

Introduction

Policies and procedures are essential to help you provide good quality provision that is compliant with the *Statutory Framework for the Early Years Foundation Stage* (EYFS). They do this by explaining to staff and parents about the type of childcare you offer and what actions you take in practice to achieve this. The EYFS requires providers to have written policies and procedures; and to provide staff with training at induction to ensure that they fully understand, and know how to implement, the policies and procedures and to ensure that they are accessible and clearly explained to parents.

There are ten overarching Safeguarding and Welfare Requirements within the EYFS, some of which are broken down into further headings, as follows:

- *Child protection*
Providers must be alert to any issues for concern in the child's life at home or elsewhere. Providers must have and implement a policy, and procedures, to safeguard children.
- *Suitable People (also covering Disqualification and Staff Taking Medication/Other Substances)*
Providers must ensure that people looking after children are suitable to fulfil the requirements of their roles.
- *Staff Qualifications, Training, Support and Skills*
The daily experience of children in early years settings and the overall quality of the provision depends on all practitioners having appropriate qualifications, training, skills and knowledge and a clear understanding of their roles and responsibilities.
- *Key Person*
Each child must be assigned a key person. Their role is to help ensure that every child's care is tailored to meet their individual needs, to help the child become familiar with the setting, offer a settled relationship for the child and build a relationship with their parents.
- *Staff:Child Ratios (also covering Childminders)*
Staffing arrangements must meet the needs of children and ensure their safety.
- *Health (also covering Medicines, Food and Drink and Accident or Injury)*
The provider must promote the good health of children attending the setting. They must have a procedure, discussed with parents and/or carers, for responding to children who are ill or infectious, take necessary steps to prevent the spread of infection and take appropriate action if children are ill.
- *Managing Behaviour*

Providers must have and implement a behaviour management policy, and procedures.

- *Safety and Suitability of Premises, Environment and Equipment (also covering Safety, Smoking, Premises, Risk Assessment and Outings)*

Providers must ensure that their premises, including outdoor spaces, are fit for purpose.

Providers must have, and implement a health and safety policy, and procedures, which cover identifying, reporting and dealing with accidents, hazards and faulty equipment.

- *Equal Opportunities*

Providers must have and implement a policy, and procedures, to promote equality of opportunity for children in their care, including support for children with special educational needs or disabilities.

- *Information and Records (also covering Information About the Child, Information for Parents and Carers, Complaints, Information About the Provider and Changes that Must be Notified to Ofsted)*

Providers must maintain records and obtain and share information (with parents and carers, other professionals working with the child, and the police, social services and Ofsted as appropriate) to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

Providers must meet all the statutory requirements of the Early Years Foundation Stage and must take all necessary steps to keep children safe and well. Each of the policies and procedures that providers are required to have in place to do this are provided in this publication and organised under each of the ten Safeguarding and Welfare Requirements of the Early Years Foundation Stage as they appear above. Also included are policies or procedures that the Alliance recommends as good practice.

Providers are required to assess risks to children's safety and review risk assessments regularly; making written risk assessments in relation to specific issues where they determine it will be helpful. Therefore template risk assessments have been included, as in some cases these stand alongside procedures, especially, for example, health and safety procedures.

In this book, the overarching policy statement is set out at the start of each section, followed by the relevant procedure describing how the policy will be fulfilled in a consistent and standardised way. References to relevant legislation or guidance are then included at the end of each policy. All staff and parents should be included in adopting, implementing and reviewing policies so that all adults involved can influence the way the setting is run.

Adopting policies

- Copies of the policies and procedures to be adopted should be made available to all parents and staff.
- A meeting to discuss and adopt the policies and procedures should be held. This will enable everyone *to discuss and fully understand each policy statement and procedure.*

Implementing policies

- *All new parents and staff should be introduced to the setting's policies and procedures.*
- *It should be explained to parents and staff that the policies are the rules required for running the setting in a way which complies with the requirements of the EYFS and Ofsted registration and must be adhered to.*

Reviewing policies

- Each policy and procedure should be continually monitored by collecting evidence about the results of its implementation.
- The evidence should be used to make any necessary changes to the policy and procedure and/or the way it is implemented.
- All staff and parents should contribute to the evidence collected and share in decisions about any necessary changes.

The enclosed policies are those required by the Safeguarding and Welfare Requirements and the Learning and Development Requirements of the Early Years Foundation Stage. If you decide to make any adaptations to any policy, you should ensure it still meets the requirements of the relevant regulations.

Some providers may also decide to develop further policies, which are not required by regulations, but which would enable a clear direction for any specific issue pertaining to the setting. For example, some providers may require a policy on sharing premises with another facility. Or in some cases a local authority or a funding body may require a policy or procedure that is not included in this publication. We have enclosed a template to enable providers to compose their own where staff and parents agree something is needed.

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Safeguarding and Welfare Requirement: Child Protection

Providers must have and implement a policy, and procedures, to safeguard children.

1.1 Children's rights and entitlements

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.

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

To be strong means to be:

- secure in their foremost attachment relationships, where they are loved and cared for by at least one person who is able to offer consistent, positive and unconditional regard and who can be relied on;
- safe and valued as individuals in their families and in relationships beyond the family, such as day care or school; self assured and form a positive sense of themselves – including all aspects of their identity and heritage;
- included equally and belong in early years settings and in community life;
- confident in abilities and proud of their achievements;
- progressing optimally in all aspects of their development and learning;
- part of a peer group in which to learn to negotiate, develop social skills and identity as global citizens, respecting the rights of others in a diverse world; and
- able to represent themselves and participate in aspects of service delivery that affects them, as well as aspects of key decisions that affect their lives.

To be resilient means to:

- be sure of their self worth and dignity;
- be able to be assertive and state their needs effectively;
- be able to overcome difficulties and problems;

- be positive in their outlook on life;
- be able to cope with challenge and change;
- have a sense of justice towards themselves and others;
- develop a sense of responsibility towards themselves and others; and
- be able to represent themselves and others in key decision making processes.

To be listened to means:

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

This policy was adopted at a meeting of	_____	<i>(name of provider)</i>
Held on	_____	<i>(date)</i>
Date to be reviewed	_____	<i>(date)</i>
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Safeguarding and Welfare Requirement: Child Protection

Providers must have and implement a policy, and procedures, to safeguard children.

1.2 Safeguarding children and child protection

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

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. Our Safeguarding Policy is based on the three key commitments of the Pre-school Learning Alliance Safeguarding Children Policy.

Procedures

We carry out the following procedures to ensure we meet the three key commitments of the Alliance Safeguarding Children Policy.

Key commitment 1

The Alliance is committed to building a 'culture of safety' in which children are protected from abuse and harm in all areas of its service delivery.

Staff and volunteers

- Our designated person (a member of staff) who co-ordinates child protection issues is:
Debbie Markwick (team leader) and Sarah-Jane Middleton (deputy)
- Our designated officer (a member of the management team) who oversees this work is:
Kelly Vallence (Chair)
- We ensure all staff are trained to understand our safeguarding policies and procedures and that parents are made aware of them too.
- All staff have an up-to-date knowledge of safeguarding issues.
- We provide adequate and appropriate staffing resources to meet the needs of children.
- Applicants for posts within the setting are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974.
- Candidates are informed of the need to carry out 'enhanced disclosure' checks with the Disclosure and Barring Service before posts can be confirmed.
- Where applications are rejected because of obtaining 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 Disclosure and Barring Service checks for staff and volunteers, to ensure that no disqualified person or unsuitable person works at the setting or has access to the children.
- Volunteers do not work unsupervised.
- We record information about staff qualifications, and the identity checks and vetting processes that have been completed including:
 - the criminal records disclosure reference number;
 - the date the disclosure was obtained; and
 - details of who obtained it.
- We inform all staff that they are expected to disclose any convictions, cautions, court orders or reprimands and warnings which may affect their suitability to work with children (whether received before or during their employment with us).
- We notify the Disclosure and Barring Service of any person who is dismissed from our employment, or resigns in circumstances that would otherwise have led to dismissal for reasons of a child protection concern.
- 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.
- We take steps to ensure children are not photographed or filmed on video for any other purpose than to record their development or their participation in events organised by us. Parents sign a consent form and have access to records holding visual images of their child.

Key commitment 2

The Alliance is committed to responding promptly and appropriately to all incidents or concerns of abuse that may occur and to work with statutory agencies in accordance with the procedures that are set down in 'What to do if you're worried a child is being abused' (HMG 2006).

Responding to suspicions of abuse

- We acknowledge that abuse of children can take different forms - physical, emotional, and sexual, as well as neglect.
- When children are suffering from physical, sexual or emotional abuse, or experiencing neglect, this may be demonstrated through:
 - significant changes in their behaviour;
 - deterioration in their general well-being;
 - their comments which may give cause for concern, or the things they say (direct or indirect disclosure);
 - changes in their appearance, their behaviour, or their play;
 - unexplained bruising, marks or signs of possible abuse or neglect; and
 - any reason to suspect neglect or abuse outside the setting.

- We take into account factors affecting parental capacity, such as social exclusion, domestic violence, parent's drug or alcohol abuse, mental or physical illness or parent's learning disability.
- We are aware of other factors that affect children's vulnerability such as, abuse of disabled children; fabricated or induced illness; child abuse linked to beliefs in spirit possession; sexual exploitation of children, such as through internet abuse; and Female Genital Mutilation; that may affect, or may have affected, children and young people using our provision.
- We also make ourselves aware that some children and young people are affected by gang activity, by complex, multiple or organised abuse, through forced marriage or honour based violence or may be victims of child trafficking. While this may be less likely to affect young children in our care, we may become aware of any of these factors affecting older children and young people who we may come into contact with.
- Where we believe that a child in our care or that is known to us may be affected by any of these factors we follow the procedures below for reporting child protection concerns.
- 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 member of staff who is acting as the 'designated person'. The information is stored on the child's personal file.
- 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 Local Safeguarding Children Board.
- We take care not to influence the outcome either through the way we speak to children or by asking questions of children.
- We take account of the need to protect young people aged 16-19 as defined by the Children Act 1989. This may include students or school children on work placement, young employees or young parents. Where abuse is suspected we follow the procedure for reporting any other child protection concerns. The views of the young person will always be taken into account, but the setting may override the young person's refusal to consent to share information if it feels that it is necessary to prevent a crime from being committed or intervene where one may have been, or to prevent harm to a child or adult. Sharing confidential information without consent is done only where not sharing it could be worse than the outcome of having shared it.

Recording suspicions of abuse and disclosures

- Where a child makes comments to a member of staff that give cause for concern (disclosure), or a member of staff observes signs or signals that give cause for concern, such as significant changes in behaviour; deterioration in general well-being; unexplained bruising, marks or signs of possible abuse or neglect; that member of staff:
 - listens to the child, offers reassurance and gives assurance that she or he will take action;
 - does not question the child;
 - makes a written record that forms an objective record of the observation or disclosure that includes: the date and time of the observation or the disclosure; the exact words spoken by the child as far as

possible; the name of the person to whom the concern was reported, with the date and time; and the names of any other person present at the time.

- These records are signed and dated and kept in the child's personal file, which is kept securely and confidentially.
- The member of staff acting as the 'designated person' is informed of the issue at the earliest opportunity.
- Where the Local Safeguarding Children Board stipulates the process for recording and sharing concerns, we include those procedures alongside this procedure and follow the steps set down by the Local Safeguarding Children Board.

Making a referral to the local authority children's social care team

- The Pre-school Learning Alliance's publication Safeguarding Children contains procedures for making a referral to the local children's social care team, as well as a template form for recording concerns and making a referral. This is based on 'What to do if you're worried a child is being abused' (HMG 2006).
- We keep a copy of this document alongside the procedures for recording and reporting set down by our Local Safeguarding Children Board, which we follow where local procedures differ from those of the Pre-school Learning Alliance.

Informing parents

- Parents are normally the first point of contact. We discuss concerns with parents to gain their view of events, unless we feel this may put the child in greater danger.
- We inform parents when we make a record of concerns in their child's file and that we also make a note of any discussion we have with them regarding a concern.
- If a suspicion of abuse warrants referral to social care, parents are informed at the same time that the referral will be made, except where the guidance of the Local Safeguarding Children Board does not allow this, for example, where it is believed that the child may be placed in greater danger.
- This will usually be the case where the parent is the likely abuser. In these cases the social workers will inform parents.

Liaison with other agencies

- We work within the Local Safeguarding Children Board guidelines.
- We have the current version of 'What to do if you're worried a child is being abused' available for parents and staff and ensure that all staff are familiar with what they need to do if they have concerns.
- We have procedures for contacting the local authority regarding 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 children's social care to work well together.
- We notify the registration authority (Ofsted) of any incident or accident and any changes in our arrangements which may affect the well-being of children or where an allegation of abuse is made against a member of staff (whether the allegations relate to harm or abuse committed on our premises or

elsewhere). Notifications to Ofsted are made as soon as is reasonably practicable, but at the latest within 14 days of the allegations being made.

