



Social Networking .....	58
Supervision of Children at Forest School .....	59
<b>Equality of opportunity .....</b>	<b>60</b>
Valuing diversity and promoting equality .....	60
Supporting children with additional educational needs.....	65
Achieving positive behaviour.....	67
<b>Child care practice .....</b>	<b>73</b>
The role of the key person and settling-in .....	73
<b>Record keeping</b>	<b>74</b>
Children’s records .....	74
Provider records.....	76
Learning Journals.....	77
<b>Employment .....</b>	<b>79</b>
Employment and staffing.....	79
Induction of staff, volunteers, students and managers .....	81
Student placements .....	82
<b>Partnership.....</b>	<b>84</b>
Parental involvement.....	84
Working in partnership with other agencies .....	87
Supporting Families in financial need.....	88
<b>Administration .....</b>	<b>90</b>
Admissions.....	90

# Health and Safety

## Health and safety general standards

(Last updated February 2021)

### Policy statement

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

- We aim to make children, parents and staff aware of health and safety issues and to minimise the hazards and risks to enable the children to thrive in a healthy and safe environment.
  - Our member of staff responsible for health and safety is: Lai Brooking
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- 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 kitchen

### *Insurance cover*

We have public liability insurance and employers' liability insurance. The certificate for public liability insurance is displayed on the general notice board for the setting

### Procedures

#### *Raising Awareness*

- 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.
- Records are kept of these induction training sessions and new staff and volunteers are asked to sign the records to confirm that they have taken part.
- Health and safety issues are explained to the parents of new children so that they understand the part played by these issues in the daily life of the setting.

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- As necessary, health and safety training is included in the annual training plans of staff, and health and safety is discussed regularly at staff meetings.  
We operate a no smoking and no alcohol or other addictive substances policy.
- Children are made aware of health and safety issues through discussions, planned activities and routines.

#### *Safety of adults*

- Adults are provided with guidance about the safe storage, movement, lifting and erection of large pieces of equipment.
- All warning signs are clear.
- Adults do not remain in the building on their own.
- The sickness of staff and their involvement in accidents is recorded. The records are reviewed termly to identify any issues that need to be addressed.
- We keep a record of all substances that may be hazardous to health - such as cleaning chemicals, or gardening chemicals if used. This states what the risks are and what to do if they have contact with eyes or skin or are ingested. It also states where they are stored.
- We keep all cleaning chemicals in their original containers.

#### *Windows*

- Low level windows are made from materials that prevent accidental breakage or are made safe.
- Windows are protected from accidental breakage or vandalism from people outside the building.

#### *Doors*

- We take precautions to prevent children's fingers from being trapped in doors.

#### *Floors*

- All floor surfaces are checked daily to ensure they are clean and not wet or damaged.

#### *Electrical/gas equipment*

- All electrical/gas equipment conforms to safety requirements and is checked regularly.

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- Our boiler/electrical switch gear/meter cupboard is not accessible to the children.
- Electric sockets, wires and leads are properly guarded and the children are taught not to touch them.
- There are sufficient sockets to prevent overloading.  
The temperature of hot water is controlled to prevent scalds and children are taught to avoid the hot taps in case the water becomes too hot for them.
- Lighting and ventilation is adequate in all areas including storage areas.

### *Storage*

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

### *Outdoor area*

- Our outdoor area is securely fenced.
- Our outdoor area is checked for safety and cleared of rubbish before it is used.
- Adults and children are alerted to the dangers of poisonous plants.
- Where water forms a pool on equipment, it is supervised as for water play.
- Our outdoor sand pit is covered when not in use and checked for cleanliness.
- All outdoor activities are supervised at all times.

### *Hygiene*

- We receive information from the Environmental Health Department and the Health Authority, via WSCC, to ensure that we keep up-to-date with the latest recommendations.
- Our daily routines encourage the children to learn about personal hygiene.
- Our premises are cleaned before and after use.
- Resources and equipment, dressing-up clothes and furnishings are cleaned regularly.
- The toilet area has a high standard of hygiene including hand washing and drying facilities.  
Soiled nappies are disposed of outside the building.
- We implement good hygiene practices by:
  - cleaning tables between activities;
  - cleaning toilets regularly;

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- wearing protective clothing - such as aprons and disposable gloves - as appropriate;
- providing sets of clean clothes; - providing tissues and wipes; and - using paper towels.

### *Activities and resources*

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

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

- All equipment is regularly checked for cleanliness and safety and any dangerous items are repaired or discarded.
- All materials, including paint and glue, are non-toxic.
- Sand is clean and suitable for children's play.
- High risk physical play, e.g. on the climbing frame or rough and tumble play, is constantly supervised.
- Children are taught to handle and store tools safely.
- Children who are sleeping are checked regularly.
- 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.

### *Forest Schools*

- A daily risk assessment is made of the Forest School Area.
- Standard Forest School fire procedures are followed for making and using the fire (details are specified in the camp fire risk assessment)
- Individual risk assessments are followed for use of tools and high risk activities, and include procedures for safe use and appropriate supervision.
- Staff and children wear suitable clothing and footwear.
- The Forest school will not run if there are high winds or a thunder storm. A judgement regarding the weather will be made by the Supervisor. Activities will be run in an indoor space if available.

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- All children will be advised to have tetanus vaccinations up to date.
- All cuts will be covered.
- A child who needs the toilet will be taken to a discreet place just outside the Forest School area in use or will use the potty provided. For solid matter, a potty liner will be used or a hole will be dug. Toilet roll will be provided and put in a carrier bag out of reach and disposed of afterwards.
- If a child needs a nappy change, they will be changed on a travel changing mat.

## **Fire safety and emergency evacuation**

(Last updated Oct 2014)

## **Policy statement**

We ensure our premises present no risk of fire by ensuring the highest possible standard of fire precautions. The managers and staff are familiar with the current legal requirements. The owners are responsible for regular inspections by a Fire Officer.

## **Procedures**

- The basis of fire safety is risk assessment. Risk assessments are carried out by our trained Health and Safety Officer. This will follow the guidance as set out in the *Fire Safety Risk Assessment – Educational Premises* document.
- We ensure that we have a copy of the fire safety risk assessment that applies to the building and we contribute to regular reviews.
- Fire doors are clearly marked, never obstructed and easily opened from the inside.
- Smoke detectors/alarms and fire fighting appliances conform to BSEN standards, are fitted in appropriate high risk areas of the building and are checked as specified by the manufacturer.
- Our emergency evacuation procedures are:
  - clearly displayed in the premises;
  - explained to new members of staff, volunteers and parents; and -  
practised at least once a term covering all staff.
- Records are kept of fire drills.
- The owners keep records of the servicing of fire safety equipment.
- Whistles are carried by all members of staff.
- The supervisor ensures the pre-school mobile phone is taken to the assembly point.
- At the start of each day, the supervisor will allocate who will collect the register and signing in book in the event of evacuation and who will check the premises is empty.

### *Emergency evacuation procedure*

- A whistle is blown to alert children and adults to the need to evacuate.
- Other staff blow their whistles to ensure children in other areas of the pre-school have heard the alarm.
- At the sound of the alarm, children and adults are still and listen for instructions.
- The Supervisor will oversee the evacuation.

- The staff leave the building with eight children each and stand at the bottom of the path, to keep the children away from the road, until everyone has left the building.
- The register and signing-in book will be checked by the Supervisor as adults and children leave the premises.
- The allocated member of staff will check the classroom, all the toilets, kitchen and storeroom as well as the main room and guide the remaining children and adults out of the building.
- The children will be walked in pairs to the green by the entrance to Morth Gardens where the supervisor will re-check the register and the signing-in book to check all the children and adults are accounted for.
- In the event of a real fire or other emergency, the supervisor will arrange for the emergency services to be called.
- The children would then be walked in pairs to The Barn, Causeway.
- The incident management procedure would then be followed.
- In this case it will be necessary to override the required ratios as set down in our outings policy.

*The fire drill record must contain:*

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

## **Flu Pandemic Emergency Plan**

(Last updated October 2020)

### When do we close?

The pre-school would close if

- government advice is to do so
- there are not enough staff to remain open and run safely and within OFSTED guide lines (It may be possible to remain open if St. Mary's Pre-School works with at least one other local preschool, nursery or playgroup.)

### Who makes the decision to close?

The Managers would consult the Governance Panel in order to make the decision.

### When would the pre-school re-open?

The pre-school would reopen when the government advise is it is safe to so.

There would need to be adequate staff to run the pre-school safely and within OFSTED guide lines.

We may re-open with another local pre-school, nursery or playgroup, if we cannot staff individual settings.

### Who do we readmit when the pre-school re-opens?

The pre-school would only admit children who have recovered from the pandemic flu or have been vaccinated against it.

Only staff who have recovered from the pandemic flu or have been vaccinated against it can return to work.

These restrictions can be overridden by government guidance.

### How soon are children and staff allowed to return to the pre-school after suffering from the flu pandemic?

The pre-school would usually accept children back when they are no longer showing symptoms and their temperature has been normal for 24 hours.

Guidance will be followed according to the particular strain.

### Keeping parents informed

The managers would ensure that all parents and staff were contacted by email (or telephone if no confirmation is received) about closure and reopening.

### Educating staff and ordering cleaning materials

Training on limiting infection is given to all staff as advised by the government.

Some toys and materials (e.g. playdough, water tray, sand tray, soft toys that are difficult to clean) may be removed from the setting, depending on advice given.

Stockpile antibacterial hand wash, sprays, etc. when news of a likely pandemic arises

Sick children and staff will be isolated, as far as possible, from the remaining people in the setting to reduce spread of infection if they become ill during session time.

Sick children and staff must not attend pre-school. Dangers to all concerned will be clearly explained.

## Bereavement Support

The managers will ensure some members of staff are trained in bereavement support.

Clergy would be asked to help support children, parents and staff if they have a death in the family.

## **Food hygiene**

(Including procedure for reporting food poisoning)

(Last updated October 2020)

### **Policy statement**

In our setting we prepare or serve food for children on the following basis.

- We prepare snacks with the children for the children to share.
- We engage in cooking activities with the children to produce food to be shared during the session or taken home.
- The children eat pre-packed lunches provided by their parents/carers.

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

We are registered as a food provider with the local authority Environmental Health Department.

### **Procedures**

- All staff follow the guidelines of *Safer Food Better Business*.
- Staff involved in the preparation of food have an in-date Food Hygiene Certificate.
- The supervisor carries out daily opening and closing checks on the kitchen to ensure standards are met consistently.
- We use reliable suppliers for the food we purchase.
- Food is stored at correct temperatures and is checked to ensure it is in-date and not subject to contamination by pests, rodents or mould.
- We make parents aware that there is no refrigeration facility for packed lunches.
- Food preparation areas are cleaned before use as well as after use.
- There are separate facilities for hand-washing and for washing up.
- All preparation 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*

- Where children and/or adults have been diagnosed by a GP or hospital doctor to be suffering from food poisoning and where it seems possible that the source of the outbreak is within the setting, the manager will contact the Environmental Health Department and the Health Protection Agency, to report the outbreak and will comply with any investigation.
- If the food poisoning is identified as a notifiable disease under the Public Health (Infectious Diseases) Regulations 1988 the setting will report the matter to Ofsted.

## **Recording and reporting of accidents and incidents**

(Including procedure for reporting to HSE, RIDDOR)

(Last updated May 2012)

### **Policy statement**

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

### **Procedures**

*Our accident book:*

- is kept safely and accessibly;
- is accessible to all staff and volunteers, who know how to complete it; and
- is reviewed termly to identify any potential or actual hazards.

- Parents/carers are informed of any accidents their child has and are asked to sign the accident book to confirm that they have been informed.

