



Early Years Foundation Stage Policy

CONFIDENTIALITY AND CLIENT ACCESS TO RECORDS

POLICY STATEMENT

Definition

‘Confidential information is information of some sensitivity, which is not already lawfully in the public domain or readily available from another public source, and which has been shared in a relationship where the person giving the information understood it would not be shared with others.’ (Information Sharing: Practitioners’ Guide)

In our setting all staff can be said to have a ‘confidential relationship’ with families. It is our intention to respect the privacy of children and their parents and carers, while ensuring that they access high quality early years care and education in our setting. We aim to ensure that all parents and carers can share their information in the confidence that it will only be used to enhance the welfare of their children. There are record keeping systems in place that meet legal requirements and means of storing and sharing that information take place within the framework of the Data Protection Act and the Human Rights Act.

CONFIDENTIALITY PROCEDURES

- We always check whether parents regard the information they share with us to be regarded as confidential or not.
- Some parents sometimes share information about themselves with other parents as well as staff; the setting cannot be held responsible if information is shared beyond those parents whom the person has ‘confided’ in.
- Information shared between parents in a discussion or training group is usually bound by a shared agreement that the information is confidential to the group and not discussed outside of it.
- We inform parents when we need to record confidential information beyond the general personal information we keep - for example with regard to any injuries, concerns or changes in relation to the child or the family, any discussions with parents on sensitive matters, any records we are obliged to keep regarding action taken in respect of child protection and any contact and correspondence with external agencies in relation to their child.
- We keep all records securely.

Client access to records procedures

- Parents may request access to any confidential records held on their child and family following the procedure below:
 - Any request to see the child’s personal file by a parent or person with parental responsibility must be made in writing to the Head.



- o The Head sends a written acknowledgement.
- o The setting commits to providing access within 14 days, although this may be extended.
- o The Nursery Manager or Head prepares the file for viewing.
- o All third parties are written to, stating that a request for disclosure has been received and asking for their permission to disclose to the person requesting it. Copies of these letters are retained on file.
- o 'Third parties' include all family members who may be referred to in the records.
- o It also includes workers from any other agency, including social services, the health authority, etc. It is usual for agencies to refuse consent to disclose, preferring the individual to go directly to them.
- o When all the consents/refusals to disclose have been received these are attached to the copy of the request letter.
- o A photocopy of the complete file is taken.
- o The Nursery Manager and Head go through the file and remove any information which a third party has refused consent to disclose. This is best done with a thick black marker, to score through every reference to the third party and information they have added to the file.
- o What remains is the information recorded by the setting, detailing the work initiated and followed by them in relation to confidential matters. This is called the 'clean copy'.
- o The 'clean copy' is photocopied for the parents who are then invited in to discuss the contents. The file should never be given straight over, but should be gone through by the Nursery Manager or Head, so that it can be explained.
- Legal advice may be sought before sharing a file, especially where the parent has possible grounds for litigation against the setting or another (third party) agency.
- All the undertakings above are subject to the paramount commitment of the setting, which is to the safety and well-being of the child.

Legal framework

- Data Protection Act 1998
- Human Rights Act 1998



UNCOLLECTED CHILD

POLICY STATEMENT

In the event that a child is not collected by an authorised adult at the end of a session/day, the setting puts into practice agreed procedures. These ensure the child is cared for safely by an experienced and qualified practitioner who is known to the child whenever possible. We will ensure that the child receives a high standard of care in order to cause as little distress as possible.

We inform parents/carers of our procedures so that, if they are unavoidably delayed, they will be reassured that their children will be properly cared for.

PROCEDURES

- Parents of children starting at the setting are asked to provide the following specific information which is recorded on our Registration Form:
 - Home address and telephone number - if the parents do not have a telephone, an alternative number must be given, perhaps a neighbour or close relative.
 - Occupation and work telephone number (if applicable).
 - Mobile telephone number (if applicable).
 - Names, addresses, telephone numbers for adults who are authorised by the parents to collect their child from the setting, for example a childminder or grandparent.
 - Who has parental responsibility for the child.
 - Information about any person who does not have legal access to the child.
- On occasions when parents are aware that they will not be at home or in their usual place of work, they inform us of how they can be contacted.
- On occasions when parents or the persons normally authorised to collect the child are not able to collect the child, they provide us with the details of the name of the person.
- Any person collecting a child must be aged sixteen or over.
- Parents are informed that if they are not able to collect the child as planned, they must inform us so that we can begin to take back-up measures. We provide parents with our contact telephone number.
- If a child is not collected at the end of the session/day, we follow the following procedures:
 - The collection register is checked for any information about changes to the normal collection routines.
 - If no information is available, parents/carers are contacted at home or at work.
 - If this is unsuccessful, the adults who are authorised by the parents to collect their child from the setting - and whose telephone numbers are recorded on the Registration Form - are contacted.
 - All reasonable attempts are made to contact the parents or nominated carers.
 - The child does not leave the premises with anyone other than those named on the Registration Form or in their file.



- If no-one collects the child after half an hour and there is no-one who can be contacted to collect the child, we apply the procedures for uncollected children.
- The child stays at the setting in the care of two fully-vetted workers until the child is safely collected either by the parents/carers or by a social care worker.
- Social Care will aim to find the parent or relative if they are unable to do so, the child will become looked after by the local authority. Under no circumstances do staff go to look for the parent, nor do they take the child home with them.
- A full written report of the incident is recorded in the child's file. Depending on circumstances, we reserve the right to charge parents for the additional hours worked by our staff.



MISSING CHILD

POLICY STATEMENT

Children's safety is maintained as the highest priority at all times both on and off premises. Every attempt is made through carrying out the outings procedure and the exit/entrance procedure to ensure the security of children is maintained at all times. In the unlikely event of a child going missing, our missing child procedure is followed.

PROCEDURES

- As soon as it is noticed that a child is missing the key person/staff alerts the Nursery Manager or Reception class teacher.
- The Nursery Manager or Reception class teacher will carry out a thorough search of the building and outside areas.
- The register is checked to make sure no other child has also gone astray.
- Doors and gates are checked to see if there has been a breach of security whereby a child could wander out.
- If the child is not found, the parent is contacted and the missing child is reported to the police.
- The Nursery Manager or Reception class teacher talks to the staff to find out when and where the child was last seen and records this.
- The Nursery Manager or Reception class teacher contacts the Head of College and reports the incident. The Head of College carries out an investigation.

Child going missing on an outing

- This describes what to do when staff have taken a small group on an outing, leaving the Nursery Manager or Reception class teacher and/or other staff back in the setting. If the Nursery Manager or Reception class teacher has accompanied children on the outing, the procedures are adjusted accordingly.
- As soon as it is noticed that a child is missing, staff on the outing ask children to stand with their designated person and carry out a headcount to ensure that no other child has gone astray. One staff member searches the immediate vicinity but does not search beyond that.
- The Nursery Manager, Reception class teacher or Head is contacted immediately and the incident is reported.
- The Nursery Manager or Reception class teacher contacts the police and reports the child as missing.
- The Head contacts the parent, who makes their way to the setting or outing venue as agreed with the setting leader. The setting is advised as the best place, as by the time the parent arrives, the child may have been returned to the setting.
- Staff take the remaining children back to the setting.
- In an indoor venue, the staff contact the venue's security who will handle the search and contact the police if the child is not found.
- The Nursery Manager, Reception class teacher or designated staff member may be advised by the police to stay at the venue until they arrive.



