

Testwood Baptist Church Pre-school

HEALTH, SAFETY AND FIRST AID

Policy statement

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

- We aim to make children, parents, and staff aware of health and safety issues and to minimise the hazards and risks to enable the children to thrive in a healthy and safe environment.
- > Our members of staff responsible for health and safety are Leah Arscott, Karen Stakesby-Lewis & Jacqui Neill
- > They are competent to carry out these responsibilities.
- > They have undertaken health and safety training and regularly update their knowledge and understanding. This is recorded in the Health & Safety Folder
- We display the necessary health and safety poster in the Kitchen area.

Insurance cover

We have public liability insurance and employers' liability insurance. The certificate for Employer's liability insurance is displayed outside the office door.

Awareness Raising

- Our induction training for all 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.
- A paper or digital copy of our Health and Safety policy is provided at the time that the Admissions Pack is given to the parents/carers of new children.
- Necessary health and safety training is included in the annual training plans of staff.
- We operate a no smoking policy.
- > Children are made aware of health and safety issues through discussions, planned activities and routines.

Safety during sessions

The safety of young children is paramount. In order to maintain this:

- > There will, at all times, be an adult present to supervise the children.
- We will meet at least the minimum OFSTED requirements with regards to Adult/Child ratios.
- The register will be taken as soon as the children arrive each session and updated/altered if children go home early or arrive late.
- ➤ Children will only be allowed to leave at the end of the session with their identified parent or named identified carer unless the password can be given to a member of staff and the Parent/Carer has pre-informed the Preschool on the said day. If this is not possible then the Pre-school will telephone the Parent/Carer for

confirmation before allowing a child to leave. No under 18s are permitted to collect children, unless they are the parent/carer or written permission from the parent/carer is obtained.

- There will always be an adult at the gate during arrivals and departures to ensure no child leaves unaccompanied.
- No child will be allowed in the kitchen area unattended.
- Children will be seated when having drinks/food and not be allowed to walk around.
- Children are kept safe near windows.
- When indoors, children will be encouraged to walk.
- > Safe behaviour will be praised and unacceptable behaviour will be pointed out and explained to the child why it is dangerous.
- Premises will be kept clean and safe at all times to prevent risk to all users.
- All floors are checked daily to ensure they are clean and not uneven, wet or damaged.
- Adult bags (including those of Parents/Carers who are staying for any length of time during a session) will be kept in the office where children are unable to access them.
- The toy cupboard will be locked during all sessions for safety.
- Adults do not remain in the building on their own.

Equipment and Chemicals (COSHH)

- All glues/paints/crayons etc used in the group will be non-toxic.
- We teach children to handle and store tools safely.
- We implement the current guidelines of the Control of Substances Hazardous to Health Regulations (COSHH).
- All members of staff use chemicals safely.
- All cleaning materials are kept out of reach of children.
- Any spills will be mopped up quickly to avoid any accidents.
- > Staff implement the current guidelines of the Control of Substances Hazardous to Health (COSHH) Regulations.
- Personal protective equipment (PPE), such as rubber gloves, latex free/vinyl gloves, aprons etc., is available to all staff as needed and stocks are regularly replenished.
- Hazardous substances are stored safely away from the children.
- Chemicals used in the setting should be kept to the minimum to ensure health and hygiene is maintained.

Playground

- The playground gates will be locked after all children are in the Pre-School.
- > There will always be the correct adult:child ratio for supervising outside play and large toys and equipment will only be permitted outside or in the hall.
- The playground will be checked before each session to make sure that it is free from any rubbish, hazardous materials or animal mess.
- All 3 playground gates will be locked during all sessions. The gate to the locked bike area is open when it is in use.
- Our outdoor sandpit is covered when not in use and is cleaned regularly.
- > All outdoor activities are supervised at all times.
- We check that children are suitably attired for the weather conditions, including layers in cold weather and suncream and hats during the summer months.
- Where water can form a pool on equipment, it is emptied before children start playing outside.
- Children will be supervised on the climbing frame and have safety mats underneath.