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

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

#### *Dealing with incidents*

We meet our legal requirements for the safety of our employees by complying with RIDDOR (the Reporting of Injury, Disease and Dangerous Occurrences Regulations). We report to the Health and Safety Executive:

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

#### *Our incident book*

- We have ready access to telephone numbers for emergency services, including local police. We ensure we have access to the person responsible for the premises and that there is a shared procedure for dealing with emergencies.
- We keep an incident book for recording incidents including those that are reportable to the Health and Safety Executive as above.
- These incidents include:
  - break in, burglary, theft of personal or the setting's property;
  - an intruder gaining unauthorised access to the premises;
  - fire, flood, gas leak or electrical failure;
  - attack on member of staff or parent on the premises or nearby;
  - any racist incident involving staff or family on the pre-school 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 our Incident Plan and 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 in evacuating the building. 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 is followed.
- The incident book is not for recording issues of concern involving a child. This is recorded in the Event File.

## Risk assessment

(Last updated June 2017)

### Policy statement

This setting believes that the health and safety of children is of paramount importance. We make our setting a safe and healthy place for children, parents, staff and volunteers by assessing and minimising the hazards and risks to enable the children to thrive in a healthy and safe environment.

### Procedures

Our risk assessment procedure follows the steps below:

- Identification of type of risk: what the danger is and who is at risk, in the case of a specific group.
- Assessment as to the severity of the risk and the likelihood of occurrence from 1 to 5, where 5 is high.
- A risk factor is calculated by multiplying the severity by the likelihood.
- Take action to reduce risk.
- Re-assess severity of risk and likelihood of occurrence.
- Recalculate the risk factor.

No activity is carried out where the final risk factor is 10 or above.

Our risk assessment process covers adults and children and includes:

- checking for and noting hazards and risks indoors and outside, and in our premises and for activities;
- assessing the level of risk and who might be affected;
- deciding which areas need attention; and
- developing an action plan that specifies the action required, the time-scales for action, the person responsible for the action and any funding required.

Regular risk assessments are carried out as follows:

- Daily risk assessment of premises and activities, outdoors and indoors;
- Termly risk assessment of premises, including fire safety risk assessment;
- Annual risk assessment of equipment and resources;
- Risk assessment of outings, visitors, animals and any allergies which our children have.

Reviews are made as follows, to ensure our risk assessments are effective and thorough:

- Evaluations are completed daily to record any risks which have been highlighted;
- Daily risk assessments and evaluations are reviewed at managers' meetings and summaries reviewed annually to ensure actions required have been taken;
- Accident and event logs are reviewed termly;

## Promoting health and hygiene

### Administering medicines

(Last updated February 2015)

#### Policy statement

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

In many cases, it is possible for children's GP's 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 no adverse effect as well as to give time for the medication to take effect.

The key person is responsible for the correct administration of medication to children for whom they are the key person. 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 supervisor is responsible for the overseeing of administering medication. Another member of staff must witness to ensure the correct amount of medication is given at the correct time.

Parents and carers are responsible for handing over medication to the key person or supervisor. No medication is stored in the children's bags.

## **Procedures**

- Children taking prescribed medication must be well enough to attend the setting.
- Medication must be handed over to the key person or supervisor on the child's arrival at the setting and the relevant forms completed; medication must not be left in the children's bags.
- Only prescribed medication is administered. It must be in-date and prescribed for the current condition.
- Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children.
- Parents give prior written permission for the administration of medication. The member of staff receiving the medication must ask the parent to sign a consent form stating the following information. No medication may be given without these details being provided:
  - full name of child and date of birth;
  - name of medication and strength;
  - who prescribed it;
  - dosage to be given in the setting;
  - how the medication should be stored and expiry date;
  - any possible side effects that may be expected should be noted; and
  - signature, printed name of parent and date.
- The medication record form records:
  - Name of child;

- name and strength of medication;
- the date and time of dose;
- dose given and method; and is
- signed by key person/supervisor; and is verified by parent signature on collection.
- If the administration of prescribed medication requires medical knowledge, training is provided for the relevant members of staff by a health professional.
- If rectal diazepam is given another member of staff must be present and co-signs the record form.
- 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 staff what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.

#### *Storage of medicines*

- All medication is stored safely in a secure box out of reach or refrigerated. In the refrigerator they are kept in a marked plastic box. The key person/supervisor 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 in a secure container. Key persons check use-by dates and return any out-of-date medication back to the parent.
- Staff medication is stored securely as for children's medication above.

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

- The key person/supervisor 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 in a secure container. Key persons check use-by dates and return any out-of-date medication back to the parent.
- A risk assessment is carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the manager alongside the key person with input from parents and medical or social care personnel.
- 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 risk assessment includes vigorous activities and any other pre-school 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 the child's GP's advice is sought if necessary where there are concerns.
- If medication is involved or instructions are more than can be held on our 'what you need to know about me' board then a health care plan for the child will be drawn up with the parent; outlining the key person's role and what information must be shared with other staff who care for the child.
- The health care plan should include the measures to be taken in an emergency.
- The health care plan is reviewed every six months or more often if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.
- Parents receive a copy of the health care plan and each contributor, including the parent, signs it.

#### *Managing medicines on trips and outings*

- If children are going on outings, staff accompanying the children must include the key person for the child 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 the 'outings rucksack' clearly labelled with the child's name, name of the medication, copy of the consent form and a form to record when it has been given, with the details as given above.
- The parent signs the record form on collection.
- 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 is read alongside the outings procedure.

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

(Including reporting notifiable diseases)

(Last updated February 2021)

## **Policy statement**

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

## **Procedures for children with allergies**

- When parents start their children at the setting they are asked if their child suffers from any known allergies. This is recorded on the registration form.
- If a child has an allergy, a risk assessment form is completed to detail 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.
  - This form is kept in the Health & Safety file.
  - A photo of the child, along with details of their allergy, is displayed on the allergy board where all staff, students and volunteers can see it.
  - Parents train staff in how to administer special medication in the event of an allergic reaction.
  - Generally, no nuts or nut products are used within the setting.
  - Parents are made aware so that no nuts or nut products are brought in.

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

- The insurance will automatically 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 your insurance provider must be obtained to extend the insurance.

**At all times the administration of medication must be compliant with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage and follow procedures based on advice given in *Managing Medicines in Schools and Early Years Settings* (DfES 2005)**

#### *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.
- The group must be provided with clear written instructions on how to administer such medication.
- All risk assessment procedures need to be adhered to for the correct storage and administration of the medication.
- The group 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 your insurance provider.

#### *Life saving medication & invasive treatments*

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).

- The setting 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 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.
- Copies of all three letters relating to these children must first be sent to the insurers for appraisal requesting confirmation in writing confirming that the insurance has been extended.

Additional needs children - children requiring help with tubes to help them with everyday living e.g. breathing apparatus, to take nourishment, colostomy bags etc.

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

- Staff are given the relevant medical training/experience, which may include receiving appropriate instructions from parents or guardians.
- Information relating to these children must first be sent to the insurers for appraisal requesting written confirmation that the insurance has been extended.

The insurers will be contacted if there is any uncertainty.

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

- If children appear unwell during the day – have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – the key-person or supervisor calls the parents and asks them to collect the child, or send a known carer to collect on their behalf.
- If a child has a temperature, they are kept cool, by removing top clothing, sponging their heads with cool water, but kept away from draughts.
- Temperature is taken
- In extreme cases of emergency an ambulance will be called and the parent informed.
- Parents are asked to ensure their child is fully recovered before returning them to pre-school; the pre-school can refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease.
- Where children have been prescribed antibiotics, parents are asked to keep them at home for 48 hours before returning to the setting.
- After sickness or diarrhoea, parents are asked to keep children home for 48 hours after the last bout.
- The setting has a list of excludable diseases and current exclusion times. The full list is obtainable from [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/353953/Guidance\\_on\\_infection\\_control\\_in\\_schools\\_11\\_Sept.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/353953/Guidance_on_infection_control_in_schools_11_Sept.pdf) and includes common childhood illnesses such as measles.

### *Reporting of 'notifiable diseases'*

- If a child or adult is diagnosed suffering from a notifiable disease under the Public Health (Infectious Diseases) Regulations 1988, the GP will report this to the Health Protection Agency.

- When the setting becomes aware, or is formally informed of the notifiable disease, the manager informs Ofsted and acts on any advice given by the Health Protection Agency.

#### *HIV/AIDS/Hepatitis procedure*

- HIV virus, like other viruses such as Hepatitis, (A, B and C) are spread through body fluids. Hygiene precautions for dealing with body fluids are the same for all children and adults.
- Single use vinyl gloves are worn when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Protective rubber gloves are used for bagging clothing after changing.
- Soiled clothing is bagged for parents to collect.
- Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and mops; cloths used are bagged before disposal in bins out of children's reach.
- Tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit are cleaned using a disinfectant.

#### *Nits and head lice*

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

## **Animals in the setting**

(Last updated February 2016)

### **Policy Statement**

Children learn about the natural world, its animals and other living creatures, as part of the Early Years Foundation Stage curriculum. This may include contact with animals, or other living creatures, either in the setting or in 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 when selecting an animal or creature to keep as a pet in the setting.

- We carry out a risk assessment with a knowledgeable person accounting for any hygiene or safety risks posed by the animal or creature.
- We provide suitable housing for the animal or creature and ensure this is cleaned out regularly and is kept safely.
- We ensure the correct food is offered at the right times.
- We make arrangements for weekend and holiday care for the animal or creature.
- If applicable, we register 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 upto-date and recorded.
- Children are taught correct handling and care of the animal or creature and are supervised.
- Staff and children wash their hands after handling the animal or creature.
- If animals or creatures are brought in by visitors to show the children they are the responsibility of the owner.
- The staff and pet owner carry out a risk assessment, detailing how the animal or creature is to be handled and how any safety or hygiene issues will be addressed.

#### *Visits involving animals*

- Before a visit to a farm or pet shop etc. a risk assessment is carried out - this may include input from the owners of the site to be visited.
- The outings procedure is followed.
- Children wash their hands after contact with animals.
- Outdoor footwear worn to visit farms is cleaned of mud and debris and should not be worn indoors.

## **First aid**

(Last updated February 2016)

### **Policy statement**

The principal aims of first aid are to preserve life, prevent deterioration and to promote recovery.

First aid treatment does not replace professional medical treatment.

In our setting, staff are able to take action to apply basic first aid treatment in the event of an accident involving a child or adult. At least one member of staff with current paediatric first aid training is on the premises or on an outing at any one time. Staff will take all reasonable care of the children and other adults and, unless they are negligent in following these agreed procedures, they

cannot be held responsible for any loss, damage or injury suffered by a child or adult as a result of first aid treatment given.

## **Procedures**

- The first aid box is easily accessible to adults and is kept out of the reach of children.
- Medication is only given to children in accordance with our Administering Medicines policy.
- At the time of admission to the setting, parents' written permission for emergency medical advice or treatment is sought. Parents sign and date their written approval.
- Parents sign a consent form at registration allowing staff to accompany their child to the nearest Accident and Emergency unit to be examined, treated or admitted as necessary on the understanding that parents have been informed and are on their way to the hospital.
- An accident book is kept, recording
  - name of child
  - date and time of accident
  - nature of injury
  - treatment given
  - signature of staff member dealing with accident
  - name of witness or second member of staff informed
  - signature of parent acknowledging they have been informed
- A Head Injury Report, giving details of the injury and advice on head injuries, is given to parents in the case of any injury to a child's head.
- If, in the judgement of a member of staff, there is serious risk to the injured person, an ambulance will be called.
- All serious or significant accidents are reported to parents as soon as possible. Other accidents are reported when the child is collected.

### *The First Aid Kit*

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

- Triangular bandages (ideally at least one should be sterile) - x 4.
- Sterile dressings:
  - a) Medium (12cm x 12cm) x 6.
  - b) Large (18cm x 18 cm) x 3.
  - c) Small low adherent (5cm x 5cm) x 5
  - d) Medium low adherent (10cm x 10cm) x 5
- Composite pack containing 20 assorted (individually-wrapped) plasters (including hypoallergenic plasters) x 1.
- Sterile eye pads (with bandage or attachment) x 2.

- Sterile Gauze swabs
- Tubular gauze
- Plastic finger applicator
- Child proof container of 6 safety pins x 1.
- scissors
- Guidance card as recommended by HSE x 1.

