

## General Welfare Requirement: Safeguarding and Promoting Children's Welfare

The provider must promote the good health of the children, take necessary steps to prevent the spread of infection, and take appropriate action when they are ill.



# Health and Safety policy

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# 1) Animals in the setting

## Policy Statement

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

## EYFS key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.4 Health and well-being	2.3 Supporting learning	3.3 The learning environment	4.1 Play and exploration 4.4 Knowledge and understanding of the world

## 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 the 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. Such as a check on all children allergies towards any animal or creature.

#### *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 are cleaned of mud and debris and should not be worn indoors.

#### **Legal framework**

- The Management of Health and Safety at Work Regulations 1999  
[www.opsi.gov.uk/SI/si1999/19993242.htm](http://www.opsi.gov.uk/SI/si1999/19993242.htm)

#### **Further guidance**

- *Health and Safety Regulation...a short guide* (HSE 2003)  
[www.hse.gov.uk/pubns/hsc13.pdf](http://www.hse.gov.uk/pubns/hsc13.pdf)

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)	_____	

## 2) 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.

### EYFS key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.3 Keeping safe		3.3 The learning environment 3.4 The wider context	

### Procedures

- The basis of fire safety is risk assessment. These are carried out by a 'competent person'.
- The manager has received training in fire safety sufficient to be competent to carry out risk assessment; this will be written where there are more than five staff. This will follow the guidance as set out in the *Fire Safety Risk Assessment – Educational Premises* document.
- Settings in rented premises will ensure that they have a copy of the fire safety risk assessment that applies to the building and that they contribute to regular reviews.
- Fire doors are clearly marked, never obstructed and easily opened from the inside.
- Smoke detectors/alarms and fire fighting appliances conform to BSEN standards, are fitted in appropriate high risk areas of the building and are checked as specified by the manufacturer.
- Our emergency evacuation procedures are 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 the servicing of fire safety equipment.

### Emergency evacuation procedure

- We test the alarm regularly on different days of the week and record these on health and safety sheets.
- The fire exits are clearly marked at both exits.
- The children are calmly lead out by nearest exit by any member of staff to the fire assembly point.
- The manager or deputy will count children then call register.
- We record in the log how long it takes to evacuate the building.
- The manager or deputy will arrange to call emergency services in the event of a real fire, we will take refuge in the primary school hall if safe or Langtree.
- All parents will be contacted by text initially then phone calls using Cabin mobile and schools office using information on the register.

The fire drill record book must contain:

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

### Legal framework

- Regulatory Reform (Fire Safety) Order 2005  
[www.opsi.gov.uk/si/si2005/20051541.htm](http://www.opsi.gov.uk/si/si2005/20051541.htm)

### Further guidance

- *Fire Safety Risk Assessment - Educational Premises* ( HMG 2006)  
[www.communities.gov.uk/publications/fire/firesafetyrisk6](http://www.communities.gov.uk/publications/fire/firesafetyrisk6)

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## ***2.2 Fire and Terrorist Evacuation procedure***

1. Sound the alarm (smoke alarm on ceiling outside kitchen) also use hand bell for children playing in outside area. Take those children away from building by moving the fence.
2. Remove all children via front door or backdoor [ both fire exists].
3. Manager or named deputy to collect register, mobile phone, gate key, visitors list, staff sign in and check all areas to ensure no children are in the building. Close all doors.
4. Line up by the inside gate on the paved area in primary school grounds
5. Count all the children. Balance with figure on register.
6. Take register, remain calm reassure the children.
7. Call the fire Brigade (999)
8. Reassure staff and children, move children to the front of the primary school.
9. In case of real fire inform the primary school and Langtree School.
10. Re-enter the building only when told to do so by emergency fire services.
11. Inform all parents and guardians. Follow emergency closure procedure.
12. Write up report and record incident.
13. In case of a terrorist alert do not use smoke alarm use hand bell.

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### 3) Food hygiene

(Including procedure for reporting food poisoning)

#### Policy statement

At the Cabin Pre-school we provide and/or serve food;

- Early snack
- Hot Lunch and packed lunches
- Afternoon snacks.

