

# **START RIGHT NURSERY SCHOOL POLICIES**

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# 1.0 Child Protection

## 1.1 Children's rights and entitlements

### **Policy statement on behalf of Start Right Nursery school**

We promote children's right to be strong, resilient and listened to by creating an environment in our setting that encourages children to develop a positive self-image, which includes their heritage arising from their colour and ethnicity, their languages spoken at home, their religious beliefs, cultural traditions and home background.

We promote children's right to be strong, resilient and listened to by encouraging children to develop a sense of autonomy and independence.

We promote children's right to be strong, resilient and listened to by enabling children to have the self-confidence and the vocabulary to resist inappropriate approaches.

We help children to establish and sustain satisfying relationships within their families, with peers, and with other adults.

We work with parents to build their understanding of, and commitment to, the principles of safeguarding all our children.

### **What it means to promote children's rights and entitlements to be '*strong, resilient and listened to*'.**

To be strong means to be:

- secure in their foremost attachment relationships, where they are loved and cared for by at least one person who is able to offer consistent, positive and unconditional regard and who can be relied on;
- safe and valued as individuals in their families and in relationships beyond the family, such as day care or school;
- self-assured and form a positive sense of themselves – including all aspects of their identity and heritage;
- included equally and belong in our setting and in community life;

- confident in their own abilities and proud of their achievements;
- progressing optimally in all aspects of their development and learning;
- part of a peer group in which they learn to negotiate, develop social skills and an identity as global citizens, respecting the rights of others in a diverse world; and
- able to represent themselves and participate in aspects of service delivery that affects them, as well as aspects of key decisions that affect their lives.

To be resilient means to:

- be sure of their self-worth and dignity;
- be able to be assertive and state their needs effectively;
- be able to overcome difficulties and problems;
- be positive in their outlook on life;
- be able to cope with challenge and change;
- have a sense of justice towards themselves and others;
- develop a sense of responsibility towards themselves and others; and
- be able to represent themselves and others in key decision making processes.

To be listened to means:

- adults who are close to children recognise their need and right to express and communicate their thoughts, feelings and ideas;
- adults who are close to children are able to tune in to their verbal, sign and body language in order to understand and interpret what is being expressed and communicated;
- adults who are close to children are able to respond appropriately and, when required, act upon their understanding of what children express and communicate;
- adults respect children's rights and facilitate children's participation and representation in imaginative and child centred ways in all aspects of core services.

## 1.2 Safeguarding children, young people and vulnerable adults

### Policy statement on behalf of Start Right Nursery school

Our setting will work with children, parents and the community to ensure the rights and safety of children, young people and vulnerable adults. Our Safeguarding Policy is based on the **three key commitments** of the Pre-school Learning Alliance Safeguarding Children Policy.

### Procedures

We carry out the following procedures to ensure we meet the three key commitments which incorporates responding to child protection concerns.

#### *Key commitment 1*

We are committed to building a 'culture of safety' in which children, young people and vulnerable adults are protected from abuse and harm in all areas of our service delivery.

Our designated person who co-ordinates child, young person and vulnerable adult protection issues is: Caryll Ingerslev. When the setting is open, but the designated person is not on site, a suitably trained deputy, Hannah Baker, is available at all times for staff to discuss safeguarding concerns.

The designated person, and the suitably trained deputy, ensure they have relevant links with statutory and voluntary organisations with regard to safeguarding.

The designated person (and the person who deputises for them) understands Local Safeguarding Children Boards (LSCB) safeguarding procedures.

We ensure all staff are trained to understand our safeguarding policies and procedures and that parents are made aware of them too.

All staff understand that safeguarding is their responsibility.

All staff have an up-to-date knowledge of safeguarding issues, are alert to potential indicators and signs of abuse and neglect and understand their professional duty to ensure

safeguarding and child protection concerns are reported to the local authority children's social care team or the NSPCC. They receive updates on safeguarding at least annually.

All staff are confident to ask questions in relation to any safeguarding concerns and know not to just take things at face value but can be respectfully sceptical.

All staff understand the principles of early help (as defined in *Working Together to Safeguard Children*, 2018) and are able to identify those children and families who may be in need of early help and enable them to access it.

All staff understand the thresholds of significant harm and understand how to access services for families, including for those families who are below the threshold for significant harm, according to arrangements published by the LSCB or safeguarding partners in areas where the safeguarding partners have replaced the LSCB.

All staff understand their responsibilities under the General Data Protection Regulation and the Data Protection Act 2018, and understand relevant safeguarding legislation, statutory requirements and local safeguarding partner requirements and ensure that any information they may share about parents and their children with other agencies is shared appropriately and lawfully.

We will support families to receive appropriate early help by sharing information with other agencies in accordance with statutory requirements and legislation.

We will share information lawfully with safeguarding partners and other agencies where there are safeguarding concerns.

We will be transparent about how we lawfully process data.

All staff understand how to escalate their concerns in the event that they feel either the local authority and/or their own organisation has not acted adequately to safeguard and know how to follow local safeguarding procedures to resolve professional disputes between staff and organisations.

All staff understand what the organisation expects of them in terms of their required behaviour and conduct, and follow our policies and procedures on positive behaviour, online safety (including use of cameras and mobile phones), whistleblowing and dignity at work.

Children have a key person to build a relationship with, and are supported to articulate any worries, concerns or complaints that they may have in an age appropriate way.

All staff understand our policy on promoting positive behaviour and follow it in relation to children showing aggression towards other children.

Adequate and appropriate staffing resources are provided to meet the needs of children.

Applicants for posts within the setting are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974.

Enhanced criminal records and barred lists checks and other suitability checks are carried out for staff and volunteers prior to their post being confirmed, to ensure that no disqualified person or unsuitable person works at the setting or has access to the children.

Where applications are rejected based on information disclosed, applicants have the right to know and to challenge incorrect information.

Enhanced criminal records and barred lists checks are carried out on anyone living or working on the premises.

Volunteers must:

- be aged 17 or over;
- be considered competent and responsible;
- receive a robust induction and regular supervisory meetings;
- be familiar with all the settings policies and procedures;
- be fully checked for suitability if they are to have unsupervised access to the children at any time.

Information is recorded about staff qualifications, and the identity checks and vetting processes that have been completed including:

- the criminal records disclosure reference number;
- certificate of good conduct or equivalent where a UK DBS check is not appropriate;
- the date the disclosure was obtained; and
- details of who obtained it.

All staff and volunteers are informed that they are expected to disclose any convictions, cautions, court orders or reprimands and warnings which may affect their suitability to work with children (whether received before or during their employment with us).

Childcare provided from domestic settings will be required to notify if anyone in their household has any relevant convictions, court orders or reprimands or had registration refused or cancelled in relation to childcare provision or have had certain Orders made in relation to the care of their children in accordance with the Childcare Disqualification and Childcare Regulations 2018, and Disqualification under the Childcare Act guidance effective from 31 August 2018.

Staff receive regular supervision, which includes discussion of any safeguarding issues, and their performance and learning needs are reviewed regularly.

In addition to induction and supervision, staff are provided with clear expectations in relation to their behaviour.

We notify the Disclosure and Barring Service of any person who is dismissed from our employment, or resigns in circumstances that would otherwise have led to dismissal for reasons of a child protection concern.

Procedures are in place to record the details of visitors to the setting.

Security steps are taken to ensure that we have control over who comes into the setting so that no unauthorised person has unsupervised access to the children.

Steps are taken to ensure children are not photographed or filmed on video for any other purpose than to record their development or their participation in events organised by us.

Parents sign a consent form and have access to records holding visual images of their child. Staff do not use personal cameras or filming equipment to record images.

Personal mobile phones are not permitted in areas where children are present.



The designated person in the setting has responsibility for ensuring that there is an adequate online safety policy in place.

We keep a written record of all complaints and concerns including details of how they were responded to.

We ensure that robust risk assessments are completed, that they are seen and signed by all relevant staff and that they are regularly reviewed and updated, in line with our health and safety policy.

The designated person will inform the relevant agencies of every significant safeguarding concern, eg. any referrals being made to children's social care, or where appropriate, the LADO, Ofsted or RIDDOR.

### *Key commitment 2*

We committed to responding promptly and appropriately to all incidents, allegations or concerns of abuse that may occur and to work with statutory agencies in accordance with the procedures that are set down in 'What to do if you're worried a child is being abused' (HMG, 2015) and the Care Act 2014.

#### *Responding to suspicions of abuse*

We acknowledge that abuse of children can take different forms - physical, emotional, and sexual, as well as neglect.

We ensure that all staff have an understanding of the additional vulnerabilities that arise from special educational needs and/or disabilities, plus inequalities of race, gender, language, religion, sexual orientation or culture, and that these receive full consideration in relation to child, young person or vulnerable adult protection.

When children are suffering from physical, sexual or emotional abuse, or experiencing neglect, this may be demonstrated through:

- significant changes in their behaviour;
- deterioration in their general well-being;
- their comments which may give cause for concern, or the things they say (direct or indirect disclosure);
- changes in their appearance, their behaviour, or their play;

- unexplained bruising, marks or signs of possible abuse or neglect; and
- any reason to suspect neglect or abuse outside the setting.

We understand how to identify children who may be in need of early help, how to access services for them

We understand that we should refer a child who meets the Children Act 1989 child in need definition to local authority children's social work services.

We understand that we should refer any child who may be at risk of significant harm to local authority children's social work services.

We are aware of the 'hidden harm' agenda concerning parents with drug and alcohol problems and consider other factors affecting parental capacity and risk, such as social exclusion, domestic violence, radicalisation, mental or physical illness and parent's learning disability.

We are aware that children's vulnerability is potentially increased when they are privately fostered and when we know that a child is being cared for under a private fostering arrangement, we inform our local authority children's social care team.

We prepared to take action if we have concerns about the welfare of a child who fails to arrive at a session when expected. The designated person will take immediate action to contact the child's parent to seek an explanation for the child's absence and be assured that the child is safe and well. If no contact is made with the child's parents and the designated person has reason to believe that the child is at risk of significant harm, the relevant professionals are contacted immediately and LSCB procedures are followed. If the child has current involvement with social care the social worker is notified on the day of the unexplained absence.

We aware of other factors that affect children's vulnerability that may affect, or may have affected, children and young people using our provision, such as abuse of children who have special educational needs and/or disabilities; fabricated or induced illness; child abuse linked to beliefs in spirit possession; sexual exploitation of children, including through internet abuse; Female Genital Mutilation and radicalisation or extremism.

In relation to radicalisation and extremism, we follow the Prevent Duty guidance for England and Wales published by the Home Office and LSCB procedures on responding to radicalisation.

We are aware of the mandatory duty that applies to teachers, and health workers to report cases of Female Genital Mutilation to the police. We are also aware that early years practitioners should follow local authority published safeguarding procedures to respond to FGM and other safeguarding issues, which involves contacting police if a crime of FGM has been or may be about to be committed.

We also make ourselves aware that some children and young people are affected by gang activity, by complex, multiple or organised abuse, through forced marriage or honour based violence or may be victims of child trafficking. While this may be less likely to affect young children in our care, we may become aware of any of these factors affecting older children and young people who we may come into contact with.

If we become concerned that a child may be a victim of modern slavery or human trafficking we will refer to the National Referral Mechanism, as soon as possible and refer and/or seek advice to the local authority children's social work service and/or police.

We will be alert to the threats children may face from outside their families, such as that posed by organised crime groups such as county lines and child sexual exploitation, online use and from within peer groups and the wider community.

Where we believe that a child in our care or that is known to us may be affected by any of these factors. We follow the procedures below for reporting child protection and child in need concerns and follow the LSCB procedures, or when they come into force replacing the LSCB, we will follow the local procedures as published by the local safeguarding partners.

Where such indicators are apparent, the child's key person makes a dated record of the details of the concern and discusses what to do with the member of staff who is acting as the designated person. The information is stored on the child's personal file.

In the event that a staff member or volunteer is unhappy with the decision made of the designated person in relation to whether to make a safeguarding referral they must follow escalation procedures.

We refer concerns about children's welfare to the local authority children's social care team and co-operate fully in any subsequent investigation. NB In some cases this may mean the police or another agency identified by the Local Safeguarding Children Board (or the local safeguarding partners when their published safeguarding arrangements take over from the LSCB).

We respond to any disclosures sensitively and appropriately and take care not to influence the outcome either through the way We speak to children or by asking questions of children (although we may check out/clarify the details of what we think they have told us with them).

We take account of the need to protect young people aged 16-19 as defined by the Children Act 1989. This may include students or school children on work placement, young employees or young parents. Where abuse or neglect is suspected We follow the procedure for reporting any other child protection concerns. The views of the young person will always be taken into account in an age appropriate way, but the setting may override the young person's refusal to consent to share information if it feels that it is necessary to prevent a crime from being committed or intervene where one may have been, or to prevent harm to a child or adult. Sharing confidential information without consent is done only where not sharing it could be worse than the outcome of having shared it.

All staff are also aware that adults can also be vulnerable and know how to refer adults who are in need of community care services.

All staff know that they can contact the NSPCC whistleblowing helpline if they feel that or organisation and the local authority have not taken appropriate action to safeguard a child and this has not been addressed satisfactorily through organisational escalation and professional challenge procedures.

We have a whistleblowing policy in place.

Staff/volunteers know they can contact the organisation Public Concern at Work for advice relating to whistleblowing dilemmas.

### *Recording suspicions of abuse and disclosures*

Where a child makes comments to a member of staff that give cause for concern (disclosure), or a member of staff observes signs or signals that give cause for concern, such as significant changes in behaviour; deterioration in general well-being; unexplained bruising, marks or signs of possible abuse or neglect; that member of staff:

- listens to the child, offers reassurance and gives assurance that she or he will take action;
- does not question the child, although it is OK to ask questions for the purposes of clarification;
- makes a written record that forms an objective record of the observation or disclosure that includes: the date and time of the observation or the disclosure; the exact words spoken by the child as far as possible; the name of the person to whom the concern was reported, with the date and time; and the names of any other person present at the time.

These records are signed and dated and kept in the child's personal file, which is kept securely and confidentially.

The member of staff acting as the designated person is informed of the issue at the earliest opportunity, and always within one working day.

Where the Local Safeguarding Children Board or local safeguarding partners safeguarding procedures stipulates the process for recording and sharing concerns, we include those procedures alongside this procedure and follow the steps set down by the Local Safeguarding Children Board.

### *Escalation process*

If we feel that a referral made has not been dealt with properly or that concerns are not being addressed or responded to, we will follow the LSCB escalation process.

We will ensure that staff are aware of how to escalate concerns.

We will follow local procedures published by the LSCB or safeguarding partners to resolve professional disputes.

### *Informing parents*

Parents are normally the first point of contact. Concerns are normally discussed with parents to gain their view of events, unless it is felt that this may put the child or other person at risk, or may interfere with the course of a police investigation, or may unduly delay the referral, or unless it is otherwise unreasonable to seek consent. Advice will be sought from social care, or in some circumstances police, where necessary.

Parents are informed when we make a record of concerns in their child's file and that we also make a note of any discussion we have with them regarding a concern.

If a suspicion of abuse warrants referral to social care, parents are informed at the same time that the referral will be made, except where the procedures of the Local Safeguarding Children Board does not allow this, for example, where it is believed that the child may be placed at risk. This will usually be the case where the parent is the likely abuser or where sexual abuse may have occurred.

If there is a possibility that advising a parent beforehand may place a child at greater risk (or interfere with a police response) the designated person should consider seeking advice from children's social care, about whether or not to advise parents beforehand, and should record and follow the advice given.

### *Liaison with other agencies and multi-agency working*

We work within the Local Safeguarding Children Board guidelines.

The current version of 'What to do if you're worried a child is being abused' is available online for parents and staff, and all staff are familiar with what they need to do if they have concerns.

We notify Ofsted of any incident or accident and any changes in our arrangements which may affect the well-being of children or where an allegation of abuse is made against a member of staff (whether the allegations relate to harm or abuse committed on our premises or elsewhere). Notifications to Ofsted are made as soon as is reasonably practicable, but at the latest within 14 days of the allegations being made.

### *Allegations against staff and persons in position of trust*

We ensure that all parents know how to complain about the behaviour or actions of staff or volunteers within the setting, or anyone living or working on the premises occupied by the setting, which may include an allegation of abuse.

We ensure that all staff volunteers and anyone else working in the setting knows how to raise concerns that they may have about the conduct or behaviour of other people including staff/colleagues.

We differentiate between allegations, and concerns about the quality of care or practice and complaints and have a separate process for responding to complaints.