*In addition to the first aid equipment, the box will be supplied with:*

- 3 pairs of disposable plastic (PVC or vinyl) gloves.
- 1 plastic disposable apron.
- a thermometer.
- Micropore tape

## **Food and drink**

(Last updated June 2014)

### **Policy statement**

This setting regards snack and meal times as an important part of the setting's day. Eating represents a social time for children and adults and helps children to learn about healthy eating. We promote healthy eating using books, games and small group activities. At snack time we aim to provide nutritious food which meets the children's individual dietary needs.

### **Procedures**

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

Before a child starts to attend the setting, we find out from parents their children's dietary needs and preferences, including any allergies. (See Managing Children with Allergies.)

- Information about each child's dietary needs is recorded in her/his learning journal and in our registration records.
- We consult annually with parents to ensure that our records of their children's dietary needs, including any allergies, are up-to-date.
- We display current information about individual children's dietary needs and allergies so that all staff and volunteers are fully informed about them.
- For each session, the supervisor is responsible for ensuring that any cooking activities and food and drink served are consistent with children's dietary needs, allergies and preferences as well as their parents' wishes.
- We provide nutritious food for all snacks, avoiding large quantities of saturated fat, sugar and salt and artificial additives, preservatives and colourings. Children are offered a choice of milk or water to drink.
- We invite parents from each of the children's cultural backgrounds to introduce us to different foods through cooking and tasting activities.
- We take care not to provide food containing nuts or nut products and are especially vigilant where we have a child who has a known allergy to nuts.
- Through discussion with parents and research reading by staff, we obtain information about the dietary rules of the religious groups to which children and their parents belong, and of vegetarians and vegans, and about food allergies. We take account of this information in the provision of food and drinks.
- We require staff to show sensitivity in providing for children's diets and allergies. Staff do not use a child's diet or allergy as a label for the child or make a child feel singled out because of her/his diet or allergy.
- We organise meal and snack times so that they are social occasions in which children and staff participate.
- We encourage children to help with the preparation of snack, under supervision, to improve fine motor skills and to give them an opportunity to contribute to the needs of the whole group.
- Children wash their hands before snack times, meal times and before preparing snack.
- We use snack times to help children to develop independence through making choices, serving food and drink and feeding themselves.

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- 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.

### *Packed lunches*

Children are required to bring packed lunches for lunch club sessions.

- We inform parents that we have no facility to keep food cool and that they will need to provide ice packs as appropriate.
- We inform parents of our policy on healthy eating. We encourage parents to provide fruit and sandwiches with a healthy filling. We discourage sweet drinks and can provide children with water.
- In order to protect children with food allergies, we do not allow children to share or swap their food with one another.
- We 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.
- We ensure staff sit with children to eat their lunch so that the mealtime is a social occasion.

## **Nappy changing**

(Last updated February 2016)

### **Policy statement**

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

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

### **Procedures**

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- Children wearing nappies are checked regularly and are changed if required or as requested by parents.

Key persons undertake changing the children in their key groups; other staff change them if the key person is not available.

Other staff are made aware that a child is being changed and the changing area is visible to them.

- There are safe areas to lie children to be changed.
- Each child has their own changing-bag containing their nappies or 'pull ups' and wipes.
- Gloves are put on before changing starts and the areas are prepared. Changing mats etc. are cleaned with anti-bacterial spray or wipes after use.
- All staff are familiar with the hygiene procedures and carry these out when changing nappies.
- Staff ensure that nappy changing is relaxed and a time to promote independence in young children.
- Young children are encouraged to take an interest in using the toilet.
- Children and staff wash their hands after nappy changing.
- Older children access the toilet when they have the need to and are encouraged to be independent.
- Used nappies and 'pull ups' are bagged and put in a bin out of reach of children. Soiled nappies or pull ups are bagged and put in the dust bin outside. Cloth nappies, trainer pants and ordinary pants that have been wet or soiled are bagged and hung, out of reach of the children, ready for the parent to take home.

## No-smoking

(Last updated October 2010)

### Policy statement

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

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## **Procedures**

- All staff, parents and volunteers are made aware of our no-smoking policy.
- We display no-smoking signs.
- We actively encourage no-smoking by having information for parents and staff about where to get help to stop smoking if they are seeking this information.  
Staff who smoke do not do so during working hours unless on a break and out of sight of the premises.
- Staff who smoke during their break make every effort to reduce the effect of the odour and lingering effects of passive smoking for children and colleagues.

## **Safeguarding children**

### **Safeguarding children and child protection**

(Including managing allegations of abuse against a member of staff)

(Last updated October 2020)

#### **Policy statement**

Our setting will work with children, parents and the community to ensure the rights and safety of children and to give them the very best start in life.

#### **Procedures**

##### *Staff and volunteers*

- Our designated persons (members of staff) who co-ordinate child protection issues are: Lai Brooking & Karen Inglis-Taylor

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- Our designated officer (a governance panel member) who oversees this work is: Mrs Theresa Adams

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- We ensure all staff and parents are made aware of our safeguarding policies and procedures.
- We provide adequate and appropriate staffing resources to meet the needs of children.

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- Applicants for posts within the setting are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974.
- Candidates are informed of the need to carry out 'enhanced disclosure' checks with the Criminal Records Bureau before posts can be confirmed.
- Where applications are rejected because of information that has been disclosed, applicants have the right to know and to challenge incorrect information.
- We abide by Ofsted requirements in respect of references and Criminal Record Bureau checks for staff and volunteers, to ensure that no disqualified person or unsuitable person works at the setting or has access to the children.  
All staff, regular volunteers and governance panel members who have regular contact with the children have to complete a *Suitability Declaration* when they start and annually thereafter. The declaration includes statements about people living in the same household in accordance with statutory guidance.
- Volunteers do not work unsupervised.
- We abide by the Protection of Vulnerable Groups Act requirements in respect of any person who is dismissed from our employment, or resigns in circumstances that would otherwise have lead to dismissal for reasons of child protection concern.
- We have procedures for recording the details of visitors to the setting.
- We take security steps to ensure that we have control over who comes into the setting so that no unauthorised person has unsupervised access to the children.

#### *Responding to suspicions of abuse*

- We acknowledge that abuse of children can take different forms - physical, emotional, and sexual, as well as neglect. We are also aware of the need to protect children from the risk of radicalisation.
- When children are suffering from physical, sexual or emotional abuse, or may be experiencing neglect, this may be demonstrated through the things they say (direct or indirect disclosure) or through changes in their appearance, their behaviour, or their play.
- Where such evidence is apparent, the child's key person makes a dated record of the details of the concern and discusses what to do with the 'designated person'. The information is stored in

- our 'event file'. A reference is made in the child's *Learning Journal* to show that additional information about the child is held elsewhere.
- We refer concerns to the local authority children's social care department and co-operate fully in any subsequent investigation.  
NB In some cases this may mean the police or another agency identified by the Multi-Agency Safeguarding Hub (MASH).
- We take care not to influence the outcome either through the way we speak to children or by asking questions of children.

*Recording suspicions of abuse and disclosures*

- Where a child makes comments to a member of staff that gives cause for concern (disclosure) or observes signs or signals that gives 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;
- 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 date and time; and ▪
    - the names of any other person present at the time.
- These records are signed and dated and kept in a *Confidential Additional Information* file for the child, which is kept securely and confidentially.
- A reference is made in the child's *Learning Journal* to show that additional information about the child is held elsewhere.

#### *Making a referral to the local authority social care team*

- We use the detailed procedures found in section 3.2 of the online Sussex Child Protection and Safeguarding Procedures <http://sussexchildprotection.procedures.org.uk> when making a referral to children's social care or other appropriate agencies.
- We keep a copy of the details given in the referral.
- All members of staff are familiar with and follow the procedures for recording and reporting.

#### *Informing parents*

- Parents are normally the first point of contact.
- If a suspicion of abuse is recorded, parents are informed at the same time as the report is made, except where the guidance of MASH does not allow this.
- This will usually be the case where the parent is the likely abuser. In these cases the investigating officers will inform parents.

#### *Liaison with other agencies*

- We work within the MASH guidelines.
- We have a copy of 'What to do if you're worried a child is being abused' for parents and staff and all staff are familiar with what to do if they have concerns.
- We have procedures for contacting the local authority on child protection issues, including maintaining a list of names, addresses and telephone numbers of social workers, to ensure that it is easy, in any emergency, for the setting and social services to work well together.

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- We notify the registration authority (Ofsted) of any incident or accident and any changes in our arrangements which may affect the wellbeing of children.  
Contact details for the local National Society for the Prevention of Cruelty to Children (NSPCC) are also kept.
- If a referral is to be made to the local authority social care department, we act within the area's Safeguarding Children and Child Protection guidance in deciding whether we must inform the child's parents at the same time.

#### *Allegations against staff*

- 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 follow the guidance of MASH when responding to any complaint that a member of staff, or volunteer within the setting, or anyone living or working on the premises occupied by the setting, has abused a child.
- 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 the local authority's social care department to investigate. We also report any such alleged incident to Ofsted and 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 governance panel and children's social care agree it is appropriate in the circumstances, the chairperson will suspend the member of staff on full pay, or the volunteer, 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.

#### *Whistleblowing*

- A member of staff follows the guidance of MASH if she/he has concerns about the behaviour or actions of another member of staff, student or volunteer in the setting.
- We do not allow a child to continue to be at risk because we fear harassment or victimisation.

- We do not make our own investigations based on our concerns.
- If we are worried at any stage about how to raise a concern, we seek advice from our individual mentor on the governance panel.

#### *Disciplinary action*

- Where a member of staff or a volunteer is dismissed from the setting because of misconduct relating to a child, we notify the Independent Barring Board administrators so that the name may be included on the Protection of Children and Vulnerable Adults Barred List.

#### *Training*

- We seek out training opportunities 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 and neglect and that they are aware of the local authority guidelines for making referrals.
- We ensure staff & volunteers are aware of the risk of children being drawn into terrorism and are alert to indicators from children who may be vulnerable. We also ensure they have an awareness of online radicalisation.
- We ensure that all staff & volunteers know the procedures for reporting and recording their concerns in the setting.

#### *Planning*

- The layout of the rooms allows for constant supervision. No child is left alone with staff or volunteers in a one-to-one situation without being visible to others. If a child needs help with toileting, the member of staff informs another adult who will check regularly.

#### *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 that they develop an understanding of why and how to keep safe.
- We create within the setting a culture of value and respect for the individual, 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.

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### *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 MASH.

### *Support to families*

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

- We make clear to parents our role and responsibilities in relation to child protection, such as for the reporting of concerns, providing information, 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 care 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 MASH.

## **Maintaining children's safety and security on premises**

(Last updated October 2020)

### **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 by an enhanced disclosure from the Disclosure and Barring Service.
- Adults do not normally supervise children on their own.
- All children are supervised by adults at all times.
- Whenever children are on the premises at least two adults are present.

- We carry out risk assessment to ensure children are not made vulnerable within any part of our premises, nor by any activity.

#### *Security*

- The doors and the garden gate are locked during pre-school sessions and an extra barrier is put up to deter children from going down a side passage.
- At arrival and departure times, and when people come and go during a session, a member of staff unlocks the door and remains at the door to ensure no child leaves without an appropriate adult and to ensure no unsuitable person enters.
- The door is locked before the staff member leaves the door and the key is hung out of reach of the children.
- The times of the children's arrivals and departures are recorded if they differ from the session start and end times.
- The arrival and departure times of adults - staff, volunteers and visitors - are recorded.
- When the door bell is rung during a session, a member of staff checks the suitability of the person through the window before unlocking the door.
- Other key holders are DBS checked and do not access the premises during pre-school sessions without prior arrangement.