The investigation

- Staff keep calm and do not let the other children become anxious or worried.
- The setting leader together with the Head Teacher speaks with the parent(s).
- The Head Teacher carries out a full investigation taking written statements from all the staff involved.
- The key person/staff member writes an incident report detailing:
 - The date and time of the report.
 - Which staff/children were in the group/outing and the name of the member of staff designated responsible for the missing child.
 - When the child was last seen in the group/outing.
 - What has taken place in the group or outing since the child went missing.
 - The time it is estimated that the child went missing.
- A conclusion is drawn as to how the breach of security happened.
- If the incident warrants a police investigation, all staff cooperate fully. In this case, the police will handle all aspects of the investigation, including interviewing staff. Children's Social Care may be involved if it seems likely that there is a child protection issue to address.
- The insurance provider is informed.

Managing people

- Missing child incidents are very worrying for all concerned. Part of managing the incident is to try to keep everyone as calm as possible.
- The staff will feel worried about the child, especially the key person or the designated carer responsible for the safety of that child for the outing. They may blame themselves and their feelings of anxiety and distress will rise as the length of time the child is missing increases.
- Staff may be the understandable target of parental anger and they may be afraid. The Nursery Manager or Reception class teacher need to ensure that staff under investigation are not only fairly treated but receive support while feeling vulnerable.
- The parents will feel angry, and fraught. They may want to blame staff and may single out one staff member over others; they may direct their anger at the setting leader. When dealing with a distraught and angry parent, there should always be two members of staff, one of whom is the Nursery Manager or Reception class teacher and the other should be a member of the SLT. No matter how understandable the parent's anger may be, aggression or threats against staff are not tolerated, and the police should be called.
- The other children are also sensitive to what is going on around them. They too may be worried. The remaining staff caring for them need to be focused on their needs and must not discuss the incident in front of them. They should answer children's questions honestly but also reassure them.
- In accordance with the severity of the final outcome, staff may need counselling and support. If a child is not found, or is injured, or worse, this will be a very difficult time. The Head Teacher will use their discretion to decide what action to take.



- Staff must not discuss any missing child incident with the press under any circumstances.



SUPERVISION OF CHILDREN ON OUTINGS AND VISITS

POLICY STATEMENT

Children benefit from being taken out of the setting to go on visits or trips to Forest School, the zoo or other suitable venues for activities which enhance their learning experiences. Staff in our setting ensure that there are procedures to keep children safe on outings; all staff and volunteers are aware of and follow the procedures below.

PROCEDURES

- Parents sign a general consent on registration for their children to be taken out as a part of the daily activities of the setting.
- This general consent details the venues used for daily activities.
- Risk assessment is carried out to ensure that there is adequate, age appropriate secure seating on vehicles.
- There is a risk assessment for each venue carried out, which is reviewed regularly.
- Parents are always asked to sign specific consent forms before major outings.
- A risk assessment is carried out before an outing takes place.
- A safety briefing is verbally delivered to all adults participating in the outing.
- All venue risk assessments are made available for parents to see upon request.
- Named children are assigned to individual staff to ensure each child is individually supervised, to ensure no child goes astray, and that there is no unauthorised access to children.
- Outings are recorded in an outings record file kept in the setting stating:
 - The date and time of outing.
 - The venue and mode of transport.
 - Names of staff assigned to named children.
 - Time of return.
- Staff take a mobile phone on outings, and supplies of tissues, wipes, pants etc as well as a mini first aid pack, snacks and water. The amount of equipment will vary and be consistent with the venue and the number of children as well as how long they will be out for.
- Staff take a list of children with them.
- Records are kept of the vehicles used to transport children, with named drivers and appropriate insurance cover.
- A minimum of two staff should accompany children on outings and a minimum of two should remain behind with the rest of the children.



MAINTAINING CHILDREN'S SAFETY AND SECURITY ON PREMISES

POLICY STATEMENT

We maintain the highest possible security of our premises to ensure that each child is safely cared for during their time with us.

Children's personal safety

- We ensure all employed staff have been checked for criminal records by an enhanced disclosure from the Disclosure and Barring Service.
- Adults do not normally supervise children on their own.
- All children are supervised by adults at all times.
- Whenever children are on the premises at least two adults are present.
- We carry out risk assessment to ensure children are not made vulnerable within any part of our premises, nor by any activity.

Security

- Systems are in place for the safe arrival and departure of children.
- The children's arrivals and departures are recorded.
- The arrival and departure times of regular volunteers and visitors are recorded.
- Our systems prevent unauthorised access to our premises.
- Our systems prevent children from leaving our premises unnoticed.
- The personal possessions of staff and volunteers can be securely stored during sessions.



Staff Supervision

For information regarding staff supervision, please refer to the separate EYFS Staff Supervision Policy.



MAKING A COMPLAINT

For full information on making a complaint, please refer to the separate cross-College Complaints Policy.

The role of the Office for Standards in Education, Early Years Directorate (Ofsted) and the Local Safeguarding Children Board

- Parents may approach Ofsted directly at any stage of this complaints procedure. In addition, where there seems to be a possible breach of the settings registration requirements, it is essential to involve Ofsted as the registering and inspection body with a duty to ensure the Welfare Requirements of the Early Years Foundation Stage are adhered to.
- The number to call Ofsted with regard to a complaint is noted on posters across the setting:
 - 03001231231
- These details are displayed on our settings notice board.

Records

- A record of complaints against our setting and/or the children and/or the adults working in our setting is kept, including the date, the circumstances of the complaint and how the complaint was managed.
- The outcome of all complaints is recorded in the Complaints File which is available for parents and Ofsted inspectors on request.



VALUING DIVERSITY AND PROMOTING EQUALITY

POLICY STATEMENT

We will ensure that our EYFS is fully inclusive in meeting the needs of all children in our setting, particularly those that arise from their ethnic heritage, social and economic background, gender, ability or disability. Our setting is committed to anti-discriminatory practice to promote equality of opportunity and valuing diversity for all children and families. We aim to:

- provide a secure and accessible environment in which all our children can flourish and in which all contributions are considered and valued;
- include and value the contribution of all families to our understanding of equality and diversity;
- provide positive non-stereotyping information about gender roles, diverse ethnic and cultural groups and disabled people;
- improve our knowledge and understanding of issues of anti-discriminatory practice, promoting equality and valuing diversity; and
- make inclusion a thread that runs through all of the activities of the setting.

Employment

- Posts are advertised and all applicants are judged against explicit and fair criteria.
- Applicants are welcome from all backgrounds and posts are open to all.
- The applicant who best meets the criteria is offered the post, subject to references and checks by the DBS. This ensures fairness in the selection process.
- All job descriptions include a commitment to promoting equality and recognising and respecting diversity as part of their specifications.
- We monitor our application process to ensure that it is fair and accessible.

Curriculum

The curriculum offered in the setting encourages children to develop positive attitudes about themselves as well as to people who are different from themselves. It encourages children to empathise with others and to begin to develop the skills of critical thinking.

Our environment is as accessible as possible for all visitors and service users. If access to the settings is found to treat disabled children or adults less favourably then we make reasonable adjustments to accommodate the needs of disabled children and adults. We do this by:

- making children feel valued and good about themselves;
- ensuring that children have equality of access to learning;
- undertaking an access audit to establish if the setting is accessible to all children;
- making adjustments to the environment and resources to accommodate a wide range of learning, physical and sensory impairments;
- making appropriate provision within the curriculum to ensure each child receives the widest possible opportunity to develop their skills and abilities, e.g. recognising the different learning styles of girls and boys;



- positively reflecting the widest possible range of communities in the choice of resources;
- avoiding stereotypes or derogatory images in the selection of books or other visual materials;
- celebrating a wide range of festivals;
- creating an environment of mutual respect and tolerance;
- differentiating the curriculum to meet children's special educational needs;
- helping children to understand that discriminatory behaviour and remarks are hurtful and unacceptable;
- ensuring that the curriculum offered is inclusive of children with special educational needs and children with disabilities;
- ensuring that children learning English as an additional language have full access to the curriculum and are supported in their learning; and
- ensuring that children speaking languages other than English are supported in the maintenance and development of their home languages.