We respond to any inappropriate behaviour displayed by members of staff, volunteer or any other person living or working on the premises, which includes:

- inappropriate sexual comments;
- excessive one-to-one attention beyond the requirements of their usual role and responsibilities, or inappropriate sharing of images.

We will recognise and respond to allegations that a person who works with children has:

- behaved in a way that has harmed a child, or may have harmed a child
- possibly committed a criminal offence against or related to a child
- behaved towards a child or children in a way that indicates they may pose a risk of harm to children

We respond to any concerns raised by staff and volunteers who know how to escalate their concerns if they are not satisfied with our response.

We respond to any disclosure by children or staff that abuse by a member of staff or volunteer within the setting, or anyone living or working on the premises occupied by the setting, may have taken, or is taking place, by first recording the details of any such alleged incident.

We refer any such complaint immediately to a senior manager within the organisation and the Local Authority Designated Officer (LADO) as necessary to investigate and/or offer advice on 01392 384964

We also report any such alleged incident to Ofsted (unless advised by LADO that this is unnecessary due to the incident not meeting the threshold), as well as what measures We have taken. We are aware that it is an offence not to do this.

We co-operate entirely with any investigation carried out by children's social care in conjunction with the police.

Where the manager and children's social care agree it is appropriate in the circumstances, the member of staff or volunteer will be suspended for the duration of the investigation. This is not an indication of admission that the alleged incident has taken place, but is to protect the staff, as well as children and families, throughout the process. Where it is appropriate and practical and agreed with LADO, we will seek to offer an alternative to suspension for the duration of the investigation, if an alternative is available that will safeguard children and not place the affected staff or volunteer at risk.

#### *Disciplinary action*

Where a member of staff or volunteer has been dismissed due to engaging in activities that caused concern for the safeguarding of children or vulnerable adults, We will notify the Disclosure and Barring Service of relevant information, so that individuals who pose a threat to children and vulnerable groups can be identified and barred from working with these groups.

#### *Key commitment 3*

We committed to promoting awareness of child abuse issues throughout our training and learning programmes for adults. We also committed to empowering children through our early childhood curriculum, promoting their right to be strong, resilient and listened to.

#### *Training*

Training opportunities are sought for all adults involved in the setting to ensure that they are able to recognise the signs and signals of possible physical abuse, emotional abuse, sexual abuse (including child sexual exploitation) and neglect and that they are aware of the local authority guidelines for making referrals. Training opportunities should also cover extra familial threats such as online risks, radicalisation and grooming, and how to identify and



respond to families who may be in need of early help, and organisational safeguarding procedures.

Designated persons receive appropriate training, as recommended by the Local Safeguarding Children Board, every two years and refresh their knowledge and skills at least annually.

We ensure that all staff know the procedures for reporting and recording any concerns they may have about the provision.

We ensure that all staff receive updates on safeguarding via emails, newsletters, online training and/or discussion at staff meetings at least once a year.

### *Curriculum*

We introduce key elements of keeping children safe into our programme to promote the personal, social and emotional development of all children, so that they may grow to be strong, resilient and listened to and so that they develop an understanding of why and how to keep safe.

We create within the setting a culture of value and respect for individuals, having positive regard for children's heritage arising from their colour, ethnicity, languages spoken at home, cultural and social background.

We ensure that this is carried out in a way that is developmentally appropriate for the children.

### *Confidentiality*

All suspicions and investigations are kept confidential and shared only with those who need to know. Any information is shared under the guidance of the Local Safeguarding Children Board and in line with the GDPR, Data Protection Act 2018, and Working Together 2018.

### *Support to families*

We believe in building trusting and supportive relationships with families, staff and volunteers.

We make clear to parents our role and responsibilities in relation to child protection, such as for the reporting of concerns, information sharing, monitoring of the child, and liaising at all times with the local children's social care team.

We will continue to welcome the child and the family whilst investigations are being made in relation to any alleged abuse.

We follow the Child Protection Plan as set by the child's social worker in relation to the setting's designated role and tasks in supporting that child and their family, subsequent to any investigation.

Confidential records kept on a child are shared with the child's parents or those who have parental responsibility for the child in accordance with the Confidentiality and Client Access to Records procedure, and only if appropriate under the guidance of the Local Safeguarding Children Board.

## **Legal framework**

### *Primary legislation*

- Children Act (1989 s47)
- Protection of Children Act (1999)
- The Children Act (2004 s11)
- Children and Social Work Act 2017
- Safeguarding Vulnerable Groups Act (2006)
- Childcare Act (2006)
- Child Safeguarding Practice Review and Relevant Agency (England) Regulations 2018

### *Secondary legislation*

- Sexual Offences Act (2003)
- Criminal Justice and Court Services Act (2000)
- Equality Act (2010)
- General Data Protection Regulations (GDPR) (2018)
- Childcare (Disqualification) Regulations (2009)
- Children and Families Act (2014)
- Care Act (2014)
- Serious Crime Act (2015)
- Counter-Terrorism and Security Act (2015)

## **1.3 Looked after children**

### **Policy statement on behalf of Start Right Nursery school**

We are committed to providing quality provision based on equality of opportunity for all children and their families. All staff in our provision are committed to doing all they can to enable 'looked after' children in our care to achieve and reach their full potential.

Children become 'looked after' if they have either been taken into care by the local authority or have been accommodated by the local authority (a voluntary care arrangement). Most looked after children will be living in foster homes, but a smaller number may be in a children's home, living with a relative or even placed back home with their natural parent(s).

We recognise that children who are being looked after have often experienced traumatic situations; physical, emotional or sexual abuse or neglect. However, we also recognise that not all looked after children have experienced abuse and that there are a range of reasons for children to be taken in to the care of the local authority. Whatever the reason, a child's separation from their home and family signifies a disruption in their lives that has an impact on their emotional well-being. Most local authorities do not place children under five with foster carers who work outside the home; however, there are instances when this does occur or where the child has been placed with another family member who works. It is not appropriate for a looked after child who is under two years to be placed in a day care setting in addition to a foster placement.

We place emphasis on promoting children's right to be strong, resilient and listened to. Our policy and practice guidelines for looked after children are based on two important concepts: attachment and resilience. The basis of this is to promote secure attachments in children's lives, as the foundation for resilience. These aspects of well-being underpin the child's responsiveness to learning and enable the development of positive dispositions for learning. For young children to get the most out of educational opportunities they need to be settled enough with their carer to be

able to cope with further separation, a new environment and new expectations made upon them.

### *Principles*

The term 'looked after child' denotes a child's current legal status; this term is never used to categorise a child as standing out from others. We do not refer to such a child using acronyms such as LAC.

In exceptional circumstances, we offer places to two-year-old children who are in care. In such cases, the child should have been with the foster carer for at least two months and show signs of having formed a secure attachment to the carer, and the placement in the setting will last a minimum of three months.

We offer places for funded three and four-year-olds who are in care to ensure they receive their entitlement to early education. We expect that a child will have been with a foster carer for a minimum of one month and that they will have formed a secure attachment to the carer. We expect that the placement in the setting will last a minimum of six weeks.

We will always offer 'stay and play' provision for a child who is two to five years old who is still settling with their foster carer, or who is only temporarily being looked after.

Where a child who normally attends our setting is taken into care and is cared for by a local foster carer, we will continue to offer the placement for the child.

### **Procedures**

The designated person for looked after children is the designated child protection coordinator.

Every child is allocated a key person before they start and this is no different for a looked after child. The designated person ensures the key person has the information, support and training necessary to meet the looked after child's needs.

The designated person and the key person liaise with agencies, professionals and practitioners involved with the child and his or her family and ensure that appropriate information is gained and shared.

The setting recognises the role of the local authority children's social care department as the child's 'corporate parent' and the key agency in determining what takes place with the child.

Nothing changes, especially with regard to the birth parent's or foster carer's role in relation to the setting, without prior discussion and agreement with the child's social worker.

At the start of a placement there is a professional's meeting to determine the objectives of the placement and draw up a care plan that incorporates the child's learning needs. This plan is reviewed after two weeks, six weeks and three months. Thereafter at three to six monthly intervals.

The care plan needs to consider issues for the child such as:

- their emotional needs and how they are to be met;
- how any emotional issues and problems that affect behaviour are to be managed;
- their sense of self, culture, language(s) and identity – and how this is to be supported;
- their need for sociability and friendship;
- their interests and abilities and possible learning journey pathway; and
- how any special needs will be supported.

In addition the care plan will also consider:

- how information will be shared with the foster carer and local authority (as the 'corporate parent') as well as what information is shared with whom and how it will be recorded and stored;
- what contact the child has with his/her birth parent(s) and what arrangements will be in place for supervised contact. If this is to be at the setting, when, where and what form the contact will take will be discussed and agreed; • what written reporting is required.

Wherever possible, and where the plan is for the child to return home, the birth parent(s) should be involved in planning; and with the social worker's agreement, and as part of the plan, the birth parent(s) should be involved in the setting's activities that include parents, such as outings and fun-days etc alongside the foster carer.

The settling-in process for the child is agreed. It should be the same as for any other child, with the foster carer taking the place of the parent, unless otherwise agreed. It is even more important that the 'proximity' stage is followed until it is visible that the child has formed a sufficient relationship with his or her key person for them to act as a 'secure base' to allow the gradual separation from the foster carer. This process may take longer in some cases, so time needs to be allowed for it to take place without causing further distress or anxiety to the child.

In the first two weeks after settling-in, the child's well-being is the focus of observation, their sociability and their ability to manage their feelings with or without support.

Further observations about communication, interests and abilities will be noted to firm a picture of the whole child in relation to the Early Years Foundation Stage prime and specific areas of learning and development.

Concerns about the child will be noted in the child's file and discussed with the foster carer.

If the concerns are about the foster carer's treatment of the child, or if abuse is suspected, these are recorded in the child's file and reported to the child's social worker according to the setting's safeguarding children procedure.

Regular contact should be maintained with the social worker through planned meetings that will include the foster carer.

The transition to school will be handled sensitively. The designated person and/or the child's key person will liaise with the school, passing on relevant information and documentation with the agreement of the child's social worker as detailed in the care plan.

## **1.4 Uncollected child**

### **Policy statement on behalf of Start Right Nursery school**

In the event that a child is not collected by an authorised adult by their expected collection time, we put into practice agreed procedures. The child will receive a high standard of care in order to cause as little distress as possible.

### **Procedures**

Parents are asked to provide the following specific information when their child starts attending our setting, 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.
- Place of work, address and telephone number (if applicable).
- Mobile telephone number (if applicable).
- Names, addresses, telephone numbers and signatures of 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 details of the person who will be collecting their child. We agree with parents how to verify the identity of the person who is to collect their child.

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. Our contact telephone number is 01392 877330.

If a child is not collected at their expected collection time, we follow the procedures below:

- The child's file 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 - 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 within 30 minutes of their expected collection time and there is no named contact who can be contacted to collect the child, we apply the procedures for uncollected children.
- If we have any cause to believe the child has been abandoned we contact the local authority children's social care team:
- If the children's social care team is unavailable we will contact the local police, or the out of hours duty officer (where applicable):
- After an additional 15 minutes if the child has not been collected, we will contact the above statutory agencies again.
- The child stays at the setting until the child is safely collected either by the parents or by a social care worker, or by another person specified by social care.
- 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 will we go to look for the parent, nor leave the setting premises with the child.
- We ensure that the child is not anxious and we do not discuss our concerns in front of 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.
- Ofsted may be informed



## 1.5 Missing child

### Policy statement

Children's safety is our highest priority, both on and off the premises. Every attempt is made, through the implementation of our outings procedure and our 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

#### *Child going missing on the premises*

- As soon as it is noticed that a child is missing, the child's key person/the relevant member of staff alerts our setting manager.
- The register is checked to make sure no other child has also gone astray.
- The session leader will carry out a thorough search of the building and garden.
- 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 session leader calls the police immediately and reports the child as missing. If it is suspected that the child may have been abducted, the police are informed of this.
- The parent(s) are then called and informed.
- A recent photo and a note of what the child is wearing is given to the police.
- The session leader talks to our staff to find out when and where the child was last seen and records this.
- The session leader contacts our manager and reports the incident. Our manager comes to the provision immediately to carry out an investigation.

#### *Child going missing on an outing*

This describes what to do when our staff have taken a small group on an outing. What to do when a child goes missing from a whole group outing may be a little different, if parents attend and are responsible for their own children.

- As soon as it is noticed that a child is missing, the staff members on the outing ask children to stand with their designated carer 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.
- Our senior staff member on the outing contacts the police and reports that child as missing.
- Our manager is contacted immediately (if not on the outing) and the incident is recorded.
- Our manager contacts the parent(s).
- Our staff take the remaining children back to the setting as soon as possible.
- According to the advice of the police, a senior member of staff, or our manager where applicable, should remain at the site where the child went missing and wait for the police to arrive.
- A recent photo and a description of what the child is wearing is given to the police.
- Our staff keep calm and do not let the other children become anxious or worried.

### *The investigation*

Ofsted are informed as soon as possible and kept up-to-date with the investigation.

Our manager carries out a full investigation, taking written statements from all our staff and volunteers who were present.

Our manager speaks with the parent(s) and explains the process of the investigation.

The parent(s) may also raise a complaint with us or Ofsted.

Each member of staff present writes an incident report detailing:

- The date and time of the incident.
- Where the child went missing from e.g. the setting or an outing venue.
- Which staff/children were in the premises/on the outing and the name of the staff member who was designated as responsible for the missing child.
- When the child was last seen in the premises/or on the outing, including the time it is estimated that the child went missing.
- What has taken place in the premises or on the outing since the child went missing.

The report is counter-signed by the senior member of staff and the date and time added.

A conclusion is drawn as to how the breach of security happened.

If the incident warrants a police investigation, all our staff co-operate fully. In this case, the police will handle all aspects of the investigation, including interviewing staff and parents. Children's social care may be involved if it seems likely that there is a child protection issue to address.

In the event of disciplinary action needing to be taken, Ofsted are advised.

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.

Our 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.

They may be the understandable target of parental anger and they may be afraid. Our manager ensures that any 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 our staff and may single out one staff member over others; they may direct their anger at our manager. When dealing with a distraught and angry parent, there should always be two members of staff one of whom is our manager. No matter how understandable the parent's anger may be, aggression or threats against our 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. Our 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, our staff may need counselling and support. If a child is not found, or is injured, or worse, this will be a very difficult time. Our manager will use their discretion to decide what action to take.

Our staff must not discuss any missing child incident with the press without taking advice.

## **1.6 Online safety (including mobile phones and cameras)**

### **Policy statement**

We take steps to ensure that there are effective procedures in place to protect children, young people and vulnerable adults from the unacceptable use of Information Communication Technology (ICT) equipment or exposure to inappropriate materials in the setting.

### **Procedures**

Our designated person responsible for co-ordinating action taken to protect children is Caryll Ingerslev.

#### *Information Communication Technology (ICT) equipment*

Only ICT equipment belonging to the setting is used by staff and children.

The designated person is responsible for ensuring all ICT equipment is safe and fit for purpose.

All computers have virus protection installed.

The designated person ensures that safety settings are set to ensure that inappropriate material cannot be accessed.

#### *Internet access*

Children do not normally have access to the internet and never have unsupervised access.

The designated person has overall responsibility for ensuring that children and young people are safeguarded in relation to internet use.

If a second hand computer is purchased or donated to the setting, the designated person will ensure that no inappropriate material is stored on it before children use it.

All computers for use by children are located in an area clearly visible to staff.

Children are not allowed to access social networking sites.

The designated person ensures staff have access to age-appropriate resources to enable them to assist children to use the internet safely.

### *Email*

Children are not permitted to use email in the setting. Parents and staff are not normally permitted to use setting equipment to access personal emails.

Staff do not access personal or work email whilst supervising children.  
Staff share information securely at all times.

### *Mobile phones – children*

Children do not bring mobile phones or other ICT devices with them to the setting. If a child is found to have a mobile phone or ICT device with them, this is removed and stored in Blue Room until the parent collects them at the end of the session.

### *Mobile phones – staff and visitors*

Personal mobile phones are not used by our staff on the premises during working hours. They will be stored in the staff common room (Blue Room).

In an emergency, personal mobile phones may be used in an area where there are no children present, with permission from the manager.

Our staff and volunteers ensure that the setting telephone number is known to family and other people who may need to contact them in an emergency.

If our members of staff or volunteers take their mobile phones on outings, for use in case of an emergency, they must not make or receive personal calls, or take photographs of children.

On walks, two mobiles will be carried in rucksacks (one at the front and one at the back of the line).

Parents and visitors are requested not to use their mobile phones whilst on the premises.

