# ANNABEL'S NURSERY POLICIES AND PROCEDURES

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# ACCIDENTS AND FIRST AID POLICY

At Annabel's Nursery the safety of all children is paramount, and we have measures in place to help to protect children. However sometimes accidents do unavoidably happen. We follow this policy and procedure to ensure all parties are supported and cared for when accidents or incidents happen; and that the circumstances of the accident or incident are reviewed with a view to minimising any future risks.

# Accidents

When an accident or incident occurs, we ensure:

- The child is comforted and reassured first
- The extent of the injury is assessed and if necessary, a call is made for medical support/ambulance
- First aid procedures are carried out where necessary, by a trained paediatric first aider
- The person responsible for reporting accidents, incidents or near misses is the early years educator who saw the incident or was first to find the child where there are no witnesses.
- The accident is recorded on an Accident/Incident in the Provision Form and reported to the room leader and nursery manager. Other early years educators who have witnessed the accident countersign the form and, in more serious cases, provide a statement. This should be done as soon as the accident is dealt with, whilst the details are still clearly remembered.
- Parents must be shown the Accident/Incident within the provision Report, informed of any first aid treatment given and asked to sign it on the same day, or as soon as reasonably practicable after.
- The DSL/Nursery Manager reviews the accident/incident forms at least monthly for patterns, e.g. one child having a repeated number of accidents, a particular area in the nursery or a particular time of the day when most accidents happen. Any patterns are investigated by the nursery manager and all necessary steps to reduce risks are put in place.
- The nursery manager reports any serious accidents/incidents to the registered person for investigation for further action to be taken (i.e. a full risk assessment or report under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) Within the correct time frame
- The Accident File is stored and kept confidentially for at least 21 years and three months.
- Where medical attention is required, a senior early years educator will notify the parent(s) as soon as possible whilst caring for the child appropriately.
- Where medical treatment is required the nursery manager will follow the insurance company procedures, which may involve informing them in writing of the accident. An accident is an unfortunate event or occurrence that happens unexpectedly and unintentionally, typically resulting in an injury, for example tripping over and hurting your knee. An Incident is an event or occurrence that is related to another person, typically resulting in an injury, for example over and hurting your knee.
- The nursery manager/registered provider will report any accidents of a serious nature to Ofsted and BCP Children's Services First Response or children's social care team (as the local child protection agency), where necessary. Where relevant such accidents will also be reported to the local authority environmental health department, or the Health and Safety Executive and their advice followed. Notification must be made as soon as is reasonably practical, but in any event within 14 days of the incident occurring.

# Head injuries

If a child has a head injury in the setting, then we will follow the following procedure: Comfort, calm and reassure the child Assess the child's condition to ascertain if an ambulance is required. We will follow our procedure for this if this is required (see below)

Parents will be informed for all bumps to the head via telephone and this will be recorded. If the skin is not broken, we will administer a cold compress for short periods of time,

repeated until the parent arrives if need be to collect their child in a quiet area whilst awaiting collection

If the skin is broken then we will follow our first aid training and stem the bleeding Complete the accident form ensuring this is signed and dated.

Keep the child in a calm and quiet area whilst awaiting collection

We will continue to monitor the child and follow the advice on the NHS website as per all head injuries <u>https://www.nhs.uk/conditions/minor-head-injury/</u>

For major head injuries we will follow our paediatric first aid training.

Transporting children to hospital procedure

The nursery manager or deputy manager must:

Call for an ambulance immediately if the injury is severe. We will not attempt to transport the injured child in our own vehicles.

Whilst waiting for the ambulance, contact the parent(s) and arrange to meet them at the hospital or nursery (depending on time frame)

Arrange for the most appropriate early years educator to accompany the child taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter

Redeploy early years educators if necessary to ensure there is adequate deployment to care for the remaining children. This may mean temporarily grouping the children together. Always remain calm. Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the accident.

# First aid

The first aid boxes are in: The snack café and the staff toilet. These are always accessible with appropriate content for use with children. The appointed person responsible for first aid checks the contents of the boxes every month and replaces items that have been used or are out of date. First aid boxes should only contain items permitted by the Health and Safety (First Aid) Regulations Act 1981, such as sterile dressings, bandages and eye pads. No other medical items, such as paracetamol should be kept in them.

The appointed persons responsible for first aid are Tina and Sarah.

The majority of our early years educators are trained in paediatric first aid and this training is updated every three years. If children are taken on an outing away from our nursery, we will always ensure they are accompanied by at least two early years educator who is trained in first aid. A first aid box is taken on all outings, along with any medication that needs to be administered in an emergency, including inhalers etc.

# Food Safety and play

Children are supervised during mealtimes and food is adequately cut up to reduce choking. The use of food as a play material is discouraged. However, as we understand that learning experiences are provided through exploring different malleable materials the following may be used.

These are risk assessed and presented differently to the way it would be presented for eating e.g. in trays,

- Playdough
- Cornflour
- Dried pasta, rice and pulses
- Dried cereal

#### • Fruits and vegetables.

Food items may also be incorporated into the role play area to enrich the learning experiences for children, e.g. Fruits and Vegetables. Children will be supervised during these activities. Food that could cause a choking hazard, including raw jelly, is not used.

#### Personal protective equipment (PPE)

The nursery provides early years educators with PPE according to the need of the task or activity. Early years educator must wear PPE to protect themselves and the children during tasks that involve contact with bodily fluids. PPE is also provided for domestic tasks. Early years educators are consulted when choosing PPE to ensure all allergies and individual needs are supported and this is evaluated on an ongoing basis.

#### Dealing with blood

We may not be aware that any child attending the nursery has a condition that may be transmitted via blood. Any early years educator member dealing with blood must: Always take precautions when cleaning wounds as some conditions such as hepatitis or the HIV virus can be transmitted via blood.

Wear disposable gloves and wipe up any blood spillage with disposable cloths, neat sterilising fluid or freshly diluted bleach (one part diluted with 10 parts water). Such solutions must be carefully disposed of immediately after use.

#### Needle punctures and sharps injury

We recognise that injuries from needles, broken glass and so on may result in blood borne infections and that early years educator must take great care in the collection and disposal of this type of material. For the safety and well-being of the employees, any early years educator dealing with needles, broken glass etc. must treat them as contaminated waste. If a needle is found the local authority must be contacted to deal with its disposal.

We treat our responsibilities and obligations in respect of health and safety as a priority and we provide ongoing training to all early years educators which reflects best practice and is in line with current health and safety legislation.

This policy is updated at least annually in consultation with early years educators and parents and/or after a serious accident or incident.

Policy Title	
Author	
Reviewer	
Date	
Approved by	
Next review date	

# ADDITIONAL NEEDS AND DISABILITIES POLICY

This policy has been created regarding:

- The SEND Code of Practice 2015
- Children and Families Act 2014 (Part 3)
- Equality Act 2010
- Working Together to Safeguard Children (2018)
- Statutory Framework for the EYFS (2023)

Special Educational Needs and Disability (SEND) code of practice.

The nursery has regard to the statutory guidance set out in the Special Educational Needs and Disability code of practice (DfE 2015) to identify, assess and make provision for children's special educational needs.

At Annabel's Nursery we use the SEND Code of Practice (2015) definition of Special Educational Needs and Disability:

A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her.

A child of compulsory school age or a young person has a learning difficulty or disability if he or she:

- has a significantly greater difficulty in learning than the majority of others of the same age, or
- has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.

# Statement of intent

We are committed to the inclusion of all children at our nursery. We ensure all children are cared for and educated to develop to their full potential alongside their peers through positive experiences. We enable them to share opportunities and experiences and develop and learn from each other. We provide a positive and welcoming environment where children are supported according to their individual needs and we work hard to ensure no child is discriminated against or put at a disadvantage as a consequence of their needs. Each child's needs are unique and we do not attempt to categorise children as this is inappropriate.

We are committed to working in partnership with parents in order to meet each child's individual needs and support them to develop to their full potential. We are committed to working with any child who has a special educational need and/or disability and making reasonable adjustments to enable every child to make full use of the nursery's facilities. All children have a right to a broad and well-balanced early learning environment.

We undertake a 2 year Progress Check of all children in accordance with the Code of Practice (2015) and statutory framework for EYFS.

Where we believe a child may have additional needs that have previously been unacknowledged, we will work closely with the child's parents and any relevant professionals if we identify any areas where a child's progress is less than expected to establish if any additional action is required.

Where a child has additional needs, we feel it is paramount to find out as much as possible about those needs; any way that this may affect his/her early learning or care needs and any additional help he/she may need by:

- Liaising with the child's parents and, where appropriate, the child
- Liaising with any professional agencies
- Reading any reports that have been prepared
- Attending any review meetings with the local authority/professionals

• Observing each child's development and assessing such observations regularly to monitor progress.

All new children will be given a full settling in period when joining the nursery according to their individual needs.

We will:

- Recognise each child's individual needs and ensure all staff are aware of, and have regard for, the Special Educational Needs Code of Practice (2015)
- Ensure that all children are treated as individuals/equals and are supported to take part in every aspect of the nursery day according to their individual needs and abilities
- Include all children and their families in our provision
- Identify the specific needs of children with special educational needs and/or disabilities and meet those needs through a range of strategies.
- Ensure that children who learn at an accelerated pace e.g. 'most able' are also supported
- Encourage children to value and respect others
- Provide well informed and suitably trained practitioners to help support parents and children with special educational difficulties and/or disabilities
- Develop and maintain a core team of staff who are experienced in the care of children with additional needs and identify a Special Educational Needs and Disabilities Coordinator (SENCO) who is experienced in the care and assessment of children with additional needs. Staff will be provided with specific training relating to SEND and the SEND Code of Practice
- Monitor and review our practice and provision and, if necessary, make adjustments, and seek specialist equipment and services where required
- Challenge inappropriate attitudes and practices
- Promote positive images and role models during play experiences of those with additional needs wherever possible
- Celebrate diversity in all aspects of play and learning.
- Work in partnership with parents and other agencies in order to meet individual children's needs, including the education, health and care authorities, and seek advice, support and training where required
- Share any statutory and other assessments made by the nursery with parents and support parents in seeking any help they or the child may need.

Our nursery Special Education Needs and Disabilities Co-ordinator (SENCO) is Sarah Elliott

The role of the SENCO in our setting includes:

- ensuring all practitioners in the setting understand their responsibilities to children with SEN and the setting's approach to identifying and meeting SEN
- advising and supporting colleagues
- ensuring parents are closely involved throughout and that their insights inform action taken by the setting
- liaising with professionals or agencies beyond the setting
- taking the lead in implementing the graduated approach and supporting colleagues through each stage of the process.

We will:

- Designate a named member of staff to be the SENCO and share their name/role with all staff and parents
- Have high aspirations for all children and support them to achieve to their full potential
- Develop respectful partnerships with parents and families

- Ensure parents are involved at all stages of the assessment, planning, provision and review of their child's care and education and where possible include the thoughts and feelings voiced by the child where possible/appropriate
- Signpost parents and families to our Local Offer on the BCP website in order to access local support and services
- Undertake formal Progress Checks and Assessments of all children in accordance with the SEND Code of Practice January (2015) / Statutory framework for the EYFS (2023)
- Provide a statement showing how we provide for children with special educational needs and/or disabilities and share this with staff, parents and other professionals
- Ensure that the provision for children with SEN and/or disabilities is the responsibility of all members of staff in the nursery through training and professional discussions
- Set out in our inclusive admissions practice on how we meet equality of access and opportunity
- Make reasonable adjustments to our physical environment to ensure it is, as far as possible suitable for children and adults with disabilities using the facilities
- Provide a broad, balanced, aspirational early learning environment for all children with SEN and/or disabilities and differentiated activities to meet all individual needs and abilities
- Liaise with other professionals involved with children with special educational needs and/or disabilities and their families, including transition arrangements to other settings and schools.
- Use the graduated response system to assess, plan, do and review to ensure early identification of any SEND
- Ensure that children with special educational needs and/or disabilities and their parents are consulted at all stages of the graduated response, taking into account their levels of ability
- Review children's progress and support plans every 6 weeks and work with parents to agree on further support plans
- Provide privacy of children with special educational needs and/or disabilities when intimate care is being provided
- Raise awareness of any specialism the setting has to offer, e.g. Signalong trained staff
- Ensure the effectiveness of our SEN/disability provision by collecting information from a range of sources e.g. additional support reviews, Education, Health and care (EHC) plans, staff and management meetings, parental and external agencies' views, inspections and complaints. This information is collated, evaluated and reviewed annually
- Provide a complaints procedure and make available to all parents in a format that meets their needs e.g. Braille, audio, large print, additional languages
- Monitor and review our policy and procedures annually.

# Effective assessment of the need for early help

We are aware of the process for early help and follow the following procedure: Local agencies should work together to put processes in place for the effective assessment of the needs of individual children who may benefit from early help services. Children and families may need support from a wide range of local agencies. Where a child and family would benefit from coordinated support from more than one agency (e.g. education, health, housing, police) there should be an inter-agency assessment. These early help assessments should identify what help the child and family require to prevent needs escalating to a point where intervention would be needed via a statutory assessment under the Children Act 1989.

The early help assessment should be undertaken by a lead professional who should provide support to the child and family, act as an advocate on their behalf and coordinate the delivery of support services. The lead professional role could be undertaken by a General

Practitioner (GP), family support worker, teacher, health visitor and/or special educational needs coordinator. Decisions about who should be the lead professional should be taken on a case by case basis and should be informed by the child and their family.

For an early help assessment to be effective:

- The assessment should be undertaken with the agreement of the child and their parents or carers. It should involve the child and family as well as all the professionals who are working with them;
- A teacher, GP, health visitor, early years' worker or other professional should be able to discuss concerns they may have about a child and family with a social worker in the local authority. Local authority children's social care should set out the process for how this will happen; and
- If parents and/or the child do not consent to an early help assessment, then the lead professional should make a judgement as to whether, without help, the needs of the child will escalate. If so, a referral into local authority children's social care may be necessary.

If at any time it is considered that the child may be a child in need as defined in the Children Act 1989, or that the child has suffered significant harm, or is likely to do so, a referral should be made immediately to local authority children's social care. This referral can be made by any professional. Working together to safeguard children 2018.

#### Graduated Approach

We follow the SEND Code of Practice (2015) recommendation that, in addition to the formal checks above, we adopt a graduated approach to assessment and planning, led and coordinated by a SENCO. Good practice of working together with parents, and the observation and monitoring of children's individual progress, will help identify any child with special educational needs or disability. This graduated approach will be led and coordinated by the SENCO and appropriate records will be kept according to the Code of Practice.

#### Assess

In identifying a child as needing SEND support, the key person, working with the SENCO and the child's parents, will carry out an analysis of the child's needs. This initial assessment will be reviewed regularly to ensure that support is matched to need. Where there is little or no improvement in the child's progress, more specialist assessment may be called for from specialist teachers or from health, social services or other agencies beyond the setting. Where professionals are not already working with the setting, the SENCO will contact them, with the parents' agreement.

# Plan

Where it is decided to provide SEND support, and having formally notified the parents, the key person and the SENCO, in consultation with the parents, will agree the outcomes they are seeking, the interventions and support to be put in place, the expected impact on progress, development or behaviour, and a clear date for review. Plans will take into account the views of the child.

The support and intervention provided will be selected to meet the outcomes identified for the child, based on reliable evidence of effectiveness, and provided by practitioners with relevant skills and knowledge. Any related staff development needs are identified and addressed. Parents will be involved in planning support and, where appropriate, in reinforcing the provision or contributing to progress at home.

# Do

The child's key person will be responsible for working with the child on a daily basis. With support from the SENCO, they will oversee the implementation of the intervention agreed as part of SEN support. The SENCO will support the key person in assessing the child's

response to the action taken, in problem solving and advising on the effective implementation of support.