- > No toys to be taken on the climbing frame.
- Children will be appropriately clothed for use of the climbing frame or on the ride on toys.
- Equipment and toys will be checked on a regular basis and any damaged items will be repaired or discarded. This will be reported to the Manager.
- Manufacturer's instructions for the use of equipment will be followed and safety catches will be used on all required items, for example in the home corner and the climbing apparatus.

Electrical/gas equipment

- ➤ All electrical/gas equipment conforms to safety requirements and is checked yearly, by an authorised electric/gas fitter, who is overseen by our Facilities Lead, Paul Lailey.
- > Our boiler/electrical switch gear/meter cupboard is not accessible to the children.
- There are sufficient sockets to prevent overloading.
- > The temperature of hot water is controlled to prevent scalds.
- Lighting and ventilation are adequate in all areas including storage areas.

Storage

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

Hygiene

- > We have daily checks and cleaning routines for the setting which covers all rooms used.
- Washing up is done in the kitchen sink using hot water with detergent; clean drying-up cloths are used every session.
- All work surfaces where food is to be prepared are cleaned before and after use.
- > Children are encouraged to wash their hands after toileting and are supervised to wash hands before starting any cooking activity and before snack/lunch time.
- Clean clothes are provided from home to change into after wet play or toileting accidents and dirty clothes are put in a separate plastic bag to take home.
- We provide clean clothes in case of accidents and bags in which to store soiled clothes.
- Dressing up clothes/hats are washed/cleaned each half term.
- There will be no smoking on the premises.
- > Tissues are available for children to wipe their noses; the tissues will be disposed of hygienically. Children are encouraged to shield their mouths when coughing.
- > Children must not attend if they are suffering from an infectious disease, and we ask parents to inform us, to enable us to notify other parents of the group.
- The sand will be changed every half term or when necessary
- A clean table cleaning cloth or paper towels will be used each day.
- > If a member of staff has been ill in the past 24 hours he/she should not prepare food or drinks at that time.
- All staff should wash their hands before food preparation or cooking.

First Aid

- > All staff are Paediatric first aid trained and a fully equipped first aid box and first aid procedures are followed.
- Our named first aiders are displayed in the Pre-school room.
- Cuts, bumps, and falls as well as more serious accidents are recorded in the accident/incident book, parents informed and asked to sign the book on the same day and will be telephoned if deemed necessary.

- Where applicable, RIDDOR and Ofsted will be informed of any incidents.
- > First Aid box contents will be checked every term and the date will be written on the inside of the lid.
- The first aid box will be stored out of reach of children in the kitchen area. Children's personal medical requirements (i.e. inhalers) are stored in the evacuation bag outside the office.
- Any spills of blood or related bodily fluids will be cleaned up with spill granules. We will wear disposable gloves and aprons when dealing with faeces, urine or blood. All waste containing bodily fluids will be tied in bags and disposed of appropriately.
- All accident sheets are kept safely and are accessible to all staff. All staff know how to complete these and they are reviewed by Leah Arscott & Karen Stakesby-Lewis at least termly to identify any potential or actual hazards.

Fire

- Fire precautions will be observed, and fire drills will take place at least once a term, preferably twice a term during various sessions.
- Safety signs will be checked regularly.
- All staff understand our evacuation procedures.
- The children's toilets are checked in the event of a fire or a drill and the register is collected (full details in Fire Evacuation Procedure).

The Management Team:

- The representative from the Management Team is Paul Lailey, his role is as an advisor to Pre-School to ensure that the measures to protect the health, safety & welfare of all personnel, visitors and children connected with Testwood Baptist Pre-School are implemented.
- He will support the Health & Safety Officers

The Pre-School Manager & Deputy:

- Will implement the Health and Safety Policy's requirements and procedures within Pre-School
- Will ensure the provision of adequate resources to implement the Health & Safety Policy's requirements and procedures within Pre-School
- Will ensure that any special activities are subject to risk assessment
- Will investigate complaints and accidents and take appropriate action

The Health & Safety Officers (Leah Arscott, Karen Stakesby-Lewis and Jacqui Neill):