These rules also apply to the use of work-issued mobiles, and when visiting or supporting staff in other settings.

### *Cameras and videos*

Our staff and volunteers must not bring their personal cameras or video recording equipment into the setting. If they do they must be left in the staff (Blue) room upstairs and are not permitted in any room where there are children.

Photographs and recordings of children are only taken on the school tablets for valid reasons i.e. to record their learning and development, or for displays within the setting, with written permission received by parents (see the Registration form). Such use is monitored by the manager.

Where parents request permission to photograph or record their own children at special events, general permission is gained from all parents for their children to be included. Parents are advised that they do not have a right to photograph anyone else's child or to upload photos of anyone else's children.

If photographs of children are used for publicity purposes, parental consent must be given and safeguarding risks minimised, for example, ensuring children cannot be identified by name or through being photographed in a sweatshirt with the name of their setting on it.

### *Social media*

Staff are advised to manage their personal security settings to ensure that their information is only available to people they choose to share information with.

Staff should not accept service users, children and parents as friends due to it being a breach of expected professional conduct.

In the event that staff name the organisation or workplace in any social media they do so in a way that is not detrimental to the organisation or its service users.

Staff observe confidentiality and refrain from discussing any issues relating to work

Staff should not share information they would not want children, parents or colleagues to view.

Staff should report any concerns or breaches to the designated person in their setting.

Staff avoid personal communication, including on social networking sites, with the children and parents with whom they act in a professional capacity. If a practitioner and family are friendly prior to the child coming into the setting, this information is shared with the manager prior to a child attending and a risk assessment and agreement in relation to boundaries is agreed.

### *Electronic learning journals for recording children's progress*

Staff seek permission from the manager prior to using any online learning journal.

Staff adhere to the guidance provided with the system at all times.

### *Use and/or distribution of inappropriate images*

Staff are aware that it is an offence to distribute indecent images. In the event of a concern that a colleague or other person is behaving inappropriately, the Safeguarding Children and Child Protection policy, in relation to allegations against staff and/or responding to suspicions of abuse, is followed.

Staff are aware that grooming children and young people online is an offence in its own right and concerns about a colleague's or others' behaviour are reported (as above).

## 2.0 Suitable people

### 2.1 Employment

#### **Policy statement**

We meet the Safeguarding and Welfare Requirements of the Early Years Foundation Stage, ensuring that our staff and volunteers are appropriately qualified, and we carry out checks for criminal and other records through the Disclosure and Barring Service (DBS) in accordance with statutory requirements.

#### **Procedures**

##### *Vetting and staff selection*

We work towards offering equality of opportunity by using non-discriminatory procedures for staff recruitment and selection.

All our staff have job descriptions, which set out their 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 disability, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation, sex, age, marriage or civil partnership. Applicants will not be placed at a disadvantage by our imposing conditions or requirements that are not justifiable.

We follow the requirements of the Early Years Foundation Stage and Ofsted guidance on checking the suitability of all staff and volunteers who will have unsupervised access to children. This includes obtaining references and ensuring they have a satisfactory enhanced criminal records check with barred list(s) check through the DBS. This is in accordance with requirements under the Safeguarding Vulnerable Groups Act (2006) and the Protection of Freedoms Act (2012) for the vetting and barring scheme.

Where an individual is subscribed to the DBS Update Service We carry out a status check of their DBS certificate, after checking their identity and viewing their original enhanced DBS



certificate to ensure that it does not reveal any information that would affect their suitability for the post.

We keep all records relating to the employment of our staff and volunteers; in particular those demonstrating that suitability checks have been done, including the date of issue, name, type of DBS check and unique reference number from the DBS certificate, along with details of our suitability decision.

We require that all our staff and volunteers keep their DBS check up-to-date by subscribing to the DBS Update Service throughout the duration of their employment with us.

Our staff are expected to disclose any convictions, cautions, court orders, reprimands and warnings which may affect their suitability to work with children – whether received before, or at any time during, their employment with us.

We obtain consent from our staff and volunteers to carry out on-going status checks of the Update Service to establish that their DBS certificate is up-to-date for the duration of their employment with us.

Where we become aware of any relevant information which may lead to the disqualification of an employee, we will take appropriate action to ensure the safety of children. In the event of disqualification, that person's employment with us will be terminated.

#### *Notifying Ofsted of changes*

We inform Ofsted of any changes to our Registered Person and/or our manager.

#### *Training and staff development*

We provide opportunities for regular training to all our staff.

We provide our staff with induction training. This induction includes our Health and Safety Policy and Safeguarding Children and Child Protection Policy. Other policies and procedures are introduced within an induction plan.

We support the work of our staff by holding supervision meetings and appraisals.

We are committed to recruiting, appointing and employing staff in accordance with all relevant legislation and best practice.

#### *Staff taking medication/other substances*

If a member of staff is taking medication which may affect their ability to care for children, we ensure that they seek further medical advice. Our staff will only work directly with the children if medical advice confirms that the medication is unlikely to impair their ability to look after children properly.

Staff medication on the premises will be stored securely and kept out of reach of the children at all times.

If we have reason to believe that a member of our staff is under the influence of alcohol or any other substance that may affect their ability to care for children, they will not be allowed to work directly with the children and further action will be taken.

#### *Managing staff absences and contingency plans for emergencies*

Our staff take their holiday breaks when the setting is closed. Where a staff member may need to take time off for any reason other than sick leave or training, this is agreed with our manager with sufficient notice.

Our manager organises staff annual leave so that ratios are not compromised.

Where our 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 individual's contract of employment.

We have contingency plans to cover staff absences, using existing part-time staff.

## **3.0 Staff Induction and First Aid**

### **3.1 Induction of employees and volunteers**

#### **Policy statement**

We provide an induction for all employees 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 employees and volunteers.
- Familiarisation with the building, health and safety, and fire and evacuation procedures.
- Ensuring policies and procedures are read and adhered to.
- Introduction to the parents, especially parents of allocated key children where appropriate.
- Familiarisation with confidential information in relation to any key children where applicable.
- Details of the tasks and daily routines to be completed.
- The induction period lasts at least two weeks. The manager inducts new employees 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.
- Following induction, we continue to support our staff to deliver high quality performance through regular supervision and appraisal of their work.

### **3.2 First aid**

#### **Policy statement**

We are able to take action to apply first aid treatment in the event of an accident involving a child or adult. At least one adult with a current first aid certificate is on the premises, or on an outing, at any one time. Newly qualified staff who achieved an early years qualification at level 2 or 3 on or after 30 June 2016 also have a paediatric first aid certificate in order to be counted in

the adult : child ratios. The first aid qualification includes first aid training for infants and young children. We have evidence of due diligence when choosing first aid training and ensure that it is relevant to adults caring for young children.

## **Procedures**

### *The first aid kit*

Our first aid kits is accessible at all times and contains the following items:

- Triangular bandages (ideally at least one should be sterile) x 4.
- Sterile dressings:
  - Small x 3.
  - Medium x 3.
  - Large x 3.
- Composite pack containing 20 assorted (individually-wrapped) plasters x 1.
- Sterile eye pads (with bandage or attachment) e.g. No 16 dressing x 2.
- Container of 6 safety pins x 1.
- Guidance card as recommended by HSE x 1.

In addition, the following equipment is kept near to the first aid box:

- 2 pairs of disposable plastic (PVC or vinyl) gloves.
- 1 plastic disposable apron.
- An infrared thermometer
- A supply of ice is kept in the freezer.

Information about who has completed first aid training and the location of the first aid box is provided to all our staff and volunteers. The first aid box is easily accessible to adults and is kept out of the reach of children.

There is a named person in the setting who is responsible for checking and replenishing the first aid box contents.

Medication is only administered in line with our Administering Medicines policy. In the case of minor injury or accidents, first aid treatment is given by our staff who are qualified first aiders.

In the event of minor injuries or accidents, we normally inform parents when they collect their child and ask them to sign the accident information form, unless the child is unduly upset or we have concerns about the injury. In which case we will contact the child's parents for clarification of what they would like to do, i.e. whether they wish to collect the child and/or take them to their own GP.

An ambulance is called for children requiring emergency treatment. We contact parents immediately and inform them of what has happened and where their child has been taken.

Parents sign a consent form at registration allowing a member of staff to take their child to the nearest Accident and Emergency unit to be examined, treated or admitted as necessary on the understanding that they have been informed and are on their way to the hospital.

Accidents and injuries are recorded in our accident recording forms and, where applicable, notified to the Health and Safety Executive, Ofsted and/or local child protection agencies in line with our Recording and Reporting of Accident and Incidents Policy.

### **Legal framework**

- Health and Safety (First Aid) Regulations (1981)

## **4.0 Key Person**

### **4.1 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. We are committed to the key person approach which benefits the child, the parents, the staff and the setting. It encourages secure relationships which support children to thrive, give parents confidence and make the setting a happy 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 our staff. We also want parents to have confidence in both their children's well-being and their role as active partners with our setting. We aim to make our 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 Safeguarding and Welfare Requirements of the Early Years Foundation Stage. Each child must have a key person. These procedures set out a model for developing a key person approach that promotes effective and positive relationships for children.

#### **Procedures**

The Manager is responsible for providing an induction for the family and for settling the child into our setting, completing relevant forms with parents, including consent forms, informing parents of our policies and procedures on our website with particular focus on policies such as safeguarding and our responsibilities under the Prevent Duty.

We allocate a key person before the child starts who is responsible for settling the child into our setting:

- Offering unconditional regard for the child and being non-judgemental.
- Working with the parents to plan and deliver goals for the child's wellbeing, care and learning.
- Acting as the key contact for the parents.

- Keeping developmental records for sharing information on a regular basis with the child's parents and keeping those records up-to-date, reflecting the full picture of the child in our setting and at home.
- Having links with other carers involved with the child and co-ordinating the sharing of appropriate information about the child's development with those carers.
- Encouraging positive relationships between children in her/his key group, spending time with them as a group each day.

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 adults and children.

### *Settling-in*

Before a child starts to attend our setting, we use a variety of ways to provide his/her parents with information. These include website information, visits to the setting and an induction morning for new parents and children just before the start of term. The key person welcomes and looks after the child and his/her parents at the start of the child's sessions and discusses the settling-in process.

When a child starts to attend, we explain the process of settling-in with his/her parents and jointly decide on the best way to help the child to settle into the setting.

Younger children will take longer to settle in, as will children who have not previously spent time away from home.

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.

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 believe that a child's distress will prevent them from learning and gaining the best from the setting and will do all we can to comfort and reassure the child.

We discuss and work with the child's parents to begin to create their child's record of achievement using 'Capture Education' portal.

### *The progress check at age two*

The key person carries out the progress check at age two in accordance with any local procedures that are in place and referring to the guidance *A Know How Guide: The EYFS progress check at age two*.

The progress check aims to review the child's development and ensures that parents have a clear picture of their child's development.

Within the progress check, the key person will note areas where the child is progressing well and identify areas where progress is less than expected.

The progress check will describe the actions that will be taken by us to address any developmental concerns (including working with other professionals where appropriate) as agreed with the parent(s).

The key person will plan activities to meet the child's needs within the setting and will support parents to understand the child's needs in order to enhance their development at home.



## 5.0 Staff:Child Ratios

### 5.1 Staffing

#### Policy statement

We provide a staffing ratio in line with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage 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 checks for enhanced criminal records and barred list checks through the Disclosure and Barring Service in accordance with statutory requirements.

#### Procedures

To meet this aim we use the following ratios of adult to children:

Children aged two years: 1 adult : 4 children:

- at least one member of staff holds a full and relevant level 3 qualification; and
- at least half of all other staff hold a full and relevant level 2 qualification.

Children aged three years and over: 1 adult : 8 children:

- at least one member of staff holds a full and relevant level 3 qualification; and
- at least half of all other staff hold a full and relevant level 2 qualification.

We follow the Early Years Foundation Stage Safeguarding and Welfare Requirements where a Qualified Teacher, Early Years Professional or other suitable level 6 qualified person is working directly with children aged three and over as follows:

- there is at least one member of staff for every 13 children; and
- at least one other member of staff holds a full and relevant level 3 qualification.

The number of children for each key person takes into account the individual needs of the children and the capacity of the individual key person to manage their cohort.

We only include those aged 17 years or older within our ratios. Where they are competent and responsible, we may include students on long-term placements and volunteers (aged 17 or over) and staff working as apprentices in early education (aged 16 or over).

A minimum of two staff/adults are on duty at any one time; one of whom is either our manager or Forest School leader.

Our manager deploys our staff, students and volunteers to give adequate supervision of indoor and outdoor areas, ensuring that children are usually within sight and hearing of staff, and always within sight *or* hearing of staff at all times.

All staff are deployed according to the needs of the setting and the children attending.

Our staff, students and volunteers inform their colleagues if they have to leave their area and tell colleagues where they are going.

Our staff, students and volunteers focus their attention on children at all times and do not spend time in social conversation with colleagues while they are working with children.

We assign each child a key person to help the child become familiar with the setting from the outset and to ensure that each child has a named member of staff with whom to form a relationship. The key person 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 and offers support in guiding their development at home.

We hold regular staff meetings to discuss children's progress, their achievements and any relevant issues.

# 6.0 Health

## 6.1 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. We ensure that where medicines are necessary to maintain health of the child, they are given correctly and in accordance with legal requirements and proscribed by a GP.

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. If a child has not had a medication before, it is advised that the parent keeps the child at home for the first 48 hours to ensure there are no adverse effects, as well as to give time for the medication to take effect.

Our staff are responsible for the correct administration of medication to children for whom they are the key person at our setting. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures. In the absence of the key person, the manager is responsible for the overseeing of administering medication.

### Procedures

Children taking prescribed medication must be well enough to attend the setting.

We only administer medication when it has been prescribed for a child by a doctor (or other medically qualified person). It must be in-date and prescribed for the current condition.

Non-prescription medication, such as pain or fever relief may not be administered. Children under the age of 16 years are never given medicines containing aspirin unless prescribed specifically for that child by a doctor.

Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children. On receiving the medication, the member of staff checks that it is in date and prescribed specifically for the current condition.

Parents must give prior written permission for the administration of medication. The staff member receiving the medication will ask the parent to sign a consent form stating the following information. No medication may be given without these details being provided:

- the full name of child and date of birth
- the name of medication and strength
- who prescribed it
- the dosage and times to be given in the setting
- the method of administration
- how the medication should be stored and its expiry date
- any possible side effects that may be expected
- the signature of the parent, their printed name and the date

The administration of medicine is recorded accurately in our medication record sheet each time it is given and is signed by the person administering the medication. Parents are shown the record at the end of the day and asked to sign the record book to acknowledge the administration of the medicine. The medication record book records the:

- name of the child
- name and strength of the medication
- name of the doctor that prescribed it
- date and time of the dose
- dose given and method
- signature of the person administering the medication and a witness who verifies that the medication has been given correctly
- parent's signature (at the end of the day).

We use the Record Sheet for recording the administration of medicine.

If the administration of prescribed medication requires medical knowledge, we obtain individual training for the relevant member of staff by a health professional.

If rectal diazepam is given, another member of staff must be present and co-signs the record sheet.

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.

We monitor the medication record sheet to look at the frequency of medication given in the setting. For example, a high incidence of antibiotics being prescribed for a number of children at similar times may indicate a need for better infection control. During the day of administration the sheet is displayed in the kitchen area and otherwise in the medications box allocated just for that child over the cup store in the kitchen.

### *Storage of medicines*

All medication is stored safely in the medication cupboard or refrigerated as required. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked box or container.

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 to be administered on a regular or as-and-when- required basis. Key persons check that any medication held in the setting, is in date and return any out-of-date medication back to the parent.

We carry out a risk assessment for each child with a long term medical condition that requires on-going medication. This is the responsibility of our manager alongside the key person. Other medical or social care personnel may need to be involved in the risk assessment.

Parents will also contribute to a risk assessment. 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 form part of the risk assessment.

The risk assessment includes vigorous activities and any other activity that may give cause for concern regarding an individual child's health needs.

The risk assessment includes arrangements for taking medicines on outings and advice is sought from the child's GP if necessary where there are concerns.

An individual health plan for the child is drawn up with the parent; outlining the key person's role and what information must be shared with other adults who care for the child.

The individual health plan should include the measures to be taken in an emergency.

We review the individual health plan every six months, or more frequently 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 individual health plan and each contributor, including the parent, signs it.

### *Managing medicines on trips and outings*

If children are going on outings, the key person for the child will accompany the children with a risk assessment, or another member of staff who is fully informed about the child's needs and/or medication.