### Review

The effectiveness of the support and its impact on the child's progress will be reviewed in line with the agreed date. The impact and quality of the support will be evaluated by the key person and the SENCO in full consultation with the child's parents and taking into account the child's views. Information will be shared with parents about the impact of the support provided.

Assess - The key person works with the setting SENCO and the child's parents and brings together all the information, then analyses the child's needs.

Plan - The key person and the SENCO will agree, in consultation with the parent, the outcomes they are seeking for the child, the interventions and support to be put in place, the expected impact on progress, development and behaviour and finally a date for review.

Do - The child's key person implements the agreed interventions or programmes

Review - On the agreed date, the key person and SENCO working with the child's parents, and taking into account the child's views, will review the effectiveness of the support and the impact of the support on the child's progress. They will then evaluate the impact and quality of support on the child.

# Education and Health Plan (EHCP)

Some children and young people may require an EHCP needs assessment in order to decide whether it is necessary to develop an EHCP plan. The purpose of an EHCP plan is to make adjustments and offer support to meet the special educational needs of the child, to secure the best possible outcomes for them across education, health and social care. The local authority will conduct the EHCP needs assessment and take into account a wide range of evidence, including

- evidence of the child's developmental milestones and rate of progress
- information about the nature, extent and context of the child's SEND
- evidence of the action already being taken by us as the early years provider to meet the child's SEND
- evidence that, where progress has been made, it has only been as the result of much additional intervention and support over and above that which is usually provided
- evidence of the child's physical, emotional and social development and health needs, drawing on relevant evidence from clinicians and other health professionals and what has been done to meet these by other agencies.

We will then work with the local authority and other agencies to ensure that the child receives the support they need to gain the best outcomes.

We will review this policy annually to ensure it continues to meet the needs of the children/ parents and our nursery.

Policy Title	
Author	
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# ALLERGY POLICY

At Annabel's Nursery we are aware that children may have or develop an allergy resulting in an allergic reaction. We aim to ensure allergic reactions are minimised or, where possible, prevented and that early years educators are fully aware of how to support a child who may be having an allergic reaction.

### Our procedures

All early years educators are made aware of the signs and symptoms of a possible allergic reaction in case of an unknown or first reaction in a child. These may include a rash or hives, nausea, stomach pain, diarrhoea, itchy skin, runny eyes, shortness of breath, chest pain, swelling of the mouth or tongue, swelling to the airways to the lungs, wheezing and anaphylaxis.

We ask parents to share all information about allergic reactions and allergies on child's registration form and to inform early years educators of any allergies discovered after registration

We share all information with all early years educators and keep our allergies updated on our allergy posters in each room where food is eaten/used for messy play.

Where a child has a known allergy, the nursery manager will carry out a full Allergy Risk Assessment Procedure with the parent prior to the child starting the nursery and/or following notification of a known allergy and this assessment is shared with all early years educators. All food prepared for a child with a specific allergy is prepared in an area where there is no chance of contamination and served on equipment that has not been in contact with this specific food type, e.g. nuts

The manager and parents will work together to ensure a child with specific food allergies receives no food at nursery that may harm them. This includes a carefully designed menu, substituting specific meals on the current nursery menu

Seating is monitored for children with allergies. Where deemed appropriate, early years educators will sit with children who have allergies and where age/stage appropriate early years educators will discuss food allergies with the children and the potential risks. If a child has an allergic reaction to food, a bee or wasp sting, plant etc. a paediatric first-aid trained early years educator will act quickly and administer the appropriate treatment, where necessary. We will inform parents and record the information on an accident/incident form If an allergic reaction requires specialist treatment, e.g. an EpiPen, then at least two early years educators working directly with the child and the manager will receive specific medical training to be able to administer the treatment to each individual child

#### Food Information Regulations 2014

We incorporate additional procedures in line with the Food Information Regulations 2014 (FIR) including displaying our weekly menus on the Parent Information Board identifying any of the 14 allergens that are used as ingredients in any of our dishes.

# In the event of a serious allergic reaction and a child needing transporting children to hospital procedures

The nursery management will:

- Call for an ambulance immediately if the allergic reaction is severe. We will not attempt to transport the sick child in their own vehicle
- Ensure someone contacts the parent(s) whilst waiting for the ambulance, and arrange to meet them at the hospital
- Inform a member of the management team immediately

- Arrange for the most appropriate early years educators to accompany the child, taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Redeploy early years educators if necessary to ensure there is adequate deployment to care for the remaining children. This may mean temporarily grouping the children together
- Remain calm at all times and continue to comfort and reassure the child experiencing an allergic reaction. Children who witness the incident may also be well affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the incident.
- Where a serious incident occurs and a child requires hospital treatment, Ofsted will be informed.

This policy is updated at least annually in consultation with early years educators and parents and/or after a serious incident.

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# APPRENTICES, STUDENTS AND YOUNG WORKERS POLICY

We are committed to sharing good practice with those wishing to pursue a career in childcare. We welcome students to join our staff team and gain work experience within our Nursery.

We will only offer placements to students who are associated with a recognised child-related course, or on occasions, pupils from local secondary schools on work experience. We offer placements only after discussions with the appropriate tutors and the establishment of close links with the college, training provider or school.

We expect all students to visit the Nursery for an interview, followed by their student induction and Nursery tour. At this time, students will have the opportunity to read and discuss relevant health and safety policies, receive a copy of the Nursery Handbook and sign their contract in readiness for their first day.

Our policy for those on placements is as follows:

- All students will have an enhanced Disclosure and Barring Service (DBS) check before their placement begins.
- All students are assigned to a senior member of staff who will supervise their work and explain the health, safety and fire requirements of the Nursery.
- Students will be always supervised by the member of staff assigned to them and will not be left alone with the children. They will only change nappies under supervision.
- Students will be supported to understand Nursery policies and procedures.
- We require students to keep to our confidentiality policy.
- It is expected that during the student's placement, their tutor will visit the Nursery or have verbal communication with the Student Co-ordinator to receive feedback about the student's progress.
- Students will be offered support and guidance throughout their placement and given constructive, honest feedback in respect of their performance.

Staff will respect individual students' needs and abilities.

An accurate evaluation of ability and performance for both students and training providers will be provided and the Nursery will support students who are experiencing difficulties with action plans if needed.

To maintain parent partnerships, parents will be informed when students are present in the Nursery e.g. via the parent noticeboard. Wherever possible this will be accompanied by a recent photograph of the student.

All students on placement must adhere to the same codes of conduct as permanent staff including time-keeping and dress codes.

All students are encouraged to contribute fully to the Nursery routine and to spend some time in every area.

In some cases, we may include students on long term placements (aged 17 and over) and staff working as apprentices in early education (aged 16 and over) in our staff: child ratios. This will be the discretion of the manager and only will only occur when the manager is satisfied the student/apprentice is competent and responsible.

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### BABY SLEEP POLICY

At Annabel's Nursery we operate a safer sleep policy to ensure the safety of our babies when

they are sleeping in our care. We follow safer sleeping advise from the lullaby trust to help babies sleep

more safely and reduce the risk of sudden infant death syndrome (SIDS). We share this information with

parents and carers to help educate them to ensure safer sleep both at home and in the setting. It is

important that the key person liaises with the parents to understand the babies sleep routine at home,

this can be recorded in their personal information during the settling in process.

#### Safe Sleep Procedure for babies

We recognise that all sleep rooms and areas where babies are going to sleep are ideally a temperature of 16-20 degrees. We want to make sure that the babies are comfortable and warm enough but not too hot, the chance of SIDS is higher in babies who get too hot. We use the baby monitor to check the sleep room temperature throughout the time a baby is sleeping. We use a room thermometer to check the playroom temperature.

#### Safe sleeping positions

At Annabel's Nursery we ensure babies sleep safely by always placing them on their backs for every sleep, we also ensure that they are placed on a flat surface. Once the baby can roll onto their tummy and back again by themselves they will be able to choose their own sleep position.

#### Baby Cots

Babies must always be put to sleep in cots, the cots must be empty with no toys or bumpers as these can cause SIDS. It is important that babies are not put to sleep in bouncers, chairs or on cushions in cosy corners as this is not safe.

#### Sleep Checks

Sleeps checks are performed every 10 minutes and this is recorded on the sleep check form. The staff member must record the time of the check and initial to show who performed the check.

When the member of staff checks the sleeping baby they must check their breathing, ensuring a rise and fall of their chest, their sleep position, ensuring they are flat on their backs if they cannot roll over and check that nothing is in the cot with them, such as bumpers or toys. If babies are unwell they must be checked every five minutes.

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# **BITING POLICY**

For younger children, biting can be part of their developmental process, which most children do not continue once they grow older; however, a small number continue this behaviour. Being bitten can be painful and frightening experience for both children involved, and the biter may be worried about the reaction of other adults and children. It is important for staff try to understand the reasons for the incident and put in place some strategies to stop this happening again.

Most children do not repeat this behaviour if they are corrected properly; therefore, it is important to handle these incidents in an appropriate manner. Matters are also complicated if the pupil in question or the bitten person has an infectious disease.

# Reporting Bites

If a child bites another child in the nursery, the incident is recorded on an incident in the provision form to give to the parents.

The date and time of the incident is recorded in the accident folder, along with the names of the children involved and the nursery manager is informed.

A body map is completed to record the location of the bite which is attached to the incident in the provision form and given to the nursery manager

Children who have been bitten:

- Staff will comfort the child to ease any distress.
- Check for any visible signs of injury and put on gloves.
- If the child's skin is broken, the wound is left to bleed gently before being cleaned with warm water.
- Dress the area if appropriate.
- Ask for advice from the first aider where necessary.
- Both the parents of the biter and the child that has been bitten must be informed, regardless of the severity of the incident.
- If a child tells an adult they have been bitten but the member of staff has not witnessed the incident, the member of staff must check for visible signs of a bite
- The above procedures must be followed if there is a bite mark
- If there is no visible sign of a bite a member of staff must talk to the child involved

Children who bite:

- Staff must speak to the child about the incident in a calm measured way using positive language.
- Check that they are not injured in any way themselves.
- Remind the child of the nursery rules about being kind to our friends.
- Staff must explain that biting hurts.
- Staff must observe the behaviour of the biter and aim to intervene if this happens again.
- Staff must inform the parents to discuss the incident.

If the biting continues and gets serious, the staff must be observed or shadowed by a practitioner (shadowed at ten minutes at a time without hindering their play or activities) and the observations will be monitored to see why the biting is reoccurring. Parents will be recommended to seek further advice should this become necessary.

# Staff who have been bitten

- Check for any visible signs of injury.
- If the skin is broken, the wound is left to bleed gently before being cleaned with warm water
- Dress the area if appropriate.
- Ask for advice from the first aider where necessary.

• An accident form must be completed which will be kept in the staff members file

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# COMPLAINTS POLICY

This Complaints Policy has been written for Annabel's Nursery to ensure an open and honest relationship with staff, parents, carers and visitors. Everyone's opinion is valued and will be taken seriously no matter what the complaint.

At Annabel's Nursery it is our aim to provide a safe and secure environment for all staff, children, parents, carers and visitors alongside a happy and fun atmosphere.

It is of utmost importance to us that parents and carers are happy with the services we provide at Annabel's Nursery and we therefore encourage regular feedback on our provision. Strong relationships and good partnerships with parents will help us to achieve this, which can be done through the Key Person Approach.

We will take onboard any suggestions that are made through feedback and complaints and do our best to rectify any problems quickly and professionally. Any formal complaint will be dealt with following our Complaints Procedure.

#### If a parent or carer complains to a member of the team or complains via email/telephone.

The parent should be directed to the child's Room Leader or Key Person if they have a complaint about any of the child's care or educational needs. The team member dealing with the complaint must reassure the parent that everything they said has been listened to and will be dealt with as soon as possible. Offer a solution to the parent's complaint, if this is feasible, if it is not, then inform the parent that the next step is to inform the management team and a solution will be communicated with them as soon as possible.

Report to management and discuss the options to resolve the complaint. Relay this to the parent and if all is resolved, log the complaint in the Complaints Folder and the actions taken. Review the complaint once everything is sorted and use the information to evaluate processes and make any improvements.

If after speaking with management the parent feels the complaint has not been resolved they will need to put the complaint in writing. The manager will then formally look into the complaint with any staff members involved, following the EYFS guidelines, try and come up with a solution and feed this back to the parents.

If this still does not resolve the issue then a formal meeting with the parents and management will take place. This will need to be recorded and all attendees to sign the document and given a copy of the minutes. Any actions must be recorded and the management must act upon these within 5-7 days.

After the meeting's actions have been completed, if the parent is still not happy and would like to take their complaint further then the parent can contact Ofsted.

Ofsted information can be found on the parent board. Contact details for Ofsted: Email: enquiries@ofsted.gov.uk Telephone: 0300 123 1231

At Annabel's Nursery we will keep records of all complaints, including names, dates, what the complaint was about, how it was resolved and any actions that were taken based upon this complaint. A summary of the complaint and actions will be filed in the complaints folder.

The complaints folder will be kept in the Office. Ofsted can have access to this folder during an inspection.

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# CONFIDENTIALITY AND DATA PROTECTION POLICY (INCLUDING GDPR)

This Data Protection and Confidentiality Policy has been written for Annabel's Nursery to ensure the safe storage of all information concerning staff, children and parents that is confidential. Information concerning both staff and children's medical needs, allergy information and contact details must be stored correctly and confidentially.

In compliance with GDPR 2018 we will ensure that all information that is collected, is collected for a purpose that benefits the child. All parents will be made aware of our Terms and Conditions, as well as our Privacy Policy and will be asked to sign to say that they understand what we will be using the information for. All information that is shared with us from the parents will be used in order to support the child's needs and will always be stored in a safe place at Annabel's Nursery with the rest of the child's information.

We will ensure that all staff are aware of the GDPR Act in 2018 and are fully aware of when they can and cannot share information. In addition to this, staff will also be aware that people have the right to view and amend their records if necessary. All staff will be made aware of the location of confidential information; however, this information will only be accessed if the manager agrees that there is a good reason to do so.

At Annabel's Nursery we have a legal duty to store any key information for up to three years after the child has left the setting. However, the parents have the right to erasure and can request that the information is deleted, providing there is no compelling reason for the information to still be used.

All information is stored confidentially and we strictly follow the guidance and regulations from the following acts:

- The National Standards 2001,
- The Children's Act 2004,
- The Data Protection Act 2018,
- EYFS Principles 2008 revised 2012, Human Rights Act 1998
- General Data Protection Regulations (GDPR) 2018
- Early Years Foundation Stage (EYFS) 2021/2023

# PROCEDURE

All procedures are in place to ensure that all private information is kept safe and secure within the setting and the team.

We strive in keeping the children safe, and will protect their information by doing the following:

- All confidential information about staff, children and parents is stored in a locked office.
- All staff members are aware that the information is confidential and not to be shared with anyone who is not the child's parent or carer.
- Any confidential information will not be passed on to any other adults without permission unless the child's safety is at risk. In which case, a discussion will be had with the manager about what to do next.
- All issues revolving around staff payment and staff information must be kept confidential and will not be shared with any other staff members.
- Parents will have access to records and information about their own child. They will not be given access to information of any other child.
- Information can be kept from parents if the Local Authority believes the parents could cause risk to their own child.

- All staff will have an induction period in which they will be told all of the reasons why information must be confidential and they will be made aware of the consequences of sharing this information.
- All staff are made aware of our Social Networking Policy.
- Any staff member found sharing information about a child with anyone other than the child's parents/caregivers will be suspended without pay immediately and face disciplinary procedures.

