

# HEALTH & SAFETY POLICY

## Statement of intent

Our settings believe that the health & safety of children is of paramount importance. We make our settings a safe and healthy place for children, parents, staff and volunteers.

# <u>Aim</u>

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

# Methods

A named member of staff is responsible for the overall Health & Safety - Emma Roberts - and is competent to carry out these responsibilities. She has undertaken health & safety training and regularly updates her knowledge and understanding. We display the necessary health and safety poster in the storeroom at Impstone and the staff office at Cherry Trees.

#### Insurance cover

We have public liability insurance and employers' liability insurance. The certificate for public liability insurance is displayed on the parent noticeboard in each lobby.

#### Risk assessment

We have a named Risk Assessor who has the responsibility of ensuring the settings are risk managed at all times. This is Emma Roberts. All staff are aware of our risk assessment policy and eliminate risks within the setting as they are identified. They notify the named Risk Assessor so the risk, and how it was rectified, can be recorded.

Our risk assessment process includes:

- checking for hazards and risks indoors and outside, and in our activities and procedures. Our
  assessment covers adults and children and specifically anything with which a child may come
  into contact.
- identifying areas that need attention, including those that need checking regularly.
- developing an action plan that specifies the action required, the timescales for action, the person responsible for the action and any funding required.
- Maintaining a list of potential health and safety issues, which are checked continually.
- Records of risks that have been identified are kept and reviewed termly.

## 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 understand their shared responsibility for health and safety. The induction training covers our procedures for maintaining safety for the children; employee well-being; storage of potentially dangerous substances



- Records are kept of these induction training sessions and new staff and volunteers are asked to sign the records to confirm that they have taken part.
- Health and safety issues are explained to the parents of new children so that they understand
  the part played by these issues in the daily life of the settings.
- Health and safety is discussed regularly at staff meetings.
- We operate a no smoking policy in and around the settings.
- Practitioners must not be under the influence of alcohol or any other substance which may affect their ability to care for children.
- Practitioners must make the Manager aware of any medication they are taking which may
  affect their ability to care for children. They must seek medical advice and only work directly
  with children if the advice is that the medication is unlikely to impair their ability to work
  safely with children.
- Children are made aware of health and safety issues through discussions, planned activities and routines.

## Suitable people

- We ensure all staff employed have been checked for criminal records by an enhanced disclosure from the Disclosure & Barring Service (DBS) and we keep a record of these checks.
- Adults do not supervise children on their own. When children are on the premises at least two adults must be present, unless the child belongs to that adult.
- All children are supervised by adults at all times.

## Safety of adults

- Adults are provided with guidance about the safe storage, movement, lifting and erection of large pieces of equipment and are provided with safe equipment.
- All warning signs are clear and in appropriate languages.
- The sickness of staff and their involvement in accidents is recorded. The records are reviewed termly to identify any issues that need to be addressed.
- We keep a record of all substances that may be hazardous to health such as cleaning chemicals or gardening chemicals (if used) and what the risks are.

## 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 adults staff, volunteers and visitors are recorded.
- Our procedures prevent unauthorised access to our premises.
- Our procedures prevent children from leaving our premises unnoticed.
- The personal possessions of staff and volunteers are securely stored during sessions.



#### **Premises**

In general, the premises are clean, adequately ventilated, kept at a comfortable temperature and well lit with as much use of daylight as possible. There is access to the outdoor area.

- a) **CCTV** We have **CCTV** installed around the Impstone premises with the images continually on view in the lobby. This enables us to see who is at the front door and acts as a deterrent to vandalism from people outside the building.
- b) **Doors** We take precautions to prevent children's fingers from being trapped in doors.
- c) Floors All surfaces are checked daily to ensure they are clean and not uneven/damaged.
- d) Kitchen Children do not have unsupervised access to the kitchen. All surfaces are clean and non-porous. There are separate facilities for handwashing and for washing up. Cleaning materials and other dangerous materials are stored out of children's reach.

  When children take part in cooking activities, they are:-
  - > supervised at all times
  - > kept away from hot surfaces and hot liquids
  - > taught about safety when cooking
- e) *Electrical equipment* All electrical equipment conforms to safety requirements and is checked regularly. We do not have gas on either site.

Our boiler/electrical switchgear/meter cupboard is not accessible to the children.

Fires, heaters, electric sockets, wires and leads are properly guarded and the children are taught not to touch them. There are sufficient sockets to prevent overloading.

The temperature of the water in the sink is checked regularly to ensure it is cool. Lighting and ventilation is adequate in all areas including storage areas.

- f) **Storage** All resources and materials from which children select are stored safely. All equipment and resources are stored or stacked safely to prevent them accidentally falling or collapsing.
- g) *Fire safety* Our emergency evacuation procedures are approved by the Fire Safety Officer Emma Roberts and are:
  - > clearly displayed in each premises
  - > explained to new members of staff and volunteers
  - > practised regularly at least once a term.
  - Fire doors are clearly marked, never obstructed and easily opened from inside.
  - > Smoke detectors/alarms and fire-fighting appliances conform to BSEN standards, are fitted in appropriate high risk areas of the building and are checked as specified by the manufacturer.
  - > Records are kept of fire drills and the servicing of fire safety equipment which is undertaken by each hall committee.
- h) *Outdoor area* Our outdoor areas are securely fenced and the gates secured before children start playing outside.