- > Will report on matters of Health & Safety, and will liaise with the Management Team representative, Paul Lailey, where necessary
- Will carry out reviews of the Health & Safety Policy
- Will liaise with regulatory and enforcing bodies
- Will promote communication amongst all levels of staff
- > Will monitor the implementation of the Health & Safety requirements
- Will oversee the removal and disposal of any broken/damaged toys

All Staff

- ➤ Will be responsible for reading, understanding and familiarizing themselves with the Health & Safety Policy's requirements and procedures and for carrying them out during the course of their work
- > Will take care of themselves and others who may be affected by their work activities, including non-employees
- Will co-operate with Testwood Baptist Pre-School so that it can comply with its legal duties

- Will report all accidents at work to the Leaders or Health & Safety Officer
- Will ensure that activities, which might be hazardous, are brought to the attention of the Pre-school Managers
- Will undertake necessary relevant training

Off-Site Activities - See Appendix A

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

Intimate Care – see appendix B

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

We see toilet training as a self-care skill that children have the opportunity to learn with the full support and non-judgemental concern of adults. We provide nappy changing facilities and exercise good hygiene practices in order to accommodate children who are not yet toilet trained.

Sleep - see appendix C

At Testwood Baptist Church Pre-school we always wish to promote a child's wellbeing and although we do not encourage sleep within pre-school, no child will be deprived of sleep at any time if it is necessary for them to have a rest.

Children who are sick, infectious or with allergies - see appendix D

Our aim is to provide a safe, healthy environment for all the children and staff, through preventing cross infection of viruses and bacterial infections and promote health by identifying allergies and preventing contact with allergenic triggers. We also aim to provide care for children who may become ill during a session.

- All procedures should have regard for the need for confidentiality.
- Each parent/carer and Pre-school worker should be given a list of infectious diseases, their appropriate exclusion times and simple medical advice.
- △ If a notifiable disease is suffered by any child or staff member, OFSTED will be informed.
- Emergency contact numbers and medical details are checked annually in September by means of a letter sent to each parent/carer.

Administration of medicines - see appendix E

Testwood Baptist Church Pre-school will ensure compliance with the relevant legislation with regard to procedures for supporting children with medical requirements. Responsibility for all administration of medicines at Testwood Baptist Church Pre-school is held by the Pre-school Manager & Deputy.

It is our policy to ensure that all medical information will be treated confidentially by the responsible manager and staff. All administration of medicines is arranged and managed in accordance with the *Health Guidance for Schools* document. All staff have a duty of care to follow and co-operate with the requirements of this policy.

Food & drink - see appendix F

Snack and mealtimes can play an important part in the social life of the Pre-school as well as reinforcing children's understanding of the importance of healthy eating. We aim to provide nutritious food, which meets children's individual dietary needs.

Suitability of play equipment and toys - see appendix G

The toys and equipment in Pre-school provide opportunities for children, with adult help, to develop new skills and concepts in the course of their play and exploration.

In the event of a child needing to go to hospital or medical centre - see appendix H

Agreed by Pre-school Management Team:	
Signed:	Date:
Review Date: Autumn 2025	

APPENDIX A

Off-site activities

Activities will only take place away from the Pre-School setting under the following conditions: -