Medication for a child is taken in a sealed plastic box clearly labelled with the child's name, the original pharmacist's label and the name of the medication. Inside the box is a copy of the consent form and a card to record when it has been given, including all the details that need to be recorded in the medication record as stated above. For medication dispensed by a hospital pharmacy, where the child's details are not on the dispensing label, we will record the circumstances of the event and hospital instructions as relayed by the parents.

On returning to the setting the card is stapled to the medicine record book and the parent signs it.

If a child on medication has to be taken to hospital, the child's medication is taken in a sealed plastic box clearly labelled with the child's name and the name of the medication. Inside the box is a copy of the consent form signed by the parent.

This procedure should be read alongside the outings procedure.

### **Legal framework**

- The Human Medicines Regulations (2012)

## **6.2 Managing children who are sick, infectious, or with allergies**

### **Policy statement**

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

### **Procedures for children who are sick or infectious**

If children appear unwell during the day – for example, if they have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – our manager will call the parents and ask them to collect the child, or to send a known carer to collect the child on their behalf. If a child is sick while eating lunch or immediately afterwards, they are observed for a period of time as this may just be regurgitation.

If a child has a temperature, they are kept cool, by removing top clothing and sponging their heads with cool water, but kept away from draughts.

The child's temperature is taken using an infrared thermometer, kept near the first aid box.

In extreme cases of emergency, an ambulance is called and the parent informed.

Parents are asked to take their child to the doctor before returning them to the setting; we can refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease.

Where children have been prescribed antibiotics for an infectious illness or complaint, we ask parents to keep them at home for 48 hours before returning to the setting.

After diarrhoea, or being sick, we ask parents keep children home for 48 hours following the last episode.

Some activities, such as sand and water play where there is a risk of cross-contamination may be suspended for the duration of any outbreak.

### *Reporting of 'notifiable diseases'*

If a child or adult is diagnosed as suffering from a notifiable disease under the Health Protection (Notification) Regulations 2010, the GP will report this to Public Health England.

When we become aware, or are formally informed of the notifiable disease, our manager informs Ofsted and contacts Public Health England, and act[s] on any advice given.

#### *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. We:

- Wear single-use vinyl gloves and aprons when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Bag soiled clothing for parents to take home for cleaning.
- Clear spills of blood, urine, faeces or vomit using mild disinfectant solution and mops; any cloths used are disposed of with the clinical waste.
- Clean any tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit using a disinfectant.

#### *Nits and head lice*

Nits and head lice are not an excludable condition; although in exceptional cases we/ may ask a parent to keep the child away until the infestation has cleared.

On identifying cases of head lice, we may inform all parents ask them to treat their child and all the family if they are found to have head lice.

#### *Procedures for children with allergies*

When children start at the setting we ask their parents if their child suffers from any known allergies. This is recorded on the Registration Form.

If a child has an allergy, we complete a detailed form to include the following:

- The allergen (i.e. the substance, material or living creature the child is allergic to such as nuts, eggs, bee stings, cats etc).
- The nature of the allergic reactions (e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc).
- What to do in case of allergic reactions, any medication used and how it is to be used (e.g. EpiPen).
- Control measures - such as how the child can be prevented from contact with the allergen.



- Review measures.

The form with information about allergies or medical conditions is filed in the child's personal file and a copy is kept in a box with the child's name and photograph in the designated cupboard in the kitchen. Any medication is kept in the child's personal box out of reach of any child.

No nuts or nut products are used within the setting. Dairy products are not used for snacks at snack time.

### ***Control measures for children with allergies***

At the staff team meeting just before the beginning of each term all staff are given an updated copy of 'List of Allergies' and any other medical conditions. These are discussed in detail. If any member of staff is not present at the meeting, they are given this information at the earliest opportunity.

All staff are made aware of any children who have allergies in an 'Allergy Report' given by the leader of each session at the beginning of each session.

Forest School staff attach names of children with allergies to the snack tray that is taken outside for snack time.

Volunteers will not be involved in giving out snacks or drinks.

Staff under probation will be supervised when giving out snacks or drinks.

### ***Insurance requirements for children with allergies and disabilities***

If necessary, our insurance will include children with any disability or allergy, but certain procedures must be strictly adhered to as set out below. For children suffering life threatening conditions, or requiring invasive treatments; written confirmation from our insurance provider must be obtained to extend the insurance.

At all times we ensure that the administration of medication is compliant with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage.

#### Oral medication:

- Asthma inhalers are now regarded as 'oral medication' by insurers and so documents do not need to be forwarded to our insurance provider. Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them.
- We must be provided with clear written instructions on how to administer such medication.
- We adhere to all risk assessment procedures for the correct storage and administration of the medication.
- We must have the parents or guardians prior written consent. This consent must be kept on file. It is not necessary to forward copy documents to our insurance provider.

#### Life-saving medication and invasive treatments:

- These include adrenaline injections (Epipens) for anaphylactic shock reactions (caused by allergies to nuts, eggs etc) or invasive treatments such as rectal administration of Diazepam (for epilepsy).

#### We must have:

- a letter from the child's GP/consultant stating the child's condition and what medication if any is to be administered;
- written consent from the parent or guardian allowing our staff to administer medication; and
- proof of training in the administration of such medication by the child's GP, a district nurse, children's nurse specialist or a community paediatric nurse.

Prior written consent must be obtained from the child's parent or guardian to give treatment and/or medication prescribed by the child's GP.

The key person must have the relevant medical training/experience, which may include receiving appropriate instructions from parents or guardians.

## 6.3 Recording and reporting of accidents and incidents

### Policy statement

We follow the guidelines of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (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 accident file* is kept in a locked filing drawer.

Accidents and incidents recording sheets master copies are kept in the staff room. Spare copies are in staff handbooks.

Our staff know how to complete them and they are reviewed at least half termly to identify any potential or actual hazards.

#### *Reporting accidents and incidents*

Ofsted is notified as soon as possible, but at least within 14 days, of any instances which involve:

- food poisoning affecting two or more children looked after on our premises
- a serious accident or injury to, or serious illness of, a child in our care and the action we take in response
- the death of a child in our care

Local child protection agencies are informed of any serious accident or injury to a child, or the death of any child, while in our care and we act on any advice given by those agencies.

Any food poisoning affecting two or more children or adults on our premises is reported to the local Environmental Health Department.

Also to be reported are:

- Any work-related accident leading to an injury to a member of the public (child or adult), for which they are taken directly to hospital for treatment.

- Any work-related accident leading to a specified injury to. Specified injuries include injuries such as fractured bones, the loss of consciousness due to a head injury, serious burns or amputations.
- Any work-related accident leading to an injury to which results in them being unable to work for seven consecutive days. All work-related injuries that lead to one of our employees being incapacitated for three or more days are recorded in our accident book.
- When one of our employees suffers from a reportable occupational disease or illness as specified by the HSE.
- Any death, of a child or adult, that occurs in connection with a work-related accident.
- 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.

### *Incident book*

We have ready access to telephone numbers for emergency services, including the local police. Where we are responsible for the premises we have contact numbers for the gas and electricity emergency services, and a carpenter and plumber.

We ensure that our staff and volunteers carry out all health and safety procedures to minimise risk and that they know what to do in an emergency.

On discovery of an incident, we report it to the appropriate emergency services – fire, police, ambulance – if those services are needed.

If an incident occurs before any children arrive, our manager risk assess[es] this situation and decides if the premises are safe to receive children. Our manager may decide to offer a limited service or to close the setting.

Where an incident occurs whilst the children are in our care and it is necessary to evacuate the premises/area, we follow the procedures in our Fire Safety and Emergency Evacuation Policy or, when on an outing, the procedures identified in the risk assessment for the outing.

If a crime may have been committed, we ask all adults witness to the incident make a witness statement including the date and time of the incident, what they saw or heard, what they did about it and their full name and signature.

We keep an incident book for recording major incidents, including some of those that that are reportable to the Local Authority or Health and Safety Executive as above.

These incidents include:

- a break in, burglary, or theft of personal or our setting's property
- an intruder gaining unauthorised access to our premises
- a fire, flood, gas leak or electrical failure
- an attack on an adult or child on our premises or nearby
- any racist incident involving families or our staff on the setting's premises
- a notifiable disease or illness, or an outbreak of food poisoning affecting two or more children looked after on our premises
- the death of a child or adult
- 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, is also recorded.

In the 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 and Emergency Evacuation Policy will be followed. The incident is recorded when the threat is averted.

In the unlikely event of a child dying on our premises, 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.

### **Common Inspection Framework**

As required under the *Common Inspection Framework*, we maintain a summary record of all accidents, exclusions, children taken off roll, incidents of poor behaviour and discrimination, including racist incidents, and complaints and resolutions.

### **Legal framework**

- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995 (As Amended)
- The Health and Safety (Enforcing Authority) Regulations 1998

## 6.4 Intimate Care

All children at **Start Right Nursery School** have the right to be safe and be treated with dignity, respect and privacy at all times so as to enable them to access all aspects of the school.

This policy sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. It should be considered in line with our Safeguarding Policy, Health and Safety Policies and Administering of Medicines policy.

This policy supports the safeguarding and welfare requirements of Early Years Foundation Stage (EYFS) 2012 and the Disability Discrimination Act 2005: **Start Right Nursery School** will ensure that:

- No child's physical, mental or sensory impairment will have an adverse effect on their ability to take part in day to day activities.
- No child with a named condition that affects personal development will be discriminated against
- No child who is delayed in achieving continence will be refused admission
- No child will be sent home or have to wait for their parents/carer due to incontinence
- Adjustments will be made for any child who has delayed incontinence

**Intimate Care Tasks** – cover any tasks that involves the dressing and undressing, washing including intimate parts, helping someone use the toilet, changing nappies or carrying out a procedure that requires direct or indirect contact to an intimate personal area.

**Partnership with Parents/Carers** – Staff/ Child's keyworker at **Start Right Nursery School** works in partnership with parents/carers to provide care appropriate to the needs of the individual child. If specialist care is needed a care plan will be produced. The care plan will set out :

- What care is required
- Number of staff needed to carry out the task (if more than one person is required , reason will be documented)
- Additional equipment required
- Child's preferred means of communication (e.g. visual, verbal). Agree terminology for parts of the body and bodily functions
- Child's level of ability i.e. what tasks they are able to do by themselves
- acknowledge and respect for any cultural or religious sensitivities related to aspects of intimate care
- Be regularly monitored and reviewed in accordance with the child's development

Parents/Carers are asked to supply the following (delete as appropriate):-

- Spare nappies
- Wipes, creams, nappy sacks etc
- Spare Clothes
- Spare underwear

**Best Practice** – When intimate care is given, the member of staff explains fully each task that is carried out, and the reason for it. Staff encourage children to do as much for themselves as they can, lots of praise and encouragement will be given to the child when they achieve.

All staff working in early years setting must have a DBS check. Particular staff members are identified to change a child with known needs and that they plan and record their work with that child.

**Safeguarding** – Staff are trained on the signs and symptom so child abuse which in line with Devon Safeguarding Children’s Board guidelines and are aware of the DFES booklet ‘What to do if you think a child is being abused’ and will follow the guidance given.

If a member of staff is concerned about any physical or emotional changes, such as marks, bruises, soreness, distress etc they will inform the Safeguarding Designated Officer (SDO) immediately. The Safeguarding Policy will then be implemented.

Should a child become unhappy about being cared for by a particular member of staff, the manager will look into the situation and record any findings. These will be discussed with the child’s parents/carers in order to resolve the problem. If necessary the manager will seek advice from other agencies. (Please remember that you need parental permission to talk to any agency about a specifically named child.)

If a child makes an allegation against a member of staff, the procedure set out in the Safeguarding Policy will be followed.

**Dealing with body fluids** – Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely. When dealing with with body fluids , staff wear protective clothing (disposal plastic gloves and aprons) wash themselves thoroughly afterward. Soiled children’s clothing with be bagged to go home – staff will not rinse it. Children will be kept away from the affected area until the incident has been completely dealt with.

All staff maintain high standards of personal hygiene, and will take all practicable steps to prevent and control the spread of infection.

## **6.5 Food and drink**

### **Policy statement**

We regard snack and meal times as an important part of our day. Eating represents a social time for children and adults, and helps children to learn about healthy eating. We promote healthy eating using resources and materials. At snack time we aim to provide or where necessary parents provide nutritious food, which meets the children's individual dietary needs. Lunch time parents are asked to provide a packed lunch to suit their dietary needs.

## Procedures

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

- Before a child starts to attend the setting, we ask their parents about their dietary needs and preferences, including any allergies. (See the Managing Children who are Sick, Infectious or with Allergies Policy.)
- We distribute current information about individual children's dietary needs so that all our staff are fully informed about them before the start of each term and before each session.
- We implement systems to ensure that children receive only food and drink that is consistent with their dietary needs and preferences, as well as their parents' wishes.
- We show sensitivity in providing for children's diets and allergies. We 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 meals and snack times so that they are social occasions in which children and adults participate.
- We use meal and snack times to help children to develop independence through making choices 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. We inform the children about how to obtain the water and that they can ask for water at any time during the day.
- In accordance with parents' wishes, we offer children arriving early in the morning, and/or staying late, an appropriate snack.
- In order to protect children with food allergies, we discourage children from sharing and swapping their food with one another.

### *Packed lunches*

We cannot provide cooked meals and children are required to bring packed lunches, we:

- ensure perishable contents of packed lunches contain an ice pack to keep food cool;
- encourage parents to provide sandwiches with a healthy filling, fruit, and milk based deserts, such as yoghurt or crème fraîche, where we can only provide cold food from home. We discourage sweet drinks and can provide children with water or diluted fresh fruit juice;



- discourage packed lunch contents that consist largely of crisps, processed foods, sweet drinks and sweet products such as cakes or biscuits. We reserve the right to return this food to the parent as a last resort;

## **6.6 Food hygiene**

### **Policy statement**

We provide and/or serve food for children on the following basis:

- Snacks.
- Packed lunches.

We maintain the highest possible food hygiene standards with regard to the purchase, storage, preparation and serving of food.

### **Procedures**

Our staff with responsibility for food preparation understand the principles of Hazard Analysis and Critical Control Point (HACCP) as it applies to our setting. This is set out in Safer Food, Better Business (Food Standards Agency 2011). The basis for this is risk assessment of the purchase, storage, preparation and serving of food to prevent growth of bacteria and food contamination.

All our staff follow the guidelines of Safer Food, Better Business.

All our staff who are involved in the preparation and handling of food have received training in food hygiene.

We use reliable suppliers for the food & drink 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.

Packed lunches are stored in a cool place; un-refrigerated food is served to children within 4 hours of preparation at home.

Food preparation areas are cleaned before and after use.

There are separate facilities for hand-washing and for washing-up.

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 hand-washing and simple hygiene rules;
- are kept away from hot surfaces and hot water; and
- 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 our setting, the manager will contact the Environmental Health Department to report the outbreak and will comply with any investigation.

We notify Ofsted as soon as reasonably practicable of any confirmed cases of food poisoning affecting two or more children looked after on the premises, and always within 14 days of the incident.

**Legal framework:** Regulation (EC) 852/2004 of the European Parliament and of the Council on the Hygiene of Foodstuffs

# **7.0 Safety and suitability of premises, environment and equipment**

## **7.1 Health and safety general standards**

### **Policy statement**

We believe 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, staff and volunteers 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.

Our member of staff responsible for health and safety is: Caryll Ingerslev in the setting. She is competent to carry out these responsibilities.

She has undertaken health and safety training and regularly updates her knowledge and understanding.

We display the necessary health and safety poster in the Art Room

### *Insurance cover*

We have public liability insurance and employers' liability insurance. The certificate for public liability insurance is displayed in the Reception.

### **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. The induction training covers matters of employee well-being, including safe lifting and the storage of potentially dangerous substances.

We keep records of these induction training sessions and new staff and volunteers are asked to sign the records to confirm that they have taken part.

We explain health and safety issues to the parents of new children, so that they understand the part played by these issues in the daily life of the setting and they are directed to the website if more details are required.

As necessary, health and safety training is included in the annual training plans of staff, and health and safety is discussed regularly at our staff meetings.

We operate a no-smoking policy.

We make children aware of health and safety issues through discussions, planned activities and routines.

### *Windows*

Low level windows are made from materials that prevent accidental breakage or.

We ensure that any blind cords are secured safely and do not pose a strangulation risk for young children.

### *Floors and walkways*

All our floor surfaces are checked daily to ensure they are clean and not uneven, wet or damaged. Any wet spills are mopped up immediately.

Walkways and stairs are left clear and uncluttered.

Stair gates are in place on the stairs.