Valuing diversity in families

- We welcome the diversity of family lifestyles and work with all families.
- We encourage children to contribute stories of their everyday life to the setting.
- We encourage parents/carers to take part in the life of the setting and to contribute fully.
- For families who speak languages in addition to English, we will develop means to ensure their full inclusion.

Food

- We work in partnership with parents to ensure that the medical, cultural and dietary needs of children are met.
- We help children to learn about a range of food, and of cultural approaches to mealtimes and eating, and to respect the differences among them.

Meetings

- Parents attend meetings and take part in consultations which help us develop the setting.
- Information about meetings is communicated in a variety of ways - written, verbal and in person to ensure that all parents have information about and access to the consultations.

Monitoring and reviewing

- To ensure our policies and procedures remain effective we will monitor and review them to ensure our strategies meet the overall aims to promote equality, inclusion and valuing diversity.
- We provide a complaints procedure and a complaints summary record for parents to see.



Legal framework

- The Equality Act 2010



Supporting children with special educational needs and disabilities

POLICY STATEMENT

We provide an environment in which all children, including those with special educational needs, are supported to reach their full potential.

- We have regard for the DfES Special Educational Needs and Disability (SEND) January 2017
- We support parents and children with special educational needs (SEND).
- We identify the specific needs of children with special educational needs and meet those needs through a range of SEND strategies.
- We work in partnership with parents and other agencies in meeting individual children's needs.
- We monitor and review our policy, practice and provision and, if necessary, make adjustments.

PROCEDURES

- We designate a member of staff to be the Special Educational Needs Coordinator (SENCO) and give his/her name to parents.
- We ensure that the provision for children with special educational needs is the responsibility of all members of the setting.
- We ensure that our admissions practice ensures equality of access and opportunity.
- We work closely with parents of children with special educational needs to create and maintain a positive partnership.
- We ensure that parents are informed at all stages of the assessment, planning, provision and review of their children's education.
- We provide parents with information on sources of independent advice and support.
- We liaise with other professionals involved with children with special educational needs and their families, including transfer arrangements to other settings and schools.
- We provide a broad, balanced and differentiated curriculum for all children with special educational needs.
- We use a system of planning, implementing, monitoring, evaluating and reviewing individual educational plans (IEPs) for children with special educational needs.
- We use a system for keeping records of the assessment, planning, provision and review for children with special educational needs.
- We provide advice support and training where appropriate for parents, practitioners and volunteers.
- We ensure the effectiveness of our special educational needs provision by collecting information from a range of sources e.g. Individual Education Plan reviews, staff and management meetings, parental and external agency's views,



inspections and complaints. This information is collated, evaluated and reviewed at least termly.

Achieving positive behaviour

POLICY STATEMENT

Our setting believes that children flourish best when their personal, social and emotional needs are met and where there are clear and developmentally appropriate expectations for their behaviour.

Children need to learn to consider the views and feelings, needs and rights, of others and the impact that their behaviour has on people, places and objects. This is a developmental task that requires support, encouragement, teaching and setting the correct example. The principles that underpin how we achieve positive and considerate behaviour exist within the programme for promoting personal, social and emotional development.

PROCEDURES

We require all staff to:

- keep up-to-date with legislation, research and thinking on promoting positive behaviour and on handling children's behaviour where it may require additional support;
- access relevant sources of expertise on promoting positive behaviour within the programme for supporting personal, social and emotional development; and
- recognise that codes for interacting with other people vary between cultures and require staff to be aware of - and respect - those used by members of the setting.
- to provide a positive model of behaviour by treating children, parents and one another with friendliness, care and courtesy.
- familiarise themselves with the behaviour policy and its guidelines for behaviour.
- We expect all members of our setting - children, parents, staff, volunteers and students - to keep to the guidelines, requiring these to be applied consistently.
- We work in partnership with children's parents. Parents are regularly informed about their children's behaviour by their key person. We work with parents to address recurring inconsiderate behaviour, using our observation records to help us to understand the cause and to decide jointly how to respond appropriately.

Strategies for children who engage in inconsiderate behaviour

- We require all staff, volunteers and students to use positive strategies for handling any inconsiderate behaviour, by helping children find solutions in ways which are appropriate for the children's age and stage of development. Such solutions might include, for example, acknowledgement of feelings, explanation as to what was not acceptable, and supporting children to gain control of their feelings so that they can learn a more appropriate response.
- We acknowledge considerate behaviour such as kindness and willingness to share.
- We support each child in developing self-esteem, confidence and feelings of competence.



- We support each child in developing a sense of belonging in our group, so that they feel valued and welcome.
- We avoid creating situations in which children receive adult attention only in return for inconsiderate behaviour.
- When children behave in inconsiderate ways, we help them to understand the outcomes of their action and support them in learning how to cope more appropriately.
- When children have difficulty in controlling behaviour such as biting, 'shadowing' may take place so that a member of staff can intervene.
- We never send children out of the room by themselves, nor do we use a 'naughty chair' or a 'time out' strategy that excludes children from the group.
- We never use physical punishment, such as smacking or shaking. Children are never threatened with these.
- We do not use techniques intended to single out and humiliate individual children.
- We use physical restraint, such as holding, only to prevent physical injury to children or adults and/or serious damage to property.
- Details of such an event (what happened, what action was taken and by whom, and the names of witnesses) are brought to the attention of relevant staff and are recorded in a child's individual file. The child's parent is informed on the same day or as soon as reasonably practicable.
- In cases of serious misbehaviour, such as racial or other abuse, we make clear immediately the unacceptability of the behaviour and attitudes, by means of explanations rather than personal blame.
- We do not shout or raise our voices in a threatening way to respond to children's inconsiderate behaviour.

Children under three years

- When children under three behave in inconsiderate ways we recognise that strategies for supporting them will need to be developmentally appropriate and differ from those for older children.
- We recognise that very young children are usually unable to regulate their own emotions, such as fear, anger or distress, and require sensitive adults to help them do this.
- Common inconsiderate or hurtful behaviours of young children include tantrums, biting or fighting. Staff are calm and patient, offering comfort to intense emotions, helping children to manage their feelings and talk about them to help resolve issues and promote understanding.
- If tantrums, biting or fighting are frequent, we try to find out the underlying cause - such as a change or upheaval at home, or frequent change of carers. Sometimes a child has not settled in well and the behaviour may be the result of 'separation anxiety'.
- We focus on ensuring a child's attachment figure in the setting, their key person, is building a strong relationship to provide security to the child.

Rough and tumble play, hurtful behaviour and bullying



Young children often engage in play that has aggressive themes – such as superhero and weapon play; some children appear preoccupied with these themes, but their behaviour is not necessarily a precursor to hurtful behaviour or bullying, although it may be inconsiderate at times and may need addressing using strategies as above.

- We will develop strategies to contain play that are agreed with the children, and understood by them, with acceptable behavioural boundaries to ensure children are not hurt.
- We recognise that fantasy play may contain some physical behaviour and as such offer opportunities for us to explore concepts of right and wrong.
- We are able to tune in to the content of the play, perhaps to suggest alternative strategies for heroes and heroines, making the most of ‘teachable moments’ to encourage empathy and lateral thinking to explore alternative scenarios and strategies for conflict resolution.

Hurtful behaviour

We take hurtful behaviour very seriously. Most children under the age of five will at some stage hurt or say something hurtful to another child, especially if their emotions are high at the time, but it is not helpful to label this behaviour as ‘bullying’. For children under five, hurtful behaviour is momentary, spontaneous and often without cognisance of the feelings of the person whom they have hurt.