- All off-site activity has a clearly identified educational purpose with specific learning and development outcomes.
- Parents are to sign a general consent form on registration for their child to be taken out on local short trips as part of the daily activities of the setting.
- We assess the risks for each local venue used for daily activities and review them regularly.
- Parents are also asked to sign consent forms before major outings and risk assessment is carried out before the outing takes place. Children with allergies or specific needs are covered separately in the risk assessment.
- > Risk assessments will be completed before each visit and made available for parents to see, if requested.
- An excursion will not go ahead if concerns are raised about its viability at any point.
- > Staff will take children's emergency contact details with them, together with any personal medical requirements for example, Epipen or Asthma Inhalers, which must be clearly named and within date of use.
- There is a designated lead for each excursion who is clear about their responsibilities as designated lead.
- > The children will be under the responsibility of the Pre-school Staff at all times.
- ➤ The adult to child ratio will be high, normally 1 adult to 2 children depending on the child's age, sensibility and the type of venue, as well as how it is to be reached.
- ➤ The accompanying adults will comprise of a combination of staff/students and parents/carers. Only DBS checked staff will accompany children to the toilet. If parents are not DBS checked, they will only be responsible for their own child/children.
- > The minimum number of adults on any trip will be 2 (over the age of 18). One adult must be a qualified L3 member of staff and the other hold a Pre-School approved DBS check.
- When children are taken out of the setting, leaving other children and adults at the setting, a ratio of 1:6 (over 3) and 1:3 (2 year olds) will be maintained in the setting.
- > All accompanying adults must be over 18; otherwise they will not be recognised as part of the adult:child ratio.
- > The children will be accompanied at all times. Extra care will be taken on the street and when crossing the road.
- > The children and staff are provided with 'high-viz' vests.
- > Frequent headcounts will be taken.
- > All accompanying adults will be given full instructions and guidelines.
- Named children are assigned to individual staff to ensure each child is individually supervised and to ensure no child gets lost and that there is no unauthorised access to children.
- On outings, staff will take a mobile phone, supplies of tissues, wipes, pants, etc., as well as a mini first aid pack and snack and water. The amount of equipment will vary and be consistent with the venue and the number of children as well as the duration of the outing.
- Sun cream will be applied to children as needed and staff will ensure they are dressed appropriately for the type of outing and weather conditions.

- ➤ In the event of a lost child or a child needing to go to hospital please refer to the following Procedures :
 - o In The Event Of A Child Being Lost
 - o In The Event Of A Child Needing To Go To Hospital Or Medical Centre
 - o A copy of these policies is taken with us.
- Outings are recorded in an outings record book kept in the setting stating;
 - The date and time of the outing
 - o The venue and mode of transport
 - o Names of staff members assigned to each of the children.
 - o Time of return
- > Records are kept of the vehicles used to transport children, with named drivers and appropriate insurance cover.
- We ensure that seat belts are worn whilst travelling in vehicles and that booster seats and child safety seats are used as appropriate to the age of the child.
- As a precaution we ensure that children do not eat when travelling in vehicles.

APPENDIX B

Intimate care

- > Staff will wear protective gloves, using a different pair for each child or use anti-bacterial gel.
- > All staff are familiar with our hygiene procedures when changing nappies.
- Changing mat will be used on the floor in a separate area.
- Children are changed within sight of other staff whilst maintaining their dignity and privacy at all times. They are not left unattended whilst they are being changed.
- We will use each child's own named spare nappies/pull ups, changing wipes and own change of clothes when available. If not available, Pre-school spares will be used.
- Staff are gentle when changing and will avoid pulling faces and making negative comments about 'nappy contents'.
- > Staff will not make inappropriate comments about young children's genitals when changing their nappies.
- > Changing mat will be cleaned after use with anti bacterial wipes and disposable paper towel after each use.
- Any soil (faeces) will be flushed down the toilet and all remaining waste containing bodily fluids will be double wrapped and disposed of at the end of the day.
- A record of a nappy change should be made on child's own changing form, together with the parent's and practitioner's signature.
- > Children will be checked before the end of each session/going home and will be changed if required and as and when needed, during the session.
- Staff will dispose of nappies hygienically at the end of each day.
- We support parents with toilet training where appropriate and provide access to the toilets to allow children to be independent. We encourage children to wash their hands and provide soap and paper towels.

APPENDIX C

Sleep

- If a child still requires a sleep during pre-school hours this will be discussed with parents and noted on their admission form during registration.
- If a child needs rest or wants a sleep during their session with us, they will be laid down in a safe area on a mat/cushion.
- Sleeping children will be monitored by a staff member regularly and looked after according to their individual needs.
- Shoes, loose clothing, hair clips and anything that could be uncomfortable or pose a risk of choking will be removed when child is laid down for a sleep.
- If a child falls asleep unexpectedly, they will be made comfortable, and the parents will be informed. Any further actions will be decided between the parents and pre-school staff.
- > If a staff member suspects the child is ill, then normal procedures will be followed.
- Parents will always be informed when they collect their child if they have had a sleep during the day and at what time.
- > Children regularly needing sleep during the day/session will be monitored and reviewed.