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# EQUALITY, DIVERSITY AND INCLUSION POLICY

Inclusion is a process of identifying, understanding and breaking down barriers to participation and belonging. Inclusive early years practice is about anticipating, paying attention, responding to and reflecting on the needs and interests of all children. A commitment to inclusion should permeate all aspects of the design of educational programmes and the structuring of environments, as well as shaping every interaction with children, parents and other professionals (Birth to 5 Matters, 2021).

# Statement of intent

At Annabel's Nursery we take great care to treat each individual as a person in their own right, with equal rights and responsibilities to any other individual, whether they are an adult or a child. We are committed to providing equality of opportunity and anti-discriminatory practice for all staff, children and families according to their individual needs. Discrimination on the grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation has no place within our nursery.

A commitment to implementing our inclusion and equality policy is part of each employee's job description. Should anyone believe that this policy is not being upheld, it is their duty to report the matter to the attention of the nursery manager at the earliest opportunity.

Appropriate steps will then be taken to investigate the matter and if such concerns are wellfounded, the nursery's disciplinary policy will be followed.

The legal framework for this policy is based on:

- Special Education Needs and Disabilities Code of Practice 2015
- Children and Families Act 2014
- Equality Act 2010
- Childcare Act 2006
- Children Act 2004
- Care Standards Act 2002
- Special Educational Needs and Disability Act 2001.

The nursery and staff are committed to:

- Recruiting, selecting, training and promoting individuals on the basis of occupational skills requirements. In this respect, the nursery will ensure that no job applicant or employee will receive less favourable treatment because of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation
- Creating a working environment free of bullying, harassment, victimisation and unlawful discrimination, promoting dignity and respect for all, and where individual differences and the contributions of all staff are recognised and valued
- Providing a childcare place, wherever possible, for children who may have special educational needs and/or disabilities or are deemed disadvantaged according to their individual circumstances
- Making reasonable adjustments for children with special educational needs and disabilities
- Striving to promote equal access to services and projects by taking practical steps (wherever possible and reasonable), such as ensuring access to people with additional needs and by producing materials in relevant languages and media for all children and their families

- Providing a secure environment in which all our families are listened to, children can flourish and all contributions are valued
- Including and valuing the contribution of all families to our understanding of equality, inclusion and diversity
- Providing positive non-stereotypical information
- Continually improving our knowledge and understanding of issues of equality, inclusion and diversity and training all staff about their rights and responsibilities under the inclusion and equality policy.
- Regularly reviewing, monitoring and evaluating the effectiveness of inclusive practices to ensure they promote and value diversity and difference and that the policy is effective and practices are non-discriminatory
- Making inclusion a thread which runs through the entirety of the nursery, for example, by encouraging positive role models through the use of toys, imaginary play and activities, promoting non-stereotypical images and language and challenging all discriminatory behaviour (see dealing with discriminatory behaviour policy).

# Admissions/service provision

The nursery is accessible to all children and families in the local community and further afield through a comprehensive and inclusive admissions policy.

The nursery will strive to ensure that all services and projects are accessible and relevant to all groups and individuals in the community within targeted age groups.

# **Recruitment**

Recruitment, promotion and other selection exercises such as redundancy selection will be conducted on the basis of merit, against objective criteria that avoids discrimination. Shortlisting will be done by more than one person, where possible.

All members of the selection group are committed to the inclusive practice set out in this policy and will have received appropriate training in this regard.

Application forms are sent out along with a copy of the equal opportunities monitoring form. Application forms do not include questions that potentially discriminate on the grounds specified in the statement of intent.

Vacancies are generally advertised to a diverse section of the labour market. Advertisements avoid stereotyping or using wording that may discourage particular groups from applying.

At interview, no questions are posed which potentially discriminate on the grounds specified in the statement of intent. All candidates are asked the same questions and members of the selection group will not introduce nor use any personal knowledge of candidates acquired outside the selection process. Candidates are given the opportunity to receive feedback on the reasons why they were not successful.

We may ask questions (Under the Equality Act 2010) prior to offering someone employment in the following circumstances:

- To establish whether the applicant will be able to comply with a requirement to undergo an assessment (i.e. an interview or selection test)
- To establish whether the applicant will be able to carry out a function that is intrinsic to the work concerned
- To monitor diversity in the range of people applying for work

- To take positive action towards a particular group for example offering a guaranteed interview scheme
- You require someone with a particular disability because of an occupational requirement for the job.

The national College for Teaching and Leadership provides further guidance specific to working with children, which we follow:

Providers have a responsibility to ensure that practitioners have the health and physical capacity to teach and will not put children and young people at risk of harm. The activities that a practitioner must be able to perform are set out in the Education (Health Standards England) Regulations 2003. Providers are responsible for ensuring that only practitioners who have the capacity to teach remain on the staff team.

People with disabilities or chronic illnesses may have the capacity to teach, just as those without disabilities or medical conditions may be unsuitable to teach. Further information on training to teach with a disability is available from the DfE website.

Successful applicants offered a position may be asked to complete a fitness questionnaire prior to commencing the programme. Providers should not ask all-encompassing health questions, but should **<u>ensure</u>** that they only ask targeted and relevant health-related questions, which are necessary to ensure that a person is able to carry out all duties on their job description.

# <u>Staff</u>

It is our policy not to discriminate in the treatment of individuals. All staff are expected to cooperate with the implementation, monitoring and improvement of this and other policies. They are expected to challenge language, actions, behaviours and attitudes which are oppressive or discriminatory on the grounds specified in this policy and recognise and celebrate other cultures and traditions. All staff are expected to participate in equality and inclusion training.

Staff will follow the 'Dealing with Discriminatory Behaviour' policy where applicable to report any discriminatory behaviours observed.

# Training

The nursery recognises the importance of training as a key factor in the implementation of an effective inclusion and equality policy. All new staff receive induction training including specific reference to the inclusion and equality policy. The nursery strives towards the provision of inclusion, equality and diversity training for all staff on a 2 yearly basis.

# Early learning framework

We follow the Early Years Foundation Stage and ensure that all learning opportunities offered in the nursery encourage children to develop positive attitudes to people who are different from them. Our curriculum encourages children to empathise with others and to begin to develop the skills of critical thinking.

We do this by:

- Identifying a key person to each child who will ensure that each child's care is tailored to meet their individual needs and continuously observe, assess and plan for their learning and development
- Listening to children (verbally and non-verbally) and making children feel included, valued and good about themselves

- Ensuring that we know what each child knows and "can do" and have equal access to tailored early learning and play opportunities
- Reflecting the widest possible range of communities in the choice of resources
- Avoiding stereotypical or derogatory images in the selection of materials
- Acknowledging and celebrating a wide range of religions, beliefs and festivals
- Creating an environment of mutual respect
- Supporting children to talk about their feelings and those of others, manage emotions and develop empathy
- Helping children to understand that discriminatory behaviour and remarks are unacceptable
- Knowing children well, being able to meet their needs and know when they require further support
- Ensuring that all early learning opportunities offered are inclusive of children with special educational needs and/or disabilities and children from disadvantaged backgrounds
- Ensuring that children whose first language is not English have full access to our early learning opportunities and are supported in their learning
- Working in partnership with all families to ensure they understand the policy and challenge any discriminatory comments made
- Ensuring the medical, cultural and dietary needs of all children are met and help
- children to learn about a range of food and cultural approaches to meal times and to respect the differences among them.

# Parent information and meetings

Information about the nursery, its activities, experiences, resources are shared with parents as well as information about their child's development. This is given in a variety of ways according to individual needs (written, verbal and translated), to ensure that all parents can access the information they need.

Wherever possible, meetings are arranged to give all families opportunities to attend and share information about their child.

We also consult with parents regularly about the running of the nursery and ask them to contribute their ideas.

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# FIRE POLICY

Annabel's Nursery understands the importance of fire safety and keeping everyone safe. This policy is designed to ensure that anyone who enters the building is kept safe and if there is a fire, everyone knows what to do.

At Annabel's Nursery we have taken into consideration the fire safety regulations and ensured all our equipment, premises and fire safety equipment is regularly checked to make sure they are in line with these regulations. Each month we check the following:

- Fire Extinguishers and Blankets are in date
- Smoke and Carbon Monoxide alarms are fully functional
- The Fire Alarm system is fully functional
- All fire doors are closed, well-maintained and free from obstruction
- Staff are aware of the whereabouts of fire equipment if needed
- Any fire exits/escape routes are kept clear (this is done daily as part of the morning risk
- assessment).

A fire drill will take place monthly to ensure everyone knows what to do in the event of a fire. These are recorded in the fire safety folder with the number of staff and children who were present at the fire drill.

At Annabel's Nursery a register is done twice daily so that staff are aware of when children have entered and left the building. This means that the staff can keep an informed log of which children are present at certain times of the day. In the event of a fire, this register needs to be taken outside and checked against each child present to ensure all children are safely out of the building.

Annabel's Nursery has a strict no smoking and/or vaping policy when in, on or around the setting for all staff, parents and visitors. There is a separate no smoking policy for more information.

# PROCEDURE

If a fire is discovered raise the alarm by breaking the glass.

If you are a Manager pick up the fire evacuation folder and bag, put on a hi-vis vest and exit the building via the nearest fire exit, closing all doors behind you to the fire safe location If you are a team member in a room, pick up the register and evacuate all of the children and staff from the building via the nearest fire exit, closing all doors behind you to the fire safe location

Once out of the building DO NOT ENTER THE BUILDING AGAIN.

Take the register to ensure all children and staff are present.

If you are the Manager call the emergency services and report anyone who is unaccounted for.

Wait for the emergency services to arrive and inspect the building, do not go back in until they deem it safe to do so.

It is important to remember that you do not stop to collect any belongings, do not attempt to fight the fire and do not go back inside the building for any children.

If you are unable to safely evacuate the building, stay where you are and keep calm. Shut any doors leading to the fire and block any gaps with towels/rugs. Try to contact another member of the team so they know where you are.

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# HEALTH AND SAFETY POLICY

At Annabel's Nursery we provide and maintain safe and healthy working conditions, equipment and systems of work for all our employees and a safe early learning environment in which children learn and are cared for. To develop and promote a strong health and safety culture within the nursery for the benefit of all staff, children, parents and any visitors, we provide information, training and supervision. We also accept our responsibility for the health and safety of other people who may be affected by our activities.

The allocation of duties for safety matters and the arrangements which we will make to implement our health and safety procedures are set out within this policy and we make sufficient resources available to provide a safe environment.

#### Legal framework

We follow all relevant legislation and associated guidance relating to health and safety within the nursery including:

- The requirements of the Statutory Framework for the Early Years Foundation Stage (EYFS) 2023
- The regulations of the Health & Safety at Work Act 1974 and any other relevant legislation such as Control Of Substances Hazardous to Health Regulation (COSHH)
- Any guidance provided by Public Health England, the local health protection unit, the local authority environmental health department, fire authority or the Health and Safety Executive.

# Aims and objectives

The aim of this policy statement is to ensure that all reasonably practical steps are taken to ensure the health, safety and welfare of all persons using the premises.

To achieve this, we will actively work towards the following objectives:

- Establish and maintain a safe and healthy environment throughout the nursery including outdoor spaces
- Establish and maintain safe working practices amongst staff and children
- Make arrangements for ensuring safety and the minimising of risks to health in connection with the use, handling, storage and transport of hazardous articles and substances
- Ensure the provision of sufficient information, instruction and supervision to enable all people working in or using the nursery to avoid hazards and contribute positively to their own health and safety and to ensure that staff have access to regular health and safety training
- Maintain a healthy and safe nursery with safe entry and exit routes
- Formulate effective procedures for use in case of fire and other emergencies and for evacuating the nursery premises. Practice this procedure on a regular basis to enable the safe and speedy evacuation of the nursery
- Maintain a safe working environment for pregnant workers or for workers who have recently given birth, including undertaking appropriate risk assessments
- Maintain a safe environment for those with special educational needs and disabilities and ensure all areas of the nursery are accessible (wherever practicable)
- Provide a safe environment for students or trainees to learn in
- Encourage all staff, visitors and parents to report any unsafe working practices or areas to ensure immediate response by the management.

We believe the risks in the nursery environment are low. To maintain the maximum protection for children, staff and parents the nursery:

- Ensures all entrances and exits from the building, including fire exits are clearly identifiable, free from obstruction and easily opened from the inside
- Regularly check the premises room by room for structural defects, worn fixtures and fittings or electrical equipment and take the necessary remedial action
- Ensures that all staff, visitors, parents and children are aware of the fire procedures and regular fire drills are carried out
- Has the appropriate fire detection and control equipment which is checked regularly to make sure it is in working order
- Ensures that all members of staff are aware of the procedure to follow in case of accidents for staff, visitors and children
- Ensures that all members of staff take all reasonable action to control the spread of infectious diseases and wear protective gloves and clothing where appropriate
- Ensures there are suitable hygienic changing facilities (see infection control policy)
- Prohibits smoking/vaping on the nursery premises
- Prohibits any contractor from working on the premises without prior discussion with the officer in charge
- Encourages children to manage risks safely and prohibits running inside the premises unless in designated areas
- Risk assesses all electrical sockets and take appropriate measures to reduce risks where necessary and ensure no trailing wires are left around the nursery
- Ensures all cleaning materials are placed out of the reach of children and kept in their original containers
- Ensures staff wear protective clothing when cooking or serving food
- Prohibits certain foods that may relate to children's allergies, e.g. nuts are not allowed in the nursery
- Follows the EU Food Information for Food Consumers Regulations (EU FIC) by identifying the 14 allergens listed by EU Law that we use as ingredients in any of the dishes we provide to children and ensure that all parents are informed
- Follows the allergies and allergic reactions policy for children who have allergies or have a reaction at the nursery
- Ensures risk assessments are undertaken on the storage and preparation of food produce within the nursery
- Familiarises all staff and visitors with the position of the first aid boxes and ensure all know who the appointed first aiders are
- Provides appropriately stocked first aid boxes and check their contents regularly
- Ensures children are always supervised
- Takes all reasonable steps to prevent unauthorised persons entering the premises and have an agreed procedure for checking the identity of visitors
- Ensures no student or volunteer is left unsupervised at any time
- Ensures staff paediatric first aid certificates or a list of staff who hold a current PFA certificate are on display (and/or made available to parents).

# Responsibilities

The designated Health and Safety Officer in the nursery is the nursery manager.

The employer has overall and final responsibility for this policy being carried out:

The nursery manager will be responsible in their absence.

All employees have the responsibility to cooperate with senior staff and the manager to achieve a healthy and safe nursery and to take reasonable care of themselves and others. Neglect of health and safety regulations/duties will be regarded as a disciplinary matter (see separate policy on disciplinary procedures).

Whenever a member of staff notices a health or safety issue or problem which they are not able to rectify, they must immediately report it to the appropriate person named above. Parents and visitors are requested to report any concerns they may have to the nursery manager.

At present at least one member of staff on the premises and available at times when children are present MUST hold a full paediatric first aid (PFA) certificate in the nursery and must accompany children on outings. The certificate must be for a full course consistent with the criteria set out in Annex A of the EYFS, 2023. This must be renewed every three years and the emergency PFA course is taken face to face.

In addition to this, all newly qualified entrants to the early years workforce who have completed a level 2 and/or level 3 qualification on or after 30 June 2016, must also have either a full PFA or an emergency PFA certificate within three months of starting work in order to be included in the required staff: child ratios at level 2 or level 3 in an early years setting

At nursery, we take in to account the number of children, staff, layout of premises to ensure that a paediatric first aider can respond to emergencies quickly.

All trained first aiders must be listed in the first aid policy. Our trained first aiders are: Tina Baker, Sarah Elliott, Saira Moradi, Kerri Newton, Caitlin Boakes, Steph Cohan, Kelly Casserley.