Our outdoor areas are checked for safety and cleared of rubbish, animal waste, pools of water on equipment and any other hazards before it is used.

Adults and children are alerted to the dangers of poisonous plants, herbicides and pesticides. Our outdoor sand pits are covered when not in use and cleaned regularly.

All outdoor activities are supervised at all times.



## Hygiene

- Due to the Covid19 outbreak we operate robust cleaning procedures throughout the settings (see Covid19 Risk Assessment).
- All staff and children wash their hands upon arrival at the setting.
- All toys and equipment used are disinfected at the end of each day and throughout as needed.
- The children are taught about the importance of covering noses and mouths when coughing/sneezing, using tissues and washing hands. Our daily routines encourage the children to learn about personal hygiene.
- We regularly seek information from the Environmental Health Department and the Health Authority to ensure that we keep up to date with the latest recommendations.
- We have a daily cleaning routine for the settings which includes playrooms, kitchen, toilet and nappy changing areas. The main hall floors and any carpets are regularly cleaned as arranged by the Hall Committee and by ourselves.
- We clean soiled resources and equipment, dressing-up clothes and furnishings as soon as needed.
- The toilet areas have a high standard of hygiene including hand washing and drying facilities and the disposal of nappies.
- We implement good hygiene practices by:
  - > cleaning tables between activities;
  - checking toilets regularly;
  - wearing protective clothing such as aprons and disposable gloves as appropriate;
  - providing sets of clean clothes;
  - providing tissues, wipes and hand gel where appropriate.

## Activities & Resources

- Before purchase or loan, equipment and resources are cleaned and checked to ensure that they are safe for the ages and stages of the children currently attending the settings.
- The layout of play equipment allows adults and children to move safely and freely between activities.
- All equipment is regularly checked for cleanliness and safety and any dangerous items are repaired or discarded.
- All materials including paint and glue are non-toxic.
- Sand is clean and suitable for children's play.
- Physical play is constantly supervised.
- Children are taught to handle and store tools safely.
- Children learn about health, safety and personal hygiene through the activities we provide and the routines we follow.
- Children who are sleeping are checked regularly and supervised at all times.
- We take a yearly inventory of all our equipment.



#### Food and drink

- Staff who prepare and handle food receive appropriate training and understand and comply with food safety and hygiene regulations.
- All food and drink is stored appropriately.
- Adults do not carry hot drinks through the play area(s) unless in Thermos cups with lids and do not place hot drinks within reach of children.
- Snack and meal times are appropriately supervised and children do not walk about with food and drinks.
- Fresh drinking water is available to the children at all times, with access to milk at mealtimes and upon request at any other time.
- We operate systems to ensure that children do not have access to food/drinks to which they are allergic.
- We notify Ofsted of any food poisoning affecting 2 or more children.

## Supervision of children on Outings and visits

- We have agreed procedures for the safe conduct of outings.
- Parents sign a general consent on registration for their children to be taken out as a part of the daily activities of the settings.
- Parents sign specific consent forms before major outings.
- A risk assessment is carried out before a major outing takes place and made available to parents should they wish to see it.
- Our adult to child ratio is lower than within the setting, however this can vary dependant on the type of venue, the sensibility of the location, the children and how easily accessible it is. Generally we work with a maximum of:
  - Under 3 1 adult to 3 children
  - Over 3 1 adult to 6 children
- Named children are assigned to individual staff to ensure each child is individually supervised and to ensure no child gets lost and that there is no unauthorised access to children.
- We have an Outings/First Aid bag which staff take on outings, containing the preschool mobile phone, first aid equipment, supplies of tissues, wipes, nappies and water. The amount of equipment will vary and be consistent with the venue and the number of children as well as how long they will be out for. Staff take contact details for parents of each child, the accident log and a copy of the missing child procedure (the latter two now being accessible online).
- Records are kept of the vehicles used to transport children, with named drivers and appropriate insurance cover.
- A minimum of two staff should accompany children on outings and a minimum of two remain behind with the rest of the children.

## Missing Child

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



# Managing Sickness, infectious diseases and allergies

- Our procedure for the exclusion of ill or infectious children is discussed with parents. This
  includes procedures for contacting parents or other authorised adults if a child becomes ill
  while in the setting.
- If a child displays symptoms of Covid19 they must isolate at home for 10 days and should be taken for a test.
- Our sickness procedure for children who are unwell, have a temperature, have sickness/diarrhoea or have an infectious disease is that they are removed from the other children and parents contacted immediately and a minimum period of 48 hours incubation time must be adhered to (illness dependant).
- Children with headlice must be treated to remedy the condition but are allowed to return to the setting once this has been carried out.
- Parents are notified if there is a case of headlice in the setting.
- Parents are notified if there is an infectious disease, such as chicken pox.
- HIV (Human Immunodeficiency Virus) may affect children or families attending the setting.
   Staff must be informed about it.
- Children or families are not excluded because of HIV.
- Good hygiene practice concerning the clearing of any spilled bodily fluids is carried out at all times.
- Ofsted is notified of any infectious diseases that a qualified medical person considers notifiable.