### *Electrical/gas equipment*

We ensure that 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, wires and leads are properly guarded and we teach the children not to touch them.

There are sufficient sockets in our setting to prevent overloading.

We ensure that the temperature of hot water is controlled to prevent scalds.

Lighting and ventilation is adequate in all areas of our setting, including storage areas.

### *Storage*

All our resources and materials, which are used by the children, are stored safely.

All our equipment and resources are stored or stacked safely to prevent them accidentally falling or collapsing.

### *Outdoor area*

Our outdoor area is securely fenced. All gates and fences are childproof and safe.

Our outdoor area is checked for safety and cleared of rubbish, animal droppings and any other unsafe items before it is used.

Adults and children are alerted to the dangers of poisonous plants, herbicides and pesticides.

We leave receptacles upturned to prevent collection of rainwater. Where water can form a pool on equipment, it is emptied and cleaned before children start playing outside.

Our outdoor sand pit is covered when not in use and is cleaned regularly.

We check that children are suitably attired for the weather conditions and type of outdoor activities; ensuring that sun cream is applied and hats are worn during the summer months.

### *Hygiene*

We seek information from the Public Health England & PLA 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 all room(s), kitchen, rest area, toilets and nappy changing areas. Children do not have unsupervised access to the kitchen.

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 disposal facilities for nappies.

We implement good hygiene practices by:

- cleaning tables between activities;
- cleaning and checking toilets regularly;
- wearing protective clothing - such as aprons and disposable gloves - as appropriate;
- providing sets of clean clothes;
- providing tissues and wipes

#### *Activities, resources and repairs*

Before purchase, we check equipment and resources to ensure that they are safe for the ages and stages of the children currently attending the setting.

The layout of our play equipment allows adults and children to move safely and freely between activities.

All our equipment is regularly checked for cleanliness and safety, and any dangerous items are repaired or discarded.

We make safe and separate from general use any areas or things that are unsafe because repair is needed.

All our materials, including paint and glue, are non-toxic.

We ensure that sand is clean and suitable for children's play.

Physical play is supervised.

We teach children to handle and store tools safely.

We check children who are sleeping at regular intervals of at least every ten minutes. If children fall asleep in-situ, it may be necessary to move or wake them to make sure they are comfortable.

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

#### *Jewellery and accessories*

Our staff do not wear jewellery or fashion accessories, such as belts or high heels, that may pose a danger to themselves or children.

Parents must ensure that any jewellery worn by children poses no danger; particularly earrings which may get pulled, bracelets which can get caught when climbing or necklaces that may pose a risk of strangulation.

We ensure that hair accessories are removed before children sleep or rest.

#### *Safety of adults*

We ensure that adults are provided with guidance about the safe storage, movement, lifting and erection of large pieces of equipment.

We provide safe equipment for adults to use when they need to reach up to store equipment or to change light bulbs.

We ensure that all warning signs are clear and in appropriate languages.

We ensure that adults do not remain in the building on their own.

We record the sickness of staff and their involvement in accidents. The records are reviewed termly to identify any issues that need to be addressed.

#### *Control of substances hazardous to health*

Our staff implement the current guidelines of the *Control of Substances Hazardous to Health Regulations (COSHH)*.

Hazardous substances are stored safely away from the children.

We carry out a risk assessment for all chemicals used in the setting. We keep all cleaning chemicals in their original containers.

We keep the chemicals used in the setting to the minimum in order to ensure health and hygiene is maintained.

Environmental factors are taken into account when purchasing, using and disposing of chemicals.

All members of staff are vigilant and use chemicals safely.

Members of staff wear protective gloves when using cleaning chemicals.

## **Legal framework**

- Health and Safety at Work Act (1974)
- Management of Health and Safety at Work Regulations (1999)
- Electricity at Work Regulations (1989)
- Control of Substances Hazardous to Health Regulations (COSHH) (2002)
- Manual Handling Operations Regulations (1992 (As Amended 2004)) • Health and Safety (Display Screen Equipment) Regulations (1992)

## **7.2 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.

### **Procedures**

#### *Children's personal safety*

We ensure all employed staff have been checked for criminal records via an enhanced disclosure with children's barred list check through the Disclosure and Barring Service.

All children are supervised by adults.

Whenever children are on the premises at least two adults are present.

We carry out risk assessments 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 times of the children's arrivals and departures are recorded.

The arrival and departure times of staff, volunteers and visitors - are recorded.

Our systems prevent unauthorised access to our premises.



Our systems prevent children from leaving our premises unnoticed.

We only allow access to visitors with prior appointments.

Our staff check the identity of any person who is not known before they enter the premises.

We keep front doors and gates locked shut at all times. Back doors do not lead to a public or unsupervised area.

The personal possessions of staff and volunteers are secured stored in the staff room during sessions.

No petty cash is kept on the premises.

## **7.3 Supervision of children on outings and visits**

### **Policy statement**

Children benefit from being taken outside of the premises on visits or trips to local parks, woods, fields or other suitable venues, for activities which enhance their learning experiences. We ensure that there are procedures to keep children safe on outings; all staff and volunteers are aware of and follow the procedures as laid out below.

### **Procedures**

All off site activity has an educational purpose with learning and development outcomes.

There is a designated lead for each excursion who is clear about their responsibility as designated lead.

We ask parents to sign a general consent on registration for their children to be taken out on local short outings as a part of the activities of the setting.

We assess the risks for each local venue used for daily activities, which is reviewed regularly.

We always ask parents to sign specific consent forms before major outings; and the risks are assessed before the outing takes place.

All staff taking part in the outing have read the risk assessments.

Children with allergies or other specific needs have a separate risk assessment completed.

A separate Forest School risk assessment is conducted and Forest School standard procedures are followed at all times. The designated lead is always a level 3 trained Forest School practitioner.

Any written outing risk assessments are made available for parents to see.

Named children are assigned to individual staff member to ensure that each child is well supervised, that no child goes astray and that there is no unauthorised access to children.

Staff frequently count their designated children and ensure hands are held when on the street and crossing the road.

Parents who accompany us on outings are responsible for their own child only. Where parents have undergone vetting with us as volunteers, they may be included in the adults to child ratio and have children allocated to them.

We take two mobile phones on outings, whistles as well as supplies of tissues, wipes, spare clothing and nappies, medicines required for individual children, a mini first aid kit, 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. We apply sun cream to children as needed and ensure they are dressed appropriately for the type of outing and weather conditions.

We take a list of children with us and contact numbers of parents.

## **7.4 Risk assessment**

### **Policy statement**

We believe 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.

Risk assessment means:

*Taking note of aspects of your workplace and activities that could cause harm, either to yourself or to others, and deciding what needs to be done to prevent that harm, making sure this is adhered to.*

The law does not require that all risk is eliminated, but that 'reasonable precaution' is taken. This is particularly important when balancing the need for children to be able to take appropriate risks through physically challenging play. Children need the opportunity to work out what is not safe and what they should do when faced with a risk.

Health and safety risk assessments inform procedures. Staff and parents should be involved in reviewing risk assessments and procedures – they are the ones with first-hand knowledge as to whether the control measures are effective – and they can give an informed view to help update procedures accordingly.

This policy is based on the five steps below:

- Identification of a risk: Where is it and what is it?
- Who is at risk: Childcare staff, children, parents, cooks, cleaners etc?
- Assessment as to whether the level of a risk is high, medium, low. This takes into account both 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 staff and volunteers have adequate training in health and safety matters.

Our risk assessment process covers adults and children and includes:

- determining where it is helpful to make some written risk assessments in relation to specific issues, to inform staff practice, and to demonstrate how we are managing risks if asked by parents and/or carers and inspectors;

- checking for and noting hazards and risks indoors and outside, in relation to our premises and 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.

Risk assessment is written and is reviewed regularly.

We maintain lists of health and safety issues, which are checked daily before the session begins, as well as those that are checked on a termly basis when a full risk assessment is carried out.

Our manager ensures that checks, such as electricity and gas safety checks, and any necessary work to the setting premises are carried out annually and records are kept.

Our manager ensures that staff members carry out risk assessments that include relevant aspects of fire safety, food safety for all areas of the premises.

Our manager ensures that staff members carry out risk assessments for work practice including:

- changing children;
- preparation and serving of food/drink for children;
- children with allergies;
- supervising outdoor play and indoor/outdoor equipment;
- putting young children to sleep;
- assessment, use and storage of equipment for disabled children;
- the use and storage of substances which may be hazardous to health, such as cleaning chemicals;
- visitors to the setting who are bringing equipment or animals as part of children's learning experiences
- following any incidents involving threats against staff or volunteers.

Our manager ensures that staff members carry out risk assessments for off-site activities if required, including:

- children's outings
- Forest school

## **Legal framework**

- Management of Health and Safety at Work Regulations (1999)

## **7.5 Fire safety and emergency evacuation**

### **Policy statement**

We ensure the highest possible standard of fire precautions are in place. The person in charge and our staff are familiar with the current legal requirements. Where necessary we seek the advice of a competent person, such as our Fire Officers. A Fire Safety Log Book is used to record the findings of risk assessment, any actions taken or incidents that have occurred and our fire drills are noted in the registers.

### **Procedures**

#### *Fire safety risk assessment*

The basis of fire safety is risk assessment, carried out by a 'competent person'.

The manager and the deputy manager has received training in fire safety sufficient to be competent to carry out the risk assessment; this will follow the Government guidance Fire Safety Risk Assessment - Educational Premises (HMG 2006).

Our fire safety risk assessment focuses on the following for each area of the setting:

- Electrical plugs, wires and sockets.
- Electrical items.
- Gas boilers.
- Cookers.
- Matches.
- Flammable materials – including furniture, furnishings, paper etc.
- Flammable chemicals.
- Means of escape.
- Anything else identified.

### *Fire safety precautions taken*

We ensure that smoke detectors/alarms and fire fighting appliances conform to BS EN standards, are fitted in appropriate high risk areas of the building and are checked as specified by the manufacturer.

We have all electrical equipment checked annually by a qualified electrician. Any faulty electrical equipment is taken out of use and either repaired or replaced.

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 where necessary parents); and practised regularly.

Records are kept of fire drills and of the servicing of fire safety equipment.

### *Emergency evacuation procedure*

It covers procedures for practice drills including:

- 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 children 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.

### *Fire drills*

We hold fire drills termly and record the following information about each fire drill in the Register:

- The date and time of the drill.
- Number of adults and children involved.
- How long it took to evacuate.
- Whether there were any problems that delayed evacuation.
- Any further action taken to improve the drill procedure.

## **Legal framework**

- Regulatory Reform (Fire Safety) Order 2005

## **7.6 Animals in the setting**

### **Policy statement**

Children learn about the natural world, its animals and other living creatures, as part of the Learning and Development Requirements of the Early Years Foundation Stage. This may include contact with animals, or other living creatures, either in the setting or on visits. We aim to ensure that this is in accordance with sensible hygiene and safety controls.

### **Procedures**

#### *Animals in the setting as pets*

We take account of the views of parents and children if we select an animal or creature to keep as a pet in the setting, as well as any allergies or issues that individual children may have any animals or creatures. At the present time we only have one cocker spaniel dog who is kept upstairs behind stair gates.

We carry out a risk assessment with a knowledgeable person accounting for any hygiene or safety risks posed by any animal or creature.

We provide suitable environment for the animal or creature and ensure this is cleaned out regularly and is kept safely.

We are registered with the local vet and take out appropriate pet care health insurance.

We make sure all vaccinations and other regular health measures, such as de-worming, are up-to-date and recorded.

We teach children the correct handling and care of the animal or creature and supervise them at all times.

We ensure that children wash their hands after handling the animal or creature and do not have contact with animal soil or soiled bedding.

If animals or creatures are brought in by visitors to show the children, they are the responsibility of their owner.

The owner carries out a risk assessment, detailing how the animal or creature is to be handled and how any safety or hygiene issues will be addressed.

### **Legal framework**

- The Management of Health and Safety at Work Regulations (1999)

## **7.7 No-smoking**

### **Policy statement**

We comply with health and safety regulations and the Safeguarding and Welfare Requirements of the Early Years Foundation Stage in making our setting a no-smoking environment - both indoors and outdoors.

### **Procedures**

All staff, parents and volunteers are made aware of our No-smoking Policy.

E-cigarettes are not permitted to be used on the premises.

Staff are made aware that failure to adhere to this policy and procedures may result in disciplinary action.

It is a criminal offence for employees to smoke in smoke-free areas, with a fixed penalty of £50 or prosecution and a fine of up to £200.

### **Legal framework**

- The Smoke-free (Premises and Enforcement) Regulations (2006)
- The Smoke-free (Signs) Regulations (2012)



## **7.8 Staff personal safety**

### **Policy statement**

This setting believes that the health and safety of all staff is of paramount importance and that all staff have the right to work in a safe environment. We support safe working both on and off the premises, acknowledging the needs and diversity of children and their family.

### **Procedures**

All staff in the building early in the morning, or late in the evening, ensure doors and windows are locked.

Visitors are generally only allowed access with prior appointments and only admitted once their identity has been verified.

No petty cash is kept on the premises.

Members of staff make a note in the diary of meetings and who are attending meetings.

Managers have telephone numbers of local police and ask for advice on safe practice where there are issues or concerns.

#### *Dealing with agitated parents in the setting*

If a parent appears to be angry, mentally agitated or possibly hostile, two members of staff will lead the parent away from the children to a less open area, but will not shut the door behind them.

If the person is standing, staff will remain standing.

Members of staff will try to empathise and ensure that the language they use can be easily understood.

Staff will speak in low, even tones, below the voice level of the parent.

Members of staff will make it clear that they want to listen and seek solutions.

If the person makes threats and continues to be angry, members of staff make it clear that they will be unable to discuss the issue until the person stops shouting or being abusive, while avoiding potentially inflammatory expressions such as 'calm down' or 'be reasonable'.

If threats or abuse continues, members of staff will explain that the police will be called and emphasise the inappropriateness of such behaviour in front of children.

After the event, details are recorded in the child's personal file together with any decisions made with the parents to rectify the situation and any correspondence regarding the incident.

#### *Dealing with visitor at the gate in the setting*

If a visitor rings on the gate bell during Start Right hours, a member of staff is to go to the gate to see who is calling, they put the chain across the gate and open the gate with the chain in place and ask what is the purpose of the visitor's call and if necessary to ask for some ID.

If the staff member is uncertain of the reason of the visit, the visitor is left outside the gate and is told that for security reasons the staff member needs to fetch the manager to deal with this enquiry.

If the member of staff is happy that it is a legitimate visitor, they unlock the gate and escort the person into the reception area. The member of staff escorts the visitor into the reception area and if another member of staff is needed, the original member of staff will go into the main school and lock the door behind them. All visitors must sign into the Visitors' Book which is in the reception area.

When the visitor needs to leave, a member of staff must escort them off the premises making sure that the gate is securely closed once they have left.

# 8.0 Equal Opportunities

## 8.1 Valuing diversity and promoting inclusion and equality

### Policy statement

We are committed to ensuring that our setting is fully inclusive in meeting the needs of all children.

We recognise that children and their families come from a wide range of backgrounds with individual needs, beliefs and values. They may grow up in family structures that include one or two parents of the same or different sex. Children may have close links or live with extended families of grandparents, aunts, uncles and cousins; while other children may be more removed from close kin, or may live with other relatives or foster carers. Some children come from families who experience social exclusion, severe hardship; discrimination and prejudice because of their ethnicity, disability and/or ability, the languages they speak, their religious or personal beliefs, their sexual orientation and marital status. Some individuals face discrimination linked to their gender and some women are discriminated against because of their pregnancy and maternity status. We understand that all these factors can affect the well-being of children within these families and may adversely impact on children's learning, attainment and life outcomes.

We are committed to anti-discriminatory practice to promote equality of opportunity and valuing diversity for all children and families using our setting. We aim to:

- promote equality and value diversity within our setting and foster good relations with the local community;
- actively include all families and value the positive contribution they make to our setting;
- promote a positive non-stereotyping environment that promotes dignity, respect and understanding of difference in all forms;
- provide a secure and accessible environment in which every child feels safe and equally included;
- improve our knowledge and understanding of issues relating to anti-discriminatory practice,
- challenge and eliminate discriminatory actions on the basis of a protected characteristic as defined by the Equality Act (2010) namely:

- age; ○ gender; ○ gender reassignment;
- marital status; ○ pregnancy and maternity;
- race; ○ disability; ○ sexual orientation;
- and ○ religion or belief.

Where possible, we take positive action to benefit groups or individuals with protected characteristics who are disadvantaged, have a disproportional representation within the setting or need different things from the setting.