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

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

#### EYFS key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.3 Keeping safe		3.3 The learning environment 3.4 The wider context	

#### 3.1 Procedures

- The Manager and the people responsible for food preparation understand the principles of Hazard Analysis and Critical Control Point (HACCP), as learnt as part of their food hygiene certificate. The basis for this is risk assessment applies to the purchase, storage, preparation and serving of food to prevent growth of bacteria and food contamination.
- At least one person has an in-date Food Hygiene Certificate.
- The person responsible for food preparation and serving carries out daily opening and closing checks on the kitchen to ensure standards are met consistently. 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.
- All surfaces are clean and non-porous.
- All utensils, crockery etc are clean and stored appropriately.
- Waste food is disposed of daily.

- Cleaning materials and other dangerous materials are stored out of children's reach.
- Children do not have unsupervised access to the kitchen.
- When children take part in cooking activities, they:
  - are supervised at all times;
  - understand the importance of hand washing and simple hygiene rules
  - are kept away from hot surfaces and hot water; and sharp utensils
  - do not have unsupervised access to electrical equipment such as blenders etc.
  - Take place in main room not in the kitchen

**3.2 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 and the Health Protection Agency, to report the outbreak and will comply with any investigation.
- If the food poisoning is identified as a notifiable disease under the Public Health (Infectious Diseases) Regulations 1988 the setting will report the matter to Ofsted.

**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)  
[www.food.gov.uk/foodindustry/regulation/hygleg/hyglegresources/sfbb/sfbbcaterers](http://www.food.gov.uk/foodindustry/regulation/hygleg/hyglegresources/sfbb/sfbbcaterers)

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## 4) Health and safety general standards

### Policy statement

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

- We aim to make children, parents and staff aware of health and safety issues and to minimise the hazards and risks to enable the children to thrive in a healthy and safe environment.
- Our member of staff responsible for health and safety is Sharon Rumsey.
- she is competent to carry out these responsibilities.
- she has undertaken health and safety training and regularly updates his/her knowledge and understanding.
- We display the necessary health and safety poster on the kitchen behind the door.

### 4.1 Insurance cover

We have public liability insurance and employers' liability insurance. The certificate for public liability insurance is displayed in Main room on the insurance documents notice board

### EYFS key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.3 Keeping safe 1.4 Health and well-being		3.3 The learning environment	

### 4.2 Procedures

#### Awareness raising

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

- Health and safety issues are explained to the parents of new children so that they understand the part played by these issues in the daily life of the setting.
- As necessary, health and safety training is included in the annual training plans of staff and health and safety is discussed regularly at staff and committee meetings.
- We operate a no smoking policy as is the whole Langtree campus.
- Children are made aware of health and safety issues through discussions, planned activities and routines.

### ***4.3 Safety of adults***

- Adults are provided with guidance about the safe storage, movement, lifting and erection of large pieces of equipment.
- When adults need to reach up to store equipment or to change light bulbs they are provided with safe equipment to do so.
- All warning signs are clear and in appropriate languages.
- Adults do not remain in the building on their own or leave on their own after dark.
- The sickness of staff and their involvement in accidents is recorded. The records are reviewed termly to identify any issues that need to be addressed.

#### **Manual handling**

At Cabin we ensure that great care is taken when moving equipment

- Two members of staff should be used to lift or move heavy pieces of furniture and equipment.
- Never lift out of your comfort zone.
- Adopt correct posture when moving and lifting – bend knees keep straight back.
- Use step ladder when appropriate.
- When comforting distressed children go down to there level rather than picking up.

#### **COSHH**

- We keep a record of all substances that may be hazardous to health - such as cleaning chemicals, or gardening chemicals if used. This states what the risks are and what to do if they have contact with eyes or skin or are ingested. It also states where they are stored.
- All chemicals are stored in original containers.
- Care is taken never to mix chemicals together and to follow manufacture recommendations.
- All chemicals purchased are listed with warning and displayed in the kitchen on COSHH data sheets.