#### First aid and medication

- We aim to have all staff members with current and valid first aid training, however there will always be a qualified first aider on the premises or on an outing at any time. The first aid qualification includes first aid training for infants and young children and is approved by the Local Authority and Ofsted.
- Our first aid kit:
  - > complies with the Health and Safety (First Aid) Regulations 1981;
  - is regularly checked by a designated member of staff (Emma Roberts) and restocked as necessary;
  - > is easily accessible to adults; and
  - > is kept out of the reach of children.
- At the time of admission to the setting, parents' written permission for emergency medical advice or treatment is obtained on the Registration Form. Parents sign and date their written approval.
- At the time of admission to the setting, parents are asked to provide full information about the medical condition of any child with long-term medical needs. Parents are required to provide details of any change to prescription/support needed.
- Parents sign a consent form at registration allowing staff to go with their child in an ambulance to the nearest Accident and Emergency unit to be examined, treated or admitted as necessary on the understanding that parents have been informed and are on their way to the hospital.



#### Administration of medication

- While it is not our policy to care for sick children, who should be at home until they are well enough to return to the setting, we will agree to administer medication as part of maintaining their health and well-being or when they are recovering from an illness.
- In many cases, it is possible for children's GPs to prescribe medicine that can be taken at home in the morning and evening.
- As far as possible, administering medicines will only be done where it would be detrimental to the child's health if not given in the setting.
- 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.
- We have procedures written in line with guidance in Managing Medicines in Schools and Early Years Settings; the manager is responsible for ensuring all staff understand and follow these procedures.
- Staff are responsible for ensuring that parent consent forms have been completed, that
  medicines are stored correctly and that records are kept according to procedures.

#### Administration of Sun cream

- We obtain permission from parents on the registration form to apply sun cream to their child, if and when needed.
- We request parents apply sun cream before they come to Preschool, however, we will apply sun cream if required and again in the afternoon.
- We ask parents to provide a suitable sun cream, labelled with their child's name, to be kept at the Preschool or sent in each day if they do not want our sun cream to be used on their child.

### Accidents and incidents

If there is any serious accident, injury or illness requiring GP or hospital treatment to a child, staff member, parent on site, volunteer or visitor or where there is a death of a child or adult on the premises, we make reports to:

- Ofsted within 14 days
- the Health and Safety Executive (using the format for RIDDOR)
- the local Safeguarding Partnership and act on its advice.

We meet our legal requirements for the safety of our employees by complying with RIDDOR. As well as reporting to the Health and Safety Executive any accident to a member of staff requiring treatment by a general practitioner or hospital as above, we also report any dangerous occurrence. This may be an event that causes or could cause injury or fatalities, such as a gas leak. Any dangerous occurrence is recorded in our Incident Log.

## Our Accident Logs:

- All accidents are recorded on Tapestry by staff and checked and approved by management.
- Details of the accident, injuries, treatment provided and staff member/s dealing with it are recorded at the time and the person collecting the child is advised upon collection. If this is not the parent of the child, we may send them a message if we deem it prudent to do so.
- Accidents are reviewed termly to identify any potential or actual hazards (Emma Roberts).



## Our Incident Log:

- is kept for recording incidents including those that are reportable to the Health and Safety Executive as above.
- These incidents include break in, burglary, theft of personal or the setting's property; fire, flood, gas leak or electrical failure; attack on member of staff or parent on the premises or nearby; any racist incident involving a staff or family on the centre's premises; death of a child; and a terrorist attack or threat of one.
- In the incident book we record the date and time of the incident, nature of the event, who was affected, what was done about it or if it was reported to the police, and if so a crime number. Any follow up, or insurance claim made, should also be recorded.
- In the unlikely event of a terrorist attack, we follow the advice of the emergency services
  with regard to evacuation, medical aid and contacting children's families. Our standard Fire
  Safety Procedure will be followed and staff will take charge of their key children. The
  incident is recorded when the threat is averted.
- In the unlikely event of a child dying on the premises, 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, which are recorded in the relevant file.

#### **Animals**

- Animals visiting the setting are free from disease and safe to be with children, and do not pose a health risk.
- Any setting pets are free from disease, safe to be with children, and do not pose a health risk.
- We check before visits for children/adults with animal allergies.
- Children wash their hands after contact with animals.
- Outdoor footwear worn to visit farms are cleaned of mud/debris and not worn indoors.

## Nappies

- No child is excluded from participating in our setting who may, for any reason, not yet be
  toilet trained and who may still be wearing nappies or equivalent. We work with parents
  towards toilet training, unless there are medical or other developmental reasons why this may
  not be appropriate at the time.
- We provide nappy changing facilities and exercise good hygiene practices in order to accommodate children who are not yet toilet trained.
- We see toilet training as a self-care skill that children have the opportunity to learn with the full support and non-judgemental concern of adults.