- Contact details for the local National Society for the Prevention of Cruelty to Children (NSPCC) are also kept.

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 respond to any inappropriate behaviour displayed by members of staff or any other person working with the children, which includes:
 - inappropriate sexual comments;
 - excessive one-to-one attention beyond the requirements of their usual role and responsibilities, or inappropriate sharing of images.
- We follow the guidance of the Local Safeguarding Children Board 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 Designated Officer (LADO) to investigate:

The Safeguarding Unit, Children's Services Dept.

Clarendon House, Monarch Way, Winchester, SO22 5PW.

01962 876364

(name and phone number)

- We also report any such alleged incident to Ofsted, as well as what measures we have taken. We are aware that it is an offence not to do this.
- We co-operate entirely with any investigation carried out by children's social care in conjunction with the police.
- Where the management team and children's social care agree it is appropriate in the circumstances, the chair/director/owner 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.

Disciplinary action

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

Key commitment 3

The Alliance is committed to promoting awareness of child abuse issues throughout its training and learning programmes for adults. It is also committed to empowering young children, through its early childhood curriculum, promoting their right to be strong, resilient and listened to.

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 that designated persons receive training in accordance with that recommended by the Local Safeguarding Children Board.
- We ensure that all staff know the procedures for reporting and recording any concerns they may have about the provision.

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.

Curriculum

- We introduce key elements of keeping children safe into our programme to promote the personal, social and emotional development of all children, so that they may grow to be strong, resilient and listened to and so that they develop an understanding of why and how to keep safe.
- We create within the setting a culture of value and respect for individuals, having positive regard for children's heritage arising from their colour, ethnicity, languages spoken at home, cultural and social background.
- We ensure that this is carried out in a way that is developmentally appropriate for the children.

Confidentiality

- All suspicions and investigations are kept confidential and shared only with those who need to know. Any information is shared under the guidance of the Local Safeguarding Children Board.

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, information sharing, monitoring of the child, and liaising at all times with the local children's social care team.
- We will continue to welcome the child and the family whilst investigations are being made in relation to any alleged abuse.

- We follow the Child Protection Plan as set by the child's social 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 the Local Safeguarding Children Board.

Legal framework

Primary legislation

- Children Act (1989 s47)
- Protection of Children Act (1999)
- Data Protection Act (1998)
- The Children Act (Every Child Matters) (2004)
- Safeguarding Vulnerable Groups Act (2006)

Secondary legislation

- Sexual Offences Act (2003)
- Criminal Justice and Court Services Act (2000)
- Equalities Act (2010)
- Data Protection Act (1998) Non Statutory Guidance

Further guidance

- Working Together to Safeguard Children (HMG 2006 - under revision 2012)
- What to do if you're Worried a Child is Being Abused (HMG 2006)
- Framework for the Assessment of Children in Need and their Families (DoH 2000)
- The Common Assessment Framework for Children and Young People: A Guide for Practitioners (CWDC 2010)
- Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004 (HMG 2007)
- Information Sharing: Guidance for Practitioners and Managers (HMG 2008) (HMG 2006)
- Independent Safeguarding Authority: www.isa.homeoffice.gov.uk

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider _____

Name of signatory _____

Role of signatory (e.g. chair, director or owner)

Other useful Pre-school Learning Alliance publications

- Safeguarding Children (2010)

Safeguarding and Welfare Requirement: Child Protection

Providers must have and implement a policy, and procedures, to safeguard children.

1.3 Looked after children

Policy statement

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

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

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

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

Principles

- The term 'looked after child' denotes a child's current legal status; this term is never used to categorise a child as standing out from others. We do not refer to such a child using acronyms such as LAC.
- We do not normally offer placements for babies and children under two years who are in care; we offer instead other services to enable a child to play and engage with other children while their carer stays with them.

- We offer places for funded two, three and four-year-olds who are in care to ensure they receive their entitlement to early education. We expect that a child will have been with a foster carer for a minimum of one month and that they will have formed a secure attachment to the carer. We expect that the placement in the setting will last a minimum of six weeks.
- We will always offer 'stay and play' provision for a child who is two to five years old who is still settling with their foster carer, or who is only temporarily being looked after.
- Where a child who normally attends our setting is taken into care and is cared for by a local foster carer, we will continue to offer the placement for the child.

Procedures

- The designated person for looked after children is the designated child protection co-ordinator.
- Every child is allocated a key person before they start and this is no different for a looked after child. The designated person ensures the key person has the information, support and training necessary to meet the looked after child's needs.
- The designated person and the key person liaise with agencies, professionals and practitioners involved with the child and his or her family and ensure that appropriate information is gained and shared.
- The setting recognises the role of the local authority children's social care department as the child's 'corporate parent' and the key agency in determining what takes place with the child. Nothing changes, especially with regard to the birth parent's or foster carer's role in relation to the setting, without prior discussion and agreement with the child's social worker.
- At the start of a placement there is a professionals meeting to determine the objectives of the placement and draw up a care plan that incorporates the child's learning needs. This plan is reviewed after two weeks, six weeks and three months. Thereafter at three to six monthly intervals.
- The care plan needs to consider issues for the child such as:
 - their emotional needs and how they are to be met;
 - how any emotional issues and problems that affect behaviour are to be managed;
 - their sense of self, culture, language(s) and identity – and how this is to be supported;
 - their need for sociability and friendship;
 - their interests and abilities and possible learning journey pathway; and
 - how any special needs will be supported.
- In addition the care plan will also consider:
 - how information will be shared with the foster carer and local authority (as the 'corporate parent') as well as what information is shared with whom and how it will be recorded and stored;
 - what contact the child has with his/her birth parent(s) and what arrangements will be in place for supervised contact. If this is to be at the setting, when, where and what form the contact will take will be discussed and agreed;
 - what written reporting is required;
 - wherever possible, and where the plan is for the child's return home, the birth parent(s) should be involved in planning; and

- with the social worker's agreement, and as part of the plan, the birth parent(s) should be involved in the setting's activities that include parents, such as outings and fun-days etc alongside the foster carer.
- The settling-in process for the child is agreed. It should be the same as for any other child, with the foster carer taking the place of the parent, unless otherwise agreed. It is even more important that the 'proximity' stage is followed until it is visible that the child has formed a sufficient relationship with his or her key person for them to act as a 'secure base' to allow the gradual separation from the foster carer. This process may take longer in some cases, so time needs to be allowed for it to take place without causing further distress or anxiety to the child.
- In the first two weeks after settling-in, the child's well-being is the focus of observation, their sociability and their ability to manage their feelings with or without support.
- Further observations about communication, interests and abilities will be noted to form a picture of the whole child in relation to the Early Years Foundation Stage prime and specific areas of learning and development.
- Concerns about the child will be noted in the child's file and discussed with the foster carer.
- If the concerns are about the foster carer's treatment of the child, or if abuse is suspected, these are recorded in the child's file and reported to the child's social care worker according to the setting's safeguarding children procedure.
- Regular contact should be maintained with the social worker through planned meetings that will include the foster carer.
- The transition to school will be handled sensitively. The designated person and/or the child's key person will liaise with the school, passing on relevant information and documentation with the agreement of the looked after child's birth parents.

Further guidance

- Guidance on the Education of Children and Young People in Public Care (DfEE 2000)
- Who Does What: How Social Workers and Carers can Support the Education of Looked After Children (DfES 2005)
- Supporting Looked After Learners - A Practical Guide for School Governors (DfES 2006)

This policy was adopted at a meeting of	_____	(name of provider)
Held on	_____	(date)
Date to be reviewed	_____	(date)
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Safeguarding and Welfare Requirement: Child Protection

Providers must have and implement a policy, and procedures, to safeguard children.

1.4 Uncollected child

Policy statement

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

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

Procedures

- Parents of children starting at the setting are asked to provide the following specific information, which is recorded on our Registration Form:
 - Home address and telephone number - if the parents do not have a telephone, an alternative number must be given, perhaps a neighbour or close relative.
 - Place of work, address and telephone number (if applicable).
 - Mobile telephone number (if applicable).
 - Names, addresses, telephone numbers and signatures of adults who are authorised by the parents to collect their child from the setting, for example a childminder or grandparent.
 - Who has parental responsibility for the child.
 - Information about any person who does not have legal access to the child.
 - On occasions when parents are aware that they will not be at home or in their usual place of work, they inform us 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, address 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 apply our child protection procedures in the event that their children are not collected by an authorised adult within one hour 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 procedures below:
 - The child's file is checked for any information about changes to the normal collection routines.
 - If no information is available, parents/carers are contacted at home or at work.
 - If this is unsuccessful, the adults who are authorised by the parents to collect their child from the setting - and whose telephone numbers are recorded on the Registration Form - are contacted.
 - All reasonable attempts are made to contact the parents or nominated carers.
 - The child does not leave the premises with anyone other than those named on the Registration Form or in their file.
 - If no-one collects the child after the setting has closed and there is no-one who can be contacted to collect the child, we apply the procedures for uncollected children.
 - We contact our local authority children's social care team:

0845 6035620

(name and phone number)

For full day care, this will be the out of hours duty officer:

0845 6004555

(name and phone number)

- 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 will staff go to look for the parent, nor do they take the child home with them. A full written report of the incident is recorded in the child's file.
- Depending on circumstances, we reserve the right to charge parents for the additional hours worked by our staff.
- Ofsted may be informed:

0300 1231231

(telephone number)

- Our local Pre-school Learning Alliance office/Development Worker may also be informed.

02076 972500

(name and phone number)

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider _____

Name of signatory _____

Role of signatory (e.g. chair, director or owner) _____

Other useful Pre-school Learning Alliance publications

- Safeguarding Children (2010)

Safeguarding and Welfare Requirement: Child Protection

Providers must have and implement a policy, and procedures, to safeguard children.

1.5 Missing child

Policy statement

Children's safety is our highest priority, both on and off the 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

- As soon as it is noticed that a child is missing, the key person/staff alerts the setting leader.
- The setting leader calls the police and reports the child as missing and then calls the parent. The setting leader will carry out a thorough search of the building and garden.
- The register is checked to make sure no other child has also gone astray.
- Doors and gates are checked to see if there has been a breach of security whereby a child could wander out.
- The setting leader talks to the staff to find out when and where the child was last seen and records this.
- The setting leader contacts the chair, director or owner and reports the incident. The chair, director or owner comes to the setting immediately to carry out an investigation, with the management team where appropriate.

Child going missing on an outing

This describes what to do when staff have taken a small group on an outing, leaving the setting leader and/or other staff back in the setting. If the setting leader has accompanied children on the outing, the procedures are adjusted accordingly.

What to do when a child goes missing from a whole setting outing may be a little different, as parents usually attend and are responsible for their own child.

- As soon as it is noticed that a child is missing, staff on the outing ask children to stand with their designated carer and carry out a headcount to ensure that no other child has gone astray. One staff member searches the immediate vicinity, but does not search beyond that.
- The setting leader or manager is contacted immediately (if not on the outing) and the incident is recorded.
- The setting leader contacts the police and reports the child as missing.
- The setting leader contacts the parent, who makes their way to the setting.
- Staff take the remaining children back to the setting.

- In an indoor venue, the staff contact the venue's security who will handle the search and contact the police if the child is not found.
- The setting leader contacts the chair, director or owner and reports the incident. The chair, director or owner comes to the setting immediately to carry out an investigation, with the management committee, (where appropriate).
- The setting leader or member of staff may be advised by the police to stay at the venue until they arrive.

The investigation

- Staff keep calm and do not let the other children become anxious or worried.
- The setting leader together with a representative of the management team, speaks with the parent(s).
- The chair, director or owner, carry out a full investigation taking written statements from all the staff in the room or 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.
- In the event of disciplinary action needing to be taken, 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.
- Staff may be the understandable target of parental anger and they may be afraid. Setting leaders need to ensure that staff under investigation are not only fairly treated but receive support while feeling vulnerable.
- The parents will feel angry, and fraught. They may want to blame staff and may single out one staff member over others; they may direct their anger at the setting leader. When dealing with a distraught and angry parent, there should always be two members of staff, one of whom is the setting leader and the

other should be the chairperson of the management committee or representative, or the proprietor. 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 or proprietor will use their discretion to decide what action to take.
- Staff must not discuss any missing child incident with the press without taking advice.