## **Procedures**

### *Admissions*

Our setting is open and accessible to all members of the community.

We base our Admissions Policy on a fair system.

We do not discriminate against a child or their family in our service provision, including preventing their entry to our setting based on a protected characteristic as defined by the Equality Act (2010).

We advertise our setting through our website.

We provide information in clear, concise language,

We ensure that all staff are made aware of our Valuing Diversity and Promoting Inclusion and Equality Policy.

We make reasonable adjustments to ensure that disabled children can participate successfully in the services and in the curriculum offered by the setting.

We ensure, wherever possible, that we have a balanced intake of boys and girls in the setting.

We take action against any discriminatory, prejudice, harassing or victimising behaviour by our staff, volunteers or parents whether by:

- direct discrimination – someone is treated less favourably because of a protected characteristic e.g. preventing families of a specific ethnic group from using the service;
- indirect discrimination – someone is affected unfavourably by a general policy e.g.

- children must only speak English in the setting;
- discrimination arising from a disability – someone is treated less favourably because of something connected with their disability e.g. a child with a visual impairment is excluded from an activity;
  - association – discriminating against someone who is associated with a person with a protected characteristic e.g. behaving unfavourably to someone who is married to a person from a different cultural background; or
  - perception – discrimination on the basis that it is thought someone has a protected characteristic e.g. making assumptions about someone's sexual orientation.

We will not tolerate behaviour from an adult who demonstrates dislike or prejudice towards individuals who are perceived to be from another country (xenophobia).

Displaying of openly discriminatory xenophobic and possibly offensive or threatening materials, name calling, or threatening behaviour are unacceptable on, or around, our premises and will be dealt with immediately and discreetly by asking the adult to stop using the unacceptable behaviour and inviting them to read and to act in accordance with the relevant policy statement and procedure. Failure to comply may lead to the adult being excluded from the premises.

### *Employment*

We advertise posts and all applicants are judged against explicit and fair criteria.

Applicants are welcome from all backgrounds and posts are open to all.

We may use the exemption clauses in relevant legislation to enable the service to best meet the needs of the community.

The applicant who best meets the criteria is offered the post, subject to references and suitability checks. This ensures fairness in the selection process.

All our 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.

## *Training*

We seek out training opportunities for our staff and our volunteers to enable them to develop anti-discriminatory and inclusive practices.

We ensure that our staff are confident and fully trained in administering relevant medicines and performing invasive care procedures on children when these are required.

We review our practices to ensure that we are fully implementing our policy for Valuing Diversity and Promoting Equality.

## *Curriculum*

The curriculum offered in our setting encourages children to develop positive attitudes about themselves as well as about people who are different from themselves. It encourages development of confidence and self-esteem, empathy, critical thinking and reflection.

We ensure that our practice is fully inclusive by:

- creating an environment of mutual respect and tolerance;
- modelling desirable behaviour to children and helping children to understand that discriminatory behaviour and remarks are hurtful and unacceptable;
- positively reflecting the widest possible range of communities within resources;
- avoiding use of stereotypes or derogatory images within our books or any other visual materials;
- celebrating locally observed festivals and holy days;
- ensuring that children learning English as an additional language have full access to the curriculum and are supported in their learning;
- ensuring that disabled children with and without special educational needs are fully supported;
- ensuring that children speaking languages other than English are supported in the maintenance and development of their home languages

We will ensure that our environment is as accessible as possible for all visitors and setting users. We do this by:

- undertaking an access audit to establish if the setting is accessible to all disabled children and adults. If access to the setting is found to treat disabled children or adults less favourably, then we make reasonable adjustments to accommodate the needs of disabled children and adults.

- fully differentiating the environment, resources and curriculum to accommodate a wide range of learning, physical and sensory needs.

### *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 mothers, fathers and other 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 encourage their full inclusion.

We offer a flexible payment system for families experiencing financial difficulties and offer information regarding sources of financial support.

We take positive action to encourage disadvantaged and under-represented groups to use the setting.

### *Food*

We work in partnership with parents to ensure that dietary requirements of children that arise from their medical, religious or cultural needs are met where ever possible.

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*

Information about meetings is communicated in a variety of ways - written, verbal to ensure that all mothers and fathers have information about, and access to, the meetings.

### *Monitoring and reviewing*

So that our policies and procedures remain effective, we monitor and review them annually to ensure our strategies meet our overall aims to promote equality, inclusion and to value diversity.

We provide a complaints procedure and a complaints summary record for parents to see.

## *Public Sector Equality Duty*

We have regard to the Duty to eliminate discrimination, promote equality of opportunity, foster good relations between people who share a protected characteristic and those who do not.

### **Legal framework**

The Equality Act (2010)

Children Act (1989) & (2004)

Children and Families Act (2014)

Special Educational Needs and Disabilities Code of Practice (2014)

## **8.2 Supporting children with special educational needs**

### **Policy statement**

We provide an environment in which all children with special educational needs (SEN) are supported to reach their full potential.

We have regard for the Special Educational Needs and Disability Code of Practice (2014). We have in place a clear approach for identifying, responding to, and meeting children's SEN.

We support and involve parents (and where relevant children), actively listening to, and acting on their wishes and concerns.

We work in partnership with the local authority and other external agencies to ensure the best outcomes for children with SEN and their families.

We regularly 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 Co-ordinator (SENCO)  
Our SENCO is: Denise.



The SENCO works closely with our manager and other colleagues and has responsibility for the day-to-day operation of our Supporting Children with Special Educational Needs Policy and for co-ordinating provision for children with SEN.

We ensure that the provision for children with SEN is the responsibility of all members of the setting.

We ensure that our inclusive admissions practice ensures equality of access and opportunity.

We provide a broad, balanced and differentiated curriculum for all children.

We apply SEN support to ensure early identification of children with SEN.

We use the graduated approach system (assess, plan, do and review) applied in increasing detail and frequency to ensure that children progress.

We ensure that parents are involved at all stages of the assessment, planning, provision and review of their children's special education including all decision making processes

We, where appropriate, take into account children's views and wishes in decisions being made about them, relevant to their level understanding.

We provide parents with information on local sources of support and advice e.g. Local Offer, Information, Advice and Support Service.

We liaise and work with other external agencies to help improve outcomes for children with SEN.

We have systems in place for referring children for further assessment e.g. Common Assessment Framework/Early Help Assessment and Education, Health and Care (EHC) assessment.

We provide resources (human and financial) to implement our Supporting Children with Special Educational Needs Policy.

We ensure that all our staff are aware of our Supporting Children with Special Educational Needs Policy and the procedures for identifying, assessing and making provision for children with SEN.

We ensure the effectiveness of our special educational needs provision by collecting information from a range of sources.

We monitor and review our policy annually.

### **Further guidance**

- Early Years Foundation Stage Statutory Framework (DfE 2017)
- Working Together to Safeguard Children (DfE 2015)
- Special Educational Needs and Disability Code of Practice (DfE & DoH 2014)

## **9.0 Information and Records – Data Protection**

### **9.1 Privacy notice**

**Start Right Nursery School's Privacy Notice:**

#### **Introduction**

We are committed to ensuring that any personal data we hold about you and your child is protected in accordance with data protection laws and is used in line with your expectations.

This privacy notice explains what personal data we collect, why we collect it, how we use it and how we protect it.

**What personal data do we collect?**

We collect personal data about you and your child to provide care and learning that is tailored to meet your child’s individual needs. We also collect information in order to verify your eligibility for funded childcare as applicable. Personal details that we collect about your child include:

Child’s name:.....	Child known as (if different).....
Family name:.....	
Date of Birth ...../...../.....	Gender:
Person to use as main contact: .....	
Relationship to child.....	
Address: .....	
Postcode .....	
Telephone No: .....	Mobile No.....
email address .....	
Second Contact	
Name.....	Relationship to child.....
Telephone No. .....	
Emergency contact	
Name.....	Relationship to child.....
Telephone No: .....	

Names and ages of other children in your family

.....  
.....

When will your child start school?

.....

Which school?

.....

Has your child been immunised against tetanus?

Does your child need any special care?

.....

Is your child allergic to anything?

.....

Religious affiliation

.....

Ethnic origin: White [ ], Black-African [ ], Black-Caribbean [ ], Asian [ ], Indian [ ], Other – please specify

Where applicable we will obtain child protection plans from social care and health care plans from health professionals.

This information will be collected from you directly in the registration form.

If you apply for up to 30 hours funded childcare, we will also collect your national insurance number or unique taxpayer reference (UTR), if you're self-employed. We may also collect information regarding benefits and family credits that you are in receipt of

•

**Why we collect this information and the legal basis for handling your data** We use personal data about you and your child in order to provide childcare services and fulfil the contractual arrangement you have entered into. This includes using your data to:

- contact you in case of an emergency
- to support your child's wellbeing and development
- to manage any special educational, health or medical needs of your child whilst at our setting
- to carry out regular assessment of your child's progress and to identify any areas of concern
- to maintain contact with you about your child's progress and respond to any questions you may have
- to process your claim for up to 30 hours funded childcare (only where applicable) •  
to keep you updated with information about our service

With your consent, we will also record your child's activities for their individual learning record. This may include photographs and videos. You will have the opportunity to withdraw your consent at any time, for images taken by confirming so in writing.

We have a legal obligation to process safeguarding related data about your child should we have concerns about their welfare. We also have a legal obligation to transfer records and certain information about your child to the school that your child will be attending.

### **Sharing data**

In order for us to deliver childcare services we will also share your data as required with the following categories of recipients:

- Ofsted – during an inspection or following a complaint about our service
- banking services to process payments (as applicable)
- the Local Authority (where you claim up to 30 hours funded childcare as applicable)
- the government's eligibility checker (as above)  
our insurance underwriter (if applicable)
- our setting software management provider (if applicable)

- the school that your child will be attending

We will also share your data if:

- we are legally required to do so, for example, by law, by a court ;
- to enforce or apply the terms and conditions of your contract with us;
- to protect your child and other children; for example by sharing information with social care or the police;
- it is necessary to protect our or others rights, property or safety
- We transfer the management of the setting, in which case we may disclose your personal data to the prospective buyer so they may continue the service in the same way.

We will never share your data with any other organisation to use for their own purposes

### **How do we protect your data?**

We protect unauthorised access to your personal data and prevent it from being lost, accidentally destroyed, misused, or disclosed by:

- Storing it on a computer with security programmes and/or in a locked filing cabinet in a lockable room.

### **How long do we retain your data?**

We retain your child's personal data at our setting only for the use for the setting's administration. Medication records and accident records are also kept for longer according to legal requirements. Your child's learning and development records are maintained by us and handed to you when your child leaves.

In some instances (child protection, or other support service referrals) we are obliged to keep your data for longer if it is necessary to comply with legal requirements (see our Children's and Provider Records policies).

### **Automated decision-making**

We do not make any decisions about your child based solely on automated decision-making.

### **Your rights with respect to your data**

You have the right to:

- request access, amend or correct your/your child's personal data
- request that we delete or stop processing your/your child's personal data, for example where the data is no longer necessary for the purposes of processing; and
- request that we transfer your, and your child's personal data to another person

If you wish to exercise any of these rights at any time or if you have any questions, comments or concerns about this privacy notice, or how we handle your data please contact us. If you have continue to have concerns about the way your data is handled and remain dissatisfied after raising your concern with us, you have the right to complain to the Information Commissioner Office (ICO). The ICO can be contacted at Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF or [ico.org.uk/](http://ico.org.uk/)

### **Changes to this notice**

We keep this notice under regular review. You will be notified of any changes where appropriate.

## **9.2 Admissions**

### **Policy statement**

It is our intention to make our setting accessible to children and families from all sections of the local community. We aim to ensure that all sections of our community have access to the setting through open, fair and clearly communicated procedures.

### **Procedures**

We ensure that information about our setting is accessible, using simple plain English

We arrange our waiting list in order of the date that the application was received. In addition, our policy may take into account:

- the age of the child, including children who are eligible for the funded entitlement – including eligible two year old children;
- the length of time on the waiting list;

whether any siblings already attend the setting; and the capacity of the setting to meet the individual needs of the child.

We offer funded places in accordance with the Code of Practice for Exeter and any local conditions in place at the time.

Our setting and its practices are welcoming and make it clear that fathers, mothers, other relations and carers are all welcome.

Our setting and its practices operate in a way that encourages positive regard for and understanding of difference and ability - whether gender, family structure, class, background, religion, ethnicity or competence in spoken English.

We support children and/or parents with disabilities to take full part in all activities within our setting.

We monitor the needs and background of children joining our setting on the Registration Form, to ensure that no accidental or unintentional discrimination is taking place.

We share and widely promote our Valuing Diversity and Promoting Equality Policy.

We consult with families about the opening times of our setting to ensure that we accommodate a broad range of families' needs.

We are flexible about attendance patterns to accommodate the needs of individual children and families, providing these do not disrupt the pattern of continuity in the setting that provides stability for all the children.

Failure to comply with the terms and conditions may ultimately result in the provision of a place being withdrawn.

### **9.3 Application to enrol your child at Start Right Nursery School**

Applications to join the sessions at our setting are by:

- Phoning on Monday or Friday mornings between 9-12am on 01392 877330
- Emailing on [startrightnurseryschool@hotmail.co.uk](mailto:startrightnurseryschool@hotmail.co.uk)
- Applying on the website [startrightnurseryschool.com](http://startrightnurseryschool.com) using the contact facility



- Writing to Start Right Nursery School, 74 Glasshouse Lane Exeter EX27BZ

An **application form** will be sent to you using letter or email.

Successful applications will be asked to complete a **starter pack** before beginning at the setting.

**An induction session** is offered to complete any administrative paper work, to see around the setting with your child and to listen to helpful advice on how to make the most of what the setting can offer for you and your child.

## 9.4 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 our setting.

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 that 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.

The Children Act (1989) defines *parental responsibility* as '*all the rights, duties, powers, responsibilities and authority which by law a parent of a child has in relation to the child and his property*'. (For a full explanation of who has parental responsibility, refer to the Preschool Learning Alliance publication *Safeguarding Children*.)

## Procedures

Parents are made to feel welcome in our setting; they are greeted appropriately, there is adult seating, there is an opportunity to discuss a child's welfare and progress when being dropped off and when being picked up with key workers.

We have a means to ensure all parents are included - that may mean that we have different strategies for involving fathers, or parents who work or live apart from their children.

We make every effort to accommodate parents who have a disability or impairment.

We consult with all parents to find out what works best for them.

We ensure on-going dialogue with parents to improve our knowledge of the needs of their children and to support their families.

Parents can ring the setting during working hours (8am-5pm) or in emergency at any time to communicate worries or concerns.

We inform all parents about how the setting is run and its policies, through access to written information, including our *Safeguarding Children and Child Protection* policy and our responsibilities under the Prevent Duty, and through regular informal communication. These are available on our website.

Information about a child and his or her family is kept confidential within our setting. Our policies inform you details how and why we process your personal information. The exception to this is where there is cause to believe that a child may be suffering, or is likely to suffer, significant harm, or where there are concerns regarding child's development that need to be shared with another agency. We will seek parental permission unless there are reasons not to in order to protect the safety of the child.

We seek specific parental consent to administer medication, take a child for emergency treatment, take a child on an outing and take photographs for the purposes of record keeping.

The expectations that we make on parents are made clear at the point of registration.

We seek parents' views regarding changes in the delivery of our service.

Parents are actively encouraged to participate in decision making processes according to the structure in place within our setting.

As far as possible our service is provided in a flexible way to meet the needs of parents without compromising the needs of children.

We provide sufficient opportunity for parents to share necessary information with staff and this is recorded and stored to protect confidentiality.

Our key persons are available to talk to parents at the beginning and end of sessions. Appointments can be made for more in-depth discussions when needed.

Where applicable, our key persons work with parents to carry out an agreed plan to support special educational needs.

Where applicable, our key persons work with parents to carry out any agreed tasks where a Protection Plan is in place for a child.

We involve parents in the shared record keeping about their children - either formally or informally – and ensure parents have access to their children's written developmental records.

We consult with parents about the times of meetings to avoid excluding anyone.

We inform all parents of the systems for registering queries, complaints or suggestions and we check to ensure these are understood. All parents have access to our written complaints procedure.

In compliance with the Safeguarding and Welfare Requirements, the following documentation is also in place at our setting:

- Admissions Policy.
- Complaints procedure.
- Record of complaints.
- Developmental records of children.

## 9.5 Children's records

### Policy statement

We have record keeping systems in place that meet legal requirements; the means we use to store and share that information takes place within the framework of the General Data Protection Regulations (GDPR) (2018) and the Human Rights Act (1998).