Health and safety arrangements

- All staff are responsible for general health and safety in the nursery
- Risk assessments will be conducted on all areas of the nursery, including rooms, activities, outdoor areas, resources, cleaning equipment, legionella and lone working
- These are reviewed at regular intervals and when arrangements change
- All outings away from the nursery (however short) will include a prior risk assessment more details are included in our outings policy
- All equipment, rooms and outdoor areas are checked thoroughly by staff before children access them or the area. These checks are recorded and initialled by the staff responsible. Unsafe areas are made safe where possible or the area is not used to promote the safety of children. In these cases the manager will be notified immediately
- We provide appropriate facilities for all children, staff, parents and visitors to receive a warm welcome and provide for their basic care needs, e.g. easy to access toilet area and fresh drinking water
- We adhere to the Control Of Substances Hazardous to Health Regulation (COSHH) to ensure all children, staff, parents and visitors are safe in relation to any chemicals we may use on the premises
- We identify and assess any water sources at risk of legionella , and manage these risks including avoiding stagnant water
- All staff and students receive appropriate training in all areas of health and safety which includes risk assessments, manual handling, fire safety and emergency evacuation

procedures. We may also use benefit risk assessments for particular activities and resources for children

- We have a clear accident and first aid policy to follow in the case of any person in the nursery suffering injury from an accident or incident
- We have a clear fire safety policy and procedure, which supports the prevention of fire and the safe evacuation of all persons in the nursery. This is shared with all staff, students, parents and visitors to the nursery
- We review accident and incident records to identify any patterns/hazardous areas
- All health and safety matters are reviewed informally on an ongoing basis and formally every six months or when something changes. Staff and parents receive these updates, as with all policy changes, as and when they happen
- We welcome feedback from staff and parents. They are able to contribute to any policy through informal discussions, the suggestion scheme and/or during regular meetings held at nursery.

At Annabel's Nursery we promote the good health of all children attending including oral health by:

- Asking parents to keep children at home if they are unwell. If a child is unwell it is in their best interest to be in a home environment rather than at nursery with their peers.
- Asking staff and other visitors not to attend the setting if they are unwell
- Helping children to keep healthy by providing balanced and nutritious snacks, meals and drinks
- Minimising infection through our rigorous cleaning and hand washing processes (see infection control policy) Ensuring children have regular access to the outdoors and having good ventilation inside
- Sharing information with parents about the importance of the vaccination programme for young children to help protect them and the wider society from communicable diseases
- Having areas for rest and sleep, where required and sharing information about the importance of sleep and how many hours young children should be having.

# PROCEDURE

In order to take appropriate action of children who become ill and to minimise the spread of infection we implement the following procedures:

- If a child becomes ill during the nursery day, we contact their parent(s) and ask them to pick up their child as soon as possible. During this time we care for the child in a quiet, calm area with their key person (wearing PPE), wherever possible
- We follow the guidance published by Public Health England (Health Protection in Schools and other childcare facilities) and advice from our local health protection unit on exclusion times for specific illnesses, e.g. sickness and diarrhoea, measles and chicken pox, to protect other children in the nursery
- Should a child have an infectious disease, such as sickness and diarrhoea, they must not return to nursery until they have been clear for at least 48 hours
- We inform all parents if there is a contagious infection identified in the nursery, to enable them to spot the early signs of this illness. We thoroughly clean and sterilise all equipment and resources that may have come into contact with a contagious child to reduce the spread of infection
- We notify Ofsted as soon as is reasonably practical, but in any event within 14 days of the incident of any food poisoning affecting two or more children cared for on the premises.

- We ask parents to keep children on antibiotics at home for the first 48 hours of the course (unless this is part of an ongoing care plan to treat individual medical conditions e.g. asthma and the child is not unwell) This is because it is important that children are not subjected to the rigours of the nursery day, which requires socialising with other children and being part of a group setting, when they have first become ill and require a course of antibiotics
- We have the right to refuse admission to a child who is unwell. This decision will be taken by the manager on duty and is non-negotiable
- We make information/posters about head lice readily available and all parents are requested to regularly check their children's hair. If a parent finds that their child has head lice we would be grateful if they could inform the nursery so that other parents can be alerted to check their child's hair.

We will follow the transporting children to hospital procedure in any cases where children may need hospital treatment.

The nursery manager/staff member must:

- Inform a member of the management team immediately
- Call 999 for an ambulance immediately if the illness is severe. DO NOT attempt to transport the unwell child in your own vehicle
- Follow the instructions from the 999 call handler
- Whilst waiting for the ambulance, a member of staff must contact the parent(s) and arrange to meet them at the hospital
- Redeploy staff if necessary to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together.
- Arrange for the most appropriate member of staff to accompany the child taking with them any relevant information such as registration forms, relevant medication sheets, medication, and the child's comforter
- Always remain calm. Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the accident.

\*If a child has an accident that may require hospital treatment but not an ambulance and you choose to transport children within staff vehicles Citation advice is to consider the following in your policy:

- Requesting permission from parents
- Ratio requirements of the setting being maintained
- The age and height of the child, in regard to will they need a car seat? Further guidance can be found at www.childcarseats.org.uk/types-of-seat/
- There are some exceptions for needing a child seat depending again on their age. Further guidance can be found at www.childcarseats.org.uk/the-law/cars-taxis-privatehire-vehicles-vans-and-goods-vehicles/#under-three
- With the fitting of the car seat, we also need to ask has the individual had training in carrying in carrying this out
- Is this transport covered under business insurance, so a call to your insurance company will be needed, or do they have business insurance on their vehicle?
- Safeguarding of the child needs to be looked at. In certain situations, e.g. a designated member of staff should be appointed to plan and provide oversight of all transporting arrangements and respond to any difficulties that may arise. Wherever possible and practicable it is advisable that transport is undertaken other than in private vehicles, with

at least one adult additional to the driver acting as an escort. Staff should ensure that the transport arrangements and the vehicle meet all legal requirements. They should ensure that the vehicle is roadworthy and appropriately insured and that the maximum capacity is not exceeded.

• Emergency procedures, e.g. what happens if the child's health begins to deteriorate during the journey.

This policy will be reviewed at least annually in consultation with staff and parents and/or after a significant incident, e.g. serious illness/hospital visit required.

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# LATE COLLECTION AND NON-COLLECTION POLICY

At Annabel's Nursery we have morning, afternoon and all day sessions. Parents are able to collect their child from the nursery flexibly within this time period asking them to be no later than the session end time, for example if they attend the morning session we expect children to be collected no later than 1pm, and afternoon/all day session no later than 6pm. We understand that some parents may arrive earlier to collect their child, this is acceptable. However, the full fees still remain in place for the allocated session times.

We give parents information about the procedures to follow if they expect to be late. These include:

- Calling the nursery as soon as possible to advise of their situation and expected time of arrival
- Agreeing a safety password with the nursery in advance to be used by anyone collecting a child who is not the parent (designated adult)
- Asking a designated adult to collect their child wherever possible
- Informing the nursery of this person's identity so the nursery can talk to the child if appropriate. This will help to reduce or eliminate any distress caused by this situation
- If the designated person is not known to the nursery staff, the parent must provide a detailed description of this person, including their date of birth where known. This designated person must know the individual child's safety password in order for the nursery to release the child into their care. This is the responsibility of the parent.

If a child has not been collected from the nursery after a reasonable amount of time (e.g.  $\frac{1}{2}$  hour) has been allowed for lateness, we initiate the following procedure:

- The nursery manager will be informed that a child has not been collected
- The manager will check for any information regarding changes to normal routines, parents' work patterns or general information. If there is no information recorded, the manager will try to contact the parents on the telephone numbers provided for their mobile, home or work. If this fails the manager will try the emergency contacts shown on the child's records
- The manager/staff member in charge and one other member of staff must stay behind with the child (if outside normal operating hours). During normal operating times, the nursery will plan to meet required staff ratios. If the parents have still not collected the child, the manager will telephone all contact numbers available every 10 minutes until contact is made. These calls will be logged on a full incident record
- In the event of no contact being made after one hour has lapsed, the person in charge will ring the local authority children's social services emergency duty team
- The nursery will inform Ofsted as soon as convenient
- The two members of staff will remain in the building until suitable arrangements have been made for the collection of the child
- The child's welfare and needs will be met at all times and to minimise distress staff will distract, comfort and reassure the child during the process
- In order to provide this additional care a late fee will be charged to parents. This will pay for any additional operational costs that caring for a child outside their normal nursery hours may incur.

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# LOST CHILD POLICY

This Lost Child Policy has been written for Annabel's Nursery to ensure the safety of the children both on and off the premises. The safety of the children in our care is paramount and we will take every precaution to ensure children are kept safe by:

- Having high fences and door handles so children cannot exit the building or premises alone.
- Team will be trained in team deployment.
- Management will ensure team deployment guidelines are followed at all times. If they are not this can lead to a disciplinary.
- Children will only be allowed to go home with adults who have been authorised by the parents in advance.
- Registers will be taken on entry and exit and kept up to date throughout the day.
- A separate register, form and risk assessment will be completed for trips.

# PROCEDURE

If a child does go missing from Annabel's Nursery the whole team must be aware of the following procedure and what to do in such an event.

- All staff are aware of this procedure and what to do in the event of a lost child.
- In the event of a lost child, all members of staff will be informed and any available staff members will aid in the search for the child.
- The search will begin in the setting grounds and if the child is not found it will extend to the surrounding area.
- If the child is not found during the first search, then the police and child's parents must be contacted.
- A second search will need to take place and the guidance of the police followed.
- Any staff that are left in charge of the other children will continue the day as normal, this helps to protect the children as they will be unaware of what is going on.
- After the second search all relevant parties will then meet to discuss what to do next.
- Then, the manager will await further instructions from the police.
- If the child is not found within the setting, then the nursery will follow the local authority and police procedures.
- Any incidents must be recorded containing the relevant information around what happened, which child was lost, when did we notice the child was missing, when were the police contacted and how did the child get out?
- Ofsted will be contacted and informed of all incidents that occur within the setting.
- The management will provide support to the parents, child and any staff if they need any therapy or counselling after the stress of this experience.
- At the end of this, a risk assessment will be done to see how the child managed to escape and ensure that this never happens again. If the child managed to escape due to a staff deployment or a staff member not fulfilling their role, then disciplinary action will be taken.

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## LONE WORKING POLICY

This Lone Working Policy has been written to ensure the safety of all staff and children at Annabel's Nursery throughout the day when possible times could occur when someone is left working alone.

Lone working is not something at Annabel's Nursery we want to promote but it needs to be addressed and a policy and procedure put in place in case it does have to occur. Lone working may occur when a team member takes a break (toilet, lunch, coffee) when in the nappy changing area or toileting area helping a child, when taking care of an unwell or unsettled child in a quiet area, when administering first aid, or if numbers are so low only one team member is needed for ratios.

For a team member to lone work the management must ensure that they are level 3 or above qualified, that in the managers view they are capable and skilled enough to lone work and deal with procedures such as allergies and fire evacuation. They must ensure that they have a way of contacting other team members in case of an emergency (a whistle /walkie talkie) and that they are abiding by the correct legal ratios.

Whilst lone working team members must make sure they report any concerns about working alone to the management team, they must have access to a telephone if they require any help and they must have completed a risk assessment before lone working to ensure any risks are eliminated.

Public liability insurance for lone working will be sought where applicable.

#### PROCEDURE

Wherever possible lone working will be avoided. If a team member has to be left alone for any reason the manager must be informed immediately. The manager must risk assess the situation straight away to ensure it is safe for lone working.

The team must also make sure that there is nothing to be done that can avoid the members of staff having to work by themselves.

The management will then assess the room to minimise any potential risks to both the staff and the children, as well as ensuring the staff member is competent and able to work by themselves.

Once the risk assessment is completed both the management and the staff member will sign it to say that they have both done the required checks.

If the management team is given enough notice, then it may be required that they get supply staff in to support that member of staff.

During lone working the team member must ensure they have access to a walkie talkie / whistle at all times to call for help.

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## MANUAL HANDLING POLICY

At Annabel's Nursery we recognise that there are times when staff need to carry out manual handling especially in relation to lifting babies and young children. Staff must all be aware and adhere to the nursery's manual handling policy to prevent/minimise any injuries can result from poor manual handling. We instruct all staff in correct handling techniques and expect them to follow these to minimise the risks of injury.

We know that lifting and carrying babies and young children is different to carrying static loads and therefore our manual handling training reflects this. All staff will receive training in manual handling within their first year of employment and will receive ongoing training as appropriate.

#### **Preventing injuries**

As with other health and safety issues, we recognise that the most effective method of prevention is to remove or reduce the need to carry out hazardous manual handling. Wherever possible, we review the circumstances in which staff have to carry out manual handling and re-design the workplace so that items do not need to be moved from one area to another.

Where manual handling tasks cannot be avoided, for example lifting children when changing nappies, we carry out a risk assessment by examining the tasks and deciding what the risks associated with them are, and how these can be removed or reduced by adding control measures.

Our manual handling assessment considers the following:

- The tasks to be carried out
- The load to be moved (including moving children)
- The environment in which handling takes place
- The capability of the individual involved in the manual handling.

We expect staff to use the following guidance when carrying out manual handling in order to reduce the risk of injury.

Planning and procedure

- Think about the task to be performed and plan the lift
- Consider what you will be lifting, where you will put it, how far you are going to move it and how you are going to get there
- Never attempt manual handling unless you have read the correct techniques and understood how to use them
- Ensure that you are capable of undertaking the task people with health problems and pregnant women may be at particularly risk of injury
- Assess the size, weight and centre of gravity of the load to make sure that you can maintain a firm grip and see where you are going
- Assess whether you can lift the load safely without help. If not, get help or use specialist moving equipment e.g. a trolley. Bear in mind that it may be too dangerous to attempt to lift some loads
- If more than one person is involved, plan the lift first and agree who will lead and give instructions
- Plan your route and remove any obstructions. Check for any hazards such as uneven/slippery flooring
- Ensure lighting is adequate

- Control harmful loads for instance, by covering sharp edges or by insulating hot containers
- Check whether you need any Personal Protective Equipment (PPE) and obtain the necessary items, if appropriate. Check the equipment before use and check that it fits you
- Ensure that you are wearing the correct clothing, avoiding tight clothing and unsuitable footwear
- Consider a resting point before moving a heavy load or carrying something any distance.

# Carrying children

- If the child is old enough, ask them to move to a position that is easy to pick up, and ask them to hold onto you as this will support you and the child when lifting
- Do not place the baby/child on your hip, carry them directly in front of you in order to balance their weight equally
- Wherever possible, avoid carrying the baby/child a long distance
- Where a baby is young and is unable to hold onto you, ensure you support them fully within your arms
- Avoid carrying anything else when carrying a baby/child. Make two journeys or ask a colleague to assist you
- If a baby/child is struggling or fidgeting whilst you are carrying them, stop, place them back down and use reassuring words to calm the baby/child before continuing
- Students and pregnant staff members will not carry babies/children.

# Position for lifting

Stand in front of the load with your feet apart and your leading leg forward. Your weight should be even over both feet. Position yourself, or turn the load around, so that the heaviest part is next to you. If the load is too far away, move toward it or bring it nearer before starting the lift. Do not twist your body to pick it up.

# Lifting

Always lift using the correct posture:

- Bend the knees slowly, keeping the back straight
- Tuck the chin in on the way down
- Lean slightly forward if necessary and get a good grip
- Keep the shoulders level, without twisting or turning from the hips
- Try to grip with the hands around the base of the load
- Bring the load to waist height, keeping the lift as smooth as possible.

#### Moving a baby/child or load

- Move the feet, keeping the baby/child or load close to the body
- Proceed carefully, making sure that you can see where you are going
- Lower the baby/child or load, reversing the procedure for lifting
- Avoid crushing fingers or toes as you put the baby/child or load down
- If you are carrying a load, position and secure it after putting it down
- Make sure that the baby/child or load is rested on a stable base and in the case of the baby/child ensure their safety in this new position
- Report any problems immediately, for example, strains and sprains. Where there are changes, for example to the activity or the load, the task must be reassessed.