#### *Windows*

- Low level windows are made from materials that prevent accidental breakage or are made safe. These do not open at child level.

- Windows are protected from accidental breakage or vandalism from people outside the building.

#### *Doors*

- We take precautions to prevent children's fingers from being trapped in doors. A safety chain is attached on the inside to prevent children leaving the building or intruders getting into the building without permission.

### 5) *Floors*

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

#### *Electrical equipment*

- All electrical equipment conforms to safety requirements and is checked regularly. An annual electrical test is carried out by local electricians. A certificate is displayed on the notice board
- Our boiler/electrical switch gear/meter cupboard is not accessible to the children.
- Fires, heaters, electric sockets, wires and leads are properly guarded and the children are taught not to touch them.
- Storage heaters are checked daily to make sure they are covered.
- There are sufficient sockets to prevent overloading.
- The temperature of hot water is controlled to prevent scalds.
- Lighting and ventilation is adequate in all areas including storage areas.
- All sockets that are not in use are covered.

#### *Storage*

- All resources and materials from which children select are stored safely.
- All equipment and resources are stored or stacked safely to prevent them accidentally falling or collapsing.
- Chairs are not stacked more than 3 high.

#### *Outdoor area*

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

## *Hygiene*

- We regularly seek information from the Environmental Health Department and the Health Authority to ensure that we keep up-to-date with the latest recommendations.
- Our daily routines encourage the children to learn about personal hygiene (see next page).
- We have a daily cleaning routine for the setting which includes play room(s), kitchen, rest area, toilets and nappy changing areas.
- We have a schedule for cleaning resources and equipment, dressing-up clothes and furnishings.
- The toilet area has a high standard of hygiene including hand washing and drying facilities and the disposal of nappies.
- We implement good hygiene practices by:
  - cleaning tables between activities;
  - cleaning toilets regularly;
  - wearing protective clothing - such as aprons and disposable gloves - as appropriate;
  - providing sets of clean clothes; A colour coded system is in place.
  - providing tissues and wipes. We encourage the children to follow a set routine; use, discard and then wash hands.
  - Ensuring individual use of flannels, towels and hand driers.

## *Activities and resources*

- Before purchase or loan, equipment and resources are checked to ensure that they are safe for the ages and stages of the children currently attending the setting.
- The layout of play equipment allows adults and children to move safely and freely between activities.
- All equipment is regularly checked for cleanliness and safety and any dangerous items are repaired or discarded.
- All materials, including paint and glue, are non-toxic.
- Sand is clean and suitable for children's play.
- Physical play is constantly supervised.
- Children are taught to handle and store tools safely. Scissors are put slightly out of reach of the younger children.
- Children who are sleeping are checked regularly.
- Any faulty equipment is removed from use and is repaired. If it cannot be repaired it is discarded.
- Large pieces of equipment are discarded only with the consent of the manager and the chairperson or owner.

## **Legal Framework**

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

**Further guidance**

- *Health and Safety Law: What you Should Know (HSE 1999)*  
www.hse.gov.uk/pubns/law.pdf
- *Health and Safety Regulation...a Short Guide (HSE 2003)*  
www.hse.gov.uk/pubns/hsc13.pdf
- Electrical Safety and You (HSE 1998)  
www.hse.gov.uk/pubns/indg231.pdf
- COSHH: A Brief Guide to the Regulations (HSE 2005)  
www.hse.gov.uk/pubns/indg136.pdf
- Manual Handling – Frequently Asked Questions (HSE)  
www.hse.gov.uk/contact/faqs/manualhandling.htm

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**5.1 Health and Safety check list**

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
TOILETS					
General cleanliness					
Toilet paper					
Soap dispenser					
Kitchen					
Gate shut					
Check food dates					
Fridge temp					
Bins empty					
Drinking bottles washed					
<b>Main room</b>					
Smoke alarm tested 1 <sup>st</sup> Monday					
Temp of room					
General cleanliness					