### Procedures

If a child attends another setting, we establish a regular two-way flow of appropriate information with parents and other providers. Where appropriate, we will incorporate comments from other providers, as well as parents and/or carers into the child's records. We keep two 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.
- These are kept using 'Capture Education digital observation programme' and can be accessed, and contributed to, by our staff by their tablets and the child's parents by logging into their own specific portal using a unique code on line. Samples of their work and weekly topics covered are bound in an end of term book with a report of their development.

#### *Personal records*

These may include the following (as applicable):

- Personal details – including the child's registration form and any consent forms.
- Contractual matters – including a copy of the signed parent contract, the child's days and times of attendance, a record of the child's fees, any fee reminders or records of disputes about fees.
- Child's development, health and well-being – including a summary only of the child's EYFS profile report, a record of discussions about every day matters about the child's development health and well-being with the parent.

- Early Support – including any additional focussed intervention provided by our setting (e.g. support for behaviour, language or development that needs an SEN action plan) and records of any meetings held.
- Welfare and child protection concerns – including records of all welfare and protection concerns, and our resulting action, meetings and telephone conversations about the child, an Education, Health and Care Plan and any information regarding a Looked After Child.
- Correspondence and Reports – including a copy of the child's 2 Year Old Progress Check (as applicable), all letters and emails to and from other agencies and any confidential reports from other agencies.

Confidential records are stored in a lockable file or cabinet, which is always locked when not in use and which our manager keeps secure in an office or other suitably safe place.

We read any correspondence in relation to a child, note any actions and file it immediately.

We ensure that access to children's files is restricted to those authorised to see them and make entries in them, this being our manager, deputy or designated person for child protection, the child's key person, or other staff as authorised by our manager and other staff as authorised by the manager.

We may be required to hand children's personal files to Ofsted as part of an inspection or investigation process; or to local authority staff conducting a S11 audit, as long as authorisation is seen. We ensure that children's personal files are not handed over to anyone else to look at.

Parents have access, in accordance with our Privacy Notice, Confidentiality and 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.

Our staff will not discuss personal information given by parents with other members of staff, except where it affects planning for the child's needs. Our staff induction programme includes an awareness of the importance of confidentiality in the role of the key person.

We retain children's records for three years after they have left the setting; except records that relate to an accident or child protection matter, which are kept until a child reaches the age of 21 years or 24 years respectively. These are kept in a secure place.

If data is kept electronically it is encrypted and stored as above.

Where there were s.47 child protection investigations, we mark the envelope with a star and archive it for 25 years.

We store financial information according to our finance procedures.

#### *Other records*

We keep a daily record of the names of the children we are caring for, their hours of attendance and the names of their key person.

#### **Legal framework**

- General Data Protection Regulations (GDPR) (2018)
- Human Rights Act (1998)

## **9.6 Provider records**

#### **Policy statement**

We keep records and documentation for the purpose of maintaining our business. These include:

- Records pertaining to our registration.
- Financial records pertaining to income and expenditure.
- Risk assessments.
- Employment records of our staff including their name, home address and telephone number.
- Names, addresses and telephone numbers of anyone else who is regularly in unsupervised contact with the children.

We consider our records as confidential based on the sensitivity of information, such as with employment records. These confidential records are maintained with regard to the

framework of the General Data Protection Regulations (2018), further details are given in our Privacy Notice and the Human Rights Act (1998).

## **Procedures**

All records are the responsibility of our management team who ensure they are kept securely.

All our records are kept in an orderly way in files and filing is kept up-to-date.

Our financial records are kept up-to-date for audit purposes.

We maintain health and safety records; these include risk assessments, details of checks or inspections and guidance etc.

Our Ofsted registration certificate is displayed.

Our Public Liability insurance certificate is displayed.

All our employment and staff records are kept securely and confidentially.

We notify Ofsted of any:

- change in the address of our premises;
- change to our premises which may affect the space available to us or the quality of childcare we provide;
- change to my name, address or contact information;
- change to any person living or working on my premises;
- significant event which is likely to affect our suitability to look after children; or
- other event as detailed in the *Statutory Framework for the Early Years Foundation Stage* (DfE 2017).

## **Legal framework**

- General Data Protection Regulations (GDPR) (2018)
- Human Rights Act 1998

## 9.7 Transfer of records to school

### Policy statement

We recognise that children sometimes move to another early years setting before they go on to school, although many will leave our setting to enter a nursery or reception class.

We prepare children for these transitions and involve parents and the receiving setting or school in this process. We prepare records about a child's development and learning in the Early Years Foundation Stage in our setting; in order to enable smooth transitions, we share appropriate information with the receiving setting or school at transfer.

Confidential records are shared where there have been child protection concerns according to the process required by our Local Safeguarding Children Board.

The procedure guides this process and determines what information we can and cannot share with a receiving school or setting. Prior to transferring information, we will establish the lawful basis for doing so (see our Privacy Notice).

### Procedures

#### *Transfer of development records for a child moving to another early years setting or school*

Using the *Early Years Outcomes* (DfE 2013) guidance and our assessment of children's development and learning, the key person will prepare a summary of achievements in the seven areas of learning and development.

The record refers to:

- any additional language spoken by the child and his or her progress in both languages;
- any additional needs that have been identified or addressed by our setting;
- any special needs or disability, whether a CAF was raised in respect of special needs or disability, whether there is an Education, Health and Care Plan, and the name of the lead professional.

The record contains a summary by the key person and a summary of the parent's view of the child.

The document may be accompanied by other evidence, such as photos or drawings that the child has made.



When a child transfers to a school, most local authorities provide an assessment summary format or a transition record, which we will follow as applicable.

If there have been any welfare or protection concerns, the authorities will inform the next school.

#### *Transfer of confidential information*

The receiving school or setting will need to have a record of any safeguarding or child protection concerns that were raised in our setting and what was done about them.

We will make a summary of the concerns to send to the receiving setting or school, along with the date of the last professional meeting or case conference. Some Local Safeguarding Children Boards will stipulate the forms to be used and provide these for us to use.

Where a CAF has been raised in respect of any welfare concerns, we will pass the name and contact details of the lead professional on to the receiving setting or school.

Where there has been a s47 investigation regarding a child protection concern, we will pass the name and contact details of the child's social worker on to the receiving setting or school – regardless of the outcome of the investigation.

We post or take the information to the school or setting, ensuring it is addressed to the setting or school's designated person for child protection and marked as 'confidential'.

We do not pass any other documentation from the child's personal file to the receiving setting or school.

#### **Legal framework**

- General Data Protection Regulations (GDPR) (2018)
- Freedom of Information Act (2000)
- Human Rights Act (1998)
- Children Act (1989)

## **9.8 Confidentiality and client access to records**

### **Policy statement**

*‘Share with informed consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, there is good reason to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case.’*

*Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (HMG 2015)*

In our setting, staff and managers 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. We have record keeping systems in place that meet legal requirements; the means that we use to store and share that information takes place within the framework of the General Data Protection Regulations (2018) and the Human Rights Act (1998).

### **Confidentiality procedures**

Most things that happen between the family, the child and the setting are confidential to our setting. In exceptional circumstances information is shared, for example with other professionals or possibly social care or the police.

Information shared with other agencies is done in line with our policies. We always check whether parents regard the information they share with us to be confidential or not.

Some parents may share information about themselves with other parents as well as with our staff; we cannot be held responsible if information is shared by 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 are not responsible should that confidentiality be breached by participants.

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.).

Information is kept in a manual file, or electronically. Our staff may also use a computer to type reports, or letters.

Our staff discuss children's general progress and well being together in meetings, but more sensitive information is restricted to our manager and the child's key person, and is shared with other staff on a need to know basis.

We do not discuss children with staff who are not involved in the child's care, nor with] other parents or anyone else outside of the setting.

Our discussions with other professionals take place within a professional framework and not on an informal or ad-hoc basis.

Where third parties share information about an individual us; our practitioners and managers check if it is confidential, both in terms of the party sharing the information and of the person whom the information concerns.

#### **Client access to records procedures**

Parents may request access to any confidential records we hold on their child and family following the procedure below:

- The parent is the 'subject' of the file in the case where a child is too young to give 'informed consent' and has a right to see information that our setting has compiled on them.
- Any request to see the child's personal file by a parent or person with parental responsibility must be made in writing to the setting manager.
- We acknowledge the request in writing, informing the parent that an arrangement will be made for him/her to see the file contents, subject to third party consent.
- Our written acknowledgement allows one month for the file to be made ready and available. We will be able to extend this by a further two months where requests are

complex or numerous. If this is the case, We will inform you within one month of the receipt of the request and explain why the extension is necessary

- A fee may be charged for repeated requests, or where a request requires excessive administration to fulfil.
- Legal advice may be sought before sharing a file.
- Our manager goes through the file and ensures that all documents have been filed correctly, that entries are in date order and that there are no missing pages. They note any information, entry or correspondence or other document which mentions a third party.
- We write to each of those individuals explaining that the subject has requested sight of the file, which contains a reference to them, stating what this is.
- They are asked to reply in writing to our manager giving or refusing consent for disclosure of that material.
- We keep copies of these letters and their replies on the child's file.
  
- 'Third parties' include each family member noted on the file; so where there are separate entries pertaining to each parent, step parent, grandparent etc. we write to each of them to request third party consent.
- Third parties also include workers from any other agency, including children's social care and the health authority for example. Agencies will normally refuse consent to share information, preferring instead for the parent to be redirected to those agencies for a request to see their file held by that agency.
- Members of our staff should also be written to, but we reserve the right under the legislation to override a refusal for consent or to just delete the name of the staff member and not the information. We may grant refusal if the member of staff has provided information that could be considered 'sensitive' and the staff member may be in danger if that information is disclosed; or if that information is the basis of a police investigation. However, if the information is not sensitive, then it is not in [our/my] interest to withhold that information from a parent. In each case this should be discussed with members of staff and decisions recorded.
- When we have received all the consents/refusals our manager takes a photocopy of the complete file. On the copy of the file, our manager removes any information that a third party has refused consent for us to disclose and blank out any references to the third party, and any information they have added to the file, using a thick marker pen.
- The copy file is then checked by the manager and legal advisors to verify that the file has been prepared appropriately.

- 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'.
- We photocopy the 'clean copy' again and collate it for the parent to see.
- Our manager informs the parent that the file is now ready and invites him/ her to make an appointment to view it.
- Our manager and their line manager meet with the parent to go through the file, explaining the process as well as what the content of the file records about the child and the work that has been done. Only the person(s) with parental responsibility can attend that meeting, or the parent's legal representative or interpreter.
- The parent may take a copy of the prepared file away; but, to ensure it is properly explained to and understood by the parent, we never hand it over without discussion.

It is an offence to remove material that is controversial or to rewrite records to make them more acceptable. Our recording procedures and guidelines ensure that the material reflects an accurate and non-judgemental account of the work we have done with the family.

If a parent feels aggrieved about any entry in the file, or the resulting outcome, then we refer the parent to our complaints procedure.

The law requires that the information we hold must be held for a legitimate reason and must be accurate (see our Privacy Notice). If a parent says that the information we hold is inaccurate, then the parent has a right to request for it to be changed. However, this only pertains to factual inaccuracies. Where the disputed entry is a matter of opinion, professional judgement, or represents a different view of the matter than that held by the parent, we retain the right not to change that entry, but we can record the parent's view of the matter. In most cases, we would have given a parent the opportunity at the time to state their side of the matter, and it would have been recorded there and then.

If there are any controversial aspects of the content of a child's file, we must seek legal advice. This might be where there is a court case between parents, where social care or the police may be considering legal action, or where a case has already completed and an appeal process is underway.

We never 'under-record' for fear of the parent seeing, nor do we make 'personal notes' elsewhere.

All the undertakings above are subject to the paramount commitment of our setting, which is to the safety and well-being of the child. Please see also our policy on Safeguarding Children and Child Protection.

## Legal framework

- General Data Protection Regulations (GDPR) (2018)
- Human Rights Act (1998)

## 9.9 Information sharing

*‘Sharing information is an intrinsic part of any frontline practitioners’ job when working with children and young people. The decisions about how much information to share, with whom and when, can have a profound impact on individuals’ lives. It could ensure that an individual receives the right services at the right time and prevent a need from becoming more acute and difficult to meet. At the other end of the spectrum it could be the difference between life and death.’*

*Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (HM Government 2015)*

## Policy statement

We recognise that parents have a right to know that the information they share with us will be regarded as confidential, as well as to be informed about the circumstances when, and the reasons why, we are obliged to share information.

We record and share information about children and their families (data subjects) in line with the six principles of the General Data Protection Regulations (GDPR) (2018) which are further explained in our Privacy Notice that is given to parents at the point of registration. The six principles state that personal data must be:

1. Processed fairly, lawfully and in a transparent manner in relation to the data subject.
2. Collected for specified, explicit and legitimate purposes and not further processed for other purposes incompatible with those purposes.
3. Adequate, relevant and limited to what is necessary in relation to the purposes for which data is processed.
4. Accurate and where necessary, kept up to date.

5. Kept in a form that permits identification of data subjects for no longer than is necessary for the purposes for which the data is processed.
6. Processed in a way that ensures appropriate security of the personal data including protection against accidental loss, destruction or damage, using appropriate technical or organisational measures

We are obliged to share confidential information without authorisation from the person who provided it, or to whom it relates, if it is in the public interest. That is when:

- it is to prevent a crime from being committed or to intervene where one may have been, or to prevent harm to a child or adult; or
- not sharing it could be worse than the outcome of having shared it.

Information should be shared in the following circumstances:

- Where there is evidence that the child is suffering, or is at risk of suffering, significant harm.
- Where there is reasonable cause to believe that a child may be suffering, or is at risk of suffering, significant harm.
- To prevent significant harm arising to children and young people or adults, including the prevention, detection and prosecution of serious crime.

## **Procedures**

Our procedure is based on the GDPR principles as listed above and the seven golden rules for sharing information in the Information sharing Advice for practitioners providing safeguarding services to children, young people, parents and carers. We also follow the guidance on information sharing from the Local Safeguarding Children Board.

1. *Remember that the General Data Protection Regulations 2018 and human rights law are not barriers to justified information sharing as per the Children Act 1989, but provide a framework to ensure that personal information about living individuals is shared appropriately.*

Our policy and procedures on Information Sharing provide guidance to appropriate sharing of information both within the setting, as well as with external agencies.

- 2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their consent, unless it is unsafe or if I have a legal obligation to do so. A Privacy Notice is given to parents at the point of registration to explain this further.*

In our setting we ensure parents:

- access a copy of our Privacy Notice and information about our Information Sharing Policy through our website. When starting their child in the setting and that they sign our Registration Form to say that they understand the circumstances in which information may be shared without their consent. This will only be when it is a matter of safeguarding a child or vulnerable adult;
  - have information about our Safeguarding Children and Child Protection Policy; and
  - have information about the other circumstances when information will be shared with external agencies, for example, with regard to any special needs the child may have or transition to school.
- 3. Seek advice from other practitioners if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.*

Our staff discuss concerns about a child routinely in supervision and any actions are recorded in the child's file.

Our Safeguarding Children and Child Protection Policy sets out the duty of all members of our staff to refer concerns to our manager or deputy, as designated person, who will contact children's social care for advice where they have doubts or are unsure.

Our manager seeks advice, if needed, to share information without consent to disclose.

- 4. Share with informed consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, there is good reason to do*



*so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be certain of the basis upon which you are doing so. Where you have consent, be mindful that an individual might not expect information to be shared.*

We base decisions to share information without consent on judgements about the facts of the case and whether there is a legal obligation.

Our guidelines for consent are part of this procedure.

Our manager is conversant with this and she is able to advise staff accordingly.

- 5. Consider safety and well-being: Base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.*

In our setting we:

- record concerns and discuss these with our designated person for child protection matters;
  - record decisions made and the reasons why information will be shared and to whom; and
  - follow the procedures for reporting concerns and record keeping as set out in our Safeguarding Children and Child Protection Policy.
- 6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.*

Our Safeguarding Children and Child Protection Policy and Children's Records Policy set out how and where information should be recorded and what information should be shared with another agency when making a referral.

- 7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.*

Where information is shared, we record the reasons for doing so in the child's file; where it is decided that information is not to be shared that is recorded too.

### *Consent*

When parents choose our setting for their child, they will share information about themselves and their families. This information is regarded as confidential. Parents have a right to be informed that we will seek their consent to share information in most cases, as well as the kinds of circumstances when we may not seek their consent, or may override their refusal to give consent.