## **Missing child**

(Last updated March 2019)

### **Policy statement**

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

### **Procedures**

Child going missing on the premises

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- As soon as it is noticed that a child is missing the key person/staff alerts the supervisor.
- The supervisor will ask where the child was last seen and carry out a thorough search of the building and garden.  
If the child is not found, the missing child is reported to the police and the parent is contacted.
- The register is checked to make sure no other child has also gone astray.
- Doors, windows and gates are checked to see if there has been a breach of security whereby a child could wander out.
- The manager (if not present at the setting) is contacted immediately and the incident is reported.
- The supervisor talks to the staff to find out when and where the child was last seen and records this.
- The supervisor contacts the chairperson and reports the incident. The chairperson, with the governance panel, carries out an investigation and may come to the setting immediately.

#### *Child going missing on an outing or Forest School*

- As soon as it is noticed that a child is missing, staff on the outing ask children to stand with their designated person and carry out a headcount to ensure that no other child has gone astray. Other Children and staff are asked where they last saw the child. One staff member searches the immediate vicinity but does not search beyond that.
- The supervisor contacts the police and reports the child as missing.
- The supervisor contacts the parent, who makes their way to the setting or outing/Forest School venue as agreed with the supervisor. The setting is advised as the best place, as by the time the parent arrives, the child may have been returned to the setting.
- The manager (if not present) is contacted immediately and the incident is reported.
- Staff take the remaining children back to the setting.
- In an indoor venue, the staff contact the venue's security who will handle the search and contact the police if the child is not found.
- The supervisor contacts the chairperson and reports the incident. The chairperson, with the governance panel, carries out an investigation and may come to the setting immediately.
- The supervisor or designated staff member may be advised by the police to stay at the venue until they arrive.

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### *The investigation*

- Staff keep calm and do not let the other children become anxious or worried.
- The supervisor together with the chairperson or representative from the governance panel, speaks with the parent(s).

The chairperson and governance panel, carry out a full investigation taking written statements from all the staff who were on the outing.
- The key person/staff member writes an incident report detailing:
  - The date and time of the report.
  - What staff/children were in the group/outing and the name of the staff designated responsible for the missing child.
  - When the child was last seen in the group/outing.
  - What has taken place in the group or outing since the child went missing.
  - The time it is estimated that the child went missing.
  - A conclusion is drawn as to how the breach of security happened.
- If the incident warrants a police investigation, all staff co-operate fully. In this case, the police will handle all aspects of the investigation, including interviewing staff. Children's Social Care may be involved if it seems likely that there is a child protection issue to address.
- The incident is reported under RIDDOR arrangements (see the Reporting of Accidents and Incidents policy); the local authority Health and Safety Officer may want to investigate and will decide if there is a case for prosecution.
- Ofsted is informed.
- The insurance provider is informed.

### *Managing people*

- Missing child incidents are very worrying for all concerned. Part of managing the incident is to try to keep everyone as calm as possible.
- The staff will feel worried about the child, especially the key person or the designated carer responsible for the safety of that child for the outing. They may blame themselves and their feelings of anxiety and distress will rise as the length of time the child is missing increases.

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- Staff may be the understandable target of parental anger and they may be afraid. The manager needs to ensure that staff under investigation are not only fairly treated but receive support while feeling vulnerable.
- The parents will feel angry, and fraught. They may want to blame staff and may single out one staff member over others; they may direct their anger at the manager. When dealing with a distraught and angry parent, there should always be two members of staff, one of whom is the manager and the other should be the chairperson of the governance panel. No matter how understandable the parent's anger may be, aggression or threats against staff are not tolerated, and the police should be called.

The other children are also sensitive to what is going on around them. They too may be worried. The remaining staff caring for them need to be focused on their needs and must not discuss the incident in front of them. They should answer children's questions honestly but also reassure them.

- In accordance with the severity of the final outcome, staff may need counselling and support. If a child is not found, or is injured, or worse, this will be a very difficult time. The chairperson will use their discretion to decide what action to take.
- Staff must not discuss any missing child incident with the press without taking advice.

## **Uncollected child**

(Last updated June 2019)

### **Policy statement**

In the event that a child is not collected by an authorised adult at the end of a session/day, the setting puts into practice agreed procedures. These ensure the child is cared for safely by an experienced and qualified practitioner who is known to the child. We will ensure that the child receives a high standard of care in order to cause as little distress as possible. We inform parents/carers of our procedures so that, if they are unavoidably delayed, they will be reassured that their children will be properly cared for.

### **Procedure**

- - Parents of children starting at the setting are asked to provide the following specific information.
  - 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 and telephone numbers of adults who are authorised by the parents to collect their child from the setting, for example a childminder or grandparent, and who can be contacted in an emergency.
  - Who has parental responsibility for the child.
  - We expect parents to provide us with 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 in writing 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 written details of the name and telephone number 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. We provide parents with our contact telephone number.
- We inform parents that we will have to contact the local authority children's social services care team in the event that their children are not collected from the setting by an authorised adult within thirty minutes after the setting has closed and the staff can no longer supervise the child on our premises.
- If a child is not collected at the end of the session/day, we follow the following procedures:
- The parents' book 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 emergency contacts are phoned.
- All reasonable attempts are made to contact the parents or nominated carers.

- - The child does not leave the premises with anyone except those authorised as above.
    - If no-one collects the child and there is no-one who can be contacted to collect the child, at the supervisor's discretion, we will apply the procedures below
    - We contact our local authority children's social services care team:
 

01403 229900	(telephone number)
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- The child stays at the setting in the care of two fully-vetted workers until the child is safely collected either by the parents or by a social care worker.
  - Social Care will aim to find the parent or relative. If they are unable to do so, the child will become looked after by the local authority.
  - Under no circumstances do staff go to look for the parent, nor do they take the child home with them.
  - A full written report of the incident is recorded in the child's file.
  - A charge will be made for any additional time a child remains at the setting after the end of a session. £10 will be charged from the 10<sup>th</sup> minute that you are late and £1 per minute after that.

Ofsted may be informed:

0300 123 1231

(telephone number)

## Making a complaint

(Last updated June 2017)

### **Policy statement**

St. Mary's Pre-School believes 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 to 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 St. Mary's Pre-School to a satisfactory conclusion for all of the parties involved.

■  
**Procedures**

We keep a 'Complaints Summary Record' of all complaints that reach stage two or beyond which is available to parents as well as to Ofsted inspectors.

**Stage 1**

- Any parent who has a concern about an aspect of the setting's provision is invited to discuss it, informally, with the manager.

**Stage 2**

- If this does not have a satisfactory outcome, or if the problem recurs, the parent should put the concerns or complaint in writing to the manager and to a representative of the governance panel who will make an investigation.
- The contact details for the governance panel representative are:  
Mrs V Kidd, The Church Office, The Church Centre, Causeway, RH12 1HE, Tel. 01403 253762

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- When the investigation is completed, the manager and governance panel representative will meet with the parent to discuss the outcome.
- Parents will be informed of the outcome of the investigation within 28 days of making the complaint.

- When the complaint is resolved at this stage, the summative points will be logged in the Complaints Summary Record.

### Stage 3

- If the parent is not satisfied with the outcome of the investigation, an external mediator will be invited 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 to define the problem, review the action so far and suggest further ways in which it might be resolved.
- The mediator keeps an agreed written record of any meetings that are held and of any advice s/he gives.
- When the mediator has concluded her/his investigations, a final meeting between the parent, the manager and the representative of the governance panel will be held. The mediator's advice will be used to reach a decision on the action to be taken.
- A record of this meeting, including the decision on the action to be taken, will be made and signed by all parties. This will signify that the procedure has concluded.
- The summative points will be logged in the Complaints Summary Record.

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

- Parents may approach Ofsted directly at any stage of this complaints procedure. In addition, where there seems to be a possible breach of the setting's registration requirements, it is essential to involve Ofsted as the registering and inspection body with a duty to ensure the Welfare Requirements of the Early Years Foundation Stage are adhered to. □ The number to call Ofsted with regard to a complaint is: 0300 123 4666

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- These details are displayed on our setting's notice board.
  - If a child appears to be at risk, our setting will follow the procedures of the Local Safeguarding Children Board in our local authority.

- In these cases, both the parent and setting are informed and the manager will work with Ofsted or the Local Safeguarding Children Board to ensure a proper investigation of the complaint, followed by appropriate action.

## Supervision of children on outings and visits

(Last updated February 2013)

### Policy statement

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

### Procedures

- Parents sign a general consent on registration for their children to be taken out as a part of the daily activities of the setting.
- This general consent details the venues used for daily activities.
- There is a risk assessment for each venue carried out, which is reviewed regularly.
- Parents are always asked to sign specific consent forms before major outings, which would include details of transport arrangements.
- A risk assessment is carried out before an outing takes place.
- All venue risk assessments are available for parents to see.
- Our adult to child ratio is high, normally one adult to two children for children under 3 and one adult to four children for children 3 or over, depending on their sensibility and type of venue as well as how it is to be reached.
- Children are assigned to individual staff to ensure each child is individually supervised, to ensure no child goes astray, and that there is no unauthorised access to children.
- Time of departure and return are recorded in the signing in/out book and, in the case of not all the children participating, the names of the adults and children concerned.
- Staff take a list of children, a mobile phone and emergency contact numbers for both children and adults on outings, along with a mini first aid pack and tissues. Children will be dressed appropriately for the weather conditions. For longer outings they will also take snacks and water, wipes and pants etc. 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.
- A minimum of two staff should accompany children on outings and a minimum of two should remain behind with the rest of the children.

## Confidentiality and client access to records

(Last updated October 2011)

### Policy statement

Definition: 'Confidential information is information that is not normally in the public domain or readily available from another source, it should have a degree of sensitivity and value and be subject to a duty of confidence. A duty of confidence arises when one person provides information to another in circumstances where it is reasonable to expect that the information will be held in confidence.'

(Information Sharing: Guidance for Practitioners and Managers (DCSF 2008))

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

### Confidentiality procedures

- When a parent shares personal information with us, we check whether they wish that information to be regarded as confidential or not.
- Some parents sometimes share information about themselves with other parents as well as staff; the setting cannot be held responsible if information is shared 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 inform parents when we need to record confidential information beyond the general personal information we keep (see our record keeping procedures) - 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.
- Any sensitive information, for example relating to child protection issues, is kept in a 'Confidential Additional Information File', created for that child.

- A form is kept in each child's Learning Journal to indicate whether and where additional information is held for that child.
- We keep all records securely.

#### *Client access to records procedures*

- Parents may request access to their child's Learning Journals at any time.
- The setting commits to providing access to Learning Journals within 5 days of the request.
- Parents may request access to the 'Confidential Additional Information' held on their child and family.
- The setting commits to providing access to this additional information within 14 days, unless the interests of a 'third party' are affected.
- All third parties are written to, stating that a request for disclosure has been received and asking for their permission to disclose to the person requesting it. Copies of these letters are retained on file.
- 'Third parties' include all family members who may be referred to in the records.
- It also includes workers from any other agency, including social services, the health authority, etc. It is usual for agencies to refuse consent to disclose, preferring the individual to go directly to them.
- When all the consents/refusals to disclose have been received these are attached to the copy of the request letter.
- A photocopy of the complete file is taken.
- The manager will go through the file and remove any information which a third party has refused consent to disclose. This is best done with a thick black marker, to score through every reference to the third party and information they have added to the file.
- 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'.
- The 'clean copy' is photocopied for the parents who are then invited in to discuss the contents. The file should never be given straight over, but should be gone through by a manager, so that it can be explained.
- Legal advice may be sought before sharing a file, especially where the parent has possible grounds for litigation against the setting or another (third party) agency.
- All the undertakings above are subject to the paramount commitment of the setting, which is to the safety and well-being of the child.

Please see also our policy on child protection.

## Children looked after

(Last update February 2016)

### Policy statement

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

Definition of 'Children looked after' (CLA): *Children and young people 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 CLA 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 impact on their emotional well-being.

In our setting, we place emphasis on promoting children's right to be confident, resilient and listened to. Our policy and practice guidelines for looked after children are based on these two important concepts, *attachment and resilience*. The basis of this is to promote secure attachments in children's lives as the basis for resilience. These aspects of well-being underpin the child's responsiveness *to* learning and are the basis in developing 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.

The term 'child looked after' 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 CLA.