APPENDIX D

Children who are sick, infectious or with allergies

Sickness and Infections

If a child becomes unwell during a session, has a temperature, sickness, diarrhoea or pains, particularly in the head or stomach, the following procedures should be followed:

- The parent/carer will be contacted to come and collect the child as soon as possible.
- The child will be kept in a secure, comfortable area whilst awaiting the parent/carer.
- If a child has a temperature, in extreme cases, they are to be kept cool, by removing top clothing, but kept away from draughts.
- Temperature is taken using a thermometer.
- A member of staff will stay with the child until the parent/carer arrives.
- ♦ Other children should be kept from close contact with a child who is unwell.
- A In extreme cases of emergency, an ambulance will be called. If it is deemed necessary for the ambulance to take the child to hospital, then a member of staff will accompany the child and wait with him/her until the parent has been informed and arrives at the hospital.
- Parents are asked to fill in a 'Loco Parentis' Form during Admissions.
- A Pre-school can refuse admittance to children who have a temperature, sickness, diarrhoea or a contagious infection or disease and may suggest that parents take their child to the doctor before returning them.

If a child is sick or has an illness, the parents/carers should follow the following procedures:

- > The parents/carers should inform the Pre-school manager or deputy on the first day of absence.
- Where children have been prescribed antibiotics, parents are asked to keep them at home for 48 hours, from the first dose, before returning them to the setting.
- The child may return to Pre-school once:
 - Sickness or diarrhoea has ceased for at least 48 hours
 - The correct exclusion time for infectious diseases has been passed (reference should be made to the list of infectious diseases which is given to all parents/carers)

We reserve the right to extend these time-scales in extreme situations.

If a Pre-school worker is unwell, they should follow the above procedure.

Body fluids

- Hygiene precautions are taken when dealing with bodily fluids in order to protect from viruses such as HIV and Hepatitis A,B and C.
- A Protective clothing must be worn, by the member of staff attending to the child, if bodily fluids are involved (i.e. disposable apron and gloves).
- A Soiled clothing is bagged for parents to collect. Spills of blood, urine, faeces or vomit are cleaned using mild disinfectant solution and cloths used are disposed of.
- Tables and other furniture and furnishings affected by blood, urine, faeces or vomit are cleaned using a disinfectant.
- Toys affected by blood, urine, faeces or vomit are cleaned using a disinfectant, or disposed of if it is deemed necessary.

Nits and Head lice

- A 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 been treated.
- A On identifying cases of head lice, all parents are informed by letter that there is a case of head lice within Preschool and asked to treat their child and all the family accordingly.

Children with Allergies

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

- If a child has an allergy we complete a Healthcare plan form detailing the following:
 - The allergen (i.e. the substance, material or living creature the child is allergic to such as nuts, eggs, bee stings, cats etc.)
 - The nature of the allergic reactions (e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc.)
 - What to do in case of allergic reactions, any medication used and how it is to be used (e.g. Epipen)
 - Control Measures such as how the child can be prevented from contact with the allergen
 - Review Measures.
- This form is kept in the child emergency contacts and info folder.
- Care is taken that 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.

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

- At all times we ensure that the administration of medication is compliant with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage.
- Treatments, such as inhalers or Auto Adrenaline Pens (for example Epipens) need to be immediately accessible in an emergency.

Oral medication:

- Asthma inhalers are now regarded as 'oral medication'. Oral medication must be prescribed by a GP or have the manufacturer's instructions clearly written on them.
- We must be provided with clear written instructions on how to administer such medication.
- We adhere to all risk assessment procedures for the correct storage and administration of the medication.
- We must have the parents or guardians prior written consent. This consent must be kept on file.

Life-saving medication and invasive treatments:

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

We must have:

- A label on the medication from the GP with the child's name on it and the dose required, if medication 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.

