



LOCAL PROCEDURES AND CONTACTS SCHEDULE

For use alongside an approved ODBST policy

Purpose of this schedule:

This document records the school-specific contacts, arrangements and procedures used to implement the linked ODBST policy.

It must not reproduce, amend or replace the approved Trust policy.

The current Trust policy should be accessed through the link recorded below.

1. Linked Trust policy

Policy title	Allergy Policy
ODBST policy level	☐ Level 1 Statutory ☐ Level 2 Trust
Link to current ODBST policy page	Oxford Diocesan Bucks Schools Trust - ODBST Statutory policies

School name	Curzon CofE Combined School
Local procedure owner	Julia Payne

3. Key contacts

Complete only the roles relevant to the linked policy. Add or delete rows where necessary.

Role or function	Name	Contact details / location
Admin assistant	Allergy lead	office@czn.odbst.org

4. Local implementation arrangements

Describe only what is specific to the school. Cross-reference the relevant section of the Trust policy where helpful.

Trust policy section / requirement	School-specific arrangement or procedure	Responsible role
5.3	We are also kiwi free.	Allergy lead and headteacher
6.1	The medical register is kept in the staffroom and all staff are made aware of this and can be checked quickly by any member of staff as part of initiating an emergency response. AAls are kept in the staffroom and are taken on trips.	Allergy lead

Trust policy section / requirement	School-specific arrangement or procedure	Responsible role

6. Records, forms and supporting resources

List the local documents, systems or resources used. Do not name a local document as a policy.

Document, form, system or resource	Where it is stored / accessed	Owner

9. School-specific considerations

Record any local circumstances, risks or accessibility arrangements that affect implementation. If none, state "None identified".

Local consideration or risk	Action / control	Review arrangements

Local consideration or risk	Action / control	Review arrangements

10. Review and sign-off

Completed by	Julia Payne
Role	Headteacher
Date	6.9.26
Headteacher approval	Name: Julia Payne_____ Date: 6.9.26

Local review prompt

Review this schedule when the Trust policy changes, when named contacts or local arrangements change, or by the local review date above, whichever is sooner.