The task

- Carry children or loads close to the body, lifting and carrying the load at arm's length increases the risk of injury
- Avoid awkward movements such as stooping, reaching or twisting
- Ensure that the task is well designed and that procedures are followed
- Try never to lift loads from the floor or to above shoulder height. Limit the distances for carrying
- Minimise repetitive actions by re-designing and rotating tasks
- Ensure that there are adequate rest periods and breaks between tasks
- Plan ahead use teamwork where the load is too heavy for one person.

The environment

- Ensure that the surroundings are safe. Flooring should be even and not slippery, lighting should be adequate, and the temperature and humidity should be suitable
- Remove obstructions and ensure that the correct equipment is available.

The individual

- Never attempt manual handling unless you have been trained and given permission to do so
- Ensure that you are capable of undertaking the task people with health problems and pregnant women may be particularly at risk of injury.
- Where applicable and age/stage appropriate encourage children to use ladders up to the changing table for nappy changes rather than lifting. Where this is not appropriate always follow the lifting process
- Use cots with a drop down side and avoid bending to lift babies from their cot.

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## MOBILE PHONE and ELECTRONIC DEVICES POLICY

This Mobile Phone Policy has been designed to ensure that the use of mobile phones, cameras and electronic devices are both stored and used correctly within the setting in a way that keeps everyone safe whilst in Annabel's Nursery.

Throughout this policy, where it refers to mobile phones, this is also intended to cover any electronic device which could be used to take images, including but not restricted to tablets, smart watches, cameras and recording equipment.

The aim of this Mobile Phone Policy is to promote safe and appropriate use of mobile phones when in Annabel's Nursery. Whilst we understand that in some circumstances mobile phones are required to be used we want to ensure that they are used safely and in the correct areas.

All staff are responsible for the safe and proper implementation of this policy and are expected to challenge any person who is seen using their mobile phone in such a way that breaches this policy. Failure to report a breach of this policy may lead to disciplinary action.

A breach in this policy may lead to disciplinary action and depending on the nature of the breach it may be considered as gross misconduct and result in dismissal. Annabel's Nursery reserves the right to view any images that have been taken whilst on the premises and request that images are deleted if they are deemed inappropriate or unnecessary.

Staff must keep phones in pockets or bags when travelling through the building then all phones to be stored on the top floor which is out of bounds to children. Smart watches to be put on airplane mode and removed if they have a camera function. Staff may use their phones on the top floor during breaks.

The Fire tablets are used to take photos Within the nursery and these photos are printed for the parents.

# **Visitors**

Visitors to Annabel's Nursery also need to follow the mobile phone policy and procedure. A visitor includes but is not limited to, contractors, inspectors, consultants, students, parents, prospective parents, local authority, any outside agencies e.g. yoga teacher, dance teacher etc.

Upon arriving at Annabel's Nursery, all visitors will be informed by a member of staff of the Mobile Phone Policy and will be asked to observe the restrictions in place.

Some visitors to Annabel's Nursery may be permitted to use mobile phones while in the staff room or office, providing that they have sought authorisation from a member of the Management Team who will challenge any use of mobile phones in restricted areas and ensure that prior approval has been given.

# Trips and Outings

Annabel's Nursery has a mobile phone specifically for the use of trips and outings with children. This mobile phone has no enhanced functionality or camera and is to be used solely for contacting the relevant person/emergency services in the event of an emergency whilst on an outing.

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## NAPPY CHANGING AND INTIMATE CARE POLICY

At Annabel's Nursery we support children's care and welfare on a daily basis in line with their individual needs. All children need contact with familiar, consistent carers to ensure they can grow confidently and feel self-assured. Wherever possible, each child's key person will change nappies according to the child's individual needs and requirements.

Our procedure meet best practice identified by the Health Protection Agency (2011) in 'Best practice advice for nurseries and childcare settings'.

We enable a two-way exchange between parents and key persons so that information is shared about nappy changing and toilet training in a way that suits the parents and meets the child's needs.

When developmentally appropriate, we work closely with parents/carers to sensitively support toilet training in a way that suits the individual needs of the child and ensures consistency between home and nursery.

We have appropriate designated facilities for nappy changing which meet the following criteria:

- Facilities are separate to food preparation, serving areas and children's play areas
- Changing mats have a sealed plastic covering and are frequently checked for cracks or tears. If cracks or tears are found, the mat is discarded. Disposable towels/roll are placed on top of the changing mat for added protection
- Clean nappies are stored in a clean dry place; soiled nappies are placed in a nappy sack before being placed in the bin. Bins are regularly emptied and always at the end of the day and placed in an appropriate waste collection area.
- We ask that where any non-prescribed creams are needed e.g. Sudocrem that these are supplied by the parent/guardian and clearly labelled with the child's name. Prior written permission is obtained from the parent. When applying creams for rashes, a gloved hand is used.

Staff changing nappies will

- Use a disposable apron and pair of gloves for each nappy change and always wash hands before and after using gloves
- Clean disinfect and dry mats thoroughly after each nappy change; disposable towels/roll are discarded after each nappy change
- Ensure they have all the equipment they need before each nappy change
- Keep nappy bags, gloves and aprons out of reach of babies and children.

#### **Reusable Nappies**

The procedures above are followed where children wear useable nappies, in addition we:

- Ask the parents for a demonstration for fitting the nappy correctly
- Dispose of any soiling by flushing straight down the toilet
- Dispose the reusable nappies liner, and place in a nappy bag (and disposed of as per disposable nappies in a nappy bin)
- Store the used nappies in a sealable wet bag (including a waterproof interior and sealed prevents any smells escaping) away from children
- Provide the parents with the wet bag at the end of the day to clean the used nappies.

We wish to ensure the safety and welfare of the children whilst being changed and safeguard against any potential harm, as well as ensuring the staff member involved is fully supported and able to perform their duties safely and confidently. We aim to support all parties through the following actions:

- Promoting consistent and caring relationships through the key person system in the nursery and ensuring all parents understand how this works and who is caring for their child
- Using this one-to-one time as a key opportunity to talk to children and help them learn, e.g. through singing and saying rhymes during the change
- Ensuring that the nappy changing area is inviting and stimulating and change this area regularly to continue to meet children's interests
- Ensuring all staff undertaking nappy changing have suitable enhanced DBS checks
- Training all staff in the appropriate methods for nappy changing
- Ensuring that no child is ever left unattended during the nappy changing time•Making sure staff do not change nappies whilst pregnant until a risk assessment has been discussed and conducted; and that students only change nappies with the support and close supervision of a qualified member of staff
- Conducting thorough inductions for all new staff to ensure they are fully aware of all nursery procedures relating to nappy changing
- Ensuring hygiene procedures are followed appropriately, e.g. hands washed before and after nappies are changed and changing mats cleaned before and after each use
- Following up procedures through supervision meetings and appraisals to identify any areas for development or further training
- Working closely with parents on all aspects of the child's care and education as laid out in the parent and carers as partner's policy. This is essential for any intimate care routines which may require specialist training or support. If a child requires specific support, the nursery will arrange a meeting with the parent to discover all the relevant information relating to this to enable the staff to care for the child fully and meet their individual needs
- Ensuring all staff have an up-to-date understanding of child protection and how to protect children from harm. This includes identifying signs and symptoms of abuse and how to raise these concerns as set out in the safeguarding policy
- Balancing the right for privacy for the children with the need for safeguarding children and adults by making sure intimate care routines do not take place behind closed doors
- Cameras, tablets and mobile phones are not permitted within toilet and intimate care areas
- Operating a whistleblowing policy to help staff raise any concerns relating to their peers or managers and helping staff develop confidence in raising concerns as they arise in order to safeguard the children in the nursery
- Conducting working practice observations of all aspects of nursery operations to ensure that procedures are working in practice and all children are supported fully by the staff. This includes all intimate care routines
- Conducting regular risk assessments of all aspects of nursery operations including intimate care and reviewing the safeguards in place. The nursery has assessed all the risks relating to intimate care routines and has placed appropriate safeguards in place to ensure the safety of all involved.

If any parent or member of staff has concerns or questions about nappy changing procedures or individual routines, please see the manager at the earliest opportunity.

Intimate care routines are essential throughout the day to meet children's basic needs. This may include nappy changing, supporting children with toileting, changing clothes, and giving first aid treatment and specialist medical support, where required.

In order to maintain the child's privacy, we will carry out the majority of these actions on a one-to-one basis, wherever possible, by the child's key person with the exception of first aid treatment which must be carried out by a qualified first aider.

We wish to ensure the safety and welfare of children during intimate care routines and safeguard them against any potential harm as well as ensuring the staff member involved is fully supported and able to perform their duties safely and confidently. We aim to support all parties through the following actions:

- Promoting consistent and caring relationships through the key person system in the nursery and ensuring all parents understand how this works
- Ensuring all staff undertaking intimate care routines have suitable enhanced DBS checks
- Training all staff in the appropriate methods for intimate care routines and arranging specialist training where required, i.e. paediatric first aid training, specialist medical support
- Ensuring children are afforded privacy during intimate care routines whilst balancing this with the need to safeguard children and staff. No nappies will be changed or intimate routines behind closed doors
- Conducting thorough inductions for all new staff to ensure they are fully aware of all nursery procedures relating to intimate care routines
- Following up procedures through supervision meetings and appraisals to identify any areas for development or further training
- Working closely with parents on all aspects of the child's care and education as laid out in the Parent and Carers as Partners Policy. This is essential for intimate care routines which require specialist training or support. If a child requires specific support the nursery will arrange a meeting with the parent to discover all the relevant information relating to this to enable the staff to care for the child fully and meet their individual needs
- Ensuring all staff have an up-to-date understanding of safeguarding/child protection and how to protect children from harm. This will include identifying signs and symptoms of abuse and how to raise these concerns as set out in the safeguarding/child protection policy
- Operating a whistleblowing policy to help staff raise any concerns about their peers or managers; and helping staff develop confidence in raising worries as they arise in order to safeguard the children in the nursery
- Conducting working practice observations on all aspects of nursery operations to ensure that procedures are working in practice and all children are supported fully by the staff. This includes intimate care routines
- Conducting regular risk assessments on all aspects of the nursery operation including intimate care and reviewing the safeguards in place. The nursery has assessed all the risks relating to intimate care routines and has placed appropriate safeguards in place to ensure the safety of all involved.

If any parent or member of staff has concerns or questions about intimate care procedures or individual routines, please see the manager at the earliest opportunity.

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## ONLINE SAFETY POLICY

This Online Safety Policy has been created for Annabel's Nursery to ensure the safety of children and team when using the internet. With the advances in technology we feel it is very important to keep our skills updated and also ensure the children have safe access to these facilitates. We are aware of the dangers that come with using the internet and therefore will make all staff aware of this policy.

Online safety comes under safeguarding and therefore it is the responsibility of the DSL to ensure the online safety policy is followed and kept up to date. We understand that online safety carries a risk of radicalisation, sexual exploitation as well as other serious types of harm.

We will therefore encourage our parents to access information on online safety.

The benefits of using the internet are so vast we feel it is important to continue to offer this in our setting and therefore have created a procedure to keep everyone safe when online.

#### PROCEDURE

This procedure has been created for Annabel's Nursery to ensure the safety of children and staff when using the internet and being online.

- The DSL must ensure that all devices have appropriate firewalls and antivirus software installed. Staff must check these are running before going online.
- Staff devices must be password protected to ensure the children cannot access them.
- Staff devices must be kept in a safe place, out of reach of children.
- If devices have confidential information further safety precautions may need to be taken to ensure they cannot get lost or stolen. Locking in the office when the nursery is closed.
- All devices accessible by the children must have parental controls installed on them.
- If links are received via email these must not be clicked. The email must be deleted straight away.
- Only setting devices must be used for taking photos of children (please see Mobile Phone Policy for more information).
- Parents must give permission before any photos or videos of their children are uploaded to social media (please see Social Media Policy for more information).
- Internet usage throughout the setting will be monitored to ensure that it is being used appropriately.
- All information that is stored on devices will follow GDPR to ensure that it is secure and protected.
- The children will be taught how to stay safe on the internet and they will be told to report any concerns that they have to a grown-up.
- The devices in the setting should never be used for personal use.
- Staff will demonstrate to the children how to use technology safely, and we will discuss with the children what to do in certain scenarios.

All communication with parents or external organisations must be done via the correct forms of communication and must be done in a professional manner.

All applications that are put on the device must be reviewed and run through by the manager before being installed.

In the event that a member of staff has any concerns about online safety then they will report all of these concerns to the DSL.

The DSL will then make sure that:

- All staff are trained and are aware of when they need to report a concern.
- Any concerns that are made will be recorded alongside any actions that were taken.
- These can then be reviewed and used to make improvements to this policy.
- Staff will always have access to training and information about staying safe online.
- Families and carers will be offered support on how to ensure that their children are safe when they are online.
- This policy is regularly reviewed to ensure that it is up-to-date and the nursery is always
- evaluating to see what could be done better.
- Under no circumstances should any information or pictures of the children be distributed or taken from the nursery devices.

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# PREVENT DUTY POLICY

At Annabel's Nursery we follow the definitions and guidance from:

- Working Together to Safeguard Children (2018)
- Counter Extreme Strategy (2015)
- Counter Terrorism and Security Act (2015)

Radicalisation can often be a slow process, where the individual does not know it is actually happening. The individual can get caught up in supporting and following a certain belief, culture or religion and not realise that the views and behaviours are considered radical or extreme. It is our duty to ensure that children are not exposed to this kind of behaviour and if they are we need to follow our procedure to ensure they get the correct support.

The process of radicalisation is a form or harm and can include; exploitation, being groomed (including online), psychological manipulation, exposure to violent material, a risk of physical harm or even death. We will be alert to any of these signs of radicalisation and will act accordingly, following our procedure.

Some of the signs of radicalisation may be:

- Separating themselves from those they are close to.
- The expression of extremist views.
- Nervous or scared about sharing their views.
- Sudden changes in mood, including being disrespectful to others.
- A change in their perspective of justice, feeling like the system is failing them.

## PROCEDURE

At Annabel's Nursery we will tackle radicalisation by:

- Ensuring that all staff have attended training on Prevent Duty and Radicalisation and are aware of the early indicators of potential radicalisation and how to react to them.
- Team knowledge of the Prevent Duty, Radicalisation and the British Values will be tested on a regular basis through reviews and team meetings.
- Ensuring that the nursery is promoting the British Values and creating an inclusive environment where every child is welcome.
- Any concerns about extremism and radicalisation will be passed on to the police or government as soon as possible.
- If a concern needs to be passed on, all relevant information will be shared.
- We will use the Government documented Prevent Duty Guidance for England and Wales

   <u>www.gov.uk/government/publications/prevent-duty-guidance</u>

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## PROMOTING POSITIVE BEHAVIOUR POLICY

This Positive Behaviour Policy has been written for Annabel's Nursery to ensure positive behaviour is encouraged throughout the setting. We will do this through role modelling, respect and kindness, as well as using co-regulation to help support children with their emotions. This will help to teach them about being aware of their own feelings as well as others. The children will be offered lots of praise throughout the day to encourage the development of their confidence and self-esteem. We will also teach the children about British Values, including respecting themselves and others and the importance of everybody having a voice.

The law of attraction will be used by staff to ensure a positive environment throughout the setting and can be used when any unwanted behaviour may arise. There will be setting values that will be shared with both parents and children, these will be encouraged by staff throughout the daily routine to promote positive behaviour.