This policy was adopted at a meeting of _____ (name of provider)

Held on _____ (date)

Date to be reviewed _____ (date)

Signed on behalf of the provider _____

Name of signatory _____

Role of signatory (e.g. chair, director or owner) _____

Safeguarding and Welfare Requirement: Suitable People

Providers must ensure that people looking after children are suitable to fulfil the requirements of their roles.

2.1 Employment

(Including suitability, contingency plans, training and development)

Policy statement

We meet the Safeguarding and Welfare Requirements of the Early Years Foundation Stage, ensuring that 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

Vetting and staff selection

- We work towards offering equality of opportunity by using non-discriminatory procedures for staff recruitment and selection.
- All staff have job descriptions, which set out their staff roles and responsibilities.
- We welcome applications from all sections of the community. Applicants will be considered on the basis of their suitability for the post, regardless of disability, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation, sex, age, marriage or civil partnership. Applicants will not be placed at a disadvantage by our imposing conditions or requirements that are not justifiable.
- We use Ofsted guidance on obtaining references and enhanced criminal record checks through the Disclosure and Barring Service for staff and volunteers who will have unsupervised access to children. 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.
- Staff are expected to disclose any convictions, cautions, court orders, reprimands and warnings which may affect their suitability to work with children – whether received before, or at any time during, their employment with us.

Disqualification

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

Changes to staff

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

Training and staff development

- Our setting leader and deputy hold the CACHE Level 3 Diploma for the Children and Young People's Workforce or an equivalent qualification and a minimum of half of our staff hold the CACHE Level 2 Certificate for the Children and Young People's Workforce or an equivalent or higher qualification.
- We provide regular in-service training to all staff - whether paid staff or volunteers - through the Pre-school Learning Alliance and external agencies.
- Our setting budget allocates resources to training.
- We provide staff induction training in the first week of employment. This induction includes our Health and Safety Policy and Safeguarding Children and Child Protection Policy. Other policies and procedures will be introduced within an induction plan.
- We support the work of our staff by holding regular supervision meetings and appraisals.
- We are committed to recruiting, appointing and employing staff in accordance with all relevant legislation and best practice.

Staff taking medication/other substances

- If a member of staff is taking medication which may affect their ability to care for children, we ensure that they seek further medical advice. Staff will only work directly with the children if medical advice confirms that the medication is unlikely to impair their ability to look after children properly.
- Staff medication on the premises will be stored securely and kept out of reach of the children at all times.
- If we have reason to believe that a member of staff is under the influence of alcohol or any other substance that may affect their ability to care for children, they will not be allowed to work directly with the children and further action will be taken.

Managing staff absences and contingency plans for emergencies

- In term time only settings, 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.
- In all year round settings, managers organise staff annual leave so that ratios are not compromised. Where staff are unwell and take sick leave in accordance with their contract of employment, we organise cover to ensure ratios are maintained.
- Sick leave is monitored and action is taken where necessary, in accordance with the contract of employment.
- We have contingency plans to cover staff absences, as follows:

Bank staff to be contacted.

This policy was adopted at a meeting of

(name of provider)

Held on

(date)

Date to be reviewed	<hr/>	(date)
Signed on behalf of the provider	<hr/>	
Name of signatory	<hr/>	
Role of signatory (e.g. chair, director or owner)	<hr/>	
	<hr/>	

Other useful Pre-school Learning Alliance publications

- Employee Handbook (2012)
- Recruiting and Managing Employees (2011)

Safeguarding and Welfare Requirement: Suitable People

Providers must ensure that adults looking after children are suitable to fulfil the requirements of their roles.

2.2 Student placements

Policy statement

Our 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 people' requirements of Ofsted and have DBS checks carried out before they start.
- We require students in our setting to have a sufficient understanding and use of English to contribute to the well-being of children in our care.
- We require schools placing students under the age of 17 years with the setting to vouch for their good character.
- We supervise students under the age of 17 years at all times and do not allow them to have unsupervised access to children.
- Students undertaking qualification courses who are placed in our setting on a short term basis are not counted in our staffing ratios.
- Trainee staff employed by the setting and students over the age of 17 may be included in the ratios if they are deemed competent and responsible.
- 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 and Client Access to Records 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.
- 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.

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider

Name of signatory

Role of signatory (e.g. chair, director or owner)

Safeguarding and Welfare Requirement: Staff Qualifications, Training, Support and Skills

Providers must ensure that all staff receive induction training to help them understand their roles and responsibilities.

3.1 Induction of staff, volunteers and managers

Policy statement

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

Procedures

- We have a written induction plan for all new staff, which includes the following:
 - Introductions to all staff and volunteers, including management committee members where appropriate.
 - Familiarising with the building, health and safety, and fire and evacuation procedures.
 - Ensuring our policies and procedures have been read and are carried out.
 - Introduction to parents, especially parents of allocated key children where appropriate.
 - Familiarising them with confidential information where applicable in relation to any key children.
 - Details of the tasks and daily routines to be completed.
- The induction period lasts at least two weeks. The manager inducts new staff and volunteers. The chairperson or senior manager inducts new managers.
- During the induction period, the individual must demonstrate understanding of and compliance with policies, procedures, tasks and routines.
- Successful completion of the induction forms part of the probationary period.

This policy was adopted at a meeting of	_____	<i>(name of provider)</i>
Held on	_____	<i>(date)</i>
Date to be reviewed	_____	<i>(date)</i>
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Other useful Pre-school Learning Alliance publications

- Employee Handbook (2012)
- Recruiting and Managing Employees (2011)

Safeguarding and Welfare Requirement: Staff Qualifications, Training, Support and Skills

At least one person who has a current paediatric first aid certificate is on the premises at all times when children are present, and must accompany children on outings.

Health

The provider must ensure there is a first aid box accessible at all times with appropriate content for use with children. Providers must keep a written record of accidents or injuries and first aid treatment.

3.2 First aid

Policy statement

In our setting, staff are able to take action to apply first aid treatment in the event of an accident involving a child or adult. At least one member of staff with a current first aid certificate is on the premises, or on an outing at any one time. The first aid qualification includes first aid training for infants and young children. We aim to ensure that first aid training is local authority approved and is relevant to staff caring for young children.

Procedures

The first aid kit

Our first aid kit is accessible at all times, complies with the Health and Safety (First Aid) Regulations 1981 and contains adequate and appropriate supplies as stated in the first aid kit.

- The first aid box is easily accessible to adults and is kept out of the reach of children.
- No un-prescribed medication is given to children, parents or staff.
- At the time of each child's admission to the setting, parents' written permission for obtaining emergency medical advice or treatment is sought. Parents sign and date their written approval.
- Parents sign a consent form at registration allowing staff to take their child to the nearest Accident and Emergency unit to be examined, treated or admitted as necessary on the understanding that parents have been informed and are on their way to the hospital.

Legal framework

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

Further guidance

- First Aid at Work: Your questions answered (HSE Revised 2009)
- Basic Advice on First Aid at Work (HSE Revised 2008)
- Guidance on First Aid for Schools (DfEE)

This policy was adopted at a meeting of	_____	<i>(name of provider)</i>
Held on	_____	<i>(date)</i>
Date to be reviewed	_____	<i>(date)</i>
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Other useful Pre-school Learning Alliance publications

- Medication Record (2010)

Safeguarding and Welfare Requirement: Key Person

Each child must be assigned a key person. Their role is to help ensure that every child's care is tailored to meet their individual needs, to help the child become familiar with the setting, offer a settled relationship for the child and build a relationship with their parents

4.1 The role of the key person and settling-in

Policy statement

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

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

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

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

The procedures set out a model for developing a key person approach that promotes effective and positive relationships for children who are in settings.

Procedures

- We allocate a key person before the child starts.
- In some settings where a home visit is carried out before the child starts, this is done by the manager and the key person.
- The key person is responsible for the induction of the family and for settling the child into our setting. The key person offers unconditional regard for the child and is non-judgemental.
- The key person works with the parents 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.
- The key person encourages positive relationships between children in her/his key group, spending time with them as a group each day.
- We provide a back-up key person so the child and the parents have a key contact in the absence of the child's key person.
- We promote the role of the key person as the child's primary carer in our setting, and as the basis for establishing relationships with other staff and children.

Settling-in

- Before a child starts to attend the setting, we use a variety of ways to provide his/her parents with information. These include written information (including our prospectus and policies), displays about activities available within the setting, information days and evenings and individual meetings with parents.
- During the half-term before a child is enrolled, we provide opportunities for the child and his/her parents to visit the setting.
- 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 may offer a home visit by the person who will be the child's key person, to ensure all relevant information about the child can be made known.
- We use pre-start visits and the first session at which a child attends to explain and complete, with his/her parents, the child's registration records.
- When a child starts to attend, we explain the process of settling-in with his/her parents and jointly decide on the best way to help the child to settle into the setting.
- We have an expectation that the parent, carer or close relative, will stay for most of the session during the first week, gradually taking time away from their child, increasing this as and when the child is able to cope.
- Younger children will take longer to settle in, as will children who have not previously spent time away from home. Children who have had a period of absence may also need their parent to be on hand to re-settle them.
- We judge a child to be settled when they have formed a relationship with their key person; for example, the child looks for the key person when he/she arrives, goes to them for comfort, and seems pleased to be with them. The child is also familiar with where things are and is pleased to see other children and participate in activities.
- When parents leave, we ask them to say goodbye to their child and explain that they will be coming back, and when.
- We recognise that some children will settle more readily than others, but that some children who appear to settle rapidly are not ready to be left. We expect that the parent will honour the commitment to stay for at least the first week, or possibly longer, until their child can stay happily without them.

- We do not believe that leaving a child to cry will help them to settle any quicker. We believe that a child's distress will prevent them from learning and gaining the best from the setting.
- We reserve the right not to accept a child into the setting without a parent or carer if the child finds it distressing to be left. This is especially the case with very young children.
- Within the first four to six weeks of starting, we discuss and work with the child's parents to begin to create their child's record of achievement.

The progress check at age two

- The key person carries out the progress check at age two in accordance with any local procedures that are in place and referring to the guidance A Know How Guide: The EYFS progress check at age two.
- The progress check aims to review the child's development and ensures that parents have a clear picture of their child's development.
- Within the progress check, the key person will note areas where the child is progressing well and identify areas where progress is less than expected.
- The progress check will describe the actions that will be taken by the setting to address any developmental concerns (including working with other professionals where appropriate) as agreed with the parent(s).
- The key person will plan activities to meet the child's needs within the setting and will support parents to understand the child's needs in order to enhance their development at home.

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider _____

Name of signatory _____

Role of signatory (e.g. chair, director or owner) _____

Other useful Pre-school Learning Alliance publications

- Play is What I Do (2010)
- Statutory Framework for the Early Years Foundation Stage (2012) With supporting documentation

Safeguarding and Welfare Requirement: Staff: Child ratios

Staffing arrangements must meet the needs of all children and ensure their safety

5.1 Staffing

Policy statement

We provide a staffing ratio in line with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage to ensure that children have sufficient individual attention and to guarantee care and education of a high quality. Our staff are appropriately qualified and we carry out checks for criminal and other records through the Disclosure and Barring Service in accordance with statutory requirements.

Procedures

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

- Children under two years of age: 1 adult : 3 children:
 - at least one member of staff holds a full and relevant level 3 qualification and is suitably experienced in working with children under two;
 - at least half of all other staff hold a full and relevant level 2 qualification;
 - at least half of all staff have received training that specifically addresses the care of babies; and
 - where there is an under two-year-olds' room, the member of staff in charge of that room has suitable experience of working with under twos.
- Children aged two years: 1 adult : 4 children:
 - at least one member of staff holds a full and relevant level 3 qualification; and
 - at least half of all other staff hold a full and relevant level 2 qualification.
- Children aged three years and over: 1 adult : 8 children:
 - at least one member of staff holds a full and relevant level 3 qualification; and
 - at least half of all other staff hold a full and relevant level 2 qualification.
- We follow the Early Years Foundation Stage Safeguarding and Welfare Requirements where a Qualified Teacher, Early Years Professional or other suitable level 6 qualified person is working directly with children aged three and over between the hours of 8am and 4pm as follows:
 - there is at least one member of staff for every 13 children; and
 - at least one other member of staff holds a full and relevant level 3 qualification.
- A minimum of two staff/adults are on duty at any one time.
- Each child is assigned a key person to help the child become familiar with the setting from the outset and to ensure that each child has a named member of staff with whom to form a relationship. The key person plans with parents for the child's well-being and development in the setting. The key person meets regularly with the family for discussion and consultation on their child's progress and offers support in guiding their development at home.

- We hold regular staff meetings to undertake curriculum planning and to discuss children's progress, their achievements and any difficulties that may arise from time to time.