Electric sockets covered					
Heater cover secure					
Bins Empty					
Doors secure					
Visitors sign in / out sheet					
Tables cleared					
Chairs tucked in					
Trip hazards identified					
Spillages cleared					
Fire escapes clear					

<b>OUTSIDE</b>					
Fencing secure					
Water tray cleaned and refilled					
Trip hazards identified					
Walkways to be clear					
Sand covered at end of each day					
Floor swept					
Gate shut					
First aid box checked 1 <sup>st</sup> of the month					
Signed and date					

## Health and safety risk assessment template

Risk identified:	Who is at risk	Level of risk:	Control measure and person(s) responsible:	Review

Risk area:

Carried out by

Date:

\_\_\_\_\_

### 6) Managing children with allergies, or who are sick or infectious (Including reporting notifiable diseases)

#### Policy statement

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

#### EYFS key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
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1.2 Inclusive practice 1.4 Health and well-being	2.2 Parents as partners 2.4 Key person	3.2 Supporting every child	
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## ***6.1 Procedures for children with allergies***

- When parents start their children at the Cabin they are asked if their child suffers from any known allergies. This is recorded on the registration form, an annual update of the registration form will also be required from carers.
- 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). Appropriate training will be undertaken before any child with a known condition starts at Cabin.
  - 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 in the kitchen.
- 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 our insurance provider must be obtained to extend the insurance.

**At all times the administration of medication must be compliant with the 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)**

## **6.2 Oral Medication**

Asthma inhalers are now regarded as "oral medication" by insurers and so documents do not need to be forwarded to our insurance provider.

- Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them. A second set which can be kept at Cabin will be stored appropriately.
- The group must be provided with clear written instructions on how to administer such medication.
- All risk assessment procedures need to be adhered to for the correct storage and administration of the medication.
- The group must have the parent's or guardian's prior written consent. This consent must be kept on file. It is not necessary to forward copy documents to your insurance provider.

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

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

The setting must have:

- a letter from the child's GP/consultant stating the child's condition and what medication if any is to be administered;
  - written consent from the parent or guardian allowing staff to administer medication; and
  - proof of training in the administration of such medication by the child's GP, a district nurse, children's nurse specialist or a community paediatric nurse.
- Copies of all three letters relating to these children must first be sent to the Pre-school Learning Alliance Insurance Department for appraisal. Confirmation will then be issued in writing confirming that the insurance has been extended.

## **6.4 Key person for special needs children –**

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

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

### ***6.5 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 on their behalf.
- If a child has a temperature, they are kept cool, by removing top clothing, sponging their heads with cool water, but kept away from draughts.
- Temperature is taken using a ‘fever scan’ kept near to 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 nursery; the nursery 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/servlet/ContentServer?c=HPAweb\\_C&cid=1194947358374&pagename=HPAwebFile](http://www.hpa.org.uk/servlet/ContentServer?c=HPAweb_C&cid=1194947358374&pagename=HPAwebFile) and includes common childhood illnesses such as measles.

#### ***Reporting of ‘notifiable diseases’***

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

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

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

- Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and mops; cloths used are disposed of with the clinical waste.
- 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.

### **6.7 Nits and head lice**

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

#### **Further guidance**

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

<http://publications.teachernet.gov.uk/eOrderingDownload/1448-2005PDF-EN-02.pdf>

name  
of  
setting

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Name of signatory

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

\_\_\_\_\_

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#### **Other useful Pre-school Learning Alliance publications**

Good Practice in Early Years Infection Control (2009)

## 7) Promoting health and hygiene

### 7.1 Nappy changing

#### Policy statement

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

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

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

#### EYFS key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.2 Inclusive practice 1.4 Health and well-being	2.2 Parents as partners 2.4 Key person	3.2 Supporting every child	

#### Procedures

- All staff have the responsibilities to change nappies as soon as it becomes apparent of the need. We also have a daily person who will take responsibility to check all children at 11.00 or 13.30 each day. This rota is kept in the kitchen.
- Young children from two years should 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 young children in their key groups; back up key persons change them if the key person is absent.
- Changing areas are warm and there are safe areas to lay young children if they need to have their bottoms cleaned.
- Each young child has their own basket to hand with their nappies or 'pull ups' and changing wipes.