APPENDIX E

Administration of medicines

Aims & Objectives

Our administration of medicine requirements will be achieved by:

- Establishing principles for safe practice in the management and administration of:
 - prescribed medicines
 - non-prescribed medicines
 - maintenance drugs
 - emergency medicine
- Providing clear guidance to all staff on the administration of medicines.
- > Ensuring that there are sufficient numbers of appropriately trained staff to manage and administer medicines.
- > Ensuring that there are suitable and sufficient facilities and equipment available to aid the safe management and administration of medicines.
- > Ensure the above provisions are clear and shared with all who may require them.
- > Ensure we notify our insurance provider of all required conditions, according to their policy.
- > Ensuring the policy is reviewed periodically or following any significant change which may affect the management or administration of medicines.

The administration of medicines is the overall responsibility of the parents. Testwood Baptist Church Pre-school is responsible for ensuring children are supported with their medical needs whilst on site, and this may include managing medicines where appropriate and agreed with parents.

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 illness.

Routine Administration

Prescribed medicines

- It is our policy to manage prescribed medicines (eg. antibiotics, inhalers) where appropriate following consultation and agreement with, and written consent from the parents.
- In many cases, it is possible for children's GP to prescribe medicine that can be taken at home in the morning and evening. As far as possible, administering medicines will only be done where it would be detrimental to the child's health if not given in the setting.
- ▶ If a child has not had a medication before, it is advised that the parent keeps the child at home for the first 48 hours to ensure no adverse effect as well as to give time for the medication to take effect.

Non-prescribed medicines

It is our general policy not to take responsibility for the administration of non-prescribed medicines, (eg. Calpol)

Maintenance drugs

It is our policy to manage the administration of maintenance drugs (eg. Insulin) as appropriate following consultation and agreement with, and written consent from the parents. On such occasions, a health care plan will be written for the child concerned.

Non-Routine Administration

Emergency medicine

- > It is our policy (where appropriate) to manage the administration of emergency medicines such as (for example):
 - Injections of adrenaline for acute allergic reactions
 - o Rectal diazepam for major fits
 - o Injections of Glucagan for diabetic hypoglycaemia
- In all cases, professional training and guidance from a competent source will be received before commitment to such administration is accepted.
- If rectal diazepam is given another member of staff must be present and co-sign the record book.

Procedure for Administration

- When deciding upon the administration of medicine needs for children we will discuss this with the parents concerned and make reasonable decisions about the level of care required.
- Any child required to have medicines will have an 'administration of medicines/treatment' consent form completed by the parent and kept on file. This includes the child's name, parent details, GP's name and address and details of the medicine including its name, dosage, completion and expiry date.
- Individual health care plans will be completed for children where required and reviewed periodically in discussion with the parents to ensure their continuous suitability.
- For any child receiving medicines, including inhalers, a 'record of prescribed medicines' sheet will be completed each time the medicine is administered and this will be kept on file. This includes the child's name and DOB, the name of the medicine, the date and time the dosage given and the signature of the staff member who gave it. Administered medicine will be reported to the parent/carer on the same day and the parent/carer is to sign their acknowledgement.
- > If a child refuses to take medication the parents will be informed at the earliest available opportunity.
- 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 pre-school manager/deputy 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 is part of the risk assessment.
- > The risk assessment includes vigorous activities and any other Pre-school activity that may give cause for concern regarding an individual child's health needs.
- > The risk assessment includes arrangement for taking medicines for outings and the child's GP's advice is sought 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 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 an individual bag clearly labelled with the child's name.
- A copy of the medication consent form is put inside the individual bag.
- If a child on medication has to be taken to hospital, the child's medication is taken in the individual bag clearly labelled with the child's name. Inside the bag is a copy of the consent form signed by the parent.
- As a precaution, children should not eat when travelling in vehicles.
- > This Policy is read alongside the Off Site Activities procedures in Appendix A.

Contacting Emergency Services

When a medical condition causes the child to become ill and/or requires emergency administration of medicines, then an ambulance will be summoned at the earliest opportunity.

Storage and Disposal of Medicines

- The storage of medicines is the overall responsibility of the Testwood Baptist Church Pre-school who will ensure that arrangements are in place to store medicines safely and that they are inaccessible to children.
- The storage of medicines will be undertaken in accordance with product instructions and in the original container in which the medicine was dispensed.