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider

Name of signatory

Role of signatory (e.g. chair, director or owner)

Other useful Pre-school Learning Alliance publications

- Employee Handbook (2012)
- Recruiting and Managing Employees (2011)

Safeguarding and Welfare Requirement: Health

Providers must have and implement a policy, and procedures, for administering medicines. It must include systems for obtaining information about a child's needs for medicines, and for keeping this information up-to-date.

6.1 Administering medicines

Policy statement

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

In many cases, it is possible for children's GPs to prescribe medicine that can be taken at home in the morning and evening. As far as possible, administering medicines will only be done where it would be detrimental to the child's health if not given in the setting. If a child has not had a medication before, especially a baby/child under two, it is advised that the parent keeps the child at home for the first 48 hours to ensure there are no adverse effects, as well as to give time for the medication to take effect.

These procedures are written in line with guidance in *Managing Medicines in Schools and Early Years Settings*; the manager is responsible for ensuring all staff understand and follow these procedures.

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 manager is responsible for the overseeing of administering medication.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only medication prescribed by a doctor (or other medically qualified person) is administered. It must be in-date and prescribed for the current condition (medicines containing aspirin will only be given if prescribed by a doctor). NB Children's paracetamol (un-prescribed) is administered only for children under the age of one year with the verbal consent of the parents in the case of a high temperature. This is to prevent febrile convulsion and where a parent or named person is on their way to collect the child.
- 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 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:
 - the full name of child and date of birth;
 - the name of medication and strength;
 - who prescribed it;
 - the dosage to be given in the setting;
 - how the medication should be stored and its expiry date;
 - any possible side effects that may be expected; and
 - the signature of the parent, their printed name and the date.

Insert details here of who receives the child's medication and asks the parent to complete a consent form.

State how staff will be aware of this.

The child's key person if possible will take responsibility of this as stated in their induction process.

- The administration of medicine is recorded accurately in our medication record book each time it is given and is signed by the key person/manager. Parents are shown the record at the end of the day and asked to sign the record book to acknowledge the administration of the medicine. The medication record book records the:
 - name of the child;
 - name and strength of the medication;
 - date and time of the dose;
 - dose given and method;
 - signature of the key person/manager; and
 - parent's signature.
- We use a Medication Record book for recording the administration of medicine and comply with the detailed procedures set out in that publication.

Storage of medicines

- All medication is stored safely in a locked cupboard or refrigerated as required. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.
- The child's key person is responsible for ensuring medicine is handed back at the end of the day to the parent.
- For some conditions, medication may be kept in the setting to be administered on a regular or as-and-when-required basis. Key persons check that any medication held in the setting, is in date and return any out-of-date medication back to the parent.

Insert details here of how and where medicines are stored in your setting. State how staff are informed of this.

Medicines will be placed into the medicine box and medicines which need refrigeration will be placed in the fridge. Both of these are in the kitchen.

- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.
- If rectal diazepam is given, another member of staff must be present and co-signs the record book.
- No child may self-administer. Where children are capable of understanding when they need medication, for example with asthma, they should be encouraged to tell their key person what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.

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

- 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. Other medical or social care personnel may need to be involved in the risk assessment.
- Parents will also contribute to a risk assessment. They should be shown around the setting, understand the routines and activities and point out anything which they think may be a risk factor for their child.
- For some medical conditions, key staff will need to have training in a basic understanding of the condition, as well as how the medication is to be administered correctly. The training needs for staff form part of the risk assessment.
- The risk assessment includes vigorous activities and any other activity that may give cause for concern regarding an individual child's health needs.
- The risk assessment includes arrangements for taking medicines on outings and advice is sought from the child's GP if necessary where there are concerns.
- A health care plan for the child is 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 frequently if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.
- Parents receive a copy of the 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 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 and a card to record when it has been given, including all the details that need to be recorded in the medication record as stated above.
- On returning to the setting the card is stapled to the medicine record book and the parent signs it.

- If a child on medication has to be taken to hospital, the child's medication is taken in a sealed plastic box clearly labelled with the child's name and the name of the medication. Inside the box is a copy of the consent form signed by the parent.
- As a precaution, children should not eat when travelling in vehicles.
- This procedure is read alongside the outings procedure.

Legal framework

- The Human Medicines Regulations (2012)

Further guidance

- Managing Medicines in Schools and Early Years Settings (DfES 2005)

This policy was adopted at a meeting of	_____	<i>(name of provider)</i>
Held on	_____	<i>(date)</i>
Date to be reviewed	_____	<i>(date)</i>
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Other useful Pre-school Learning Alliance publications

- Medication Record (2010)
- Daily Register and Outings Record (2012)

Safeguarding and Welfare Requirement: Health

The provider must promote the good health of children attending the setting. They must have a procedure, discussed with parents and/or carers, for responding to children who are ill or infectious, take necessary steps to prevent the spread of infection, and take appropriate action if children are ill.

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

(Including reporting notifiable diseases)

Policy statement

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

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 manager calls the parents and asks them to collect the child, or send a known carer to collect the child on their behalf.
- If a child has a temperature, they are kept cool, by removing top clothing and sponging their heads with cool water, but kept away from draughts.
- The child's temperature is taken using a forehead thermometer strip, kept in the first aid box.
- In extreme cases of emergency, the child should be taken to the nearest hospital and the parent informed.
- Parents are asked to take their child to the doctor before returning them to the setting; the setting 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 diarrhoea, parents are asked to keep children home for 48 hours or until a formed stool is passed.
- The setting has a list of excludable diseases and current exclusion times. The full list is obtainable from www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1194947358374 and includes common childhood illnesses such as measles.

Reporting of 'notifiable diseases'

- If a child or adult is diagnosed as suffering from a notifiable disease under the Health Protection (Notification) Regulations 2010, the GP will report this to 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 and aprons are worn when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Protective rubber gloves are used for cleaning/sluicing clothing after changing.
- Soiled clothing is double bagged for parents to collect.
- Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution or cleaning crystals and mops; any cloths used are bagged and disposed of.
- Tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit are cleaned using a disinfectant.
- Children do not share tooth brushes, which are also soaked weekly in sterilising solution.

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.

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 child's personal file and a copy is displayed where staff 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 nut or nut products are accidentally brought in, for example to a party.

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 your insurance provider.

- Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them.
- The setting 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 setting 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 and 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 provider 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 documents relating to these children must first be sent to the Pre-school Learning Alliance Insurance Department for appraisal (if you have another provider, please check their procedures with them). Written confirmation that the insurance has been extended will be issued by return.

Key person for special needs children - children requiring assistance with tubes to help them with everyday living e.g. breathing apparatus, to take nourishment, colostomy bags etc.

- Prior written consent must be obtained from the child's parent or guardian to give treatment and/or medication prescribed by the child's GP.
- The key person must have the relevant medical training/experience, which may include those who have received appropriate instructions from parents or guardians, or who have qualifications.
- Copies of all letters relating to these children must first be sent to the Pre-school Learning Alliance Insurance Department for appraisal (if you have another provider, please check their procedures with them). Written confirmation that the insurance has been extended will be issued by return.

If you are unsure about any aspect, contact the Pre-school Learning Alliance Insurance Department on 020 7697 2585 or email membership@pre-school.org.uk.

Further guidance

- Managing Medicines in Schools and Early Years Settings (DfES 2005)

This policy was adopted at a meeting of	_____	(name of provider)
Held on	_____	(date)
Date to be reviewed	_____	(date)
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Other useful Pre-school Learning Alliance publications

- Good Practice in Early Years Infection Control (2009)

Safeguarding and Welfare Requirement: Health

Providers must keep a written record of accidents or injuries and first aid treatment.

6.3 Recording and reporting of accidents and incidents

(Including the procedure for reporting accidents and incidents to the HSE under RIDDOR requirements)

Policy statement

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

Procedures

Our accident book:

- is kept in a safe and secure place;
- is accessible to staff and volunteers, who all know how to complete it; and
- is reviewed at least half termly to identify any potential or actual hazards.

Reporting accidents and incidents

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

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

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

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

We meet our legal requirements in respect of the safety of our employees and the public by complying with RIDDOR (the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations). We report to the Health and Safety Executive:

- any work-related accident leading to an injury to a child or adult, for which they are taken to hospital;
- any work-related injury to a member of staff, which results in them being unable to work for seven consecutive days;
- when a member of staff suffers from a reportable work-related disease or illness;
- any death, of a child or adult, that occurs in connection with activities relating to our work; 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.

Information for reporting incidents to the Health and Safety Executive is provided in the Pre-school Learning Alliance's Accident Record publication. 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 the local police. Where we are responsible for the premises we have contact numbers for the gas and electricity emergency services, and a carpenter and plumber. Where we rent premises we ensure we have access to the person responsible and that there is a shared procedure for dealing with emergencies.
- We keep an incident book for recording major incidents, including those that are reportable to the Health and Safety Executive as above.
- These incidents include:
 - a break in, burglary, or theft of personal or the setting's property;
 - an intruder gaining unauthorised access to the premises;
 - a fire, flood, gas leak or electrical failure;
 - an attack on member of staff or parent on the premises or nearby;
 - any racist incident involving staff or family on the setting's premises;
 - a notifiable disease or illness, or an outbreak of food poisoning affecting two or more children looked after on the premises;
 - the death of a child or adult, 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, is also recorded.
- In the unlikely event of a terrorist attack, we follow the advice of the emergency services with regard to evacuation, medical aid and contacting children's families. Our standard Fire Safety and Emergency Evacuation Policy will be followed and staff will take charge of their key children. The incident is recorded when the threat is averted.
- In the unlikely event of a child dying on the premises, for example, through cot death in the case of a baby, the emergency services are called, and the advice of these services are followed.
- The incident book is not for recording issues of concern involving a child. This is recorded in the child's own file.

Legal framework

- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995 (As Amended)

Further guidance

- RIDDOR Guidance and Reporting Form: www.hse.gov.uk/riddor

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider

Name of signatory

Role of signatory (e.g. chair, director or owner)

Other useful Pre-school Learning Alliance publications

- Accident Record (2010)
- Reportable Incident Record (2012)

Safeguarding and Welfare Requirement: Health

Providers must ensure there are suitable hygienic changing facilities for changing any children who are in nappies.

6.4 Nappy changing

Policy statement

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

We provide nappy changing facilities and exercise good hygiene practices in order to accommodate children who are not yet toilet trained.

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

Procedures

- Children from two years should normally wear pull ups, or other types of trainer pants, as soon as they are comfortable with this and their parents agree.
- Key persons undertake changing children in their key groups; back up key persons change them if the key person is absent.
- Changing areas are warm with safe areas to lay children.
- Each child has their own bag to hand with their nappies or pull ups and changing wipes.
- Gloves and aprons are put on by staff before changing starts and the areas are prepared. Paper towel is put down on the changing mat freshly for each child.
- All staff are familiar with the hygiene procedures and carry these out when changing nappies.
- In addition, key persons ensure that nappy changing is relaxed and a time to promote independence in young children.
- Children are encouraged to take an interest in using the toilet; they may just want to sit on it and talk to a friend who is also using the toilet.
- Children are encouraged to wash their hands, and have soap and towels to hand. They should be allowed time for some play as they explore the water and the soap.
- Anti-bacterial hand wash liquid or soap should not be used for young children; young skin is quite delicate and anti-bacterial products kill off certain good bacteria that children need to develop their own natural resistance to infection.
- Key persons are gentle when changing; they avoid pulling faces and making negative comments about 'nappy contents'.
- Key persons do not make inappropriate comments about children's genitals when changing their nappies.

- Older children access the toilet when they have the need to and are encouraged to be independent.
- Nappies and pull ups are disposed of hygienically. Any soil (faeces) in nappies or pull ups is flushed down the toilet and the nappy or pull up is double bagged and sent home. Cloth nappies, trainer pants and ordinary pants that have been wet or soiled are rinsed and double bagged for the parent to take home.
- We have a 'duty of care' towards children's personal needs. If children are left in wet or soiled nappies/pull ups in the setting this may constitute neglect and will be a disciplinary matter.
- Any nappy changes are logged in the diary.

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider _____

Name of signatory _____

Role of signatory (e.g. chair, director or owner) _____

Safeguarding and Welfare Requirement: Health

Where children are provided with meals, snacks and drinks, they must be healthy, balanced and nutritious.

6.5 Food and drink

Policy statement

Our provision regards snack and meal times as an important part of our day. Eating represents a social time for children and adults and helps children to learn about healthy eating. We promote healthy eating using resources and materials from the Pre-school Learning Alliance. At snack and meal times, we aim to provide nutritious food, which meets the children's individual dietary needs.