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 persons for children looked after are the designated child protection coordinators:  
Lai Brooking & Karen Inglis-Taylor

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- 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 appropriate information is gained and shared.
- The setting recognises the role of the local authority 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.
- The name and telephone number of the child's social worker, along with other contact information for the child, are kept up-to-date and held in the child's Learning Journal and in our contact box, where they are accessible to all staff at all times.
- Any confidential information is held securely (see Children's Records Policy). ▪ All staff are kept informed of procedures concerning the child.
- At the start of a placement, the setting will liaise with social care and will be involved in care plans as advised by the social worker.
- The key person, SENCO and social worker will work together to put an Early Years Personal Education Plan in place. This plan will be shared with the foster carers.
- The plan will be reviewed every 6 months.
- 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 relationship with his or her key person sufficient 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 form a picture of the whole child in relation to the Early Years Foundation Stage areas of learning.
- We will take advice from the social worker as to the appropriate involvement of the birth parents.
- 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 our event file and reported 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.
- Transition to school will be handled sensitively and the designated person and or the child's key person will liaise with the social worker, passing on relevant information and documentation to the school with appropriate agreement.

## Information sharing

(Last update June 2017)

### Policy statement

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

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 intervene where one may have been, or to prevent harm to a child or adult; or
- in the judgement of the staff, not sharing it could be worse than the outcome of having shared it.

The decision should never be made as an individual, but with the back-up of one of the designated persons. The three critical criteria are:

- 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 at risk of suffering, significant harm.
- To *prevent* significant harm arising to children and young people or serious harm to adults, including the prevention, detection and prosecution of serious crime.

## Procedures

Our procedure is based on the 7 golden rules for information sharing as set out in *Information Sharing: Guidance for Practitioners and Managers (DCSF 2008)*.

1. Remember that the Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately.
  - Our policy and procedures on information sharing provide guidance to appropriate sharing of information with external agencies.
2. Be open and honest. Explain to families how, when and why information will be shared about them and with whom. Seek consent to share information, unless it puts the child at risk or undermines a criminal investigation.

In our setting we ensure parents:

- receive information about our information sharing policy when starting their child in the setting and they sign a form to say that they *understand* circumstances when information may be shared without their consent. This will only be when it is a matter of safeguarding a child or vulnerable adult.
  - have access to our Safeguarding Children and Child Protection policy; and
  - have information about the 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 when there are doubts about possible significant harm to a child or others.
    - Managers contact children's social care for advice where they have doubts or are unsure.

4. Share with consent where appropriate. Respect the wishes of children and parents not to consent to share confidential information. However, in the interests of the child, know when it is reasonable to override their wish.
  - Guidelines for consent are part of this procedure.
5. Managers are conversant with this and are able to advise staff accordingly. Consider the safety and welfare of the child when making a decision about sharing information – if there are concerns regarding ‘significant harm’ the child’s well being and safety is paramount.

In our setting we:

- record concerns and discuss these with the setting’s *designated person* and/or *designated officer* from the governance panel 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.
6. Information shared should be accurate and up-to-date, necessary for the purpose it is being shared for, shared only with those who need to know and shared securely.
    - Our Child Protection procedure and Record Keeping procedure set out how and where information should be recorded and what information should be shared with another agency when making a referral.
  7. Reasons for decisions to share information, or not, are recorded.
    - We complete an ‘Information Sharing Decision’ form which, when complete, is held in a lockable filing cabinet in the Church Centre.

#### *Consent*

- Our responsibility regarding gaining consent to share information and when it may not be sought or overridden is covered in our policies on Confidentiality and Client access to records.
- We issue a letter when the child starts which includes this information.

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- Parents sign a form at registration to say they understand that information may be shared without consent in circumstances as explained above.

Parents are asked 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 consider the following questions when we need to share:

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

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

## **Appendix**

Designated Persons:

Staff member - Karen Inglis-Taylor Staff

member - Lai Brooking

Governance Panel member – Mrs Theresa Adams

## **Alcohol and Substance Abuse and Use of Medication**

(Last updated March 2019)

### **Policy statement**

Staff, students and volunteers must not be under the influence of alcohol or any other substance which may affect their ability to care for children.

## **Procedures**

- Staff must not work if they are under the influence of alcohol or other addictive substance or adversely affected by any medication they are taking.
- Individuals taking medication or who have an illness which they believe may affect their ability to care for children should seek medical advice and must inform the manager or supervisor.
- The individual should only work with children if the advice is that the medication is unlikely to impair their ability to look after children.
- If an individual becomes unable to work, he/she should inform the manager or supervisor immediately so that cover arrangements can be made and the individual can go home.
- In the event of alcohol or substance abuse being suspected the manager or supervisor will be informed immediately and the staff member, volunteer or student will be sent home. The governance panel will be contacted and any appropriate disciplinary action taken.

## **Children's rights and entitlements**

(Last updated October 2012)

### **Policy statement**

- 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.

## **Procedures**

- We ask parents to visit and sharing their skills, culture, language and experience. We listen to the children and we encourage children to listen to each other and to adults. We praise and encourage children in their efforts, achievements and positive behaviour.
- We encourage children to do things for themselves but support them while they are learning. We challenge children to reach the next stage of development.
- We encourage children to stand up for themselves with other children when they are not happy with a situation and, wherever possible ask permission from the child or parent to hold the child.
- We explore relationships and seek to develop social skills through small group activities and in our routines at pre-school.
- We share our policies with parents. We work with St. Mary's Church to provide parenting courses. We work with families who need support, involving outside agencies where necessary or helpful.

## **Mobile Phones, i-Pads, Computers & Cameras**

(Last update October 2020)

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## **Information Technology (including use of Mobile phones, i-Pads & iPods)**

### **Policy statement**

A mobile phone belonging to the pre-school is available for emergency use in the garden and on outings and is kept in the first-aid bag. There is also a landline with an answer phone, which staff, students and volunteers can use as an emergency contact. Adults in the setting do not carry a mobile phone unless the phone is a monitor for a child with medical needs or for emergency on-call duties for a visiting policeman for example. There is a forest school mobile phone for phoning from our forest school site, making observations (which may include photographs and videos) and for accessing information.

We use mobile phones, i-Pads and i-Pods belonging to the pre-school to take photographs of the children, and activities they are involved in, for their Learning Journals, for our displays in the pre-school and St. Mary's Church buildings and for setting records such as photo albums which are only used in the pre-school. Other photographs and filming of the children may be arranged with special consent from the parents/carers.

Pre-school i-Pads and computers are used by staff and children. We use safe searching tools to avoid unsuitable images or sites appearing but it is acknowledged that it is impossible to safeguard every eventuality.

### **Procedures**

- The pre-school mobile phones are checked daily to ensure it is properly charged.
- All phones, including those belonging to students, volunteers and visitors are kept in a box in the kitchen except in exceptional circumstances which are agreed with the supervisor, e.g. the visitor is a police officer who is on call.
- If a phone is being carried for the circumstances as above or for monitoring a medical condition, the member of staff carrying it will remain visible to another member of staff at all times so that they can supervise how it is used.

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- If it is felt that the constant ringing of a phone is disrupting the setting the individual will be asked to turn their phone to discreet or silent.
- Staff, volunteers and students are made aware that they must not make personal phone calls or send text messages while they are responsible for the children.
- Should anyone need to use the phone, they must check with the supervisor that they can leave the session to do so.
- Should a member of staff or another adult in the setting use their phone inappropriately the managers will at first address the issue informally. If the incident is repeated the managers will issue a verbal warning and follow the setting's standard disciplinary procedures.
- Photographs are not taken using personal mobile phones.
- Photographs can be taken using pre-school mobile phones, iPads or iPods for children's records or in order to upload them onto our pre-school Facebook page or pre-school Instagram account only. No photographs showing children's faces are uploaded to our Facebook or pre-school Instagram account without consent.
- Photographs are held on the iPads and iPods which are locked in the cupboard overnight and also on the pre-school laptop which is password protected. The password is only known by staff members.
- Pre-school mobile phones, iPads and iPods are only used by staff members and not students or volunteers without supervision.
- Mobile phones, iPads and iPods are not used in the toilet area, except for the exceptional circumstance of illustrating information showing our pre-school routines such as hand washing.
- Photographs of the children are shredded when they are no longer required.
- Discs of photographs used for presentations are held in a lockable cabinet and destroyed when they are no longer required.
- *Safe search* is installed on iPads and *Magic Desktop* on pre-school computers to limit the risk of unsuitable images or websites as far as possible.
- In the unusual event of unsuitable images appearing a staff member should close the screen as soon as possible and report the event to the Supervisor for recording and further investigation.
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## Social Networking

(Last updated June 2019)

### Policy statement

We encourage the friendships which exist between our staff and parents and are happy that they talk on social networking sites but ask that they follow the guidelines laid down in this policy. Should anyone fail to comply with the guidelines we will follow our standard disciplinary procedure.

### Procedures

- Staff are expected to be considerate of the public image they portray online through public profiles or public communication, and it should be in keeping with the values of the pre-school
- Staff must not post photos, videos or any other information about any of the children in their care on a social networking site.
- If a member of staff and a parent are linked on a site, the member of staff must refrain from discussing any child, including the child of that parent, or any other matters specific to their work in the setting which would not normally be in the public domain.
- Staff should be sensitive to the views and opinions of parents (e.g. religious views, political views and parenting styles) when posting messages on any internet site and must carefully control what they say in order not to cause offence or to bring the name of the setting into disrepute.
- If the member of staff becomes concerned about something they learn about a parent, or any of the children in their care, through a social networking site they should treat this information as they would any other piece of information and report it to their manager or supervisor, if appropriate, and follow the correct procedures in the setting. If they have concerns at all about their relationships, they should cease communications until the issue is resolved.
- Should a manager or supervisor feel that any relationships between staff and parents on social networking sites could have a detrimental effect on the setting in any way, the member of staff may be asked to stop this line of communication. Failure to do so will result in disciplinary action.

## Supervision of Children at Forest School

(Last update March 2022)

### Policy statement

Children benefit from being taken out of the setting to engage in outdoor activities which enhance their learning experiences. Staff in our setting ensure that there are procedures to keep children safe whilst at Forest School; all staff and volunteers are aware of and follow the procedures below.

### Procedures

- Parents sign a general consent for their children to take part in Forest School.
- There is a risk assessment for the Forest School site carried out, which is reviewed termly.
- A risk assessment is carried out before each Forest School session.
- Individual risk assessments are carried out for use of tools and for Forest School activities.
- Our adult to child ratio is high, at least one adult to four children, depending on their sensibility and type of activities which are planned.
- Children remain the responsibility of the parent or carer until the child has entered the forest school area (usually marked by tape). If, for any reason, a child needs settling outside the forest school area, the parent or carer must ensure that the child has been marked as present by the supervisor when transferring responsibility or before leaving.
- Children become the responsibility of the parent or carer once again when they meet the parent or carer at the boundary of the forest school area or as soon as the parent or carer arrives to meet the child in an area outside the main forest school area.
- Children are taught to stay within boundaries, counted regularly and supervised by staff and adults to ensure no child goes astray and that there is no unauthorised access to children.
- A register of children is kept which records the arrival and departure of each child. Staff take a mobile phone and emergency contact numbers for both children and adults, along with a first aid pack and tissues, as well as any medication children might need, with consent and record forms. Children will be dressed appropriately for the weather conditions, and for the activities they will be taking part in. They will also take and water, wipes and spare set of clothes etc. The

- amount of equipment will vary and be consistent with the weather and the number of children as well as the activities planned.
- A minimum of two staff will supervise the children at Forest School.

## Equality of opportunity

### Valuing diversity and promoting equality

(Last updated March 2019)

#### Policy statement

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

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

#### Procedures

#### Admissions

Our setting is open to all members of the community.