- We recognise that young children behave in hurtful ways towards others because they have not yet developed the means to manage intense feelings that sometimes overwhelm them.
- We will help them manage these feelings as they have neither the biological means nor the cognitive means to do this for themselves.
- We understand that self-management of intense emotions, especially of anger, happens when the brain has developed neurological systems to manage the physiological processes that take place when triggers activate responses of anger or fear.
- Therefore we help this process by offering support, calming the child who is angry as well as the one who has been hurt by the behaviour. By helping the child to return to a calm state, we are helping the brain to develop the physiological response system that will help the child be able to manage his or her own feelings.
- One way of responding to pre-verbal children is to calm them through holding and cuddling. Verbal children may also respond to cuddling to calm them down, but we offer them an explanation and discuss the incident with them to their level of understanding.
- We recognise that young children require help in understanding the range of feelings they experience. We help children recognise their feelings by naming them and helping children to express them, making a connection verbally between the event and the feeling.
- We help young children learn to empathise with others, understanding that they have feelings too and that their actions impact on others’ feelings.
- We are aware that the same problem may happen over and over before skills such as sharing and turn-taking develop. In order for both the biological maturation and



cognitive development to take place, children will need repeated experiences with problem solving, supported by patient adults and clear boundaries.

- We support social skills through modelling behaviour, through activities, drama and stories. We build self-esteem and confidence in children, recognising their emotional needs through close and committed relationships with them.
- When hurtful behaviour becomes problematic, we work with parents to identify the cause and find a solution together.

Bullying

We take bullying very seriously. Bullying involves the persistent physical or verbal abuse of another child or children. It is characterised by intent to hurt, often planned, and accompanied by an awareness of the impact of the bullying behaviour. A child who is bullying has reached a stage of cognitive development where he or she is able to plan to cause distress in another. Any concerns by parents will be taken very seriously and investigated fully.



ADMINISTERING MEDICINES

POLICY STATEMENT

While it is not our policy to care for sick children, who should be at home until they are well enough to return to the setting, we will agree to administer medication as part of maintaining their health and well-being or when they are recovering from an illness.

In many cases, it is possible for children's GPs to prescribe medicine that can be taken at home in the morning and evening. As far as possible, administering medicines will only be done where it would be detrimental to the child's health if not given in the setting.

These procedures are written in line with current guidance in 'Supporting pupils at school with medical conditions' (August 2017).

The school matron and staff are responsible for the correct administration of medication to children. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures.

PROCEDURES

- Children taking prescribed medication must be well enough to attend the setting.
- Only prescribed medication is administered. It must be in-date and prescribed for the current condition. An exception is made for nappy rash cream and eczema emollients that need not be prescribed, with written consent from parents/carers.
- Written consent is given on admission for the administration of children's paracetamol. Unprescribed children's paracetamol may be administered to any children with the verbal consent of the parents, on that day, in the case of a high temperature. This is to prevent febrile convulsion. A parent of a child with a high temperature will be telephoned to ask for the child to be collected from school. Where a child is known to convulse when febrile, prescribed children's paracetamol should be brought to the setting and the parent's written consent recorded for the medicine to be administered according to the prescription if the temperature rises above 37.5 degrees.
- Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children.
- Parents give prior written permission for the administration of prescribed medication. The staff receiving the medication must ask the parent to sign a consent form stating the following information. No medication may be given without these details being provided:
 - full name of child and date of birth;
 - name of medication;
 - dosage and time to be given in the setting;
 - signature, printed name of parent and date.
- Medicine will be given to the school Matron, Nursery Manager or Deputy, who will then be responsible for recording the above and storing the medicine. Suitable



staff are responsible for ensuring the medicine is given as directed with a witness present.

- We record the administration of all medicines, safely store these and comply with the detailed procedures in the statutory framework for the Early Years Foundation Stage

Storage of medicines

- All medication is stored safely away from the children.
- The child's key person is responsible for ensuring medicine is handed back at the end of the day to the parent.
- For some conditions, medication may be kept in the setting. Key persons check that any medication held to administer is in date and return any out-of-date medication back to the parent.
- All staff are shown the safe medicine storage areas on induction.
- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional from the Clifton College medical centre.
- No child may self-administer. Where children are capable of understanding when they need medication, for example with asthma, they should be encouraged to tell their key person what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.

Children who have long term medical conditions and who may require on ongoing medication

- A care plan is created for each child with long term medical conditions that require ongoing medication. This is the responsibility of the school matron or school nurse alongside the key person. Other medical or social care personnel may need to be involved in the care plan.
- Parents will also contribute to a care plan. They should be shown around the setting, understand the routines and activities and point out anything which they think may be a risk factor for their child.
- For some medical conditions key staff will need to have training in a basic understanding of the condition as well as how the medication is to be administered correctly. The training needs for staff is part of the care plan.
- The care plan includes arrangements for taking medicines on outings and the child's GP's advice is sought if necessary where there are concerns.
- The health care plan should include the measures to be taken in an emergency.
- The health care plan is reviewed every six months or more if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.
- Parents receive a copy of the health care plan and each contributor, including the parent, signs it.

Managing medicines on trips and outings



- If children are going on outings, all staff are fully informed about the child's needs and/or medication and/or care plans.
- Medication for a child is taken in a clearly labelled container. Time and dose of medication administered is recorded and updated on their medical record card.
- On returning to the setting the information is updated on the medical record card and the parent/carer is informed.
- If a child on medication has to be taken to hospital, the child's medication is taken in a clearly labelled container with the child's name on it.

Legal framework

- Medicines Act (1968)

Further guidance

- 'Supporting pupils at school with medical conditions' (December 2015)



MANAGING CHILDREN WHO ARE SICK OR INFECTIOUS (INCLUDING REPORTING NOTIFIABLE DISEASES)

POLICY STATEMENT

We provide care for healthy children and promote health through identifying allergies and preventing contact with the allergenic substance and through preventing cross infection of viruses and bacterial infections.

PROCEDURES

- If children appear unwell during the day – have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – the Nursery Manager, school secretary or school matron calls the parents and asks them to collect the child, or send a known carer to collect on their behalf.
- If a child has a temperature, they are kept cool, by removing top clothing, sponging their heads with cool water, but kept away from draughts.
- Temperature is taken using a digital thermometer kept in the medical room or Nursery office.
- In extreme cases of emergency, the child should be taken to the nearest hospital and the parent informed.
- After diarrhoea or vomiting, parents are asked to keep children home for at least 48 hours and until a formed stool is passed or the last instance of vomiting.
- The setting has a list of excludable diseases and current exclusion times which is displayed on a poster in the medical room and includes common childhood illnesses such as measles.

Reporting of 'notifiable diseases'

- If a child or adult is diagnosed suffering from a notifiable disease under the Public Health (Infectious Diseases) Regulations 1988, the GP will report this to the Health Protection Agency.
- When the setting becomes aware, or is formally informed of the notifiable disease, the College nurse informs the relevant bodies and acts on any advice given by the Health Protection Agency.

HIV/AIDS/Hepatitis procedure

- HIV virus, like other viruses such as Hepatitis, (A, B and C) are spread through body fluids. Hygiene precautions for dealing with body fluids are the same for all children and adults.
- Single use vinyl gloves and aprons are worn when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Protective rubber gloves are used for cleaning/slucing clothing after changing.
- Soiled clothing is bagged for parents to collect.



- Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and mops; cloths used are disposed of with the nappy waste.
- Tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit are cleaned using a disinfectant.

Nits and head lice

- Nits and head lice are not an excludable condition, although in exceptional cases a parent may be asked to keep the child away until the infestation has cleared.
- On identifying cases of head lice, all parents are informed and asked to treat their child and all the family if they are found to have head lice.