Procedures

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

- Before a child starts to attend the setting, we ask their parents about their dietary needs and preferences, including any allergies. (See the Managing Children who are Sick, Infectious or with Allergies Policy.)
- We record information about each child's dietary needs in the Registration Form and parents sign the form to signify that it is correct.
- We regularly consult with parents to ensure that our records of their children's dietary needs – including any allergies - are up-to-date. Parents sign the up-dated record to signify that it is correct.
- We display current information about individual children's dietary needs so that all staff and volunteers are fully informed about them.
- We implement systems to ensure that children receive only food and drink that is consistent with their dietary needs and preferences, as well as their parents' wishes.
- Staff do not use a child's diet or allergy as a label for the child, or make a child feel singled out because of her/his diet or allergy.
- We organise meal and snack times so that they are social occasions in which children and staff participate.
- We use meal and snack times to help children to develop independence through making choices, serving food and drink and feeding themselves.
- We provide children with utensils that are appropriate for their ages and stages of development and that take account of the eating practices in their cultures.
- We have fresh drinking water constantly available for the children. We inform the children about how to obtain the water and that they can ask for water at any time during the day.
- We inform parents who provide food for their children about the storage facilities available in the setting.
- We give parents who provide food for their children information about suitable containers for food.
- In order to protect children with food allergies, we discourage children from sharing and swapping their food with one another.
- For young children who drink milk, we provide semi-skimmed milk from the age of two years

Packed lunches

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

- ensure perishable contents of packed lunches are refrigerated or contain an ice pack to keep food cool;
- inform parents of our policy on healthy eating;
- inform parents of whether we have facilities to microwave cooked food brought from home;
- encourage parents to provide sandwiches with a healthy filling, fruit, and milk based deserts, such as yoghurt or crème fraîche, where we can only provide cold food from home. We discourage sweet drinks and can provide children with water or diluted fresh fruit juice;
- discourage packed lunch contents that consist largely of crisps, processed foods, sweet drinks and sweet products such as cakes or biscuits. We reserve the right to return this food to the parent as a last resort;
- provide children bringing packed lunches with plates, cups and cutlery; and
- ensure staff sit with children to eat their lunch so that the mealtime is a social occasion.

Legal framework

- Regulation (EC) 852/2004 of the European Parliament and of the Council on the Hygiene of Foodstuffs.

Further guidance

- Safer Food, Better Business (Food Standards Agency 2011)

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider

Name of signatory

Role of signatory (e.g. chair, director or owner)

Other useful Pre-school Learning Alliance publications

- Nutritional Guidance for the Under Fives (Ed. 2010)
- The Early Years Essential Cookbook (2009)
- Healthy and Active Lifestyles for the Early Years (2012)

Safeguarding and Welfare Requirement: Health

Where children are provided with meals, snacks and drinks, they must be healthy, balanced and nutritious.

6.6 Food hygiene

(Including the procedure for reporting food poisoning)

Policy statement

We provide and/or serve food for children on the following basis (delete which does not apply):

- Snacks.
- Packed lunches.

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

Procedures

- The person in charge and the person responsible for food preparation understands the principles of Hazard Analysis and Critical Control Point (HACCP) as it applies to their business. This is set out in
- Safer Food, Better Business (Food Standards Agency 2011). The basis for this is risk assessment of the purchase, storage, preparation and serving of food to prevent growth of bacteria and food contamination.
- All staff follow the guidelines of Safer Food, Better Business.
- All staff involved in the preparation and handling of food have received training in food hygiene.
- The person responsible for food preparation and serving carries out daily opening and closing checks on the kitchen to ensure standards are met consistently. (See Safer Food, Better Business.)
- We use reliable suppliers for the food we purchase.
- Food is stored at correct temperatures and is checked to ensure it is in-date and not subject to contamination by pests, rodents or mould.
- Packed lunches are stored in a cool place; un-refrigerated food is served to children within 4 hours of preparation at home.
- Food preparation areas are cleaned before use as well as after use.
- There are separate facilities for hand-washing and for washing up.
- All surfaces are clean and non-porous.
- All utensils, crockery etc are clean and stored appropriately.
- Waste food is sent home.
- Cleaning materials and other dangerous materials are stored out of children's reach.
- Children do not have unsupervised access to the kitchen.
- When children take part in cooking activities, they:
 - are supervised at all times;
 - understand the importance of hand washing and simple hygiene rules;

- are kept away from hot surfaces and hot water; and
- do not have unsupervised access to electrical equipment, such as blenders etc.

Reporting of food poisoning

- Food poisoning can occur for a number of reasons; not all cases of sickness or diarrhoea are as a result of food poisoning and not all cases of sickness or diarrhoea are reportable.
- Where children and/or adults have been diagnosed by a GP or hospital doctor to be suffering from food poisoning and where it seems possible that the source of the outbreak is within the setting, the manager will contact the Environmental Health Department to report the outbreak and will comply with any investigation.
- Any confirmed cases of food poisoning affecting two or more children looked after on the premises are notified to Ofsted as soon as reasonably practicable, and always within 14 days of the incident.

Legal framework

- Regulation (EC) 852/2004 of the European Parliament and of the Council on the Hygiene of Foodstuffs

Further guidance

- Safer Food Better Business (Food Standards Agency 2011)

This policy was adopted at a meeting of	_____	name of setting
Held on	_____	(date)
Date to be reviewed	_____	(date)
Signed on behalf of the management committee	_____	
Name of signatory	_____	
Role of signatory (e.g. chair/owner)	_____	

Safeguarding and Welfare Requirement: Managing Behaviour

Providers must have and implement a behaviour management policy, and procedures

7.1 Achieving positive behaviour

Policy statement

We believe that children flourish best, when their personal, social and emotional needs are understood, supported and met and where there are clear, fair and developmentally appropriate expectations for their behaviour.

As children develop, they learn about boundaries, the difference between right and wrong, and to consider the views and feelings and needs and rights of others and the impact that their behaviour has on people, places and objects. The development of these skills requires adult guidance to help encourage and model appropriate behaviours and to offer intervention and support when children struggle with conflict and emotional situations. In these types of situations key staff can help identify and address triggers for the behaviour and help children reflect, regulate and manage their actions.

Procedures

In order to manage childrens behaviour in an appropriate way we will:

- Attend relevant training to help understand and guide appropriate models of behaviour;
- Implement the settings behaviour procedures including the stepped approach;
- Have the necessary skills to support other staff with behaviour issues and to assess expert advice, if necessary;
- Ensure all staff complete the positive behaviour programme on Educare (<http://pre-school.educare.co.uk/Login.aspx>)
- Our named behaviour Co-ordinator is:

Debbie Markwick (team leader)

Stepped Approach

Step 1

- We will ensure that EYFS Guidance relating to behaviour management is incorporated into relevant policy and procedures;
- We will be knowledgeable with, and apply the settings procedure on promoting positive behaviour;
- We will undertake an annual audit of the provision to ensure the environment and practices supports healthy social and emotional development. Findings from the audit are considered by management and relevant adjustments applied;

- We will ensure that all staff are supported to address issues relating to behaviour including applying initial and focussed intervention approaches (see below);

Step 2

- We address unwanted behaviours using the agreed and consistently applied initial intervention approach. If the unwanted behaviour does not re-occur or cause concern then normal monitoring will resume.
- Behaviour's that result in concern for the child and/or others will be discussed between the keyperson, the behaviour co-ordinator and special educational needs co-ordinator (SENCo) and/or the manager. During the meeting, the keyperson will use their knowledge and assessments of the child to share any known influencing factors (new baby, additional needs, illness etc) in order to place the behaviour into context. Appropriate adjustments to practice will be agreed and if successful normal monitoring resumed.
- If the behaviour continues to re-occur and remain a concern then the keyperson should liaise with parents to discuss possible reasons for the behaviour and to agree next steps. If a cause for the behaviour is not known or only occurs whilst in the setting then the SENCo will suggest using a focused intervention approach to identify a trigger for the behaviour.
- If a trigger is identified then the SENCo and keyperson will meet with the parents to plan support for the child through developing an action plan. If relevant, recommended actions for dealing with the behaviour at home should be agreed with the parents and incorporated into the plan. Other members of the staff team should be informed of the agreed actions in the action plan and help implement the actions. The plan should be monitored and reviewed regularly by the keyperson and SENCo until improvement is noticed.

Step 3

- If, despite applying the initial intervention and focussed intervention approaches, the behaviour continues to occur and/or is of significant concern, then the behaviour co-ordinator (BeCo) and SENCo will invite the parents to a meeting to discuss external referral and next steps for supporting the child in the setting.
- It may also be agreed that the Early Help process should begin and that specialist help be sought for the child if deemed necessary – this support may address either developmental or welfare needs. (See supporting children with SEN policy 9.2). if the child's behaviour is part of a range of welfare concerns that also include a concern that the child may be suffering or likely to suffer significant harm, follow the safeguarding children and child protection policy (1.2).
- Advice provided by external agencies should be incorporated into the child's action plan and regular multi-disciplinary meetings held to review the child's progress.

Initial intervention approach

- We use an initial problem solving intervention for all situations in which a child or children are distressed in conflict. All staff use this intervention consistently.

- This type of approach involves an adult approaching the situation calmly, stopping any hurtful actions, acknowledging the feelings of those involved, gathering information, restating the issues to help children reflect, regain control of the situation and resolve the situations themselves.
- High Scope's Conflict Resolution process provides this type of approach but equally any other similar method would be suitable. Periodically the effectiveness of the approach will be checked.

Focussed intervention approach

- The reasons for some types of behaviour are not always apparent, despite the knowledge and input from key staff and parents.
- Where we have considered all possible reasons, then a focussed intervention approach should be applied.
- This approach allows the keyperson and BeCo to observe, reflect, and identify causes and functions of unwanted behaviour in a wider context of other known influences on the child.
- We follow the ABC method which uses key observations to identify (a) an event or activity (Antecedent) that occurred immediately before a particular behaviour, (b) what behaviour was observed and recorded at the time of the incident, and (c) what the consequences were following the behaviour. Once analysed, the focused intervention should help determine the cause (eg ownership of a toy or fear of a situation) and function of the behaviour (to obtain the toy or avoid a situation), and suitable support will be applied.

Strategies for children who engage in inconsiderate behaviour

- We require all staff, volunteers and students to use positive strategies for handling any inconsiderate behaviour, by helping children to find solutions in ways which are appropriate for the children's ages and stages of development. Such solutions might include, for example, acknowledgment of feelings, explanation as to what was not acceptable, and supporting children to gain control of their feelings, so that they can learn a more appropriate response.
- We 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 for 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 within the group, so that they feel valued and welcome.
- We avoid creating situations in which children receive adult attention only in return for inconsiderate behaviour.
- When children behave in inconsiderate ways, we help them to understand the outcomes of their actions and support them in learning how to cope more appropriately.
- We never send children out of the room by themselves, nor do we use a naughty chair or a time out strategy that excludes children from the group.

- We never use physical or corporal punishment, such as smacking or shaking. Children are never threatened with these.
- We do not use techniques intended to single out and humiliate individual children.
- We use physical restraint, such as holding, only to prevent physical injury to children or adults and/or serious damage to property.
- Details of such an event (what happened, what action was taken and by whom, and the name of witnesses) are brought to the attention of our setting leader are recorded.
- The child's parent(s) is/are informed on the same day.
- 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.

Rough and tumble play and fantasy aggression

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

- We 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, eg blowing up and shooting and that themes often refer to goodies and baddies and as such offer opportunities for us to explore concepts of right and wrong.
- We are able to tune in to the content of the play, perhaps to suggest alternative strategies for heroes and heroines, making the most of teachable moments to encourage empathy and lateral thinking to explore alternative scenarios and strategies for conflict resolution.

Use of rewards and sanctions

- All children need consistent messages, clear boundaries and guidance to intrinsically manage their behaviour through self reflection and control.
- Rewards such as excessive praise and stickers may provide an immediate change in the behaviour but will not teach children how to act when a prize is not being given or provide a child with the skills to manage situations and their emotions. Instead, a child is taught how to be compliant and respond to meet adults own expectations in order obtain a reward (or for fear of a sanction). If used then the type of rewards and their functions must be carefully considered before applying.
- Children should never be labelled, criticised, humiliated, punished, shouted or isolated by removing them from the group and left alone in time out or in a naughty chair. However, if necessary children can

be accompanied and removed from the group in order to calm down and if appropriate help to reflect on what's happened.

Use of physical intervention

- The term physical intervention is used to describe any forceful, physical contact by an adult to a child such as grabbing, pulling, dragging, or any form of restraint of a child such as holding down. Where a child is upset or angry, staff will speak to them calmly, encouraging them to vent their frustration in other ways by diverting the child's attention.
- Staff should not use physical intervention – or the threat of physical intervention, to manage a child's behaviour unless it is necessary to use reasonable force in order to prevent children from injuring themselves or others or damage property (EYFS).
- If reasonable force has been used for any of the reasons shown above, parents are to be informed on the same day that it occurs. The intervention will be recorded as soon as possible in the incident book and states clearly when and how parents were informed.
- Corporal (physical) punishment of any kind should never be used or threatened which could adversely affect a child's wellbeing.