#### PROCEDURE

At Annabel's Nursery we use this procedure to support positive behaviour within our setting:

- All the team will read, understand and carry out the Positive Behaviour Policy and Procedure.
- Have setting values that we will share with children and parents and follow ourselves.
- Create an enriching environment where children feel safe and secure.
- Respect everyone's differences and views.
- Encourage the use of co-regulation to help children understand their emotions.
- Use games, stories and activities to support children with understanding their emotions.
- Promote good relationships through the key person and buddy system.
- Use law of attraction to turn negative behaviour into positive.
- Staff will encourage all parents and visitors to promote positive behaviour through role
- modelling.
- Create a positive environment within the setting, to help promote positive behaviour.
- If negative behaviour arises staff will...
- Ensure no child is singled out for their behaviour
- Not punish any child in any way, physically, mentally, emotionally or verbally.
- Not raise their voice or scare the child in any way.
- Physical restraint will only be used if it is in the best interest of the safety of both the children and the staff.
- Distract the child from what is causing the behaviour.
- Talk to the child about how they are feeling, try to help them understand their emotions.
- Explain to the child that the behaviour is unwanted (not the child themselves).
- Staff will be aware of when children are starting to become restless and will create group
- activities to try and keep the children happy and engaged with an activity.
- This policy will be available for both the parents and the staff and they will both be informed of any changes that occur.

Parents are able to express any concerns that they have with the staff and they will work together to ensure that the child's and the parent's needs have been met. All concerns will be handled confidentially.

Children will be shown alternatives to solving disputes that do not involve any anger or physical involvement

Children are unlikely to bully at a young age due to most outbursts being caused by a lack

of emotional intelligence, as these skills are still being developed. However, to ensure that bullying does not take place within the setting we aim to teach all children about equality and diversity. Through the use of the British Values, we talk about individual liberty and mutual respect.

This means that the children learn about treating others like they would want to be treated, and by learning about different cultures the children become aware of individual differences that everyone might have, this is supported by our setting values.

Children are keen observers and likely to copy behaviours, so signs of bullying may be caused by what the child has seen. It is important to ensure that children are not being labelled as being a bully, as this could have detrimental effects on their self-image and selfesteem in the future.

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#### RISK ASSESSMENT POLICY

What is risk assessment?

A risk assessment is the process of identifying hazards and then assessing their potential for causing harm or loss. It also includes an evaluation of the consequences of a risk if it materialises and suggests what needs to be done to avoid or minimise the risk. What is the difference between a hazard and a risk?

"A hazard is an article, substance, piece of equipment or an installation with the potential to cause harm or loss or both. A risk is a measure of the probability that the hazards (potential for harm or loss) will materialise. For example, a trailing wire, spillage, loose carpet tile and so on".

"The law does not expect you to eliminate all risk, but you are required to protect people as far as reasonably practicable. You are legally required to assess the risks in your workplace so that you put in place a plan to control the risks".

At Annabel's Nursery we must ensure that they take all reasonable steps to ensure staff and children in their care are not exposed to risks and must be able to demonstrate how they manage risks – EYFS Statutory Guidance 2023

Points to consider

There are five steps to risk assessment:

Step 1 – Identify the hazard

Step 2 – Decide who might be harmed and how

Step 3 – Evaluate the risks and decide on precautions Step 4 - Record your findings and implement them

Step 5 – Review your assessment and update if necessary

We complete risk assessments every morning to ensure the rooms and the whole nursery is safe

Policy Title	
Author	
Reviewer	
Date	
Approved by	
Next review date	

## SAFE RECRUITMENT OF STAFF POLICY

This policy has been written for Annabel's Nursery to ensure the safe recruitment of staff. It is important to ensure any new staff are recruited in a safe and fair manner, that all staff are suitable to work in Early Years and can fulfil the role of keeping our children safe.

All staff recruiting new members will undergo safer recruitment training to ensure they understand how to safely recruit. All legislation must be followed when recruiting, this includes the Equality Act 2021. The Recruitment Procedure must be fair and offer equal opportunities to all candidates.

#### PROCEDURE

At Annabel's Nursery we will follow this procedure to ensure the safe recruitment of any new staff members:

- Any staff involved in the recruitment procedure will undergo safer recruitment training online.
- A job description and person specification will be created for the job role before it is advertised.
- The job adverts will be advertised on indeed or child care Dorset.
- The advert will include all details of the job role, relevant qualifications and experience, person specification, hours, salary and the need to have an enhanced DBS check.
- Applicants will be shortlisted using the required experience and qualifications, any chosen applicants will be invited for an interview.
- At interview all applicants will be asked to bring two forms of ID, any relevant paperwork (including qualification and training certificates).
- The interview will be carried out by at least two staff members including the manager
- Interview questions must be pre-decided and all applicants must be asked the same questions to ensure fairness at interview.
- The applicant must be given the opportunity to ask any questions of their own they may have during the interview.
- One person must take minutes at the interview, including the applicants answers to any questions.
- A scoring system will be used to grade the applicants.
- The applicants with the highest score will be invited to the next stage of the interview.
- Any successful applicants will be invited into the setting for a 'stay and play'.

Other team members will make notes on how the applicant interacts with the children and other staff.

Once all the 'stay and plays' are over the recruitment team (whoever was a part of the recruitment process) will need to come together to make a decision on who to employ.

The manager must inform all applicants of whether they have been successful or not. References for the successful applicant will need to be contacted before they start work. We also ensure that any members of staff we may hire have been Enhanced DBS checked so that we can check their suitability to work with children, we also inform new staff that the manager has the responsibility to inform DBS if there are any queries or concerns about the suitability of staff.

After the applicant has been accepted for the job role, the manager will then contact the references to ensure that they are the right person for the job. This will happen before the employee starts working for the company.

The new employee will be sent a contract stating all of the legal requirements around the job, including salary and hours.

The applicant will also be sent a health check questionnaire and the results will be taken into account before they start work in the setting. If there are concerns around the applicant's mental or physical health that relate to their ability to fulfil their job role then additional advice may be needed.

The applicant will then undergo an enhanced DBS check or provide an update service number if applicable. This will be done before the member of staff starts or is in any unsupervised contact with the children.

If the applicant has lived or worked abroad, then an additional criminal records check will also need to be done.

Information about this individual will be stored by the setting if the applicant is definitely hired.

On their first day the new member of staff will undergo an induction period, in which they will learn about the nursery's policies and procedures. All new staff members will go on safeguarding and first aid training shortly after starting so that the manager can ensure that they have received recent and effective training.

The staff member will then have a meeting at the end of their first day with the children to see how they found it and if they need any support.

The new staff member will receive frequent meetings with the manager to discuss how they are getting on and whether or not any changes need to be made. This will happen after their first week, first month, six months and a year.

All staff members are aware that they need to report any concerns that they may have about the new member of staff to the manager.

All staff members will need to inform the manager of any changes to their own circumstances such as where they live, family issues or anything that may affect their ability to work with the children.

Staff will also have to fill in an annual health check questionnaire to inform the manager of any changes to their health which could affect their ability to work with children.

Staff will have a 1:1 meeting every 3 months to talk about their position in the setting and discuss strengths and weaknesses. This helps to ensure that staff are able to voice any concerns that they may have. This also allows the manager to discuss any potential training needs that may need to be fulfilled by the staff member.

All members of staff will be offered the same opportunities to access training and continue to work on their CPD.

All members of staff will be on the update service for DBS which will allow us to monitor whether or not they are allowed to work with children.

Policy Title	
Author	
Reviewer	
Date	
Approved by	
Next review date	

#### SAFEGUARDING POLICY

At Annabel's Nursery we work with children, parents, external agencies and the community to ensure the welfare and safety of children and to give them the very best start in life. Children have the right to be treated with respect, be helped to thrive and to be safe from any abuse in whatever form.

We support the children within our care, protect them from maltreatment and have robust procedures in place to prevent the impairment of children's health and development. In our setting we strive to protect children from the risk of radicalisation, and we promote acceptance and tolerance of other beliefs and cultures (please refer to our inclusion and equality policy for further information). Safeguarding is a much wider subject than the elements covered within this single policy, therefore this document should be used in conjunction with the nursery's other policies and procedures. Safeguarding children is everybody's responsibility. At Annabel's Nursery all staff, students and visitors are made aware of and adhere to, the policy. Staff undertake safeguarding training via BCP workforce development, attend Safeguarding forums and are made aware of any updates. This policy works alongside these other specific policies to cover all aspects of child protection:

- Prevent Duty and Radicalisation
- Whistleblowing
- Monitoring staff behaviour/staff behaviour policy
- Mobile phone and electronic device use
- Safe recruitment of staff
- Complaints
- Inclusion and Equality
- Legal framework and documentation of safeguarding
- Children Act 1989 and 2004
- Childcare Act 2006 (amended 2018)
- Safeguarding Vulnerable Groups Act 2006
- Children and Social Work Act 2017
- The Statutory Framework for the Early Years Foundation Stage (EYFS) 2023
- Working Together to Safeguard Children 2018
- Keeping Children Safe in Education 2023
- Guidance for safer working practice for those working with children and young people in education settings 2022
- Data Protection Act 2018
- What to do if you're worried a child is being abused 2015
- Counter-Terrorism and Security Act 2015
- Inspecting Safeguarding in Early years, Education and Skills settings 2022
- Prevent Duty 2022

Safeguarding and promoting the welfare of children, in relation to this policy is defined as:

- Protecting children from maltreatment
- Preventing the impairment of children's health or development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes.
- (Definition taken from the HM Government document 'Working together to safeguard children 2018).

#### Policy intention

To safeguard children and promote their welfare we will:

• Create an environment to encourage children to develop a positive self-image

- Provide positive role models and develop a safe culture where staff are confident to raise concerns about professional conduct
- Support staff to notice all signs of abuse and know what action to take
- Encourage children to develop a sense of independence and autonomy in a way that is appropriate to their age and stage of development
- Provide a safe and secure environment for all children
- Promote tolerance and acceptance of different beliefs, cultures and communities
- Help children to understand how they can influence and participate in decision making and how to promote Fundamental British values through play, discussion, and role modelling
- Always listen to children and know them well, to identify when things are not right.
- Provide an environment where practitioners are confident to identify where children and families may need intervention and seek the help they need (continuum of need)
- Share information with other agencies as appropriate.

The nursery is aware that abuse does occur in our society and we are vigilant in identifying signs of abuse and reporting concerns. Our practitioners have a duty to protect and promote the welfare of children. Due to the many hours of care we are providing, staff may often be the first people to identify that there may be a problem. They may well be the first people in whom children confide information that may suggest abuse or to spot changes in a child's behaviour which may indicate abuse.

#### Peer-on-peer abuse

We are aware that peer-on-peer abuse does take place, so we include children in our policies when we talk about potential abusers. This may take the form of bullying, physically hurting another child, emotional abuse or sexual abuse. We will report this in the same way we do for adults abusing children and will take advice from the appropriate bodies on this area; to support for both the victim and the perpetrator, as they could also be a victim of abuse.

Our prime responsibility is the welfare and well-being of each child in our care. As such we believe we have a duty to the children, parents and staff to act quickly and responsibly in any instance that may come to our attention. This includes sharing information with any relevant agencies such as local authority services for Children's Social Care, family support, other professionals including health visitors or the police. All staff will work with other agencies in the best interest of the child, including as part of a multi-agency team, where needed.

The nursery aims to:

- Keep the child at the centre of all we do, providing sensitive interactions that develops builds children's well-being, confidence, and resilience. We will support children to develop an awareness of how to keep themselves safe, healthy and have positive relationships.
- Ensure staff are trained right from induction to understand the child protection and safeguarding policy and procedures, are alert to identify possible signs of abuse, understand what is meant by child protection and are aware of the different ways in which children can be harmed, including by other children (peer on peer) through bullying or discriminatory behaviour
- Be aware of the increased vulnerability of children with Special Educational Needs and Disabilities (SEND), isolated families and vulnerabilities in families, including the impact of toxic trio (domestic abuse, mental ill health, and substance misuse) on children and Adverse Childhood Experiences (ACE's- stressful or traumatic experiences in children and young people)

- Ensure that all staff feel confident and supported to act in the best interest of the child; maintaining professional curiosity around welfare of children, share information, and seek the help that the child may need at the earliest opportunity.
- Ensure that all staff are familiar and updated regularly with child protection training and procedures and kept informed of changes to local/national procedures, including thorough Pan Dorset updates.
- Make any child protection referrals in a timely way, sharing relevant information as necessary in line with procedures set out by the PDSCP (Pan Dorset Safeguarding partnership)
- Ensure that information is shared only with those people who need to know in order to protect the child and act in their best interest
- Keep the setting safe online using appropriate filters, checks and safeguards, monitoring access at all times and maintaining safeguards around the use of technology by staff, parents, and visitors in the setting
- Identify changes in staff behaviour and act on these as per the Staff Behaviour Policy in contract
- Take any appropriate action relating to allegations of serious harm or abuse against any person working with children or working on the nursery premises including reporting such allegations to Ofsted and other relevant authorities including the BCP LADO.
- Ensure parents are fully aware of child protection policies and procedures when they register with the nursery and are kept informed of all updates when they occur
- Regularly review and update this policy with staff and parents where appropriate and make sure it complies with any legal requirements and any guidance or procedures issued by the BCP local authority.

# Contact telephone numbers

- First Response Hub (MASH) 01202 123334
- Local authority children's social care team out of hours. 01202 738256
- Local authority Designated Officer (LADO) 01202 817600
- Sue Goddard BCP DSL 01202 817825 / 07825 522316
- NSPCC 0808 800 5000
- Pan-Dorset safeguarding Children Partnership 01202 458873
- Local Early Help services (MASH) 01202 123334
- Pan Dorset (PDSCP) Professionals 01305 228558
- Ofsted 0300 123 1231
- Emergency police 999
- Non-emergency police 101
- Government helpline for extremism concerns 020 7340 7264
- Child exploitation and Online protection command (CEOP)
- <u>https://www.ceop.police.uk/safety-centre/</u>

# Types of abuse and particular procedures followed

- Non-Mobile Baby Injury
- Any injury to a non-mobile baby must be reported to The First Response Hub
- A baby that is unable to move could not have caused the injury to their self therefore all injuries i.e. bruises on a non-mobile baby must be referred to the First Response Hub so that it can be investigated.
- The signs and indicators listed below may not necessarily indicate that a child has been abused but will help us to recognise that something may be wrong, especially if a child shows a number of these signs or any of them to a marked degree.

Indicators of child abuse

• Failure to thrive and meet developmental milestones

- Fearful or withdrawn tendencies
- Unexplained or repeated injuries to a child or conflicting reports from parents or staff
- Sexual knowledge above age appropriateness or unexplained soreness to genitals
- Unaddressed illnesses or injuries
- Significant changes to behaviour patterns.

Signs of abuse as defined by National Institute for Health and Care Excellence (NICE) include:

- Fearful
- Withdrawn
- Low self-esteem.
- Aggressive
- Oppositional habitual body rocking.
- Indiscriminate contact or affection seeking
- Over-friendliness to strangers including healthcare professionals
- Excessive clinginess, persistently resorting to gaining attention
- Demonstrating excessively 'good' behaviour to prevent parental or carer disapproval
- Failing to seek or accept appropriate comfort or affection from an appropriate person when significantly distressed
- Coercive controlling behaviour towards parents or carers
- Lack of ability to understand and recognise emotions
- Very young children showing excessive comforting behaviours when witnessing parental or carer distress.

#### Types of abuse

We define the types of abuse using the word **S.P.E.N.D.** 

#### Sexual abuse

Sexual abuse involves forcing, or enticing, a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online and technology can be used to facilitate offline abuse. Adult males do not solely perpetrate sexual abuse; women can also commit acts of sexual abuse, as can other children.