Further guidance

- 'Supporting pupils at school with medical conditions' (August 2017)



NAPPY CHANGING

POLICY STATEMENT

No child is excluded from participating in our setting who may, for any reason, not yet be toilet trained and who may still be wearing nappies or equivalent. We work with parents towards toilet training, unless there are medical or other developmental reasons why this may not be appropriate at the time.

We make necessary adjustments to our bathroom provision and hygiene practice in order to accommodate children who are not yet toilet trained.

We see toilet training as a self-care skill that children have the opportunity to learn with the full support and non-judgemental concern of adults.

PROCEDURES

- Young children from around two years old begin toilet training with the agreement and support of parents.
- Nursery staff undertake changing young children in their key groups; buddy key person changes them if the key person is absent.
- Gloves and aprons are put on before changing starts and the areas are prepared. The area is cleaned with a disinfectant after each use.
- All staff are familiar with the hygiene procedures and carry these out when changing nappies.
- In addition, Nursery staff ensure that nappy changing is relaxed and a time to promote independence in young children.
- Young children are encouraged to take an interest in using the toilet; they may just want to sit on it and talk to a friend who is also using the toilet.
- They should be encouraged to wash their hands and have soap and towels to hand.
- Older children access the toilet when they have the need to and are encouraged to be independent.
- Nappies are disposed of hygienically. Nappies are bagged and put in the specific nappy bin. Ordinary clothing that has been wet or soiled is bagged for the parent to take home.
- NB Supportive toileting/nappy hygiene are core basic elements of caring for young children. A system is in place to ensure children are not left in dirty nappies or pants. If young children are left in wet or soiled nappies in the setting this may constitute neglect and will be a disciplinary matter. Settings have a 'duty of care' towards children's personal needs.
- Staff will work closely with parents throughout the whole toilet training process and beyond.



NO-SMOKING

POLICY STATEMENT

We comply with health and safety regulations and the Welfare Requirements of the EYFS in making our setting a no-smoking environment - both indoor and outdoor.

PROCEDURES

- All staff, parents and volunteers are made aware of our no-smoking policy.
- Staff who smoke do not do so during working hours or on outings or trips.
- Staff who smoke before coming to work make every effort to reduce the effect of the odour and lingering effects of passive smoking for children and colleagues.

Legal framework

- The Smoke-free (Premises and Enforcement) Regulations 2006
- The Smoke-free (Signs) Regulations 2007



FOOD AND DRINK

POLICY STATEMENT

We regard snack and mealtimes as an important part of the day. Eating represents a social time for children and adults and helps children to learn about healthy eating. We promote healthy eating using a range of resources and materials. At snack and meal times, we aim to provide nutritious food, which meets the children's individual dietary needs.

PROCEDURES

We follow these procedures to promote healthy eating in our setting.

- Before a child starts to attend the setting, we find out from parents their children's dietary needs and preferences, including any allergies.
- We record information about each child's dietary needs on registration.
- We regularly consult with parents to ensure that our records of their children's dietary needs - including any allergies - are up-to-date.
- We display current information about individual children's dietary needs on their place mats, in the kitchen and on the room notice board so that all staff and volunteers are fully informed about them.
- We implement systems to ensure that children receive only food and drink that is consistent with their dietary needs.
- We display the menus of meals for the information of parents.
- We provide nutritious food for all meals and snacks, avoiding large quantities of saturated fat, sugar and salt and artificial additives, preservatives and colourings.
- We include a variety of foods from the four main food groups:
 - meat, fish and protein alternatives;
 - dairy foods;
 - grains, cereals and starch vegetables; and
 - fruit and vegetables.
- We include foods from the diet of each of the children's cultural backgrounds, providing children with familiar foods and introducing them to new ones.
- We are a nut free school.
- We require staff to show sensitivity in providing for children's diets and allergies. Staff do not use a child's diet or allergy as a label for the child or make a child feel singled out because of her/his diet or allergy.
- We organise meal and snack times so that they are social occasions in which children and staff participate.
- We use meal and snack times to help children to develop independence through making choices, serving food and drink and feeding themselves.
- We provide children with utensils that are appropriate for their ages and stages of development and that take account of the eating practices in their cultures.
- We have fresh drinking water constantly available for the children. Each child has a labelled water bottle available at all times.
- In accordance with parents' wishes, we offer children arriving early in the morning - and/or staying late - an appropriate meal or snack.



- In order to protect children with food allergies, we discourage children from sharing and swapping their food with one another.
- For children who drink milk, we provide semi-skimmed pasteurised milk or some special milks for dietary requirements.



FIRST AID

POLICY STATEMENT

A high percentage of our staff hold a full paediatric first aid certificate. In our setting staff are able to take action to apply first aid treatment in the event of an accident involving a child or adult. At least one member of staff with current first aid training is on the premises or on an outing at any one time. The first aid qualification includes first aid training for infants and young children.

PROCEDURES

The First Aid Kit

Our first aid kit complies with the Health and Safety (First Aid) Regulations 1981 and contains the following items:

- Triangular bandages (ideally at least one should be sterile) - x 4
- Sterile dressings:
 - Small (formerly Medium No 8) - x 3
 - Medium (formerly Large No 9) – HSE 1 - x 3
 - Large (formerly Extra Large No 3) – HSE 2 - x 3
- Sterile eye pads (with bandage or attachment) e.g. No 16 dressing 2
- Container or 6 safety pins 1
- Guidance card as recommended by HSE 1

In addition to the first aid equipment, each box should be supplied with:

- 2 pairs of disposable plastic (PVC or vinyl) gloves.
- 1 plastic disposable apron.
- The first aid box is easily accessible to adults and is kept out of the reach of children.
- At the time of admission to the setting, parents' written permission for emergency medical advice or treatment is sought. Parents sign and date their written approval.
- Parents sign a consent form at registration allowing staff to take their child to the nearest Accident and Emergency unit to be examined, treated or admitted as necessary on the understanding that parents have been informed and are on their way to the hospital.



EMPLOYMENT AND STAFFING

POLICY STATEMENT

All of our HR procedures ensure we only follow the highest standards and ensure that suitable adults are recruited to work in the Early Years at Clifton College.

We provide a staffing ratio in line with the Statutory Framework for the EYFS (September 2014) to ensure that children have sufficient individual attention and to guarantee care and education of a high quality. Our staff are appropriately qualified and we carry out DBS checks in accordance with statutory requirements.

PROCEDURES

Ratios

- A minimum of two staff/adults are on duty at any one time.
- We use a key person approach to ensure that each child has a named member of staff with whom to form a relationship and who plans with parents for the child's well-being and development in the setting. The key person meets regularly with the family for discussion and consultation on their child's progress.
- We hold regular staff meetings to undertake curriculum planning and to discuss children's progress, their achievements and any difficulties that may arise from time to time.

Vetting and staff selection

- We work towards offering equality of opportunity by using non-discriminatory procedures for staff recruitment and selection.
- All staff have job descriptions which set out their staff roles and responsibilities.
- We welcome applications from all sections of the community. Applicants will be considered on the basis of their suitability for the post, regardless of marital status, age, gender, culture, religious belief, ethnic origin or sexual orientation. Applicants will not be placed at a disadvantage by our imposing conditions or requirements that are not justifiable.
- We use Ofsted guidance on obtaining references and enhanced DBS checks for staff and volunteers who will have unsupervised access to children. This is in accordance with requirements under the Safeguarding Vulnerable Groups Act 2006 (Commencement No 8 and Saving) Order 2012 for the vetting and barring scheme.
- We keep all records relating to employment of staff and volunteers, in particular those demonstrating that checks have been done, including the date and number of the enhanced DBS check.

Training and staff development

- We provide regular in-service training to all staff through internal updates and through using external agencies.