- It is the responsibility of all staff to ensure that the received medicine container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration.
- > The child's key person or setting manager & deputy are responsible for ensuring medicine is handed back at the end of the day to the parent.
- It is the responsibility of the parents to provide medicine that is in date. This should be agreed with the parents at the time of acceptance of on-site administration responsibilities.
- For some conditions, medication may be kept in the setting. Key persons check that any medication held to administer on an as and when required basis, or on a regular basis, is in date and returns any out-of-date medication back to the parent.
- It is not the responsibility of Testwood Baptist Church Pre-schools to dispose of medicines. It is the responsibility of the parents to ensure that all medicines which are no longer required including those which have date-expired are returned to a pharmacy for safe disposal.
- 'Sharps boxes' will always be used for the disposal of needles. Collection and disposal of the boxes will be locally arranged as appropriate.

These procedures are written in line with current guidance for managing medicines in schools and early years settings; the Pre-school Manager and Deputy are responsible for ensuring all staff understand and follow these procedures.

APPENDIX F

Food & drink

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

- ➤ Before a child starts to attend Pre-school, we find out from parents, a children's dietary needs and preferences, including any allergies.
- We record information about each child's dietary needs in her/his Admissions information.
- We regularly consult with parents to ensure that our records or their children's dietary needs including any allergies are up-to-date.
- We display current information about individual children's special 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 correct with dietary needs and preferences, as well as parent's wishes.
- ➤ 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, Should there be a dairy or wheat/gluten allergy within pre-school will be vigilant about the foods we provide.
- Through discussion with parents and research reading by staff, we obtain information about the dietary rules of the religious groups 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 and for cooking activities.
- > Individual child health plans are made and shared with parents, staff, volunteers and students.
- We have fresh drinking water constantly available for the children. Children bring in a named water bottle which they can access at all times. We will top up the water when required.
- 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 semi skimmed milk.
- We use meal and snack times to help children to develop independence through making choices, serving food and drink and feeding themselves.
- Pre-school will provide snacks which are healthy, balanced and nutritious including fruit, vegetables and savoury snacks in line with the EYFS guidelines.

Packed Lunches

Children who attend lunch club are required to bring packed lunches and we:

- Ensure perishable contents of packed lunches are refrigerated or contain an ice pack to keep food cool.
- Inform parents that we promote healthy eating.
- > Inform parents that products containing nuts or nut products are not allowed in lunch boxes, due to allergies.
- Encourage parents to provide a healthy lunch relating to the EYFS guidelines.
- Discourage sweet drinks and provide children with water.
- Discourage packed lunches that consist largely of crisps, processed foods, sweet drinks and sweet products such as cakes and biscuits. We reserve the right to return this food to the parent, as a last resort.
- > Ensure children wash their hands before sitting down for lunch with at least one staff member.
- > Ensure that staff sit with children to eat their lunch, so that the mealtime is a social occasion.
- Ensure that children with similar allergies are sat together to keep them safe and away from other children's lunch boxes that may contain an allergen.
- Ensure there is access to the toilets for the children and staff.
- Ensure that children are not left unsupervised at lunch at any time.
- Ensure that children wash their hands or have their hands wiped and anti bac gel their hands before leaving the table after snack and lunch.

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)
- Nutritional Guidance for the Under Fives (Pre-school Learning Alliance 2009)
- The Early Years Essential Cookbook (Pre-school Learning Alliance 2009)
- Healthy and Active Lifestyles for the Early Years (Pre-school Learning Alliance 2012)

APPENDIX G

Suitability of play equipment and toys

Procedures

The equipment we provide:

- ▲ Is appropriate for the ages and stages of the children.
- The layout of play equipment allows adults and children to move safely and freely between activities.
- All materials, including paint and glue, are non-toxic. Children are taught to handle and store tools safely.
- A Physical play is constantly supervised.
- Offers challenges to developing physical, social, personal and intellectual skills.
- Features positive images of people, both male and female, from a range of ethnic and cultural groups, with and without disabilities.
- A Includes a range of raw materials, which can be used in a variety of ways and encourages an open-ended approach to creativity and problem solving.
- Will enable children, with adult support, to develop individual potential and move towards required learning goals.
- Conforms to all relevant safety regulations and is sound and well made.
- Is regularly checked for cleanliness and safety and any dangerous items are repaired or discarded.
- A Prioritised spending on identified needs to be agreed by Finance committee member to ensure value for money.
- Lensure that we have a sufficient range of play equipment to enable children to make choices.

