school team who has food hygiene certificate (See appendix b).

Reception snacks will be prepared at 5.30pm the previous day by a staff member in Bug Club who has food hygiene certificate (See appendix b). These will be stored in airtight containers in the Bug Club fridge and collected by a member of the Reception team.

- Softened or mashed where necessary.
- Free from known choking hazards (e.g., whole grapes, hard raw vegetables).
- Children must be seated in chairs appropriate to their size.
- The eating environment should be calm and free from distractions.

8. Staff Training

All staff must:

- Be trained in paediatric first aid.
- Complete Level 2 Allergy Awareness training.
- Understand the signs of choking and allergic reactions.
- Know how to implement emergency procedures.

9. Communication with Parents

- Regular updates must be sought from parents regarding any changes in dietary needs.

- Termly reviews of dietary information should be scheduled for any child with known allergies or intolerances.
- Parents must be consulted before introducing new foods.
- Parents must be informed of any incident/concerns,

10. Record Keeping

- Maintain up-to-date records of:
- Dietary requirements and allergies.
- Allergy action plans.
- Staff training certifications.
- Food checks and incidents (if any).

11. Monitoring and review

This policy will be reviewed **annually** by the headteacher, EYFS Lead and the governing body, who will make any changes necessary and communicate these to all members of staff.

The next scheduled review date is **September 2026**.

Appendix A.

Paediatric First Aid trained staff 2025-26

- Jenna Hetherington (pre sch)
- Sue Purcell (pre sch pm only)
- Debbie Davies (pre sch am only)
- Maricel Sutton (Rec)
- Hannah Bradshaw (Rec & bug club Tues – Fri am and Thurs pm)
- Nina Townsend (Yr 1 am only)
- Andree Plumbley (Yr 1 Mon, Tues, Wed only & bug club Mon & Tues pm)
- Sarah Partridge (Yr 1)
- Nina Picton (Yr 2)
- Karen Clarke (Yr 2)
- Rebecca Hope (office Mon, Tues, Wed only & bug club everyday except Thurs pm)
- Emma Bettley (MDS Rec)
- Katie Peace (MDS Rec)
- Nicky Parks (Senior MDS)

Appendix B.

Food hygiene trained staff 2025-26

- Jenna Hetherington (pre sch)
- Sue Purcell (pre sch pm only)
- Debbie Davies (pre sch am only)
- Hannah Bradshaw (Rec & bug club Tues – Fri am and Thurs pm)
- Andree Plumbley (Yr 1 Mon, Tues, Wed only & bug club Mon & Tues pm)
- Nina Picton (Yr 2)
- Rebecca Hope (office Mon, Tues, Wed only & bug club everyday except Thurs pm)
- Diane Hull (Bug Club Mon – Fri pm)

Appendix C.



Safer Eating Questionnaire for Parents – EYFS September 2025

Child's Full Name: _____

Date of Birth: _____

Class : _____

Parent/Carer Name(s): _____

Date Completed: _____

Section 1: Dietary Requirements and Preferences

1. Does your child have any food allergies?

☐ Yes ☐ No

If yes, please list: _____

What happens if your child eats or comes into contact with this food?

2. Does your child have any food intolerances (e.g. lactose, gluten)?

☐ Yes ☐ No

If yes, please list: _____

What happens if your child eats this food?

3. Does your child follow a special diet for medical, cultural, or religious reasons?

☐ Yes ☐ No

If yes, please explain: _____

4. Are there any foods your child dislikes or avoids?

☐ Yes ☐ No

If yes, please list: _____

What is their typical reaction to these foods?

Section 2: Eating Habits and Support Needs

5. Does your child require support while eating (e.g. help with utensils, supervision due to choking risk)?

☐Yes ☐No

If yes, please describe: _____

6. At home, does your child eat with:

☐Fingers ☐Fork ☐Spoon ☐Knife

Which of these can they use independently? _____

7. Do you feed your child at home at times?

☐Yes ☐No

If yes, please describe when/what types of food: _____

8. Has your child ever experienced choking or difficulty swallowing?

☐Yes ☐No

If yes, please provide details: _____

Section 3: Food from Home

9. Will your child be bringing packed lunches or snacks from home?

☐Yes ☐No

If yes, please ensure all food is clearly labelled and complies with our healthy eating policy.

Section 4: Emergency and Medical Information

10. Does your child have an EpiPen or other emergency medication related to food allergies?

☐Yes ☐No

If yes, please ensure it is provided to the setting and that a care plan is in place.

11. Is your child under the care of a dietitian or medical professional for dietary needs?

☐Yes ☐No

If yes, please provide contact details or documentation if available.

Section 5: Consent and Updates

12. I consent to this information being shared with relevant staff to ensure my child's safety.

☐Yes ☐No

13. I agree to update the setting if there are any changes to my child's dietary needs.

☐Yes ☐No

Parent/Carer Signature: _____

Date: _____