Reviewed Summer Term 2019

Next Review Summer Term 2020



- Our school budget allocates resources to training.
- We provide staff induction training in the first week of employment. This induction includes our Health and Safety Policy and Safeguarding Children and Child Protection Policy. Other policies and procedures will be introduced within an induction plan.
- We support the work of our staff by holding regular supervision meetings and appraisals.
- We are committed to recruiting, appointing and employing staff in accordance with all relevant legislation and best practice.

Managing staff absences and contingency plans for emergencies

- Where staff are unwell and take sick leave in accordance with their contract of employment, we organise cover to ensure ratios are maintained.
- Sick leave is monitored and action is taken where necessary in accordance with the contract of employment.
- We have contingency plans to cover staff absences, as follows:

The Nursery Manager is supernumerary and able to cover as required. The EYFS may also have apprentices and part time staff able to work on an ad hoc basis as and when the need arises. In exceptional circumstances a local agency would be used for staff cover.



INDUCTION OF STAFF AND VOLUNTEERS

POLICY STATEMENT

We provide an induction for all staff and volunteers in order to fully brief them about the setting, the families we serve, our policies and procedures, curriculum and daily practice.

PROCEDURES

We have a written induction plan for all new staff, which includes the following:

- Introductions to all staff.
- Familiarising with the building, health and safety and fire procedures.
- Ensuring our policies and procedures have been read and are carried out.
- Introduction to parents, especially parents of allocated key children where appropriate.
- Familiarising them with confidential information where applicable in relation to any key children.
- Details of the tasks and daily routines to be completed.
- The Nursery Manager inducts new staff and volunteers.
- During the induction period, the individual must demonstrate understanding of and compliance with policies, procedures, tasks and routines.
- Successful completion of the induction forms part of the probationary period.



APPRENTICE PLACEMENTS

POLICY STATEMENT

This setting recognises that qualifications and training make an important contribution to the quality of the care and education provided by early years settings.

We aim to provide for apprentice students on placement with us experiences that contribute to the successful completion of their studies and that provide examples of quality practice in early years care and education.

PROCEDURES

- We require apprentices and students on qualification courses to meet the 'suitable person' requirements of the EYFS Statutory Framework (September 2014) and have DBS checks carried out.
- We supervise apprentices and other students under the age of 17 years at all times and do not allow them to have unsupervised access to children.
- Students undertaking qualification courses who are placed in our setting on a short term basis are not counted in our staffing ratios.
- Apprentices employed by the setting may be included in the ratios if they are deemed competent.
- We take out employers' liability insurance and public liability insurance, which covers apprentices, students and voluntary helpers.
- We require apprentices and students to keep to our confidentiality policy.
- We co-operate with tutors/assessors in order to help all learners to fulfil the requirements of their course of study.
- We provide all learners, at the first session of their placement, with a short induction on how our setting is managed, how our sessions are organised and our policies and procedures.
- We communicate a positive message to all learners about the value of qualifications and training.
- We make the needs of the children paramount by not admitting students in numbers that hinder the essential work of the setting.
- We ensure that apprentices and students placed with us are engaged in bona fide early years training, which provides the necessary background understanding of children's development and activities.



HEALTH AND SAFETY - RISK ASSESSMENT

POLICY STATEMENT

All of our Health and Safety Procedures are closely monitored by a Clifton College Health and Safety officer. This ensures we follow the highest standards. This setting believes that the health and safety of children is of paramount importance. We make our setting a safe and healthy place for children, parents, staff and volunteers by assessing and minimising the hazards and risks to enable the children to thrive in a healthy and safe environment.

The basis of this policy is risk assessment. This risk assessment process follows five steps:

- Identification of risk: Where is it and what is it?
- Who is at risk: Childcare staff, children, parents, cooks, cleaners etc?
- Assessment as to the level of risk as high, medium, low. This is both the risk of the likelihood of it happening, as well as the possible impact if it did.
- Control measures to reduce/eliminate risk: What will you need to do, or ensure others will do, in order to reduce that risk?
- Monitoring and review: How do you know if what you have said is working, or is thorough enough? If it is not working, it will need to be amended, or maybe there is a better solution.

PROCEDURES

- Our risk assessment process covers adults and children and includes:
 - checking for and noting hazards and risks indoors and outside, and in our premises and for activities;
 - assessing the level of risk and who might be affected;
 - deciding which areas need attention; and
 - developing an action plan that specifies the action required, the time-scales for action, the person responsible for the action and any funding required.
- We maintain lists of health and safety issues, which are checked daily before the session begins and at the end of the session.

Further guidance

- Five Steps to Risk Assessment (HSE)



HEALTH AND SAFETY - GENERAL STANDARDS

POLICY STATEMENT

This setting believes that the health and safety of children is of paramount importance. We make our setting a safe and healthy place for children, parents, staff and volunteers.

- We aim to make children, parents and staff aware of health and safety issues and to minimise the hazards and risks to enable the children to thrive in a healthy and safe environment.
- We display the necessary health and safety posters

Insurance cover

We have public liability insurance and employers' liability insurance. The certificate for public liability insurance is displayed on the parents' notice board in the hallway.

PROCEDURES

Awareness raising

- Our induction training for staff and volunteers includes a clear explanation of health and safety issues so that all adults are able to adhere to our policy and procedures as they understand their shared responsibility for health and safety.
- Records are kept of these induction training sessions and new staff and volunteers are asked to sign the records to confirm that they have taken part.
- Health and safety issues are explained to the parents of new children so that they understand the part played by these issues in the daily life of the setting.
- As necessary, health and safety training is included in the annual training plans of staff, and health and safety is discussed regularly at staff meetings.
- We operate a no smoking policy.
- Children are made aware of health and safety issues through discussions, planned activities and routines.

Safety of adults

- Adults are provided with guidance about the safe storage, movement, lifting and erection of large pieces of equipment.
- When adults need to reach up to store equipment or to change light bulbs they are provided with safe equipment to do so, use of ladders is discussed.
- All warning signs are clear and in appropriate languages.
- The sickness of staff and their involvement in accidents is recorded. The records are reviewed termly to identify any issues that need to be addressed.
- We keep a record of all substances that may be hazardous to health - such as cleaning chemicals, or gardening chemicals if used. This states what the risks are and what to do if they have contact with eyes or skin or are ingested. It also states where they are stored.



- We keep all cleaning chemicals in their original containers.

Windows

- Low level windows are made from materials that prevent accidental breakage or are made safe.
- Windows are protected from accidental breakage or vandalism from people outside the building.
- Windows above the ground floor are secured so that children cannot climb through them.

Doors and Floors

- We take precautions to prevent children's fingers from being trapped in doors.
- All floor surfaces are checked daily to ensure they are clean and not uneven, wet or damaged.

Electrical/gas equipment

- All electrical/gas equipment conforms to safety requirements and is checked regularly.
- Our boiler/electrical switch gear/meter cupboard is not accessible to the children.
- Fires, heaters, electric sockets, wires and leads are properly guarded and the children are taught not to touch them.
- There are sufficient sockets to prevent overloading.
- The temperature of hot water is controlled to prevent scalds.
- Lighting and ventilation is adequate in all areas including storage areas.

Storage

- All resources and materials from which children select are stored safely.
- All equipment and resources are stored or stacked safely to prevent them accidentally falling or collapsing.

Outdoor area

- Our outdoor area is securely fenced.
- Our outdoor area is checked for safety and cleared of rubbish before it is used.
- Adults and children are alerted to the dangers of poisonous plants, herbicides and pesticides.
- Where water can form a pool on equipment, it is emptied before children start playing outside.
- Our outdoor sand pits are covered and locked securely when not in use and are cleaned regularly.
- All outdoor activities are supervised at all times.