Outdoor Area (including The Secret Garden)

- > Our outdoor area is securely fenced. All gates and fences are childproof, safe, and secure.
- > The outdoor sand pit is covered when not in use and cleaned regularly.
- Alternate outdoor play activities to encourage children to take risks.
- Areas are checked daily to make sure animal droppings, litter, glass etc. is removed. Staff wear rubber gloves to do this.
- Bushes or overhanging trees are checked to ensure they do not bear poisonous berries.
- Wooden equipment is maintained safely, and not used if broken.
- Wooden equipment is sanded and varnished as required.
- > Broken climbing equipment or outdoor toys are removed and reported to the setting manager.
- Children are always supervised within ratios outside.
- Children are suitably attired for the weather conditions and type of outdoor activities.
- > Sun cream (if parents have given permission) is applied and hats are worn during the summer months. Outdoor play is avoided in extreme heat between noon and 3pm.
- Children who have no adequate means of sun protection, such as a hat, long sleeves and trousers or sun cream, will not be able to play outdoors in un-shaded areas.
- Children are supervised on climbing equipment, especially younger children.

- Water play is not left out but is cleared, cleaned and stored after each use.
- Receptacles are left upturned to prevent collection of rainwater, this is important in areas where there are vermin to prevent urine/faeces contaminating the water.
- > Sightings of vermin are recorded and reported to the manager who reports to the Church Site Manager.
- > If paddling pools are used, a risk assessment is conducted, and consideration given to the needs of disabled children or those less ambulant.

Drones

- If there are concerns about a 'drone' being flown over the outdoor area, that may compromise children's safety or privacy, the setting manager will contact the police on 101 & children will be bought inside immediately.
- Parents will be informed that a Drone has been spotted flying over the outdoor area and will be advised fully of the actions taken by the setting.
- If at any point following the incident, photographs taken by a drone emerge on social media that could identify the nursery or individual children, these are reported to the police.
- A record is completed in the Notifiable Incident Record unless there is reason to believe that the incident might have safeguarding implications, for example:
 - the drone has hovered specifically over the outdoor area for any length of time
 - there is a likelihood that images of the children have been recorded
 - is spotted on more than one occasion
 - if the Police believe there is cause for concern

Where this is the case, Safeguarding children, young people and vulnerable adults' procedures are followed.

APPENDIX H

In the event of a child needing to go to hospital or medical centre

Procedures

- If there is an emergency an ambulance will be called, and the child's parents contacted immediately. If the parents cannot get to the Pre-school before the ambulance, the child's keyperson, or another member of staff who the child is comfortable with, will accompany the child to the hospital, taking the child's personal details, held on file, with them, and remain with him/her until his/her parents have arrived. If emergency treatment is required and the parents cannot be contacted, the Pre-school staff will act in Loco Parentis and agree treatment. (Loco Parentis agreement is sought from parents on their child's admission to Pre-school).
- If the accident is not an emergency but the child still needs treatment, the child's parents will be contacted, and they can collect the child and take him/her to hospital.
- ➤ If the parents cannot be contacted, a doctor or an ambulance will be requested, whichever is most appropriate for the situation in hand. A member of staff will accompany the child in the absence of a parent and the Preschool will continue to try and contact his/her parents.
- > A report of the incident/accident will be recorded on a Incident form under the child's name.
- If we have permission from the child's parents (loco parentis), then we can take the child to hospital, if the parents cannot be contacted before the ambulance arrives. Their Keyworker will accompany the child in the ambulance.
- ➤ If parents disagree with Loco Parentis, we will ask them to write a note, to be kept on file, which gives permission for the hospital to make a decision in the best interest of the child, should the parents be uncontactable.

If a child needs medical attention, we will check the Ofsted website to see if the accident needs to be reported. We will also check if a RIDDOR form needs to be completed