Action must be taken if a staff member witnesses an occasion(s) where a child indicates sexual activity through words, play, drawing, has an excessive preoccupation with sexual matters; or has an inappropriate knowledge of adult sexual behaviour, or language, for their developmental age. This may include acting out sexual activity on dolls/toys or in the roleplay area with their peers; drawing pictures that are inappropriate for a child, talking about sexual activities or using sexual language or words. (Staff refer to Brook traffic light tool)

The physical signs may include genital trauma, discharge and bruises between the legs or signs of a sexually transmitted disease (STD). Emotional signs could include a distinct change in a child's behaviour. They may be withdrawn or overly extroverted and outgoing. They may withdraw away from a particular adult and become distressed if they reach out for them, but they may also be particularly clingy to a potential abuser so all signs should be looked at together and assessed as a whole.

#### Physical abuse

Action needs to be taken if staff have reason to believe that there has been a physical abuse to a child, which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. These signs may include bruising or injuries in an area that is not usual for a child, e.g., fleshy parts of the arms and legs, back, wrists, ankles, trunk and face. Many children will have cuts and grazes from normal childhood injuries. When children enter the nursery with an existing injury, we will record the details of the injury. Any injuries that are a cause of concern will be followed up with parents and the designated safeguarding lead.

## **Emotional abuse**

Working Together to Safeguard Children (2018) defines emotional abuse as the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun 'of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone. Signs that children are being emotionally abused may include shying away from an adult who is abusing them; becoming withdrawn, aggressive or clingy in order to receive their love and attention; not having a close bond with their parent/carer; seem unconfident or anxious or being aggressive towards others.

Action should be taken if the staff member has reason to believe that there is a severe, adverse effect on the behaviour and emotional development of a child, caused by persistent or severe ill treatment or rejection. Children may also experience emotional abuse through witnessing domestic abuse and alcohol or drug misuse by adults caring for them.

# **Neglect**

Working Together to Safeguard Children (2018) defines Neglect as the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- a) Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- b) Protect a child from physical and emotional harm or danger
- c) Ensure adequate supervision (including the use of inadequate caregivers)
- d) Ensure access to appropriate medical care or treatment including Dentistry.
- e) Ensure adequate diet to aid healthy weight gain and dental health.

Signs may include a child persistently arriving at nursery unwashed or unkempt, poor dental hygiene wearing clothes that are too small (especially shoes that may restrict the child's growth or hurt them), arriving at nursery in the same nappy they went home in or a child having an illness or identified special educational need or disability that is not being addressed by the parent. A child may also be persistently hungry if a parent is withholding food or not providing enough for a child's needs.

Neglect may also be shown through emotional signs, e.g., a child may not be receiving the attention they need at home and may crave love and support at nursery. In addition, neglect

may occur through pregnancy as a result of maternal substance abuse. Action will be taken if the staff member has reason to believe that there has been any type of neglect of a child.

## **Domestic Violence**

Domestic abuse is any type of controlling, coercive, threatening behaviour, violence or abuse between people who are, or who have been in a relationship, regardless of gender or sexuality. It can also happen between adults who are related to one another and can include physical, sexual, psychological, emotional or financial abuse.

Each UK nation has its own definition of domestic abuse for professionals who are working to prevent domestic abuse and protect those who have experienced it (Department of Health, Social Services and Public Safety, 2016; Home Office, 2013; Police Scotland and the Crown Office and Procurator Fiscal Service, 2019; Welsh Government, 2019).

Domestic abuse can include:

- sexual abuse and rape (including within a relationship)
- punching, kicking, cutting, hitting with an object
- withholding money or preventing someone from earning money
- taking control over aspects of someone's everyday life, which can include where they go and what they wear
- not letting someone leave the house
- reading emails, text messages or letters
- threatening to kill or harm them, a partner, another family member or pet.

#### Fabricated illness

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. The parent or carer may seek out unnecessary medical treatment or investigation; they may exaggerate a real illness and symptoms or deliberately induce an illness through poisoning with medication or other substances or they may interfere with medical treatments. Fabricated illness is a form of physical abuse and any concerns will be reported, in line with our safeguarding procedures.

#### Female Genital mutilation (FGM)

FGM is a procedure where the female genital organs are injured or changed and there is no medical reason for this. Some ethnic groups practice this form of physical abuse as a cultural ritual. When the procedure happens is dependent on the community and it may occur shortly after birth, during childhood; during adolescence, just before marriage or during a woman's first pregnancy. The practice can cause severe pain and there may be immediate and/or long-term health consequences, including mental health problems, urinary infection, septicemia, incontinence; difficulties in childbirth, causing danger to the child and mother; and/or death.

If we have concerns about a child or family, we will contact children's social care team in the same way as other types of physical abuse. We have a mandatory duty to report to police any case where an act of female genital mutilation appears to have been carried out on a girl under the age of 18. HTTPS//www.legislation.gov.uk/ukpga/2003/31/contents

#### Breast ironing

Breast ironing also known as "breast flattening" is the process where young girls' breasts are ironed, massaged and/or pounded down through the use of hard or heated objects in order for the breasts to disappear, or delay the development of the breasts entirely. It is believed that by carrying out this act, young girls will be protected from harassment, rape, abduction and early forced marriage. Although this is unlikely to happen to children in the nursery due to their age, we will remain vigilant for the signs and symptoms in any children and families using our services and follow-up concerns following our regular safeguarding referral process.

## Child Sexual Exploitation (CSE)

Working Together to Safeguard Children (2018) defines CSE as "...a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual.

Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology."

We will be aware of the possibility of CSE and the signs and symptoms this may manifest as. If we have concerns, we will follow the same procedures as for other concerns and we will record and refer as appropriate.

#### Child Criminal Exploitation (CCE)

Child Criminal Exploitation (CCE) can be described as when an individual, or group, takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18. The victim may have been criminally exploited even if the activity appears consensual. Child Criminal Exploitation does not always involve physical contact; it can also occur through the use of technology.

#### County Lines

County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs from big cities into smaller towns, using dedicated mobile phone lines or other form of 'deal line. 'Customers will live in a different area to where the dealers and networks are based, so drug runners are needed to transport the drugs and collect payment. They are likely to exploit children and vulnerable adults to move the drugs and money, and they will often use coercion, intimidation, violence (including sexual violence) and weapons. Signs that a child may be involved in county lines could be a change in behaviour, suddenly having more money or possessions; change in friendship group, withdrawing from family life, sudden change in appearance; unexplained physical injuries, staying out late or a lack of interest in school and previous positive activities.

#### Cuckooing

Cuckooing is a form of county lines crime in which drug dealers take over the home of a vulnerable person in order to criminally exploit them as a base for drug dealing, often in multi-occupancy or social housing properties. Signs that this is happening in a family property may be an increase in people entering or leaving the property, an increase in cars or bikes outside the home; windows covered, or curtains closed for long periods, family not being seen for extended periods; signs of drug use or an increase in anti-social behaviour at the home. If we recognise any of these signs, we will report our concerns as per our reporting process.

#### Contextual safeguarding

As young people grow and develop, they may be vulnerable to abuse or exploitation from outside their family. These extra-familial threats might arise at school and other educational establishments, from within peer groups, or more widely from within the wider community and/or online.

As part of our safeguarding procedures, we will work in partnership with parents/carers and other agencies to work together to safeguard children and provide the support around contextual safeguarding concerns.

Domestic Abuse / Honour Based Violence / Forced Marriages

We look at these areas as a child protection concern. We will report any concerns to the Multi-Agency Safeguarding Hub.

Extremism – the Prevent Duty

Under the Counter-Terrorism and Security Act 2015 we have a duty to refer any concerns of extremism to the police.

Reasons for referral may include a cause for concern relating to a change in behaviour of a child or family member, single-channelled conversations with comments causing concern made to a member of the team (or other persons in the setting) or actions that lead staff to be worried about the safety of a child in their care.

We promote Fundamental British Values within our setting on a consistent basis Democracy Rule of Law Individual Liberty Mutual Respect Fundamental British Values are promoted every day within our play and activities which we deliver for our children.

#### **Online Safety**

We take the safety of our children very seriously and this includes their online safety. Please refer to the Online Safety policy for further details.

#### Human Trafficking and Slavery

These areas are a child protection concern. We will report any concerns to MASH.

#### Adult sexual exploitation

As part of our safeguarding procedures, we will also ensure that staff and students are safeguarded from sexual exploitation. We are aware that any staff, apprentices or volunteers who are under the age of 17 will be treated as a child.

#### <u>Upskirting</u>

Up skirting involves taking a picture of someone's genitals or buttocks under their clothing without them knowing, either for sexual gratification or in order to humiliate, or distress, the individual. This is a criminal offence, and any such action would be reported following our reporting procedures.

#### Child abuse linked to faith or belief (CALFB)

Child abuse linked to faith or belief can happen in families when there is a concept of belief in:

- Witchcraft and spirit possession, demons or the devil acting through children or leading them astray (traditionally seen in some Christian beliefs)
- The evil eye or djinns (traditionally known in some Islamic faith contexts) and dakini (in the Hindu context)
- Ritual or multi murders where the killing of children is believed to bring supernatural benefits, or the use of their body parts is believed to produce potent magical remedies
- Use of belief in magic or witchcraft to create fear in children to make them more compliant when they are being trafficked for domestic slavery or sexual exploitation.

This is not an exhaustive list and there will be other examples where children have been harmed when adults think that their actions have brought bad fortune.

#### Reporting Procedures

All staff have a responsibility to report safeguarding concerns and suspicions of abuse. These concerns will be discussed with our Designated Safeguarding Lead Tina Baker as a matter or priority.

Staff will report their concerns to the Manager Tina Baker in the absence of the DSL they will be reported to the Deputy DSL's Sarah Elliott

Any signs of marks/injuries to a child or information a child has given will be recorded on a childcare provider incident of concern form (located on the notice board at bottom of stairs) and stored securely in the child's file.

A chronology form (safeguarding folder) will be started if deemed appropriate.

For children who arrive at nursery with an existing injury, an incident at home form will be completed along with the parent's/ carer's explanation as to how the injury happened. Staff will have professional curiosity around any explanations given, any concerns around existing injury's will be reported to DSL Tina or DDSL. Sarah.

If appropriate, any concerns/or incidents will be discussed with the parent/carer and discussions will be recorded on the incident of concern form. Parents will have access to these records on request in line with GDPR and data protection guidelines.

# If there are queries/concerns regarding the injury/information given, then the following procedures will take place:

The designated safeguarding lead will:

- Record the information and action taken relating to the concern raised on an incident of concern form (Safeguarding folder)
- Speak to the parents (unless advised not do so by LA children's social care team) and record conversation on the cause for concern form.
- Contact the First Response Hub 01202 123334 to report concerns and seek advice immediately, or as soon as it is practical to do so. If it is believed a child is in immediate danger, we will contact the police on 999.
- If requested to do so by the First Response Hub, we will complete a Consent to make a referral to BCP Children's services Form. (Safeguarding folder)
- The designated safeguarding lead will follow up with the Local Authority children's social care team if they have not contacted the setting within 1 working day as put in the Working Together to Safeguarding Children document (2018). We will never assume that action has been taken.
- Keeping children safe is our highest priority and if, for whatever reason, staff do not feel able to report concerns to the DSL or deputy DSL they should call the Local Authority children's social care team, the Police or the NSPCC and report their concerns anonymously.

Responding to a spontaneous disclosure from a child

If a child starts to talk openly to a member of staff about abuse, they may be experiencing then staff will:

Give full attention to the child or young person

Keep body language open and encouraging

Be compassionate, be understanding and reassure them their feelings are important. Phrases such as 'you've shown such courage today'

Take time and slow down: we will respect pauses and will not interrupt the child – let them go at their own pace

Recognise and respond to their body language

Use TED (Tell Explain Describe) questions

Make it clear you are interested in what the child is telling you

Show understanding and reflect back what they have said to check your understanding – and use their language to show it is their experience

Reassure the child that they have done the right thing in telling you. Make sure they know that abuse is never their fault.

Never talk to the alleged perpetrator about the child's disclosure. This could make things a lot worse for the child.

Any disclosure will be reported to the nursery manager DSL Tina or DDSL Sarah and will be referred to the First response hub immediately, following our reporting procedures.

#### Recording Suspicions of Abuse and Disclosures

Staff should make an objective record of any observation or disclosure, supported by the nursery manager (DSL) Tina Baker or deputy designated safeguarding lead (DDSL) Sarah. This record should include:

Child's name

Child's address

Age of the child and date of birth

Date and time of the observation or the disclosure, location

Exact words spoken by the child (word for word) and non-verbal communication Exact position and type of any injuries or marks seen (body map in safeguarding folder) Exact observation of any incident including any concern was reported, with date and time; and the names of any other person present at the time

Any discussion held with the parent(s) (where deemed appropriate).

These records should be signed by the person reporting this and the manager/DSL, dated and kept in a separate confidential file. If a child starts to talk to an adult about potential abuse it is important not to promise the child complete confidentiality. This promise cannot be kept. It is vital that the child is allowed to talk openly, and disclosure is not forced, or words put into the child's mouth. As soon as possible after the disclosure details must be logged accurately. It is not the nursery's role to investigate, it is the role of statutory services to complete this.

Staff involved in a safeguarding case may be asked to supply details of any information/concerns they have with regard to a child. The nursery expects all members of staff to co-operate with the local authority children's social care, police, and Ofsted in any way necessary to ensure the safety of the children. Staff must not make any comments either publicly or in private about the supposed or actual behaviour of a parent, child, or member of staff concerning safeguarding.

#### Informing parents

Parents are normally the first point of contact. If a suspicion of abuse is recorded, parents are informed at the same time as the report is made, except where the guidance of the local authority children's social care team/police does not allow this to happen. This will usually be the case where the parent or family member is the likely abuser or where a child may be endangered by this disclosure. In these cases, the investigating officers will inform parents.

#### **Confidentiality**

All suspicions, enquiries and external investigations are kept confidential and shared only with those who need to know. Any information is shared in line with guidance from the local authority. All staff, students and volunteers are bound by confidentiality and any information will not be discussed out of work, or this will become a disciplinary matter.

The Nursery has due regard to the data protection principles as in the Data Protection Act 2018 and General Data Protection Regulations (GDPR). These do not prohibit the collection and sharing of personal information, even without consent if this would put the child at further risk. We will follow the principles around data collection and information sharing, and ensure any information is recorded and shared in an appropriate way.

#### Support to families

The nursery takes every step in its power to build up trusting and supportive relations among families, staff, students, and volunteers within the nursery.

The nursery continues to welcome the child and the family whilst enquiries are being made in relation to abuse in the home situation. Parents and families will be treated with respect in a non-judgmental manner whilst any external investigations are carried out in the best interest of the child.

#### Record Keeping

Confidential records kept on a child are shared with the child's parents or those who have parental responsibility for the child, only if appropriate and in line with guidance of the local authority with the proviso that the care and safety of the child is paramount. We will do all in our power to support and work with the child's family.

The Nursery keeps appropriate records to support the early identification of children and families that would benefit from support. Factual records are maintained in a chronological order with parental discussions. Records are reviewed regularly by the DSL to look holistically at identifying children's needs.

Allegations against adults working or volunteering with children.

If an allegation is made against a member of staff, student or volunteer or any other person who works on the nursery premises regardless of whether the allegation relates to the nursery premises or elsewhere, we will follow the procedure below.

The allegation should be reported to manager Tina Baker. If this person is the subject of the allegation, then this should be reported to owner Amanda Swift or DDSL Sarah Elliott instead.

We will follow Pan Dorset safeguarding partnership information (<u>https://pdscp.co.uk</u>) and report an allegation to the BCP LADO 01202 817600 <u>immediately</u> and we would also inform Ofsted after LADO in order for this to be investigated by the appropriate bodies promptly:

If as an individual, you feel this will not be taken seriously or are worried about the allegation getting back to the person in question then it is your duty to inform the BCP children's social care team yourself directly. First Response Hub 01202 123334

The local authority children's social care team will be informed immediately for advice and guidance

A full investigation will be carried out by the appropriate professionals (BCP children's social care team, Ofsted) to determine how this will be handled

The nursery will follow all instructions from the local authority children's social care team and Ofsted and ask all staff members to do the same and co-operate where required

Support will be provided to all those involved in an allegation throughout the external investigation in line with local authority children's social care team support and advice

The nursery reserves the right to suspend any member of staff during an investigation, Legal advice will be sought to ensure compliance with the law.