- We advertise our service widely.
- We reflect the diversity of our society in our publicity and promotional materials.
- We provide information in clear, concise language, whether in spoken or written form.
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- We seek to provide information in other languages, if required.
- Our admissions policy is on a *first come, first served* basis.
- We ensure that all parents are made aware of our equal opportunities policy.
- We include children and their families irrespective of protected characteristics as defined by the Equalities Act 2010. These are:
  - disability;
  - race;
  - gender reassignment;
  - religion or belief;
  - sex;
  - sexual orientation;
  - age;
  - pregnancy and maternity; and - marriage and civil partners.
- Our aim to ensure that all children and their families can participate successfully in the services offered by the setting and in the curriculum offered is reflected in all our planning.
- We take action against any discriminatory behaviour by staff or parents whether by:
  - direct discrimination – someone is treated less favourably because of a protected characteristic e.g. preventing families of some racial groups from using the service; - indirect discrimination - someone is affected unfavourably by a general policy e.g. children must only speak English in the setting;
  - 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. assuming someone is gay because of their mannerisms or how they speak.
- Displaying of openly discriminatory and possibly offensive materials, name calling, or threatening behaviour are unacceptable on or around the premises and will be dealt with in the strongest manner.

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## *Employment*

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

## **Training**

- We seek out training opportunities for staff and volunteers to enable them to develop antidiscriminatory and inclusive practices, which enable all children to flourish.
- We ensure that staff are confident and fully trained in administering relevant medicines and performing invasive care procedures when these are required.
- We review our practices to ensure that we are fully implementing our policy for promoting equality, valuing diversity and inclusion.

## **Environment**

Our environment is as accessible as possible for all visitors and service users. If access to the settings is found to treat children or adults with disabilities less favourably then we make reasonable adjustments to accommodate their needs.

## **Curriculum**

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

- making children feel valued and good about themselves and others;
- ensuring that children have equality of access to learning;
- undertaking an access audit to establish if the setting is accessible to all children;

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- making adjustments to the environment and resources to accommodate any learning, physical and sensory impairments;
- making appropriate provision within the curriculum to ensure each child receives the widest possible opportunity to develop their skills and abilities, e.g. recognising the different learning styles of girls and boys;
- positively reflecting the widest possible range of communities in the choice of resources;
- avoiding stereotypes or derogatory images in the selection of books or other visual materials;
- exploring a range of festivals and the different ways they are celebrated in different cultures;
- creating an environment of mutual respect and tolerance;
- differentiating the curriculum to meet children's additional educational needs;

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- helping children to understand that discriminatory behaviour and remarks are hurtful and unacceptable; ensuring that the curriculum offered is inclusive of children with additional educational needs and children with disabilities;
- ensuring that children learning English as an additional language have full access to the curriculum and are supported in their learning; and
- ensuring that children speaking languages other than English are encouraged in the maintenance and development of their home languages.

### **Valuing diversity in families**

- We welcome the diversity of family lifestyles and work with all families.
- We encourage children to contribute stories of their everyday life to the setting.
- We encourage 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 ensure their full inclusion.
- We offer a flexible payment system for families of differing means and offer information regarding sources of financial support.
- We support 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.
- 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.

### **Involvement and Communication**

- Opportunities are available, through the key person system, parent representatives on the governance panel and questionnaires, for parents and carers to share their views and ideas about how the setting should be run.

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- We encourage all parents and carers to be involved in the setting, by helping during a session, helping on an outing, sharing a skill or interest, attending Pre-School Worship Services or helping with social or fund raising events.
- Key persons work closely with their allocated families to ensure they are fully informed and understand information which is distributed or displayed.

#### *Monitoring and reviewing*

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

## **Supporting children with additional educational needs**

(Last update June 2015)

### **Policy statement**

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

- We have regard for the DfE SEND Code of Practice 2014: 0-25 yrs (July 2014)
- We ensure our provision is inclusive to all children with additional educational needs.
- We support parents and children with additional educational needs.
- We identify the specific needs of children with additional educational needs and meet those needs through a range of strategies.
- We work in partnership with parents, other educational settings and health and social care agencies in meeting individual children's needs and providing support.
- We monitor and review our policy, practice and provision and, if necessary, make adjustments.

### **Procedures**

- We designate a member of staff to be the Inclusion and Additional Educational Needs
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- Coordinator (SEND/INCO) and give her name to parents. Our SEND/INCO is Louise Stokes

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We ensure that the provision for children with additional educational needs is the responsibility of all members of the setting.

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

- On identifying a child with SEND, we use a graduated response with four stages of action – assess, plan, do and review.
- We work closely with parents of children with additional educational needs taking into account their views and wishes.

We ensure that parents are informed at all stages of the assessment, planning, provision and review of their children's education.

On our website, we include our 'local offer', which gives information on our provision for children with special educational needs and disabilities.

- We provide parents with information on sources of independent advice and support. We liaise with other professionals involved with children with additional educational needs and their families, including transfer arrangements to other settings and schools.
- We provide a broad, balanced and differentiated curriculum for all children with additional educational needs.
- We use a system of planning, implementing, monitoring, evaluating and reviewing Individual Plans for children with additional educational needs.
- We ensure that children with additional educational needs are appropriately involved at all stages of the graduated response, taking into account their levels of ability. For example, we find out what the child likes and dislikes before an Individual Plan is completed
- We support children with Education Health Care Plans that are in place already and support those children and parents who may be considering or going through the process of requesting one. We follow advice from other agencies involved, including our local authority advisors, and always keep other staff informed. We support the process and provide information as requested by the parents or by other agencies, such as EYPARM, with agreement of the parents.
- We keep records of the assessment, planning and provision for children with additional educational needs and review these regularly.
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- We provide resources (human and financial) to implement our Additional Educational Needs Policy, requesting extra funding where possible.  
We provide in-service training for parents, practitioners and volunteers.
- We raise awareness of any specialism the setting has to offer, e.g. staff trained in sign language.
- We ensure the effectiveness of our additional educational needs provision by collecting information from a range of sources e.g. Individual Plan reviews, staff and management meetings, parental and external agency's views, inspections and complaints. This information is collated, evaluated and reviewed annually.
- We provide a complaints procedure.
- We monitor and review our policy annually.

## Achieving positive behaviour

(Last update June 2016)

### Policy statement

Our setting believes that children flourish best when their personal, social and emotional needs are met and where there are clear and developmentally appropriate expectations for their behaviour. Children need to learn to consider the views and feelings, needs and rights, of others and the impact that their behaviour has on people, places and objects. This is a developmental task that requires support, encouragement, teaching and setting the correct example.

### Procedures

- Our member of staff who has overall responsibility for our programme for supporting personal, social and emotional development, including issues concerning behaviour, is: Karen InglisTaylor
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- This member of staff:
  - keeps up-to-date with legislation, research and thinking on promoting positive behaviour and on handling children's behaviour where it may require additional support;
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- accesses relevant sources of expertise on promoting positive behaviour; and
- checks that all staff have relevant in-service training on promoting positive behaviour. We keep a record of training completed by staff.
- We recognise that codes for interacting with other people vary between cultures and require staff to be aware of - and respect - those used by members of the setting.  
All staff, volunteers and students provide a positive model of behaviour by treating children, parents and one another with friendliness, care and courtesy.  
We familiarise new staff, volunteers and students with the setting's behaviour policy and its guidelines for behaviour.
- All staff, volunteers and students apply these procedures consistently.
- We work in partnership with children's parents. Parents are regularly informed about their children's behaviour by their key person. We work with parents to address recurring inconsiderate behaviour, using our observation records to help us to understand the cause and to decide jointly how to respond appropriately.

*Strategies used with children who engage in challenging behaviour*

- We use positive strategies for handling any challenging behaviour, by helping children find solutions in ways which are appropriate for the children's ages and stages of development.
- We support children in acknowledging their feelings, explaining what is not acceptable and supporting children to gain control of their feelings so that they can learn a more appropriate response.  
We support children in finding their own ways of managing conflict, such as asking for the sand timer, forming a queue or changing a game so that another child can join in.
- We ensure that there are enough popular toys and resources and sufficient activities available so that children are meaningfully occupied without the need for unnecessary conflict over sharing and waiting for turns.
- We acknowledge considerate behaviour such as kindness and willingness to share.
- We support each child in developing self-esteem, confidence and feelings of competence.
- We support each child in developing a sense of belonging in our group, so that they feel valued and welcome.
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- We avoid creating situations in which children receive adult attention only in return for challenging behaviour.
- When children behave in challenging ways, we help them to understand the outcomes of their action and support them in learning how to cope more appropriately.
- We do not use a 'naughty chair' or a 'time out' strategy that excludes children from the group. We will, however, remove a child from a situation where he/she is continuing to behave unacceptably.  
We never use physical punishment, such as smacking or shaking. Children are never threatened with these.
- We do not use techniques intended to single out and humiliate individual children.
- We may use proportionate physical restraint, such as holding to restrain, to prevent physical injury to children or adults and/or serious damage to property.
- Details of such an event are recorded in the Event File and referred to in the child's learning journal. The child's parent is informed on the same day.
- We may also hold a child to stop him/her running after his/her parent or carer when they are leaving the setting or in order to encourage appropriate social behaviour e.g. sitting down for a lunch or snack time or during story or circle time.
- In cases of serious misbehaviour, such as racial or other abuse, we make clear immediately the unacceptability of the behaviour and attitudes, by means of explanations rather than personal blame.
- We do not shout or raise our voices in a threatening way to respond to children's inconsiderate behaviour.

#### *Tantrums, biting and fighting*

If a child is bitten or hurt by another child, we comfort them and treat their injury in the first instance. The child's parent or carer will be informed.

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- Staff respond calmly and patiently to the child who has caused the injury or who is having a tantrum, offering comfort to intense emotions, helping children to manage their feelings and talk about them to help resolve issues and promote understanding.
- Staff make clear that hurting another child is not acceptable.
- Details are recorded in the Event File and referred to in the child's learning journal.
- If tantrums, biting or fighting are frequent, we try to find out the underlying cause and work with the parents/carers to support the child.
- If the tantrums, biting or fighting continue, we seek specialist help from the WSCC Early Childhood Service.
- If a child's behaviour is putting children or adults in danger, we may need to ask the parents or carers to take their child home until safety can be ensured.

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### *Rough and tumble play and fantasy aggression*

Young children often engage in play that has aggressive themes – such as superhero and weapon play. It may be inconsiderate at times and may need to be addressed using strategies as above.

- We recognise that teasing and rough and tumble play are normal for young children and acceptable within limits. We regard these kinds of play as pro-social and not as problematic or aggressive.
- We will develop strategies to contain play that are agreed with the children, and understood by them, with acceptable behavioural boundaries to ensure children are not hurt.
- We recognise that fantasy play also contains many violently dramatic strategies, blowing up, shooting etc., and that themes often refer to ‘goodies and baddies’ and as such offer opportunities for us to explore concepts of right and wrong.
- We tune in to the content of the play, perhaps to suggest alternative strategies for heroes and heroines, making the most of ‘teachable moments’ to encourage empathy and lateral thinking to explore alternative scenarios and strategies for conflict resolution.

### *Hurtful behaviour*

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

We offer comfort to the child who has been hurt by the behaviour.

We also offer support to the child who is angry. This could be by holding them, taking them to the *feelings den* to be somewhere quiet, exploring resources which will help them, giving them a verbal explanation or helping them to talk through the feelings which motivated the behaviour.

- We help young children learn to empathise with others, understanding that they have feelings too and that their actions impact on others’ feelings.
- We help young children develop pro-social behaviour, such as resolving conflict over who has the toy.

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- We are aware that the same problem may happen over and over before skills such as sharing and turn-taking develop. Children will need repeated experiences with problem solving, supported by patient adults and clear boundaries.
- We support social skills through modelling behaviour, through activities, drama and stories.
- We build self-esteem and confidence in children, recognising their emotional needs through close and committed relationships with them.
- We help a child to understand the effect that their hurtful behaviour has had on another child; we encourage children to say sorry or use alternatives such as a hand shake or picture drawn for the person they have hurt.
- When hurtful behaviour becomes problematic, we work with parents to identify the cause and find a solution together.
- Where this does not work, we seek specialist help from the WSCC Early Childhood Service.