- Gloves and aprons are put on 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, all staff ensure that nappy changing is relaxed and a time to promote independence in young children.
- Young children are encouraged to take an interest in using the toilet; they may just want to sit on it and talk to a friend who is also using the toilet, or potty.
- They should be 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.
- All staff are gentle when changing; they avoid pulling faces and making negative comment about 'nappy contents'.
- Staff do not make inappropriate comments about young 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. The nappy or 'pull up' is double bagged and put in the bin. Cloth nappies, trainer pants and ordinary pants that have been wet or soiled are bagged for the parent to take home.
- NB If young children are left in wet or soiled nappies/'pull ups' in the setting this may constitute neglect and will be a disciplinary matter. Settings have a 'duty of care' towards children's personal needs.

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) \_\_\_\_\_

## 7.2 No-smoking

### Policy statement

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

### EYFS key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.4 Health and well-being	2.1 Respecting each other	3.2 Supporting every child	

### 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 brochure for parents.
- We actively encourage no-smoking by having information for parents and staff about where to get help to stop smoking if they are seeking this information.
- Staff who smoke do not do so during working hours, unless on a break and off the premises and grounds.
- 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  
[www.opsi.gov.uk/si/si2006/20063368.htm](http://www.opsi.gov.uk/si/si2006/20063368.htm)
- The Smoke-free (Signs) Regulations 2007  
[www.opsi.gov.uk/si/si2007/20070923.htm](http://www.opsi.gov.uk/si/si2007/20070923.htm)

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Role of signatory (e.g. chair/owner) \_\_\_\_\_

## 7.3 Food and drink

### Policy statement

The Cabin regards snack and meal times as an important part of the setting's day. Eating represents a social time for children and adults and helps children to learn about healthy eating. At snack and meal times, we aim to provide nutritious food, which meets the children's individual dietary needs.

### EYFS key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.4 Health and well-being	2.1 Respecting each other 2.2 Parents as partners 2.4 Key person	3.2 Supporting every child 3.4 The wider context	4.4 Personal, social and emotional development

### Procedures

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

- Before a child starts to attend the setting, we find out from parents their children's dietary needs and preferences, including any allergies.
- We record information about each child's dietary needs in her/his registration record and parents sign the record 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 in the kitchen.
- We implement systems to ensure that children receive only food and drink that is consistent with their dietary needs and preferences as well as their parents' wishes.
- We display the menus of meals for the information of parents.
- We provide nutritious food for all meals and snacks, avoiding large quantities of saturated fat, sugar and salt and artificial additives, preservatives and colourings.
- We include a variety of foods from the four main food groups:
  - meat, fish and protein alternatives;
  - dairy foods;
  - grains, cereals and starch vegetables; and
  - fruit and vegetables.

- We include foods from the diet of each of the children's cultural backgrounds, providing children with familiar foods and introducing them to new ones.
- We take care not to provide food containing nuts or nut products and are especially vigilant where we have a child who has a known allergy to nuts.
- Through discussion with parents and research reading by staff, we obtain information about the dietary rules of the religious groups to which children and their parents belong, and of vegetarians and vegans, and about food allergies. We take account of this information in the provision of food and drinks.
- We provide a vegetarian alternative on days when meat or fish are offered and make every effort to ensure Halal meat or Kosher food is available for children who require it. This is available through Langtree school kitchen that provide our hot lunch option.
- We require staff to show sensitivity in providing for children's diets and allergies. Staff do not use a child's diet or allergy as a label for the child or make a child feel singled out because of her/his diet or allergy.
- We organise meal and snack times so that they are social occasions in which children and staff participate, sitting with their key children where possible.
- 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. We ask parents to provide a sports type drinking bottle which is checked and replenished throughout the day.
- We offer an early snack at 0930 which all children are expected to sit and enjoy of toast and milk. Approx 2.30 we offer another snack of fruit, veg, carbohydrates and protein which Cabin provides
- 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 children who drink milk, we provide whole pasteurised milk.