Further guidance

- Special Educational Needs and Disability Code of Practice (DFE 2014)

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider _____

Name of signatory _____

Role of signatory (e.g. chair, director or owner) _____

Other useful Pre-school Learning Alliance publications

- Reflecting on Behaviour (2010)
- The Social Child (2007)

Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Providers must take reasonable steps to ensure the safety of children, staff and others on the premises.

Health

The provider must promote the good health of children attending the setting.

8.1 Health and safety general standards

Policy statement

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

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

Debbie Markwick (team leader)

- 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 policy in

The kitchen

Insurance cover

We have public liability insurance and employers liability insurance. The employer's liability insurance is displayed on our notice board in the foyer. A copy of the village hall's public liability insurance is in

The policy folder

Procedures

Awareness raising

- Our induction training for staff and volunteers includes a clear explanation of health and safety issues, so that all adults are able to adhere to our policy and procedures as they understand their shared responsibility for health and safety. The induction training covers matters of employee wellbeing, including safe lifting and the storage of potentially dangerous substances.
- We keep records of these induction training sessions and new staff and volunteers are asked to sign the records to confirm they have taken part.

- We explain health and safety issues to the parents of new children, so that they understand the part played by these issues in the daily life of the setting.
- As necessary, health and safety training is included in the annual training plans of staff, and health and safety is discussed regularly at our staff meetings.
- We operate a no smoking policy
- We make children aware of health and safety issues through discussions, planned activities and routines

Windows

- Low level windows are made from materials that prevent accidental breakage or we ensure they are made safe
- We ensure that windows are protected from accidental breakage or vandalism from people outside the building
- We ensure that any blind cords are secured safely and do not pose a strangulation risk for young children.

Doors

- We take precaution to prevent childrens fingers from being trapped in doors

Floors and walkways

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

Electrical equipment

- We ensure that all electrical equipment conforms to all safety requirements and is checked regularly.
- Our electrical cupboard is not accessible to the children
- Fires, heaters, electric sockets, wires and leads are properly guarded and we teach the children not to touch them.
- There are sufficient sockets in our setting to prevent overloading
- We switch electrical devices off from the plug after use
- We ensure the children understand the rules when using hot water.
- Lighting and ventilation is adequate in all areas of our setting, including storage areas

Storage

- All our resources and materials, which are used by the children, are stored safely
- All our equipment and resources are stored or stacked safely to prevent them accidentally falling or collapsing

Outdoor area

- Our outdoor area is securely fenced. All gates and fences are child proof and safe.
- Our outdoor area is checked for safety and cleared of rubbish, animal droppings and any other unsafe items before it is used.
- Adults and children are alerted to the dangers of poisonous plants, herbicides and pesticides.
- Our water areas are supervised at all times.
- Our outdoor sandpit is covered when not in use and is cleaned regularly
- We check that children are suitably attired for the weather conditions and type of outdoor activities; ensuring that sun cream is applied and hats are worn during the summer months.
- We supervise outdoor activities at all times; and particularly children on climbing equipment.

Hygiene

- We seek information from the Public Health England to ensure that we keep up-to-date with the latest recommendations.
- Our daily routines encourage the children to learn about personal hygiene
- We have a daily cleaning routine for the setting which includes the kitchen, toilets, main hall and nappy changing areas. Children do not have unsupervised access to the kitchen.
- We have a schedule for cleaning resources and equipment, dressing up clothes and furnishings.
- The toilet area has a high standard of hygiene, including hand washing and drying facilities.
- We implement good hygiene practices by:
 - Cleaning tables between activities:
 - Cleaning and checking toilets regularly;
 - Wearing protective clothing such as disposable gloves where appropriate;
 - Providing sets of clean clothes;
 - Providing tissues and wipes.

Activities, resources and repairs

- Before purchase or loan, we check equipment and resources to ensure they are safe for the ages and stages of the children currently attending the setting
- We keep a full inventory of all items in the setting for audit and insurance purposes
- The layout of our play equipment allows adults and children to move safely and freely between activities.
- All our equipment is regularly checked for cleanliness and safety and any dangerous items are repaired or discarded
- All our materials, including paints and glue, are non toxic
- We ensure that sand is clean and suitable for childrens play
- Physical play is constantly supervised.
- We teach children to handle and store tools safely
- We check children who are sleeping regularly
- Children learn about health, safety and personal hygiene through the activities we provide and the routines we follow.

Jewellery and accessories

- Our staff do not wear jewellery or fashion accessories such as high heels that may pose a danger to themselves or children
- Parents must ensure that any jewellery worn by children poses no danger particularly earrings which may get pulled, bracelets which can get caught when climbing or necklaces that may pose a risk of strangulation

Safety of adults

- We ensure that adults are provided with guidance about the safe storage, movement, lifting and erection of large pieces of equipment
- We provide safe equipment for adults to use when they need to reach up to store equipment.
- We ensure that all warning signs are clear and in appropriate languages
- We ensure that adults do not remain in the building on their own
- We record the sickness of staff and their involvement in accidents. The records are reviewed termly to identify any issues that need to be addressed.

Control of substances hazardous to health

- Our staff implement the current guidelines of the Control of Substances Hazardous to Health Regulations (COSHH)
- We keep a record of all substances that may be hazardous to health such as cleaning chemicals, or gardening chemicals, if used, and where they are stored.
- Hazardous substances are stored safely away from the children
- We carry out a risk assessment for all chemicals used in the setting. This states what the risks are and what to do if they have contact with eyes or skin or are ingested.
- We keep all cleaning chemicals in their original containers
- We keep the chemicals used in the setting to the minimum in order to ensure health and hygiene is maintained. We do not use:
 - Bleach
 - Antibacterial soap/hand wash, unless specifically advised during an infection outbreak such as Pandemic flu; or
 - Antibacterial cleaning agents, except in the toilets, nappy changing area and food preparation areas.
 - Antibacterial sprays are not used when children are near by
- Environmental factors are taken into account when purchasing, using and disposing of chemicals
- All members of staff are vigilant and use chemicals safely
- Members of staff use protective gloves when using cleaning chemicals

Legal framework

- Health and Safety at Work Act (1974)
- Management of Health and Safety at Work Regulations (1999)

- Electricity at Work Regulations (1989)
- Control of Substances Hazardous to Health Regulations (COSHH) (2002)
- Manual Handling Operations Regulations (1992 (As amended 2004))
- Health and Safety (Display Screen Equipment) Regulations (1992)

Further Guidance

- Health and Safety Law: What you Need To Know (HSE Revised 2009)
- Health and Safety Regulation: A Short Guide (HSE 2003)
- Electrical Safety and You: A Brief Guide (HSE 2012)
- Working with Substances Hazardous to Health: What you Need to Know About COSHH (HSE Revised 2009)
- Getting to Grips With Manual Handling: Frequently Asked Questions: A Short Guide (HSE 2011)

This policy was adopted at a meeting of	_____	<i>(name of provider)</i>
Held on	_____	<i>(date)</i>
Date to be reviewed	_____	<i>(date)</i>
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment.

Providers must take reasonable steps to ensure the safety of children, staff and others on the premises.

8.2 Maintaining children's safety and security on premises

Policy statement

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

Procedures

Children's personal safety

- We ensure all employed staff have been checked for criminal records via an enhanced disclosure through 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 assessments to ensure children are not made vulnerable within any part of our premises, nor by any activity.

Security

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

This policy was adopted at a meeting of	_____	(name of provider)
Held on	_____	(date)
Date to be reviewed	_____	(date)
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Other useful Pre-school Learning Alliance publications

- Managing Risk (2009)

Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Children must be kept safe while on outings.

8.3 Supervision of children on outings and visits

Policy statement

Children benefit from being taken out of the setting to go on visits or trips to local parks, or other suitable venues, for activities which enhance their learning experiences. Some settings do not have direct access to outdoor provision on their premises and will need to take children out daily. 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 as laid out 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.
- A risk assessment is carried out before an outing takes place.
- All venue risk assessments are made available for parents to see.
- Our adult to child ratio is high, normally one adult to two children, depending on their age, sensibility and the type of venue, as well as how it is to be reached.
- Named children are assigned to individual staff to ensure that each child is well supervised, that no child goes astray and that there is no unauthorised access to children.
- Outings are recorded in an outings record book kept in the setting, stating:
 - The date and time of the outing.
 - The venue and mode of transport used.
 - The names of the staff members assigned to each of the children.
 - The time of return.
- Staff take a mobile phone on outings, as well as supplies of tissues, wipes, spare clothing and nappies, medicines required for individual children, a mini first aid kit, snacks and water. The amount of equipment will vary and be consistent with the venue and the number of children, as well as how long they will be out for.
- Staff take a list of children with them with contact numbers of parents/carers, as well as an accident book and a copy of our Missing Child Policy.
- Records are kept of the vehicles used to transport children, with named drivers and appropriate insurance cover.

- An appropriate number of adults including staff accompany children on outings and remain behind with the rest of the children.

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider

Name of signatory

Role of signatory (e.g. chair, director or owner)

Other useful Pre-school Learning Alliance publications

- Daily Register and Outings Record (2012)
- Managing Risk (2009)

Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Providers must have a clear and well-understood policy, and procedures for assessing any risks to children's safety, and review risk assessments regularly.

8.4 Risk assessment

Policy statement

Our 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.

This policy is based on the Pre-school Learning Alliance risk assessment processes, which follow five steps as follows:

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

Procedures

- Our risk assessment process covers adults and children and includes:
 - determining where it is helpful to make some written risk assessments in relation to specific issues, to inform staff practice, and to demonstrate how we are managing risks if asked by parents and/or carers and inspectors;
 - checking for and noting hazards and risks indoors and outside, in relation to our premises and activities;
 - assessing the level of risk and who might be affected;
 - deciding which areas need attention; and
 - developing an action plan that specifies the action required, the time-scales for action, the person responsible for the action and any funding required.
- Where more than five staff and volunteers are employed, the risk assessment is written and is reviewed regularly.
- We maintain lists of health and safety issues, which are checked daily before the session begins, as well as those that are checked on a weekly and termly basis when a full risk assessment is carried out.

Legal framework

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

Further guidance

- Five Steps to Risk Assessment (HSE 2011)

This policy was adopted at a meeting of	<hr/>	<i>(name of provider)</i>
Held on	<hr/>	<i>(date)</i>
Date to be reviewed	<hr/>	<i>(date)</i>
Signed on behalf of the provider	<hr/>	
Name of signatory	<hr/>	
Role of signatory (e.g. chair, director or owner)	<hr/>	

Other useful Pre-school Learning Alliance publications

- Managing Risk (2009)

Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Providers must take reasonable steps to ensure the safety of children, staff and others on the premises in the case of fire or any other emergency, and must have an emergency evacuation procedure.

8.5 Fire safety and emergency evacuation

Policy statement

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

Procedures

- The basis of fire safety is risk assessment, carried out by a 'competent person'.
- The manager has received training in fire safety sufficient to be competent to carry out the risk assessment; this will be written where there are more than five staff and will follow the Government guidance Fire Safety Risk Assessment - Educational Premises (HMG 2006).
- Where we rent premises, we will ensure that we have a copy of the fire safety risk assessment that applies to the building and that 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 BS EN standards, are fitted in appropriate high risk areas of the building and are checked as specified by the manufacturer.
- Our emergency evacuation procedures are approved by the Fire Safety Officer and are:
 - clearly displayed in the premises;
 - explained to new members of staff, volunteers and parents; and
 - practised regularly, at least once every six weeks.
- Records are kept of fire drills and of the servicing of fire safety equipment.

Emergency evacuation procedure

Every setting is different and the evacuation procedure will be suitable for each setting. It must cover procedures for practice drills including:

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

The fire drill record book must contain:

- The 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.

Legal framework

- Regulatory Reform (Fire Safety) Order 2005

Further guidance

- Fire Safety Risk Assessment - Educational Premises (HMG 2006)

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider

Name of signatory

Role of signatory (e.g. chair, director or owner)

Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Providers must keep premises and equipment clean, and be aware of, and comply with, requirements of health and safety legislation (including hygiene requirements).