We inform them as follows:

- Our policies and procedures set out our responsibility regarding gaining consent to share information and when it may not be sought or overridden.
- We may cover this verbally when the child starts or include this in our website.
- Parents sign our Registration Form at registration to confirm that they understand this.
- We ask parents to give written consent to share information about any additional needs their child may have, or to pass on child development summaries to the next provider/school.
- We give parents copies of the forms they sign.

We consider the following questions when we assess the need to share:

- Is there a legitimate purpose to us sharing the information?
- Does the information enable the person to be identified?
- Is the information confidential?
- If the information is confidential, do we have consent to share?
- Is there a statutory duty or court order requiring us to share the information?
- If consent is refused, or there are good reasons for us not to seek consent, is there sufficient public interest for us to share information?
- If the decision is to share, are we sharing the right information in the right way?
- Have we properly recorded our decision?

Consent must be freely given and *informed* - that is the person giving consent needs to understand why information will be shared, what will be shared, who will see information, the purpose of sharing it and the implications for them of sharing that information as detailed in the Privacy Notice.

Consent may be *explicit*, verbally but preferably in writing, or *implicit*, implied if the context is such that sharing information is an intrinsic part of our service or it has been explained and agreed at the outset.

Consent can be withdrawn at any time.

We explain our Information Sharing Policy to parents.

### *Separated parents*

Consent to share need only be sought from one parent. Where parents are separated, this would normally be the parent with whom the child resides. Where there is a dispute, we will consider this carefully.

Where the child is looked after, we may also need to consult the Local Authority, as 'corporate parent' before information is shared.

All the undertakings above are subject to our paramount commitment, which is to the safety and well-being of the child. Please also see our Safeguarding Children and Child Protection Policy.

### **Legal framework**

- General Data Protection Regulations (GDPR) (2018)
- Human Rights Act (1998)

## **9.10 Working in partnership with other agencies**

### **Policy statement**

We work in partnership with local and national agencies to promote the well-being of all children. We will never share your data with any organisation to use for their own purposes.

### **Procedures**

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

We have procedures in place for the sharing of information about children and families with other agencies. These are set out in our Privacy Notice, Information Sharing Policy, Safeguarding Children and Child Protection Policy and the Supporting Children with Special Educational Needs Policy.

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 our setting and respect their professional roles.

We follow the protocols for working with agencies, for example on child protection. We ensure that staff from other agencies do not have unsupervised access to the child they are visiting in the setting and do not have access to any other child(ren) during their visit.

Our staff do not casually share information or seek informal advice about any named child/family.

When necessary, we consult with and signpost to local and national agencies who offer a wealth of advice and information that help us to develop our understanding of the 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.

## 9.11 Making a complaint

### Policy statement

We believe that children and parents are entitled to expect courtesy and prompt, careful attention to their needs and wishes. We welcome suggestions on how to improve our setting and will give prompt and serious attention to any concerns about the running of the setting. We anticipate that most concerns will be resolved quickly, by an informal approach with the appropriate member of staff. If this does not achieve the desired result, we have a set of procedures for dealing with concerns. We aim to bring all concerns about the running of our setting to a satisfactory conclusion for all of the parties involved.

### Procedures

All settings are required to keep a written record of any complaints that reach stage two and above, and their outcome. This is to be made available to parents, as well as to Ofsted inspectors on request. A full procedure is set out in the *Complaint Investigation Record* (Preschool Learning Alliance 2015) which acts as the 'summary log' for this purpose.

#### *Making a complaint*

##### Stage 1

- Any parent who has a concern about an aspect of our setting's provision talks over his/her concerns with our manager] first of all.
- Most complaints should be resolved amicably and informally at this stage.
- We record the issue, and how it was resolved, in the accident/incident/complaints file.

##### Stage 2

- If this does not have a satisfactory outcome, or if the problem recurs, the parent moves to this stage of the procedure by putting the concerns or complaint in writing.
- Our setting stores all information relating to written complaints from parents in the accident/incident/complaints file. However, if the complaint involves a detailed investigation, our manager may wish to store all information relating to the investigation in a separate file designated for this complaint.
- When the investigation into the complaint is completed, our manager meets with the parent to discuss the outcome.

- We inform parents of the outcome of the investigation within 28 days of him/her making the complaint.
- When the complaint is resolved at this stage, we log the summative points in our accident/incident/complaints file, which is made available to Ofsted on request.

### Stage 3

- If the parent is not satisfied with the outcome of the investigation, he or she requests a meeting with our manager. The parent may have a friend or partner present if they prefer and our manager should have the support of the childminding network.
- An agreed written record of the discussion is made, as well as any decision or action to take as a result. All of the parties present at the meeting sign the record and receive a copy of it.
- This signed record signifies that the procedure has concluded. When the complaint is resolved at this stage, we log the summative points in our accident/incident/complaints file.

### Stage 4

- If at the stage three meeting the parent cannot reach agreement with us, we invite an external mediator to help to settle the complaint. This person should be acceptable to both parties, listen to both sides and offer advice. A mediator has no legal powers, but can help us to define the problem, review the action so far and suggest further ways in which it might be resolved.
- The mediator keeps all discussions confidential. She/he can hold separate meetings with our staff and the parent, if this is decided to be helpful. The mediator keeps an agreed written record of any meetings that are held and of any advice she/he gives.

### Stage 5

- When the mediator has concluded her/his investigations, a final meeting between the parent and our manager is held. The purpose of this meeting is to reach a decision on the action to be taken to deal with the complaint. The mediator's advice is used to reach this conclusion. The mediator is present at the meeting if all parties think this will help a decision to be reached.
- A record of this meeting, including the decision on the action to be taken, is made. Everyone present at the meeting signs the record and receives a copy of it. This signed record signifies that the procedure has concluded.

*The role of the Office for Standards in Education, Children's Services and Skills (Ofsted), the Local*

*Safeguarding Children Board and the Information Commissioner's Office*

- Parents may approach Ofsted directly at any stage of this complaints procedure. In addition, where there seems to be a possible breach of the setting's registration requirements, it is essential to involve Ofsted as the registering and inspection body with a duty to ensure the Safeguarding and Welfare Requirements of the Early Years Foundation Stage are adhered to.
- Parents can complain to Ofsted by telephone or in writing at:

Ofsted National Business Unit, Piccadilly Gate, Store Street, Manchester M1 2WD

Tel: 0300 123 1231

- These details are displayed on our setting's notice board.
- If a child appears to be at risk, we follow the procedures of the Local Safeguarding Children Board.
- In these cases, both the parent and our setting are informed and our manager work with Ofsted or the Local Safeguarding Children Board to ensure a proper investigation of the complaint, followed by appropriate action.
- The Information Commissioner's Office (ICO) can be contacted if you have made a complaint about the way your data is being handled and remain dissatisfied after raising your concern with us. For further information about how we handle your data, please refer to the Privacy Notice given to you when you registered your child at [our/my] setting. The ICO can be contacted at Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF or [ico.org.uk](http://ico.org.uk)

*Records*

- A record of complaints in relation to our setting, or the children or the adults working in our setting, is kept for at least three years; including the date, the circumstances of the complaint and how the complaint was managed.
- The outcome of all complaints is recorded in our accident/incident/complaints file, which is available for parents and Ofsted inspectors to view on request.

# 10.0 Preventing Radicalization (PREVENT)

## 10.1 Preventing Extremism and Radicalisation

### Introduction

*Start Right Nursery School* is committed to providing a secure environment for children, where they feel safe and are kept safe. All adults in our setting recognise that safeguarding is everyone's responsibility irrespective of the role they undertake or whether their role has direct contact or responsibility for children or not.

In adhering to this policy, all staff, including visiting staff, volunteers, students on placement and visitors will contribute to our setting's delivery of the outcomes for all children, as set out in s10 (2) of the Children Act 2004.

This Preventing Extremism and Radicalisation Safeguarding Policy is one element within our overall arrangements to Safeguard and Promote the Welfare of all Children in line with our statutory duties set out in Ofsted's Common Inspection Framework, 2015, Inspecting safeguarding in early years, education and skills from September 2015, Safeguarding children and young people and young vulnerable adults policy, July 2015 and Statutory framework for the early years foundation stage, 2014.

Our setting's Preventing Extremism and Radicalisation Policy also draws upon:

- Keeping Children Safe in Education, 2014, DfE
- Counter-terrorism and Security Act, 2015
- Guidance to the Prevent Duty, DfE
- Protecting children from radicalisation: the prevent duty; July 2015
- Prevent: Resources Guide, DfE
- Social Media Guidance, July 2015,
- Tackling Extremism in the UK, DfE
- Equality Act 2010 and guidance on its implementation
- Peter Clarke's Report into allegations concerning Birmingham schools, July 2014.



## **Ethos and Practice**

When operating this policy we use the following accepted Governmental definition of extremism which is:

***‘Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs; and/or calls for the death of members of our armed forces, whether in this country or overseas’.***

There is no place for extremist views of any kind in our setting, whether from internal sources –children, staff or management, or external sources - school community, external agencies or individuals. The children see our setting as a safe place where they can ask questions about the world and where our staff encourage and facilitate these opportunities.

As a setting we recognise that extremism and exposure to extremist materials and influences can lead to poor outcomes for children and so should be addressed as a safeguarding concern as set out in this policy. We also recognise that if we fail to challenge extremist views, we are failing to protect our children.

We aim to provide a broad and balanced early years curriculum, delivered by skilled professionals, so that our children understand and become tolerant of difference and diversity and also to ensure that they thrive and feel valued and respected as individuals.

Children can be exposed to extremist influences or prejudiced views from an early age which originate from a variety of sources and media, including via the internet. There may be times when children may reflect or display views that may be discriminatory, prejudiced or extremist, including using derogatory language.

Any prejudice, discrimination or extremist views, including derogatory language, displayed by children or staff will always be challenged and where appropriate supported through discussion with children and their families and the Code of Conduct for staff.

Where misconduct by a member of staff is proven the matter will be referred to the Local Authority.

As part of wider safeguarding responsibilities setting staff will be alert to:

- Disclosures by children of their exposure to the extremist actions, views or materials of others outside of the setting, such as in their homes or community groups.
- Graffiti symbols, writing or art work promoting extremist messages or images
- Children exposed to extremist material online, including through social networking sites
- Parental reports of changes in behaviour, friendship or actions and requests for Assistance.
- Local authority services, and police reports of issues affecting children in other schools or settings
- Use of extremist or 'hate' terms to exclude others or incite violence  
Intolerance of difference, whether secular or religious or, in line with our equalities policy, views based on, but not exclusive to, gender, disability, homophobia, race, colour or culture

Our setting will closely follow any locally agreed procedure as set out by the Local Authority and /or the Safeguarding Children Board's agreed processes and criteria for safeguarding individuals vulnerable to extremism and radicalisation.

### **Teaching Approaches**

We will ensure our teaching approaches help children to build resilience to extremism and give them a positive sense of identity through Personal, Social and Emotional development and the promotion of critical thinking. We will aim to ensure that all our staff are equipped to recognize extremism and are skilled and confident enough to challenge it in a way appropriate to the child's age and level of development.

We will facilitate a 'safe place' for children to speak confidently and openly about any worries or concerns they may have concerning their safety and will equip our children with the appropriate skills to become self-assured young people.

This approach will be embedded within the ethos of our setting so that children know and understand what safe and acceptable behaviour is in the context of extremism and radicalisation. Our goal is to build mutual respect and understanding and to promote the use of dialogue not violence as a form of conflict resolution.

We will work with local partners, families and communities in our efforts to ensure our setting understands and embraces our local context and values in challenging extremist views and to assist in the broadening of children's experiences. We will help support children who may be vulnerable to such influences as part of our wider safeguarding responsibilities and in such instances seek external support from the Local Authority and/or local partnership structures working to prevent extremism.

At our setting we will promote the values of democracy, the rules of law, individual liberty, mutual respect and tolerance for those with different faiths and beliefs. We will teach and encourage children to respect one another and to respect and tolerate difference, especially those of a different faith or no faith.

### **Whistle Blowing**

Where there are concerns of extremism or radicalisation children and staff will be encouraged to make use of our internal systems to Whistle Blow or raise any issue in confidence.

### **Safeguarding**

Staff at our setting will be alert to the fact that whilst extremism and radicalisation is broadly a safeguarding issue there may be some instances where a child or children may be at direct risk of harm or neglect. For example; staff may be aware of information about a child's family related to extremism that may place a child at risk of harm Therefore all adults working in our setting (including visiting staff, volunteers' contractors, and students on placement) are required to report instances where they believe a child may be at risk of harm or neglect to the Lead Safeguarding Practitioner or setting Manager.

### **Role of the Lead Safeguarding Practitioner**

The Lead Safeguarding Practitioner is: Caryll Ingerslev

## **Training**

Training on Safeguarding and Child Protection will be organised for staff and management at least every three years and will comply with the prevailing arrangements agreed by the Local Authority and the Safeguarding Children Board and will, in part, include training on extremism and radicalisation and its safeguarding implications.

The Lead Safeguarding Practitioner will attend training courses as necessary and the appropriate inter-agency training organised by the Safeguarding Children Board at least safeguarding implications.

## **Recruitment**

The arrangements for recruiting all staff, permanent and volunteers will follow LA guidance for safer recruitment best practice in education settings, including, but not limited to, ensuring that DBS checks are always made at the appropriate level, that references are always received and checked and that we complete and maintain a single central record of such vetting checks.

Safer recruitment best practice principles and sound employment practice will be applied and in doing so will deny opportunities for inappropriate recruitment or advancement. We will be alert to the possibility that persons may seek to gain positions within our setting so as to unduly influence our setting's character and ethos. We are aware that such persons seek to limit the opportunities for our children thereby rendering them vulnerable to extremist views and radicalisation as a consequence.

By adhering to safer recruitment best practice techniques and by ensuring that there is an ongoing culture of vigilance within our setting and staff team we will minimise the opportunities for extremist views to prevail.

## **10.2 Lockdown**

In case of a telephone warning or evidence of any terrorist or violent attack to the school or in the surrounding area a verbal warning key word 'LOCKDOWN' will be issued. All staff, children and adults are to be brought into the main building. All doors and windows are to be locked. Everyone must stay inside until we receive further instructions from the authorities.

If an attack is made on the building then all should be relocated into an upstairs room and the door locked.

## **11.0 British Values**

### **11.1 Promoting Fundamental British Values**

Start Right Nursery School helps children to understand that while different people may hold different views about what is 'right' and 'wrong', all people living in England are subject to its law. Start Right Nursery School promote the fundamental British values of democracy, the rule of law, individual liberty, and mutual respect and tolerance of those with different faiths and belief. Start Right Nursery School actively promote these values means that they seek to challenge opinions or behaviours in children that are contrary to fundamental British values.

Start Right Nursery School seeks to:

- enable children to develop their self-knowledge, self-esteem and self-confidence;
- enable children to distinguish right from wrong and to respect the civil and criminal law of England;
- encourage children to accept responsibility for their behaviour, show initiative, and to understand how they can contribute positively to the lives of those living and working in the locality of the school and to society more widely;

- enable children to acquire a broad general knowledge of and respect for public institutions and services in England;
- further tolerance and harmony between different cultural traditions by enabling children to acquire an appreciation of and respect for their own and other cultures;
- encourage respect for other people;
- encourage respect for democracy and support for participation in the democratic processes, including respect for the basis on which the law is made and applied in England.
- encourage an understanding of how citizens can influence decision-making through the democratic process;
- encourage an appreciation that living under the rule of law protects individual citizens and is essential for their well being and safety;
- encourage an acceptance that other people having different faiths or beliefs to oneself (or having none) should be accepted and tolerated, and should not be the cause of prejudicial or discriminatory behaviour;

## **12.0 Forest School**

### **12.1 Environmental/ Ecological policy**

One of the core values of Start Right is that of respect. This respect is not only for people but also for the world we live in. In the Forest School sessions, the children will learn of the beauty of the natural world and how to care for it. The Forest School leader will teach through example in the care of the Forest School site, to enable sustainable use of the site and to show respect to the natural environment.

The purchasing of equipment for use within Forest School will be thought about, and as far as possible local suppliers will be used. Ethical considerations will be made as well in regards to purchasing items where the welfare of the environment, animals and workers are paramount.

The care of the flora and fauna in the site is managed by the Forest School leader and is taught to all those who use the site. When looking for insects the children are asked to return them to where they are found so that they are put back in the appropriate environment. The Flora of the site is cared for by putting up boundaries to areas in the Spring, when flowers are beginning to appear to prevent people trampling on them.

*Start Right Nursery School Policies revised by Peter and Caryl Ingerslev*

*Sept 2021*

*Adapted from Pre School Learning Alliance Publications (with additions and revisions).*