### *Bullying*

We take bullying very seriously. Bullying involves the persistent physical or verbal abuse of another child or children. It is characterised by intent to hurt, often planned, and accompanied by an awareness of the impact of the bullying behaviour. A child who is bullying has reached a stage of cognitive development where he or she is able to plan to carry out a premeditated intent to cause distress in another. Bullying is unlikely to occur in children under five years old.

If a child bullies another child or children we take action as follows:

- We show the children who have been bullied that we are able to listen to their concerns and act upon them.
- We intervene to stop the child who is bullying from harming the other child or children.
- We explain to the child doing the bullying why her/his behaviour is not acceptable.
- We give reassurance to the child or children who have been bullied.

We help the child who has done the bullying to recognise the impact of their actions. We make sure that children who bully receive positive feedback for considerate behaviour and are given opportunities to practise and reflect on considerate behaviour.

- We do not label children who bully as 'bullies'.

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- We recognise that children who bully may be experiencing bullying themselves, or be subject to abuse or other circumstance causing them to express their anger in negative ways towards others.
- We recognise that children who bully are often unable to empathise with others.
- We discuss what has happened with the parents of the child who did the bullying and work out with them a plan for handling the child's behaviour.
- We share what has happened with the parents of the child who has been bullied, explaining that the child who did the bullying is being helped to adopt acceptable ways of behaving.

## Child care practice

### The role of the key person and settling-in

(Last update May 2012)

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

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

#### Procedures

##### *The Role of the Key Person*

- We allocate a key person before the child starts.

The key person is responsible for the induction of the family and for settling the child into our setting.

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The key person works with the parent to plan and deliver a personalised plan for the child's well-being, care and learning.

- The key person acts as the key contact for the parents and has links with other carers involved with the child, such as a childminder, and co-ordinates the sharing of appropriate information about the child's development with those carers.
- The key person is responsible for developmental records and for sharing information on a regular basis with the child's parents to keep those records up-to-date, reflecting the full picture of the child in our setting and at home.
- In the absence of the child's key person, the parents contact the supervisor for the session.
- We promote the role of the key person as the child's primary carer in our setting, and as the basis for establishing relationships with other staff and children.

### *Settling-in*

- Before a child starts to attend the setting, we use a variety of ways to provide his/her parents with information. These include written information (including our prospectus and a new starter booklet), an Open Afternoon and an extra visit if the child is not starting in September.
- We allocate a key person to each child and his/her family before she/he starts to attend; the key person welcomes and looks after the child and his/her parents at the child's first session and during the settling-in process.
- We ask the family to complete an 'All about me' booklet to ensure we have all the information we need in order to support the child and family in the settling-in process.
- The key person explains the process of settling-in with his/her parents and they jointly decide on the best way to help the child to settle into the setting.
- Within the first four to six weeks of starting we discuss and work with the child's parents to start to create their child's learning journal.

## **Record keeping**

### **Children's records**

(Last updated June 2018)

## **Policy statement**

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

This policy and procedure is taken in conjunction with the Confidentiality and Client Access to Records policy and Information Sharing policy.

## **Procedures**

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 also include any reports or minutes from meetings concerning the child from other agencies where the agency has given us consent to share these with the parents/carers or they already have a copy.
- These are held online or kept in the setting, in a lockable filing cabinet, and can be freely accessed, and contributed to, by staff, the child and the child's parents.
- Parental consent is given on joining to enable us to pass developmental records on to schools or other early years settings when the children leaves St. Mary's Pre-School.
- Parental consent is also given to enable us to share records with WSCC Family Information Services to enable them to give support to families.

### *Personal records*

- Copies of registration forms and signed consent forms are held in the Church Centre or the setting. Accident books and medical records are also held in the Church Centre and in the setting. They are kept in a lockable cabinet and can be accessed by staff.
- Confidential correspondence concerning the child or family, reports or minutes from meetings concerning the child from other agencies, an ongoing record of relevant contact with parents,

and observations by staff on any confidential matter involving the child, such as developmental concerns or child protection matters are all kept in a lockable filing cabinet in the Church Centre and can only be accessed by the managers.

- Parents have access, in accordance with our Client Access to Records policy, to the files and records of their own children but do not have access to information about any other child.
- Staff will not discuss personal information given by parents with other members of staff, except where it affects planning for the child's needs. Staff induction includes an awareness of the importance of confidentiality in the role of the key person.
- Students, when they are observing in the setting, are advised of our confidentiality policy and are required to respect it.
- We retain children's personal records for three years after they have left the setting, or until after the next Ofsted inspection, if later. Accident books are kept for 21 years and records about child protection concerns are kept for 24 years. These are kept in a lockable filing cabinet in the Church Centre and can only be accessed by the managers.

## **Provider records**

(Last update June 2018)

### **Policy statement Policy statement**

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

- Records pertaining to our registration.
- Landlord/lease documents and other contractual documentation pertaining to amenities, services and goods.
- Financial records pertaining to income and expenditure.
- Risk assessments.
- Employment records of staff.
- Records of outcomes for the children

Our records are regarded as confidential on the basis of sensitivity of information, such as with regard to employment records and outcomes for the children and these are maintained with regard to the framework of the Data Protection Act and the Human Rights Act.

This policy and procedure is taken in conjunction with the Confidentiality and Client Access to Records policy and Information Sharing policy.

## **Procedures**

- All records are the responsibility of the managers, the bursar and the administrator who ensure they are kept securely.
- All records are kept in an orderly way in files and filing is kept up-to-date.
- Employment records of staff are kept in a lockable filing cabinet in the Church Centre and can only be accessed by the managers.
- Records of outcomes for the children are held to help us evaluate our practice. These are kept in the setting, in a lockable filing cabinet accessible, and contributed to, by staff or in a lockable filing cabinet in the Church Centre.
- Financial records are kept up-to-date for audit purposes and held for 6 years.
- Health and safety records are maintained; 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.

### *Other records*

- Issues to do with the employment of staff, whether paid or unpaid, remain confidential to the people directly involved with making personnel decisions.

## **Learning Journals**

(Last updated June 2017)

### **Policy statement**

We ensure that all children attending the pre-school have a personal Learning Journal which records photos, observations and comments, in line with the Early Years Foundation Stage, to build up a record of each child's experience during his/her time with us.

It will also show children's developmental progress through the different age bands of the Early Years Foundation Stage.

### **Procedures**

- Each child will have a key person allocated to them who will be responsible for the compilation of that child's Learning Journal.
- We use an online Learning Journal system (Tapestry), allowing staff and parents to access the information from any computer via a personal, password-protected login.
- Staff access allows input of new observations and photos or amendment of existing observations and photos.
- Parent access allows input of new observations and photos or the addition of comments on existing observations and photos. Parent log-ins do not have the necessary permission to edit existing material.
- Observations input into the Tapestry system are checked to ensure they are allocated to the correct child before being added to the child's Learning Journal.
- Parents logging into the system are only able to see their own child's Learning Journal.
- Parents are asked to sign a consent form giving permission for their child's image to appear in other children's Learning Journals, and to protect images of other children that may appear in any photos contained in their child's Learning Journal. They are asked to sign to say they will not use or copy images of other children from their child's Learning Journal.
- Staff are made aware of any family who have asked for their child's image not to appear in any other child's journal.
- In all written observations, other children are not referred to by name.
- Photographs taken of children using the pre-school i-Pads and i-Pods are used only in accordance with our IT policy.
- Tapestry is not used as a general communication tool between pre-school and home. A child's Learning Journal is a document recording their learning and development and parents may add comments on observations or contribute photos, videos or information about activities they have been doing at home.
- Parents may contact us through the usual channels for any other day-to-day matters, e.g. absence, lost property, etc.

### *Transition to another school or setting*

- When a child leaves pre-school, we will send an electronic version of the learning journal to the parents.
- With the parents' permission, we will give a further electronic copy of the journal to the new school or setting if they do not use the Tapestry System.
- If the new school or setting uses the Tapestry system as well, we will (also) follow the Tapestry transfer process to move the child to that new account once we have completed analysis on the data.
- We will keep a printed copy of the basic assessment data for each child.
- For children who have not been transferred, their learning journals will be deleted when we have completed analysis on the data.

### *Security*

- The Tapestry on-line Learning Journal system is hosted on secure dedicated servers based in the UK.
- Access to information stored on Tapestry can only be gained by unique user id and password.
- Parents can only see their own child's information and are unable to login to view other children's Learning Journals.

## **Employment**

### **Employment and staffing**

(Including vetting, contingency plans, training and development)

(Last updated October 2020)

#### **Policy Statement**

We provide a staffing ratio in line with the 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 criminal and other records through the Disclosure and Barring Service in accordance with statutory requirements.

## Procedures

### *Ratios*

- To meet this aim we use the following ratios of adult to children:
- children aged two years of age: 1 adult : 4 children; and
- children aged three to five years of age: 1 adult : 8 children.
- As a contingency only, we will use the EYFS minimum requirements where a person with Qualified Teacher Status, Early Years Professional Status or another suitable level 6 qualification (which is full and relevant) is working directly with the children and at least one other member of staff holds a full and relevant level 3 qualification.
- children aged three to five years of age: 1 adult : 13 children ▪ A minimum of two staff/adults are on duty at any one time.
- We use a key person approach to ensure that each child has a named member of staff with whom to form a relationship and who plans with parents for the child's well-being and development in the setting. The key person meets regularly with the family for discussion and consultation on their child's progress.
- We hold regular staff meetings to undertake curriculum planning, training, evaluation and development of the setting and to discuss children's progress, their achievements and any difficulties that may arise from time to time.

### *Vetting and staff selection*

- We work towards offering equality of opportunity as detailed in our *Valuing Diversity and Promoting Equality* policy.
- All staff have job descriptions which set out their staff roles and responsibilities.
- We obtain references and enhanced criminal record checks through the Disclosure and Barring Service for staff and volunteers. This is in accordance with requirements under the Safeguarding Vulnerable Groups Act 2006 for the vetting and barring scheme.
- We keep all records relating to employment of staff and volunteers, in particular those demonstrating that checks have been done, including the date and number of the enhanced DBS check.

### *Changes to staff*

- We inform Ofsted of any changes in the persons responsible for our setting.

### *Training and staff development*

- Our supervisors hold a full and relevant Level 3 qualification or above (as defined by CWDC) and a minimum of half of the remaining staff in each session hold a full and relevant Level 2 qualification or above (as defined by CWDC).
- We provide regular in-service training to all staff – through internal training sessions, WSCC and external agencies.
- Our setting budget allocates resources to training.
- We provide staff induction training in the first week of employment. This induction includes Health and Safety and Child Protection procedures. Key policies must be read by new staff and students within one week of joining and all other policies must be read by new staff within one month of joining. A list of key policies is attached to our Induction policy.
- We support the work of our staff by holding annual appraisals and an optional six-month review.

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

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

- Our staff take their holiday breaks when the setting is closed. Where staff may need to take time off for any reason other than sick leave or training, this is agreed with the manager with sufficient notice.
- Where staff are unwell and take sick leave in accordance with their contract of employment, we organise cover to ensure ratios are maintained.
- Sick leave is monitored and action is taken where necessary in accordance with the contract of employment.
- Our contingency plans to cover staff absences are
  - to use other staff who do not usually work for that session
  - to use temporary members of staff who have agreed to cover for staff absences
  - to use DBS checked volunteers if no permanent or temporary staff are available
  - to close the setting, as a last resort, until the required ratio can be provided  
(managers would inform parents/carers)

## **Induction of staff, volunteers, students and managers**

(Last updated June 2014)

## **Policy Statement**

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

## **Procedures**

- The individual will be introduced to existing staff, volunteers, students and managers.
- The induction will involve working through the induction plan, which is attached.
- The Induction Training Record must be completed.
- Key policies must be read by new staff and students within one week of joining and the Induction Training Record signed again when this is done. The list of key policies is attached.
- All other policies must be read by new staff within one month of joining.
- New staff will be introduced to their key children and parents and familiarised with any confidential information concerning them.
- New staff will also be given details of the tasks and daily routines to be completed.
- A manager or experienced member of staff will induct new staff, volunteers and students. A governance panel member, along with an existing manager or senior member of staff, will induct a new manager.
- Successful completion of the probationary period will depend in part on the individual demonstrating an understanding of and compliance with policies, procedures, tasks and routines.