8.6 Animals in the setting

Policy statement

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

Procedures

Animals in the setting as pets

- We take account of the views of parents and children 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.
- 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 up-to-date and recorded.
- Children are taught correct handling and care of the animal or creature and are supervised.
- Children wash their hands after handling the animal or creature and do not have contact with animal soil or soiled bedding.
- Staff wear disposable gloves when cleaning housing or handling soiled bedding.
- If animals or creatures are brought in by visitors to show the children, they are the responsibility of their owner.
- The owner carries out a risk assessment, detailing how the animal or creature is to be handled and how any safety or hygiene issues will be addressed.

Visits to farms

- Before a visit to a farm, a risk assessment is carried out - this may take account of safety factors listed in the farm's own risk assessment, which should be viewed.

- 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.

Legal framework

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

Further guidance

- Health and Safety Regulation...A Short Guide (HSE 2003)

This policy was adopted at a meeting of _____ (name of provider)

Held on _____ (date)

Date to be reviewed _____ (date)

Signed on behalf of the management committee _____

Name of signatory _____

Role of signatory (e.g. chair/owner) _____

General Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Providers must have a no-smoking policy, and must prevent smoking in a room, or outside play area, when children are present or about to be present

8.7 No-smoking

Policy statement

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

Procedures

- All staff, parents and volunteers are made aware of our No-smoking Policy.
- We display no-smoking signs.
- The No-smoking Policy is stated in our information for parents.
- We actively encourage no-smoking and can provide 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 off 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.

Legal framework

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

This policy was adopted at a meeting of	_____	(name of provider)
Held on	_____	(date)
Date to be reviewed	_____	(date)
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Safeguarding and Welfare Requirement: Equal Opportunities

Providers must have and implement a policy, and procedures, to promote equality of opportunity for children in their care, including support for children with special educational needs or disabilities.

9.1 Valuing diversity and promoting equality

Policy statement

We will ensure that our service is fully inclusive in meeting the needs of all children. We recognise that children and their families come from diverse backgrounds. All families have needs and values that arise from their social and economic, ethnic and cultural or religious backgrounds. Children grow up in diverse family structures that include two parent and one parent families; some children have two parents of the same sex. Some children have close links with extended families of grandparents, aunts, uncles and cousins; while others may be more removed from close kin, or may live with other relatives or foster carers.

Some children have needs that arise from disability or impairment, or may have parents that are affected by disability or impairment. Some children come from families who experience social exclusion or severe hardship; some have to face discrimination and prejudice because of their ethnicity, the languages they speak, their religious or belief background, their gender or their impairment.

We understand that these factors affect the well-being of children and can impact on their learning and attainment. 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 of our children can flourish and in which all contributions are considered and valued;
- include and value the contribution of all families to our understanding of equality and diversity;
- provide positive non-stereotyping information about gender roles, diverse family structures, diverse ethnic and cultural groups and disabled people;
- 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.
- We provide information in as many languages as possible.
- We base our Admissions Policy on a fair system.
- We ensure that all parents are made aware of our Valuing Diversity and Promoting Equality Policy.
- We do not discriminate against a child or their family, or prevent entry to our setting, on the basis of a protected characteristic 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 partnership.
- We do not discriminate against a child with a disability or refuse a child entry to our setting for reasons relating to disability.
- We ensure, wherever possible, that we have a balanced intake of boys and girls in the setting.
- We develop an action plan to ensure that people with impairments can participate successfully in the services offered by the setting and in the curriculum offered.
- 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. making assumptions about someone's sexual orientation 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 immediately and discreetly by asking the adult to stop using the unacceptable behaviour and inviting them to read and to act in accordance with the relevant policy statement and procedure. Failure to comply may lead to the adult being excluded from the premises.

Employment

- 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 enable the service to best meet the needs of the community.
- The applicant who best meets the criteria is offered the post, subject to references and 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 anti-discriminatory 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 Valuing Diversity and Promoting Equality.

Curriculum

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

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

- making children feel valued and good about themselves 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;
- making adjustments to the environment and resources to accommodate a wide range of learning, physical and sensory impairments;
- making appropriate provision within the curriculum to ensure each child receives the widest possible opportunity to develop their skills and abilities, e.g. recognising the different learning styles of girls and boys;
- positively reflecting the widest possible range of communities in the choice of resources;
- avoiding stereotypes or derogatory images in the selection of books or other visual materials;
- celebrating a wide range of festivals;
- creating an environment of mutual respect and tolerance;

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

Valuing diversity in families

- We welcome the diversity of family lifestyles and work with all families.
- We encourage children to contribute stories of their everyday life to the setting.
- We encourage 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 take positive action to encourage disadvantaged and under-represented groups to use the setting.

Food

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

Meetings

- Meetings are arranged to ensure that all families who wish to may be involved in the running of the setting.
- We positively encourage fathers to be involved in the setting, especially those fathers who do not live with the child.
- Information about meetings is communicated in a variety of ways - written, verbal and in translation – to ensure that all mothers and fathers have information about, and access to, the meetings.

Monitoring and reviewing

- So that our policies and procedures remain effective, we monitor and review them annually to ensure our strategies meets the overall aims to promote equality, inclusion and to value diversity.
- We provide a complaints procedure and a complaints summary record for parents to see.

Legal framework

The Equality Act (2010)

Children Act (1989) & (2004)

Special Educational Needs and Disability Act (2001)

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider

Name of signatory

Role of signatory (e.g. chair, director or owner)

Other useful Pre-school Learning Alliance publications

- Guide to the Equality Act and Good Practice (2011)
- All Together Now (2009)
- Where's Dad? (2009)

Safeguarding and Welfare Requirement: Equal opportunities

Providers must have and implement a policy, and procedures, to promote equality of opportunity for children in their care, including support for the children with special educational needs or disabilities.

9.2 Supporting children with special educational needs

Policy statement

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

- We have regard for the special educational needs code of practice (2014)
- We ensure our provision is inclusive to all children with special educational needs
- We support parents and children with special educational needs
- We identify the specific needs of children with special educational needs and meet those needs through a range of SEN strategies
- We work in partnership with parents and other agencies in meeting individual childrens needs
- We monitor and revue our policy, practice and provision and, if necessary, make adjustments

Procedures

- We designate a member of staff to be the special educational needs coordinator (SENCo) and give his/her name to parents. Our SENCo is

Sarah- Jane Middleton

- We ensure that the provision for children with special educational needs is the responsibility of all members of the setting
- We ensure that our inclusive admissions practice ensures quality of access and opportunity
- We use the graduated response system for identifying, assessing and responding to childrens special educational needs
- We work closely with the parents of children with special educational needs to create and maintain a positive partnership
- We ensure that parents are informed at all stages of the assessment, planning, provision and review of their children's education
- We provide parents with information on sources of independent advice and support.
- We liaise with other professionals involved with children with special educational needs and their families, including in connection with transfer arrangements to other settings and schools
- We provide a broad, balanced and differentiated curriculum for all children with special educational needs
- We use a system of planning, implementing, monitoring, evaluating and reviewing action plans for children with special educational needs.

- We ensure that children with special educational needs are appropriately involved in the graduated approach, taking into account their levels of ability
- We have systems in place for supporting children based on a continuous cycle of 'assess, plan, do and review' which is applied in increasing detail and frequency to ensure that children progress
- We have systems in place for working with other agencies such as the 'Early Help Assessment'
- We use a system for keeping records of the 'assess, plan, do and review' for children with special educational needs
- We provide resources (human and financial) to implement our supporting children with special educational needs policy
- We ensure that all our staff are aware of our supporting children with special educational needs policy and the procedures for identifying, assessing and making provision for children with SEN. We provide in-service training for parents, practitioners and volunteers.
- We raise awareness of any specialism the setting has to offer, eg Makaton trained staff
- We ensure the effectiveness of our special educational needs provision by collecting information from a range of sources eg action plan reviews, staff and management meetings, parental and external agencies reviews, inspections and complaints. This information is collated, evaluated and reviewed annually.
- We provide a complaints procedure

Further guidance

- SEND Code of Practice for the Early Years (Preschool Learning Alliance 2014)
- Issues in Earlier Intervention: Identifying and Supporting Children with Additional Needs (DCSF 2010)
- Early Years Foundation Stage Statutory Framework (DFE 2014)
- The Team Around the Family (TAF) and the Lead Professional: A Guide for Managers (CWDC 2009)
- Working Together to Safeguard Children (DFE 2013)
- Special Educational Needs and Disability Code of Practice (DFE and DOH 2014)

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider

Name of signatory

Role of signatory (e.g. chair, director or owner)

Other useful Pre-school Learning Alliance publications

- The Role of the Early Years Special Educational Needs Co-ordinator (SENCo) 2nd Edition 2013)

Safeguarding and Welfare Requirement: Information and Records

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

10.2 Admissions

Policy statement

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

Procedures

- We ensure that 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 and provided in written and spoken form.
- We will provide translated written materials where language needs of families suggest this is required, as well as access to an interpreter. Where necessary, we will try to provide information in Braille, or through British Sign Language.
- We arrange our waiting list by taking into account the following:
 - the age of the child
 - the vicinity of the home to the setting,
 - siblings already attending the setting or have attended in the past; and
 - a 'looked after child' (those in Local Authority).
- We keep a place vacant, if this is financially viable, to accommodate an emergency admission.
- We describe our setting and its practices in terms that make it clear that it welcomes both fathers and mothers, other relations and other carers, including childminders.
- We describe how our practices treat each child and their family, having regard to their needs arising from their gender, special educational needs, disabilities, social background, religion and ethnicity or from English being a newly acquired additional language.
- We describe how our practices enable children and/or parents with disabilities to take part in the life of the setting.
- We monitor the gender and ethnic background of children joining the group to ensure that our intake is representative of social diversity.
- We make our Valuing Diversity and Promoting Equality Policy widely known.
- We consult with families about the opening times of the setting to ensure we accommodate a broad range of families' needs.

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

This policy was adopted at a meeting of _____ *(name of provider)*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider

Name of signatory

Role of signatory (e.g. chair, director or owner)

Other useful Pre-school Learning Alliance publications

- Seasonal Hello Posters (2006)

Safeguarding and Welfare Requirement: Information and Records

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to ensure the needs of all children are met.

10.5 Parental involvement

Policy statement

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

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

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

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

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

Procedures

- We have a means to ensure all parents are included - that may mean we have different strategies for involving fathers, or parents who work or live apart from their children.
- We consult with all parents to find out what works best for them.
- We ensure ongoing dialogue with parents to improve our knowledge of the needs of their children and to support their families.
- We inform all parents about how the setting is run and its policies, through access to written information and through regular informal communication. We check to ensure parents understand the information that is given to them.

- We encourage and support parents to play an active part in the governance and management of the setting.
- 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 written developmental records.
- We provide opportunities for parents to contribute their own skills, knowledge and interests to the activities of the setting.
- We inform parents about relevant conferences, workshops and training.
- We consult with parents about the times of meetings to avoid excluding anyone.
- We provide information about opportunities to be involved in the setting in ways that are accessible to parents with basic skills needs, or those for whom English is an additional language.
- We hold meetings in venues that are accessible and appropriate for all.
- We welcome the contributions of parents, in whatever form these may take.
- We inform all parents of the systems for registering queries, complaints or suggestions and we 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.

In compliance with the Safeguarding and Welfare Requirements, the following documentation is in place:

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

This policy was adopted at a meeting of _____ *name of provider*

Held on _____ *(date)*

Date to be reviewed _____ *(date)*

Signed on behalf of the provider _____

Name of signatory _____

Role of signatory (e.g. chair, director or owner) _____

Other useful Pre-school Learning Alliance publications

- Complaint Investigation Record (2012)
- Engaging Mothers & Fathers (2010)
- Safeguarding Children (2010)
- Looking at Learning Together (2005)
- The First and Foremost Series (2008)

Safeguarding and Welfare Requirement: Information and Records

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

10.6 Children's records

Policy statement

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

This policy and procedure is taken in conjunction with the Confidentiality and Client Access to Records Policy and the 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 are kept online using a secure system called Tapestry which is password protected, and can be freely accessed, and contributed to, by staff, the child and the child's parents.

Personal records

- These include registration and admission forms, signed consent forms, 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.
- These confidential records are stored in a lockable file or cabinet and are kept secure by the person in charge in an office or other suitably safe place.
- Parents have access, in accordance with our Client Access to Records Policy, to the files and records of their own children, but do not have access to information about any other child.

- Staff will not discuss personal information given by parents with other members of staff, except where it affects planning for the child's needs. Staff induction includes an awareness of the importance of confidentiality in the role of the key person.
- We retain children's records for three years after they have left the setting, except records that relate to an accident or child protection matter, which are kept until a child reaches the age of 21 years. These are kept in a secure place.