#### ***7.4 Cooking and special occasions***

Special celebrations such as Pancake Day or sensory tasting activities in line with current themes may allow for small amounts to be tasted. Cooking activities will be a mixture of healthy or treats which we will use to discuss and then send home for you to decide if your children are allowed to eat them

## 7.5 Packed Lunches

*Packed lunches are a parent choice:*

- ensure perishable contents of packed lunches are refrigerated or contain an ice pack to keep food cool; Parents to advise us.
- inform parents of our policy on healthy eating;
- inform parents that we have no 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, squeezy yoghurts and can provide children with water or milk;
- 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*  
[www.food.gov.uk/foodindustry/regulation/hygleg/hyglegresources/sfbb/](http://www.food.gov.uk/foodindustry/regulation/hygleg/hyglegresources/sfbb/)

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### Other useful Pre-school Learning Alliance publications

- Nutritional Guidance for the Under Fives (2009)
- The Early Years Essential Cookbook (2009)

## 8) Recording and reporting of accidents and incidents

(Including procedure for reporting to HSE, RIDDOR)

### Policy Statement

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

### EYFS key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.3 Keeping safe 1.4 Health and well-being	2.2 Parents as partners 2.4 Key person	3.4 The wider context	

### Procedures

#### 8.1 *Our accident book:*

- is kept safely and accessible; In the filing Cabinet under health and safety
- is accessible to all staff and volunteers, who know how to complete it; and
- is reviewed at least half termly to identify any potential or actual hazards. These are recorded in the staff meeting book.

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

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

#### *Dealing with incidents*

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

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

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

## **8.2 Our incident book**

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

## Legal framework

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

## Further guidance

- RIDDOR Guidance and Reporting Form  
[www.hse.gov.uk/riddor/index.htm](http://www.hse.gov.uk/riddor/index.htm)

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Name of signatory \_\_\_\_\_  
Role of signatory (e.g. chair/owner) \_\_\_\_\_

## Other useful Pre-school Learning Alliance publications

- Accident Record (2009)
- Incident Record (2009)



**8.3 Accident Form**

**Name of Child** \_\_\_\_\_

**Date** \_\_\_\_\_ **Time of accident** \_\_\_\_\_

**Place where accident happened** \_\_\_\_\_

---

**Details of accident** \_\_\_\_\_

**Treatment given** \_\_\_\_\_

**Parent Contacted** \_\_\_\_\_ **yes / no**

**Follow procedure** \_\_\_\_\_

**Staff dealing with accident** \_\_\_\_\_

**Signature of staff** \_\_\_\_\_

**Date completing form** \_\_\_\_\_

**Witness** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Parent signature** \_\_\_\_\_ **Date** \_\_\_\_\_

## 9) Risk assessment

### Policy statement

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

The basis of this policy is risk assessment. Pre-school Learning Alliance risk assessment processes follow five steps as follows:

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

### EYFS key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.3 Keeping safe		3.3 The learning environment 3.4 The wider context	

### 9.1 Procedures

- The Cabin risk assessment process covers adults and children and includes:
  - checking for and noting hazards and risks indoors and outside, and in our premises and for activities;
  - assessing the level of risk and who might be affected;
  - deciding which areas need attention; and

- developing an action plan that specifies the action required, the time-scales for action, the person responsible for the action and any funding required.
- 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.
- Assessments before any trips, outings are arranged, esp. detail to ratios we like to offer a
- 1; 2 where possible.

**Legal framework**

- Management of Health and Safety at Work Regulations 1992

**Further guidance**

- Five Steps to Risk Assessment (HSE 2006)  
[www.hse.gov.uk/pubns/indg163.pdf](http://www.hse.gov.uk/pubns/indg163.pdf)

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**Other useful Pre-school Learning Alliance publications**

- Managing Risk (2009)