Hygiene

- We regularly seek information from the Environmental Health Department and the Health Authority via the College's Health and Safety Officer to ensure that we keep up-to-date with the latest recommendations.
- Our daily routines encourage the children to learn about personal hygiene.
- We have a daily cleaning routine for the setting which includes play rooms, kitchen, rest area, toilets (including nappy changing areas).
- We have a schedule for cleaning resources and equipment, dressing-up clothes and furnishings.
- The toilet area has a high standard of hygiene including hand washing and drying facilities and the disposal of nappies.
- We implement good hygiene practices by:
 - cleaning tables between activities;
 - cleaning toilets regularly;
 - wearing protective clothing - such as aprons and disposable gloves - as appropriate;
 - providing sets of clean clothes;
 - providing tissues and wipes;

Activities and resources

- Before purchase or loan, equipment and resources are checked to ensure that they are safe for the ages and stages of the children currently attending the setting.
- The layout of play equipment allows adults and children to move safely and freely between activities.
- All equipment is regularly checked for cleanliness and safety and any dangerous items are repaired or discarded.
- All materials, including paint and glue, are non-toxic.
- Sand is clean and suitable for children's play.
- Physical play is constantly supervised.
- Children are taught to handle and store tools safely.
- Children who are sleeping are supervised at all times.
- Children learn about health, safety and personal hygiene through the activities we provide and the routines we follow.
- Any faulty equipment is removed from use and is repaired. If it cannot be repaired it is discarded.
- Large pieces of equipment are discarded only with the consent of the Headmistress.



HEALTH AND SAFETY - FIRE SAFETY AND EMERGENCY EVACUATION

POLICY STATEMENT

Acorn Health and Safety oversee our fire evacuation procedures to ensure the building adheres to the highest possible standards. We ensure our premises present no risk of fire by ensuring the highest possible standard of fire precautions. The person in charge and staff are familiar with the current legal requirements. Where necessary we seek the advice of a competent person, such as our Fire Officer, or Fire Safety Consultant.

PROCEDURES

- The basis of fire safety is risk assessment. These are carried out by a 'competent person'.
- There is Fire Safety Risk Assessment in place.
- Fire doors are clearly marked, never obstructed and easily opened from the inside.
- Smoke detectors/alarms and fire fighting appliances conform to BSEN standards, are fitted in appropriate high risk areas of the building and are checked as specified by the manufacturer.
- Our emergency evacuation procedures are approved by the Fire Safety Officer and are:
 - clearly displayed in the premises;
 - explained to new members of staff, volunteers and parents; and
 - practised regularly
- Records are kept of fire drills and the servicing of fire safety equipment.

Emergency evacuation procedure

Evacuation is via the nearest and safest fire exit or door. Fire drills are carried out regularly and cover all the sessions that the children attend. The drill includes assessment of:

- How children are familiar with the sound of the fire alarm.
- How the children staff and parents know where the fire exits are.
- How children are led from the building to the assembly point.
- How they will be accounted for and who by.
- How long it takes to get the children out safely.
- Who calls the emergency services and when in the event of a real fire.
- How parents are contacted.

The fire drill record book must contain:

- Date and time of the drill.
- How long it took.
- Whether there were any problems that delayed evacuation.
- Any further action taken to improve the drill procedure.



HEALTH AND SAFETY - RECORDING AND REPORTING OF ACCIDENTS AND INCIDENTS

POLICY STATEMENT

We follow the guidelines of the Reporting Injuries, Diseases and Dangerous Occurrences (RIDDOR) for the reporting of accidents and incidents. Child protection matters or behavioural incidents between children are NOT regarded as incidents and there are separate procedures for this.

PROCEDURES

Our staff accident forms:

- are accessible to all staff and volunteers, who know how to complete it; and
- are reviewed by the 'Compliance Officer' regularly to identify any potential or actual hazards.

Children's accident forms:

- are kept safely and accessible in the filing cabinet in the Nursery office, or the medical room for Reception
- are accessible to all staff. All staff know how to complete it
- All Nursery accidents are countersigned by the Nursery Manager who will identify any potential or actual hazards

RIDDOR is notified of any injury requiring treatment by a general practitioner or hospital doctor, or the death of a child or adult.

When there is any injury requiring general practitioner or hospital treatment to a child, parent, volunteer or visitor or where there is a death of a child or adult on the premises, we make a report to the Health and Safety Executive using the format for the Reporting of Injuries, Diseases and Dangerous Occurrences.

Dealing with incidents

We meet our legal requirements for the safety of our employees by complying with RIDDOR. We report to the Health and Safety Executive:

- any accident to a member of staff requiring treatment by a general practitioner or hospital; and
- any dangerous occurrences. This may be an event that causes injury or fatalities or an event that does not cause an accident but could have done, such as a gas leak.
- Any dangerous occurrence is recorded in our incident book. See below.

Information for reporting the incident to Health and Safety Officer is detailed in the Pre-school Learning Alliance's Accident Record publication.



Our incident File

- We have ready access to telephone numbers for emergency services, including local police. Where we are responsible for the premises we have contact numbers for gas and electricity emergency services, carpenter and plumber. We keep an incident book for recording incidents including those that are reportable to the Health and Safety Executive as above.
- These incidents include:
 - break in, burglary, theft of personal or the setting's property;
 - an intruder gaining unauthorised access to the premises;
 - fire, flood, gas leak or electrical failure;
 - attack on member of staff or parent on the premises or nearby;
 - any racist incident involving staff or family on the centre's premises;
 - death of a child, and
 - a terrorist attack, or threat of one.
- In the incident book we record the date and time of the incident, nature of the event, who was affected, what was done about it - or if it was reported to the police, and if so a crime number. Any follow up, or insurance claim made, should also be recorded.
- In the unlikely event of a terrorist attack we follow the advice of the emergency services with regard to evacuation, medical aid and contacting children's families. Our standard Fire Safety Policy will be followed and staff will take charge of their key children. The incident is recorded when the threat is averted.
- In the unlikely event of a child dying on the premises, for example, through cot death in the case of a baby, or any other means involving an older child, the emergency services are called, and the advice of these services are followed.
- The incident book is not for recording issues of concern involving a child. This is recorded in the child's own file.



HEALTH AND SAFETY - FOOD HYGIENE

POLICY STATEMENT

We maintain the highest possible food hygiene standards with regard to the purchase, storage, preparation and serving of food. We are registered as a food provider with the local authority Environmental Health Department.

PROCEDURES

- The person in charge and the person responsible for food preparation understands the principles of Hazard Analysis and Critical Control Point (HACCP) as it applies to their business. This is set out in Safer Food Better Business. The basis for this is risk assessment as it applies to the purchase, storage, preparation and serving of food to prevent growth of bacteria and food contamination.
- All staff follow the guidelines of Safer Food Better Business.
- We have several members of staff with an in-date Food Hygiene Certificate.
- The person responsible for food preparation and serving carries out daily opening and closing checks on the kitchen to ensure standards are met consistently. (See Safer Food Better Business.)
- We use reliable suppliers for the food we purchase.
- Food is stored at correct temperatures and is checked to ensure it is in-date and not subject to contamination by pests, rodents or mould.
- Food preparation areas are cleaned before use as well as after use.
- There are separate facilities for hand-washing.
- All surfaces are clean and non-porous.
- All utensils, crockery etc are clean and stored appropriately.
- Waste food is disposed of daily.
- Cleaning materials and other dangerous materials are stored out of children's reach.
- Children do not have unsupervised access to the kitchen.
- When children take part in cooking activities –
 - they are supervised at all times;
 - understand the importance of handwashing and simple hygiene rules
 - are kept away from hot surfaces and hot water
 - do not have unsupervised access to electrical equipment such as blenders etc.