Other records

- We keep a daily record of the names of the children we are caring for, their hours of attendance and the names of their key person.
- Issues to do with the employment of staff, whether paid or unpaid, remain confidential to the people directly involved with making personnel decisions.
- Students on Pre-school Learning Alliance or other recognised qualifications and training, when they are observing in the setting, are advised of our Confidentiality and Client Access to Records Policy and are required to respect it.

Legal framework

- Data Protection Act (1998)
- Human Rights Act (1998)

Further guidance

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

This policy was adopted at a meeting of	_____	<i>(name of provider)</i>
Held on	_____	<i>(date)</i>
Date to be reviewed	_____	<i>(date)</i>
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Safeguarding and Welfare Requirement: Information and Records

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

10.7 Provider records

Policy statement

We keep records and documentation 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 including their name, home address and telephone number.
- Names, addresses and telephone numbers of anyone else who is regularly in unsupervised contact with the children.

We consider our records as confidential based on the sensitivity of information, such as with employment records. These confidential records are maintained with regard to the framework of the Data Protection Act (1998) and the Human Rights Act (1998).

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 management team who ensure they are kept securely.
- All records are kept in an orderly way in files and filing is kept up-to-date.
- Financial records are kept up-to-date for audit purposes.
- 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.

We notify Ofsted of any change:

- in the address of the premises;
- to the premises which may affect the space available to us or the quality of childcare we provide;
- to the name and address of the provider, or the provider's contact information;

- to the person managing the provision;
- any significant event which is likely to affect our suitability to look after children; or
- any other event as detailed in the Statutory Framework for the Early Years Foundation Stage (DfE 2012).

Legal framework

- Data Protection Act 1998
- Human Rights Act 1998

This policy was adopted at a meeting of	_____	<i>(name of provider)</i>
Held on	_____	<i>(date)</i>
Date to be reviewed	_____	<i>(date)</i>
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Other useful Pre-school Learning Alliance publications

- Accident Record (2010)
- Accounts Record (2005)
- Safeguarding Children (2010)
- Recruiting and Managing Employees (2010)
- Financial Management (2010)
- Medication Record (2010)
- Daily Register and Outings Record (2012)
- Managing Risk (2009)
- Complaints Investigation Record (2012)

Safeguarding and Welfare Requirement: Information and Records

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

10.8 Transfer of records to school

Policy statement

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

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

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

The procedure guides this process and determines what information we can and cannot share with a receiving school or setting.

Procedures

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

- Using the Development Matters in the Early Years Foundation Stage guidance and our assessment of children's development and learning, the key person will prepare a summary of achievements in the seven areas of learning and development.
- The record refers to:
 - any additional language spoken by the child and his or her progress in both languages;
 - any additional needs that have been identified or addressed by the setting;
 - any special needs or disability.
- The record contains a summary by the key person and a summary of the parent's view of the child.
- The document may be accompanied by other evidence, such as photos or drawings that the child has made.
- When a child transfers to a school, most local authorities provide an assessment summary format or a transition record, which we will follow as applicable.
- If there have been any welfare or protection concerns, a star is placed on the front of the assessment record.

Transfer of confidential information

- The receiving school or setting will need to have a record of any safeguarding or child protection concerns that were raised in the setting and what was done about them.
- A summary of the concerns will be made to send to the receiving setting or school, along with the date of the last professional meeting or case conference. Some Local Safeguarding Children Boards will stipulate the forms to be used and provide these.
- Where a TAF has been raised in respect of any welfare concerns, the name and contact details of the lead professional will be passed on to the receiving setting or school.
- Where there has been a s47 investigation regarding a child protection concern, the name and contact details of the child's social worker will be passed on to the receiving setting or school – regardless of the outcome of the investigation.
- This information is posted or taken to the school or setting, addressed to the setting or school's designated person for child protection and marked as 'confidential'.

Legal framework

- Data Protection Act (1998)
- Freedom of Information Act (2000)
- Human Rights Act (1998)
- Children Act (1989)

Further guidance

- What to do if You're Worried a Child is Being Abused (HMG 2006)
- Information Sharing: Guidance for Practitioners and Managers (DCSF 2008)

This policy was adopted at a meeting of	_____	<i>(name of provider)</i>
Held on	_____	<i>(date)</i>
Date to be reviewed	_____	<i>(date)</i>
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Safeguarding and Welfare Requirement: Information and Records

Confidential information and records about staff and children must be held securely and only accessible and available to those who have a right or professional need to see them.

10.9 Confidentiality and client access to records

Policy statement

'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; the means we use to store and share that information takes place within the framework of the Data Protection Act (1998) and the Human Rights Act (1998).

Confidentiality procedures

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

Client access to records procedures

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

- Any request to see the child's personal file by a parent or person with parental responsibility must be made in writing to the setting leader or manager.
- The setting leader informs the management team and sends a written acknowledgement.
- The setting commits to providing access within 14 days, although this may be extended.
- The setting's leader and chair, director or owner prepare the file for viewing.
- 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 children's social care, 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 setting leader and chair, director or owner go through the file and remove any information which a third party has refused consent to disclose. A thick black marker is used, 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 the setting leader, 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 Safeguarding Children and Child Protection

Legal framework

- Data Protection Act (1998)
- Human Rights Act (1998)

Further guidance

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

This policy was adopted at a meeting of	<hr/>	<i>(name of provider)</i>
Held on	<hr/>	<i>(date)</i>
Date to be reviewed	<hr/>	<i>(date)</i>
Signed on behalf of the provider	<hr/>	
Name of signatory	<hr/>	
Role of signatory (e.g. chair, director or owner)	<hr/>	

Safeguarding and Welfare Requirement: Information and Records

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

10.10 Information sharing

'Practitioners need to understand their organisation's position and commitment to information sharing. They need to have confidence in the continued support of their organisation where they have used their professional judgement and shared information professionally.'

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

Policy statement

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

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

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

The decision should never be made as an individual, but with the back-up of the management team. 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 is at risk of suffering, significant harm.
- To prevent significant harm arising to children and young people or adults, including the prevention, detection and prosecution of serious crime.

Procedures

Our procedure is based on the seven 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 with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could, be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.*

In our setting we ensure parents:

- receive information about our Information Sharing Policy when starting their child in the setting and that they sign our Registration Form to say that they understand the circumstances in which information may be shared without their consent. This will only be when it is a matter of safeguarding a child or vulnerable adult;
 - have information about our Safeguarding Children and Child Protection Policy; and
 - have information about the other circumstances when information will be shared with external agencies, for example, with regard to any special needs the child may have or transition to school.
3. *Seek advice if you are in any doubt, without disclosing the identity of the person where possible.*
- Managers contact children's social care for advice where they have doubts or are unsure.
4. *Share with consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the public interest. You will need to base your judgement on the facts of the case.*
- Guidelines for consent are part of this procedure.
5. *Consider safety and well-being: Base your information sharing decisions on considerations of the safety and well-being of the person and others who may be affected by their actions.*

In our setting we:

- record concerns and discuss these with the setting's designated person and/or designated officer from the management committee 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. *Necessary, proportionate, relevant, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.*

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

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

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

Consent

Parents have a right to be informed that their consent to share information will be sought in most cases, as well as the kinds of circumstances when their consent may not be sought, or their refusal to give consent may be overridden. We do this as follows:

- Our policies and procedures set out our responsibility regarding gaining consent to share information and when it may not be sought or overridden.
- We may cover this verbally when the child starts or include this in our prospectus.
- Parents sign our Registration Form at registration to say they understand this.
- 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.
- Copies are given to parents of the forms they sign.
- 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 we have consent to share?
 - Is there a statutory duty or court order requiring us to share the information?
 - If consent is refused, or there are good reasons not to seek consent, is there sufficient public interest for us to share information?
 - If the decision is to share, are we sharing the right information in the right way?
 - Have we properly recorded our decision?

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.

Legal framework

- Data Protection Act (1998)
- Human Rights Act (1998)

Further guidance

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

This policy was adopted at a meeting of	<hr/>	<i>(name of provider)</i>
Held on	<hr/>	<i>(date)</i>
Date to be reviewed	<hr/>	<i>(date)</i>
Signed on behalf of the provider	<hr/>	
Name of signatory	<hr/>	
Role of signatory (e.g. chair, director or owner)	<hr/>	

Safeguarding and Welfare Requirement: Information and Records

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

10.11 Working in partnership with other agencies

Policy statement

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

Procedures

- We work in partnership, or in tandem with, local and national agencies to promote the well-being of children.
- Procedures are in place for the sharing of information about children and families with other agencies. These are set out in the Information Sharing Policy, Safeguarding Children and Child Protection Policy and the Supporting Children with Special Educational Needs Policy.
- Information shared by other agencies with us is regarded as third party information. This is also kept in confidence and not shared without consent from that agency.
- When working in partnership with staff from other agencies, we make those individuals welcome in the setting and their professional roles are respected.
- We follow the protocols for working with agencies, for example on child protection.
- 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 to develop our understanding of the issues facing us and who can provide support and information for parents. For example, ethnic/cultural organisations, drug/alcohol agencies, welfare rights advisors or organisations promoting childcare and education, or adult education.

This policy was adopted at a meeting of	_____	(name of provider)
Held on	_____	(date)
Date to be reviewed	_____	(date)
Signed on behalf of the provider	_____	
Name of signatory	_____	
Role of signatory (e.g. chair, director or owner)	_____	

Safeguarding and Welfare Requirement: Information and Records

Providers must put in place a written procedure for dealing with concerns and complaints from parents and/or carers.

10.12 Making a complaint

Policy statement

Our setting 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 our setting to a satisfactory conclusion for all of the parties involved.

Procedures

All settings are required to keep a written record of any complaints that reach stage two and above, and their outcome. This is to be made available to parents, as well as to Ofsted inspectors on request. A full procedure is set out in the Pre-school Learning Alliance publication Complaint Investigation Record (2012) which acts as the 'summary log' for this purpose.

Making a complaint

Stage 1

- Any parent who has a concern about an aspect of the setting's provision talks over, first of all, his/her concerns with the setting leader.
- Most complaints should be resolved amicably and informally at this stage.

Stage 2

- If this does not have a satisfactory outcome, or if the problem recurs, the parent moves to this stage of the procedure by putting the concerns or complaint in writing to the setting leader and the management team.
- For parents who are not comfortable with making written complaints, there is a template form for recording complaints in the Complaint Investigation Record; the form may be completed with the person in charge and signed by the parent.

- The setting stores written complaints from parents in the child's personal file. However, if the complaint involves a detailed investigation, the setting leader may wish to store all information relating to the investigation in a separate file designated for this complaint.
- When the investigation into the complaint is completed, the setting leader or manager meets with the parent to discuss the outcome.
- Parents must 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 are logged in the Complaint Investigation Record.

Stage 3

- If the parent is not satisfied with the outcome of the investigation, he or she requests a meeting with the setting leader and the chair, director or owner. The parent may have a friend or partner present if they prefer and the leader should have the support of the management team.
- An agreed written record of the discussion is made, as well as any decision or action to take as a result. All of the parties present at the meeting sign the record and receive a copy of it.
- This signed record signifies that the procedure has concluded. When the complaint is resolved at this stage, the summative points are logged in the Complaint Investigation Record.

Stage 4

- If at the stage three meeting the parent and setting cannot reach agreement, an external mediator is 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.
- Staff or volunteers within the Pre-school Learning Alliance are appropriate persons to be invited to act as mediators.
- The mediator keeps all discussions confidential. S/he can hold separate meetings with the setting personnel (setting leader and chair, director or owner) and the parent, if this is decided to be helpful. The mediator keeps an agreed written record of any meetings that are held and of any advice s/he gives.

Stage 5

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

The role of the Office for Standards in Education, Children's Services and Skills (Ofsted) 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 Safeguarding and Welfare Requirements of the Early Years Foundation Stage are adhered to.
- The number to call Ofsted with regard to a complaint is:

0300 1231231

- These details are displayed on our setting's notice board.
- If a child appears to be at risk, our setting follows the procedures of the Local Safeguarding Children Board.
- In these cases, both the parent and setting are informed and the setting leader works with Ofsted or the Local Safeguarding Children Board to ensure a proper investigation of the complaint, followed by appropriate action.

Records

- A record of complaints in relation to our setting, or the children or the adults working in our setting, is kept; including the date, the circumstances of the complaint and how the complaint was managed.
- The outcome of all complaints is recorded in the Complaint Investigation Record, which is available for parents and Ofsted inspectors on request.

This policy was adopted at a meeting of	<hr/>	(name of provider)
Held on	<hr/>	(date)
Date to be reviewed	<hr/>	(date)
Signed on behalf of the provider	<hr/>	
Name of signatory	<hr/>	
Role of signatory (e.g. chair, director or owner)	<hr/>	

Other useful Pre-school Learning Alliance publications

- Complaint Investigation Record (2012)