## **Student placements**

(Last updated October 2013)

## **Policy Statement**

This setting recognises that qualifications and training make an important contribution to the quality of the care and education provided by early years settings. As part of our commitment to quality, we offer placements to students undertaking early years qualifications and training. We also offer placements for school pupils on work experience.

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

## **Procedures**

- We require students on qualification courses to meet the 'suitable person' requirements of Ofsted and have DBS checks carried out.
- We require schools placing students under the age of 17 years with the setting to vouch for their good character.
- Students undertaking qualification courses who are placed in our setting on a short term basis are not counted in our staffing ratios and we do not allow them to have unsupervised access to children.
- Trainee staff employed by the setting may be included in the ratios if they are deemed competent.
- We take out employers' liability insurance and public liability insurance, which covers both trainees and voluntary helpers.  
We require students to keep to our confidentiality policy.
- We co-operate with students' tutors in order to help students to fulfil the requirements of their course of study.
- We provide students, at the first session of their placement, with a short induction on how our setting is managed, how our sessions are organised and our policies and procedures.
- Key policies must be read by students within one week of joining and the Induction Training Record signed again when this is done. The list of key policies is attached to the Induction Policy.
- We communicate a positive message to students about the value of qualifications and training.
- We make the needs of the children paramount by not admitting students in numbers that hinder the essential work of the setting.
- We ensure that trainees and students placed with us are engaged in bona fide early years training, which provides the necessary background understanding of children's development and activities.

# Partnership

## Parental involvement

(Last updated May 2013)

### Policy statement

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

Our aim is to support parents as their children's first and most important educators by involving them in their children's education and in the full life of the setting. We also aim to support parents by providing parenting courses and by building links with other organisations who could give them support in their parental role.

In carrying out the following procedures, we will ensure all parents are included.

### Procedures

It is the role of the key person to work with their key children's families to ensure that each parent is involved in the child's life and development in the setting, including fathers or parents who work or live apart from their children.

- We ensure ongoing dialogue with parents to improve our knowledge of the needs of their children and to support their families.
- We inform all parents about how the setting is run and its policies through access to written information and through regular informal communication. We check to ensure parents understand the information that is given to them.
- We encourage and support parents to play an active part in the governance and management of the setting by appointing parent representatives to our governance panel and inviting parents to contact the representatives with any opinions or ideas. We also send parents copies of revised policies to invite them to give input on the policies before they are agreed.
- We encourage parents to give feedback throughout the year but also invite them to complete an annual questionnaire to help us know their views.
- We inform all parents on a regular basis about their children's progress.

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

We encourage parents to contribute their own skills, knowledge and interests to the activities of the setting, e.g. parents with English as additional language share their knowledge of their first language and culture with the children in the setting.

- We inform parents about relevant conferences, workshops and training.
- Wherever possible, we offer alternatives to ensure parents can attend visits and parent consultation meetings.
- We invite parents to help us in the setting, once their children are settled, and welcome them regardless of skills.
- We hold meetings in venues that are accessible and appropriate for all.
- We inform all parents of the systems for registering queries, complaints or suggestions and check to ensure these are understood. All parents have access to our written complaints procedure.
- We provide opportunities for parents to learn about the curriculum offered in the setting and about young children's learning, in the setting and at home, through consultations with staff, workshops at the consultation evenings, our open afternoon and through written information. We also pass on information about relevant courses.

### *Respect and concern for others*

We expect parents and carers to show respect and concern for others by

- supporting the respectful ethos of our pre-school by setting a good example in their own speech and behaviour towards all members of the pre-school community including staff, volunteers, committee members and other parents and children.
- maintaining positive lines of communication and working together with staff for the benefit of children.
- resolving issues of concern or clarifying specific events with staff whilst they are in the setting and being mindful that whilst staff and volunteers wish to maintain a positive relationship they may be unable, to discuss issues when away from the setting.
- making an appointment to discuss a sensitive issue rather than discuss it in front of the children
  - not smoking in the vicinity of the pre-school
- correcting their own child's behaviour in the vicinity of the pre-school where it could otherwise lead to conflict, aggressive or unsafe behaviour
  - respecting the pre-school environment.
- following the parking guide lines and being responsible for their own children and mindful of others when parking.

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In order to support a peaceful and safe pre-school environment, St. Mary's Pre-School cannot tolerate

- use of disruptive behaviour which interferes with the operation of the pre-school
- use of loud and/or offensive language or displaying temper
- threatening harm or the use of physical aggression towards staff or other families
- abusive or threatening emails, phone or social network messages
- slanderous comments about incidents or alleged incidents relating to the pre-school, the staff or other families
- consumption of alcohol or other addictive substances on the premises or accessing the preschool site whilst intoxicated

The above behaviours will be reported to the Police or appropriate authorities and having consulted the governance panel could result in prohibiting an offending adult and, as a last resort, their family from entering the premises on a permanent basis.

## Working in partnership with other agencies

(Last updated May 2012)

### Policy statement

We work in partnership with local and national agencies to promote the well-being of all children. We access specialist information, support and advice to help us support the children in our setting. We work together with all other agencies involved with each child to ensure consistent support.

### Procedures

- We work in partnership or in tandem with, local and national agencies to promote the wellbeing of children.
- Procedures are in place for sharing of information about children and families with other agencies. These are set out in the Information Sharing policy.
- Information shared by other agencies with us is regarded as third party information. This is kept in our 'Additional Confidential Information' file for the child unless we have consent to share it with the parents. If we have this consent, the information can be held in or with the child's Learning Journal.

When working in partnership with staff from other agencies, we make those individuals welcome in the setting and their professional roles are respected.

- 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 local and national agencies who offer a wealth of advice and information that help us develop understanding of issues facing us and who can provide support and information for parents. For example, ethnic/cultural organisations, drug/alcohol agencies, welfare rights advisors or organisations promoting childcare and education, or adult education.

## Supporting Families in Financial Need

(Last updated October 2016)

### Policy statement

St. Mary's Pre-School, Horsham is a Christian pre-school committed to reaching out to the whole community. While we welcome many children from Church families into pre-school, we actively want to encourage all families to consider our pre-school for their children. We also want to ensure that all children, regardless of background, are equally able to access the benefits that our preschool offers in terms of early years care and education of the highest quality. We want to follow the spirit of early years care and education of the highest quality. We want to follow the spirit of the Government's well-established "Every Child Matters" agenda and 10 Year Childcare Strategy, through which all people working with young children must seek to support every child according to need – and, collectively, ensure that no child "falls through the gaps". Despite many developments, children from poor backgrounds are far less likely to access good quality early years care and education – yet benefit the most from it. So it is particularly important that St. Mary's Pre-School is accessible to all.

The way in which our Assisted Place Fund operates needs to be subject to a clear set of criteria, fairly applied and openly communicated – to ensure genuine equality and to ensure that our policy and practice stands up to scrutiny under equal opportunities legislation. Discretion is required, however, in order to be able to cater for very rare or unforeseeable circumstances.

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## Procedures

Subject to funds being available, we will offer support to families by offering appropriate/additional sessions funded through our Assisted Place Fund where:

- Financial circumstances mean that a child will access fewer (or no) sessions than their peers of similar age
- Child protection or other significant welfare issues (such as those arising from disability or long term parental ill health) mean that a child will benefit particularly greatly from being in our care, and parents will benefit from the support that our experienced and caring pre-school staff can offer. In this instance we will accept children regardless of the family's ability to pay. By making this a priority, we are actively supporting the most vulnerable children in society and their families.
- A serious crisis (resulting, example, from the loss of a breadwinning parent through separation, divorce or imprisonment, or due to accident, illness or bereavement) means that a family becomes unexpectedly, suddenly or temporarily unable to pay the usual amount.

In cases where these criteria are not met, but there is still some clear financial difficulty, we will offer a range of payment options such as paying by cash weekly or by post-dated cheque, and we will adopt a flexible and considerate approach, working with families to arrive at a long-term solution where finances are problematic.

We will monitor the effectiveness of this policy and review it on an annual basis in line with good practice and to ensure we continue to meet our obligations as regards equal opportunities. We will also consider the suitability of the size of the Assisted Place Fund in relation to need, and seek to obtain additional support if required. We refer to the Assisted Place Fund in our Prospectus and will ensure that the policy is communicated to all staff so that any enquiry relating to this sensitive matter is handled appropriately and consistently. A copy of this policy is available in pre-school at all times.

### Requesting funding from the Assisted Place Fund

- Applicants will complete a request form which will be passed to the Chair of the Governance Panel for consideration.

- Additional information will be sought if necessary  
If the request is agreed, a date will be set to review the application

## Administration

### Admissions

(Last updated February 2018)

#### 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. The waiting list is operated on a first-come, first-served basis.

#### Procedures

- These procedures apply to all children who apply on or after the date this policy is adopted.
- We ensure that the existence of our setting is widely advertised in places accessible to all sections of the community.
- We ensure that information about our setting is accessible, in written and spoken form. We will seek to obtain translated written materials or access to an interpreter where the needs of families suggest this is required.
- We arrange our waiting list on a first-come, first served basis within age cohorts. Cohorts are based on the academic year, 1<sup>st</sup> September – 31<sup>st</sup> August.
- We operate with 24 places per morning session, 16 places per afternoon session and 8 places in Forest School which will usually run three mornings a week.
- The morning sessions, are available to children aged 2¼ years old and above and who, except in exceptional circumstances, will be at least 3 by the end of the following August.
- The afternoon sessions and 'Forest School' sessions are specifically for children who will be 4 during the academic year.
- New children are usually admitted in September, November, January and February.
- If there is still space available in February (after the spring half term), we will admit children in April and June.

- - Children whose birthdays fall between September and December will be admitted in September of the year in which they turn 3 years old, unless, unusually, space is available in April/June.
  - Except at the discretion of the managers, children will not be offered fewer than two sessions as we believe that they need to attend twice a week in order to become settled at the pre-school.
  - Children who will become 4 during the academic year will usually be given two or three afternoon sessions out of their five.
  - Children who will become 3 during the academic year can identify and hold one session until January and those who will become 4 can identify and hold two sessions also until January through the session preference process.
  - The afternoon sessions can be increased to 18 spaces, at the managers' discretion, if the needs of the children require this.
  - Places are offered during the spring term for the following academic year. If a place is not taken up or a child is withdrawn from pre-school, they would join the bottom of the waiting list if their application is reinstated.
  - Parents of children to whom we are unable to offer a place initially, will be kept informed of their child's position on our waiting list.
  - If a child leaves the pre-school during the academic year, their place will be offered to the next person on the waiting list.
  - 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.
  - In exceptional circumstances only and at the discretion of the managers, children can start from age 2 years.

*Allocation of spaces Key:*

- cohort a – children who will become 4 during the academic year
- cohort b – children who will become 3 during the academic year
- cohort c – children who will become 2 during the academic year (exceptional circumstances only)

Places are allocated in this priority order:

- 1) to the first 26 children in cohort a, according to their order on the waiting list: up to 5 sessions

- 2) to other children in cohort a, according to their order on the waiting list, and who *already attend pre-school*: up to 5 sessions,
- 3) to up to 26 children in cohort b according to their order on the waiting list: up to 3 sessions,
- 4) to any other children in cohorts a or b, according to their order on the waiting list, *who do not already attend pre-school*: sessions as above (5 for cohort a, 3 for cohort b)
- 5) to children in cohort a, according to age, eldest first: extra requested sessions (one session at a time)
- 6) to children in cohort b, according to age, eldest first: extra requested morning sessions (one session at a time)
- 7) to children in cohorts a or b who wish to start in April (if spaces are still available after the February half-term holiday): sessions as above (5 for cohort a, 3 for cohort b)
- 8) to children in cohort c, in exceptional circumstances only and at the discretion of the managers: up to 3 sessions