Reporting of food poisoning

- Food poisoning can occur for a number of reasons; not all cases of sickness or diarrhoea are as a result of food poisoning and not all cases of sickness or diarrhoea are reportable.
- Where children and/or adults have been diagnosed by a GP or hospital doctor to be suffering from food poisoning and where it seems possible that the source of the outbreak is within the setting, the College will contact the Environmental Health



Department and the Health Protection Agency, to report the outbreak and will comply with any investigation.

THE ROLE OF THE KEY PERSON AND SETTLING-IN

POLICY STATEMENT

We believe that children settle best when they have a key person to relate to, who knows them and their parents well, and who can meet their individual needs. Research shows that a key person approach benefits the child, the parents, the staff and the setting by providing secure relationships in which children thrive, parents have confidence, staff are committed and the setting is a happy and dedicated place to attend or work in.

We want children to feel safe, stimulated and happy in the setting and to feel secure and comfortable with staff. We also want parents to have confidence in both their children's well-being and their role as active partners with the setting.

We aim to make the setting a welcoming place where children settle quickly and easily because consideration has been given to the individual needs and circumstances of children and their families.

The key person role is set out in the Welfare Requirements of the Early Years Foundation Stage. Each setting must offer a key person for each child.

PROCEDURES

- The key person is responsible for the induction of the family and for settling the child into our setting.
- The key person offers unconditional regard for the child and is non-judgemental.
- The key person works with the parent to plan and deliver a personalised plan for the child's well-being, care and learning.
- The key person acts as the key contact for the parents and has links with other carers involved with the child, such as a childminder, and co-ordinates the sharing of appropriate information about the child's development with those carers.
- A key person is responsible for developmental records and for sharing information on a regular basis with the child's parents to keep those records up-to-date, reflecting the full picture of the child in our setting and at home.
- The key person encourages positive relationships between children in her/his key group, spending time with them as a group each day.
- We provide a secondary 'buddy' key person so the child and the parents have a key contact in the absence of the child's key person.
- We promote the role of the key person as the child's primary carer in our setting, and as the basis for establishing relationships with other staff and children.

Settling-in

- Before a child starts to attend the setting, we use a variety of ways to provide his/her parents with information. These include written information (including our



prospectus and policies), displays about activities available within the setting, and individual meetings with parents.

- We provide opportunities for the child and his/her parents to visit the setting prior to their first session (this is flexible depending on the needs of the child and family).
- The key person welcomes and looks after the child and his/her parents at the child's first session and during the settling-in process.
- If requested, we offer a home visit for Nursery, during which we explain the process of settling-in with parents and jointly decide on the best way to help the child to settle into the setting.
- We judge a child to be settled when they have formed a relationship with their key person; for example, the child looks for the key person when he/she arrives, goes to them for comfort, and seems pleased to be with them. The child is also familiar with where things are and is pleased to see other children and participate in activities.
- When parents leave, we ask them to say goodbye to their child and explain that they will be coming back, and when if parent wishes to do this.
- We recognise that some children will settle more readily than others but that some children who appear to settle rapidly are not ready to be left.
- We reserve the right not to accept a child into the setting without a parent or carer if the child finds it distressing to be left. This is especially the case with very young children.



PARTNERSHIP - PARENTAL INVOLVEMENT

POLICY STATEMENT

We believe that children benefit most from early years education and care when parents and settings work together in partnership.

Our aim is to support parents as their children's first and most important educators by involving them in their children's education and in the full life of the setting. We also aim to support parents in their own continuing education and personal development.

Some parents are less well represented in early years settings; these include fathers, parents who live apart from their children but who still play a part in their lives as well as working parents. In carrying out the following procedures, we will ensure all parents are included.

When we refer to 'parents' we mean both mothers and fathers; these include both natural or birth parents as well as step-parents and parents who do not live with their children, but have contact with them and play a part in their lives. 'Parents' also includes same sex parents as well as foster parents.

'Parental responsibility' is all the rights, duties, powers and responsibilities and authority which by law a parent of a child has in relation to the child and his property.

PROCEDURES

- We have a means to ensure all parents are included – that may mean we have different strategies for involving fathers or parents who work or live apart from their children.
- We consult with all parents to find out what works best for them.
- We ensure ongoing dialogue with parents to improve our knowledge of the needs of their children and to support their families.
- We inform all parents about how the setting is run and its policies through access to written information and through regular informal communication. We check to ensure parents understand the information that is given to them.
- We inform all parents on a regular basis about their children's progress.
- We involve parents in the shared record keeping about their children - both formally and informally - and ensure parents have access to their children's written developmental records.
- We provide opportunities for parents to contribute their own skills, knowledge and interests to the activities of the setting.
- We inform parents about relevant conferences, workshops and training and use the Parent's information board to raise awareness of opportunities available.
- We consult with parents about the times of meetings to avoid excluding anyone.
- We provide information about opportunities to be involved in the setting in ways that are accessible to parents with basic skills needs, or those for whom English is an additional language.



- We hold meetings in venues that are accessible and appropriate for all.
- We welcome the contributions of parents, in whatever form these may take.
- We inform all parents of the systems for registering queries, complaints or suggestions and check to ensure these are understood. All parents have access to our written complaints procedure.
- We provide opportunities for parents to learn about the curriculum offered in the setting and about young children's learning, in the setting and at home.



WORKING IN PARTNERSHIP WITH OTHER AGENCIES

POLICY STATEMENT

We work in partnership with local and national agencies to promote the wellbeing of all children.

PROCEDURES

- We work in partnership or in tandem with, local and national agencies to promote the wellbeing of children.
- Procedures are in place for sharing of information about children and families with other agencies. These are set out in the Information Sharing Protocol, Safeguarding Children procedures and the Special Educational Needs Procedures.
- Information shared by other agencies with us is regarded as third party information. This is also kept in confidence and not shared without consent from that agency.
- When working in partnership with staff from other agencies, we make those individuals welcome in the setting and their professional roles are respected.
- We follow the protocols for working with agencies, for example on safeguarding children.
- Staff from other agencies do not have unsupervised access to the child they are visiting in the setting.
- Our staff do not casually share information or seek informal advice about any named child/family.
- When necessary we consult with local and national agencies who offer a wealth of advice and information that help us develop understanding of issues facing us and who can provide support and information for parents. For example, ethnic/cultural organisations, drug/alcohol agencies, welfare rights advisors or organisations promoting childcare and education, or adult education.



RECORD KEEPING - CHILDREN'S RECORDS

POLICY STATEMENT

There are record keeping systems in place that meet legal requirements; means of storing and sharing that information take place within the framework of the Data Protection Act and the Human Rights Act.

This policy and procedure is taken in conjunction with the Confidentiality Policy and our procedures for information sharing.

PROCEDURES

We keep two main kinds of records on children attending our setting:

Developmental records

- These include observations of children in the setting, photographs, video clips and samples of their work and summary developmental reports.
- All information is stored securely on the ILD

Personal records

- These include registration and admission forms, signed consent forms, correspondence concerning the child or family, medication permission letters. These confidential records are stored in a lockable cupboard and are kept secure by the Nursery Manager or school matron. A copy of any letter received from the parent regarding administering medicine to their child is kept in their medical file.
- Parents have access, in accordance with our Client Access to Records policy, to the files and records of their own children but do not have access to information about any other child.
- Staff will not discuss personal information given by parents with other members of staff, except where it affects planning for the child's needs. Staff induction includes an awareness of the importance of confidentiality in the role of the key person.
- We retain children's records securely.

Other records

- Issues to do with the employment of staff, whether paid or unpaid, remain confidential to the people directly involved with making personnel decisions.
- Staff/ student confidential records are kept filed away.
- Safeguarding information is securely stored on CPOMS (Child Protection On-line Monitoring System).