All enquiries/external investigations/interviews will be documented and kept in a locked office for access by the relevant authorities

Founded allegations will be passed on to the relevant organisations including the local authority children's social care team and where an offence is believed to have been committed, the police will also be informed.

Founded allegations will be dealt with as gross misconduct in accordance with our disciplinary procedures and may result in the termination of employment, Ofsted will be notified immediately of this decision along with notifying the Disclosure and Barring Service (DBS) to ensure their records are updated.

All safeguarding records will be kept until the person reaches normal retirement age or for 21 years and 3 months if that is longer. This will ensure accurate information is available for references and future DBS checks and avoids any unnecessary reinvestigation.

The nursery retains the right to dismiss any member of staff in connection with founded allegations following an inquiry

Unfounded allegations will result in all rights being reinstated

A return-to-work plan will be put in place for any member of staff returning to work after an allegation has been deemed unfounded. Individual support will be offered to meet the needs

of the individual staff member and the nature of the incident; this may include more frequent supervisions, coaching and mentoring and external support.

#### Monitoring children's attendance

As part of our requirements under the Statutory Framework and guidance documents we are required to monitor children's attendance patterns to ensure they are consistent and no cause for concern.

Parents should please inform the nursery prior to their children taking holidays or days off, and all incidents of sickness absence should be reported to the nursery the same day so the nursery management are able to account for a child's absence. This should not stop parents taking precious time with their children, by keeping us informed parents can help us to meet our statutory requirements and let us know that children are safe.

If a child has not arrived at nursery within two hour of their normal start time the parents will be called to ensure the child is safe and healthy. If the parents are not contactable then the emergency contacts numbers listed will be used to ensure all parties are safe. Staff will work their way down the emergency contact list until contact is established and we are made aware that all is well with the child and family. It is a parent's responsibility to keep their emergency contact details updated. This is all recorded.

Where a child is part of a child protection plan, or during a referral process, any absences will immediately be reported to the local authority children's social care team to ensure the child remains safe and well.

#### Looked after children

As part of our safeguarding practice, we will ensure our staff are aware of how to keep looked after children safe. To do this, we ask that we are informed of:

- The legal status of the child (e.g., whether the child is being looked after under voluntary arrangements with consent of parents or on an interim or full care order)
- Contact arrangements for the biological parents (or those with parental responsibility)
- The child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her
- The details of the child's social worker and any other support agencies involved
- Any child protection plan or care plan in place for the child in question.

# Staffing and volunteering

Our policy is to provide a secure and safe environment for all children. We follow safer recruitment practices including obtaining references and all staff employed to work with children will have enhanced criminal record checks from the Disclosure and Barring Service (DBS) before being able to carry out intimate care routines or be left unsupervised with children.

We will obtain enhanced criminal records checks (DBS) for volunteers in the setting. Volunteers and visitors will never have unsupervised access to children.

All staff will attend child protection training and receive initial basic child protection training during their induction period. This will include the procedures for spotting signs and behaviours of abuse and abusers/potential abusers, recording and reporting concerns and creating a safe and secure environment for the children in the nursery. During induction staff will be shown where to find contact details for the local authority children's social care team's, the local safeguarding children partnership and Ofsted to enable them to report any safeguarding concerns, independently, if they feel it necessary to do so.

Ongoing suitability of staff is monitored through:

- regular supervisions see supervision policy
- peer observations
- annual declaration of staff suitability
- safeguarding competencies
- regular review of DBS.
- Staff are encouraged to use the online update service for DBS checks

## Designated Safeguarding Lead

We have named persons within the nursery who take lead responsibility for safeguarding and co-ordinate child protection and welfare issues, known as the Designated Safeguarding Leads (DSL), there is always at least one designated person on duty during the opening hours of the setting. The designated persons will receive comprehensive training at least <u>every two years</u> and update their knowledge on an ongoing basis, but at least once a year. The nursery DSL's liaise with the local authority children's social care team, undertakes specific training, including a child protection training course, and receives regular updates to developments within this field. They in turn support the ongoing development and knowledge of the staff team with regular safeguarding updates.

The Designated Safeguarding Lead (DSL) at the nursery is Tina Baker, The Deputy DSL is Sarah Elliot.

The role of the Designated Safeguarding Lead:

The Nursery safeguards children and staff by:

- Providing adequate and appropriate staffing resources to meet the needs of all children
- Informing applicants for posts within the nursery that the positions are on approval from the Disclosure and Barring Service Candidates are informed of the need to carry out DBS checks before posts can be confirmed. Where applications are rejected because of information that has been disclosed, applicants have the right to know and to challenge incorrect information.
- Giving staff members, volunteers and students regular opportunities during supervisions and having an open-door policy to declare changes that may affect their suitability to care for the children. This includes information about their health, medication or about changes in their home life such as child protection plans for their own children.
- Requesting DBS checks on a three-year basis/or we use the DBS update service (with staff consent) to re-check staff's criminal history and suitability to work with children at regular intervals
- Abiding by the requirements of the EYFS and any Ofsted guidance in respect to
  obtaining references and suitability checks for staff, students and volunteers, to ensure
  that all staff, students and volunteers working in the setting are suitable to do so
- Ensuring we receive at least two written references before a new member of staff commences employment with us (see safer recruitment policy)
- Ensuring all students will have enhanced DBS checks completed before their placement starts
- Volunteers/ students do not carry out any intimate care routines and are never left to work unsupervised with children. (students may be trained in nappy changing and this will be done with under strict supervision by a room leader)
- Abiding by the requirements of the Safeguarding Vulnerable Groups Act 2006 and the Childcare Act 2006 (amended 2018) in respect of any person who is dismissed from our employment, or resigns in circumstances that would otherwise have led to dismissal for reasons of child protection concern will be reported to the Disclosure and Barring Services (DBS)

- Having procedures for recording the details of visitors to the nursery and take security steps to ensure that that no unauthorised person has unsupervised access to the children
- Ensuring all visitors/contractors are supervised whilst on the premises, especially when in the areas the children use
- Staying vigilant to safeguard the whole nursery environment and be aware of potential dangers on the nursery boundaries such as drones or strangers lingering.
- Having a Staff Behaviour Policy in the contract sits alongside this policy to enable us to monitor changes in behaviours that may cause concern. All staff sign up to this policy/contract to ensure any changes are reported to management, so we are able to support the individual staff member and ensure the safety and care of the children is not compromised
- Ensuring that staff are aware not to contact parents/carers and children through social media on their own personal social media accounts and they will report any such incidents to the management team to deal with
- Ensuring that all staff have access to, and comply with, the whistleblowing policy which provides information on how they can share any concerns that may arise about their colleagues in an appropriate manner. We encourage a culture of openness and transparency, and all concerns are taken seriously
- Ensuring all staff are aware of the signs to look for of inappropriate staff behaviour, this
  may include inappropriate sexual comments; excessive one-to-one attention beyond the
  requirements of their usual role and responsibilities; or inappropriate sharing of images.
  This is not an exhaustive list, any changes in behaviour must be reported and acted
  upon immediately.
- Ensuring all staff will receive regular supervision meetings (see supervision policy) where opportunities will be made available to discuss any issues relating to individual children, child protection training, safeguarding concerns and any needs for further support or training
- Having peer on peer and manager observations in the setting to ensure that the care we provide for children is at the highest level and any areas for staff development are quickly identified. Peer observations allow us to share constructive feedback, develop practice and build trust so that staff are able to share any concerns they may have. Concerns are raised with the designated lead and dealt with in an appropriate and timely manner
- Ensuring the deployment of staff within the nursery allows for constant supervision and support. We have a lone working policy.
- We also operate a Phones and Other Electronic Devices and Social Media policy which states how we will keep children safe from these devices whilst at nursery. This also links to our Online Safety policy.

Our nursery has a clear commitment to protecting children and promoting welfare. Should anyone believe that this policy is not being upheld, it is their duty to report the matter to the attention of the nursery manager/owner/DSL/registered person at the earliest opportunity.

## Early help services

When a child and/or family would benefit from support but do not meet the threshold for Local Authority Social Care Team, a discussion will take place with the family around early help services. Early help provides support as soon as a concern/area of need emerges, helping to improve outcomes and prevent escalation onto local authority services. Sometimes concerns about a child may not be of a safeguarding nature and relate more to their individual family circumstances. The nursery will work in partnership with parents/carers to identify any early help services that would benefit your child or your individual circumstances, with your consent, this may include family support, food-bank support, counselling, or parenting services.

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Author	
Reviewer	
Date	
Approved by	
Next review date	

## SICKNESS ILLNESS AND MEDICATION POLICY

At Annabel's Nursery we promote the good health of all children attending including oral health by:

- Asking parents to keep children at home if they are unwell. If a child is unwell it is in their best interest to be in a home environment rather than at nursery with their peers.
- Asking staff and other visitors not to attend the setting if they are unwell
- Helping children to keep healthy by providing balanced and nutritious snacks, meals and drinks
- Minimising infection through our rigorous cleaning and hand washing processes (see infection control policy) Ensuring children have regular access to the outdoors and having good ventilation inside
- Sharing information with parents about the importance of the vaccination programme for young children to help protect them and the wider society from communicable diseases
- Having areas for rest and sleep, where required and sharing information about the importance of sleep and how many hours young children should be having.

## Procedures

In order to take appropriate action of children who become ill and to minimise the spread of infection we implement the following procedures:

- If a child becomes ill during the nursery day, we contact their parent(s) and ask them to pick up their child as soon as possible. During this time we care for the child in a quiet, calm area with their key person (wearing PPE), wherever possible
- We follow the guidance published by Public Health England (Health Protection in Schools and other childcare facilities) and advice from our local health protection unit on exclusion times for specific illnesses, e.g. sickness and diarrhoea, measles and chicken pox, to protect other children in the nursery
- Should a child have an infectious disease, such as sickness and diarrhoea, they must not return to nursery until they have been clear for at least 48 hours
- We inform all parents if there is a contagious infection identified in the nursery, to enable them to spot the early signs of this illness. We thoroughly clean and sterilise all equipment and resources that may have come into contact with a contagious child to reduce the spread of infection
- We notify Ofsted as soon as is reasonably practical, but in any event within 14 days of the incident of any food poisoning affecting two or more children cared for on the premises.
- We ask parents to keep children on antibiotics at home for the first 48 hours of the course (unless this is part of an ongoing care plan to treat individual medical conditions e.g. asthma and the child is not unwell) This is because it is important that children are not subjected to the rigours of the nursery day, which requires socialising with other children and being part of a group setting, when they have first become ill and require a course of antibiotics
- We have the right to refuse admission to a child who is unwell. This decision will be taken by the manager on duty and is non-negotiable
- We make information/posters about head lice readily available and all parents are requested to regularly check their children's hair. If a parent finds that their child has head lice we would be grateful if they could inform the nursery so that other parents can be alerted to check their child's hair.

Meningitis procedure

If a parent informs the nursery that their child has meningitis, the nursery manager will contact the Local Area Infection Control (IC) Nurse. The IC Nurse will give guidance and support in each individual case. If parents do not inform the nursery, we may be contacted directly by the IC Nurse and the appropriate support given. We will follow all guidance given and notify any of the appropriate authorities including Ofsted where necessary.

We will follow the transporting children to hospital procedure in any cases where children may need hospital treatment.

The nursery manager/staff member must:

- Inform a member of the management team immediately
- Call 999 for an ambulance immediately if the illness is severe. DO NOT attempt to transport the unwell child in your own vehicle
- Follow the instructions from the 999 call handler
- Whilst waiting for the ambulance, a member of staff must contact the parent(s) and arrange to meet them at the hospital
- Redeploy staff if necessary to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together
- Arrange for the most appropriate member of staff to accompany the child taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Remain calm at all times. Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the accident.

\*If a child has an accident that may require hospital treatment but not an ambulance and you choose to transport children within staff vehicles Citation advice is to consider the following in your policy:

- Requesting permission from parents
- Ratio requirements of the setting being maintained
- The age and height of the child, in regards to will they need a car seat? Further guidance can be found at www.childcarseats.org.uk/types-of-seat/
- There are some exceptions for needing a child seat depending again on their age. Further guidance can be found at www.childcarseats.org.uk/the-law/cars-taxis-privatehire-vehicles-vans-and-goods-vehicles/#under-three
- With the fitting of the car seat, we also need to ask has the individual had training in carrying in carrying this out
- Is this transport covered under business insurance, so a call to your insurance company will be needed, or do they have business insurance on their vehicle?
- Safeguarding of the child needs to be looked at. In certain situations, e.g. a designated member of staff should be appointed to plan and provide oversight of all transporting arrangements and respond to any difficulties that may arise. Wherever possible and practicable it is advisable that transport is undertaken other than in private vehicles, with at least one adult additional to the driver acting as an escort. Staff should ensure that the transport arrangements and the vehicle meet all legal requirements. They should ensure that the vehicle is roadworthy and appropriately insured and that the maximum capacity is not exceeded
- Emergency procedures, e.g. what happens if the child's health begins to deteriorate during the journey.

This policy will be reviewed at least annually in consultation with staff and parents and/or after a significant incident, e.g. serious illness/hospital visit required.

We follow strict guidelines when dealing with medication of any kind in the nursery and these are set out below.

Medication prescribed by a doctor, dentist, nurse or pharmacist

(Medicines containing aspirin will only be given if prescribed by a doctor)

Prescription medicine will only be given when prescribed by the above and for the person named on the bottle for the dosage stated

Medicines must be in their original containers with their instructions printed in English Those with parental responsibility for any child requiring prescription medication should hand over the medication to the most appropriate member of staff who will then note the details of the administration on the appropriate form and another member of staff will check these details

Those with parental responsibility must give prior written permission for the administration of each and every medication. However, we will accept written permission once for a whole course of medication or for the ongoing use of a particular medication under the following circumstances:

- The written permission is only acceptable for that brand name of medication and cannot be used for similar types of medication, e.g. if the course of antibiotics changes, a new form will need to be completed
- The dosage on the written permission is the only dosage that will be administered. We will not give a different dose unless a new form is completed
- Parents must notify us IMMEDIATELY if the child's circumstances change, e.g. a dose has been given at home, or a change in strength/dose needs to be given.
- The nursery will not administer a dosage that exceeds the recommended dose on the instructions unless accompanied by written instructions from a relevant health professional such as a letter from a doctor or dentist
- The parent must be asked when the child has last been given the medication before coming to nursery; and the staff member must record this information on the medication form. Similarly, when the child is picked up, the parent or guardian must be given precise details of the times and dosage given throughout the day. The parent's signature must be obtained at both times
- At the time of administering the medicine, a senior member of staff will ask the child to take the medicine, or offer it in a manner acceptable to the child at the prescribed time and in the prescribed form. (It is important to note that staff working with children are not legally obliged to administer medication)
- If the child refuses to take the appropriate medication, then a note will be made on the form
- Where medication is "essential" or may have side effects, discussion with the parent will take place to establish the appropriate response.

Non-prescription medication (these will not usually be administrated)

- The nursery will not administer any non-prescription medication containing aspirin
- The nursery will only administer non-prescription medication for a short initial period, dependant on the medication or the condition of the child. After this time medical attention should be sought
- If the nursery feels the child would benefit from medical attention rather than nonprescription medication, we reserve the right to refuse nursery care until the child is seen by a medical practitioner

- If a child needs liquid paracetamol or similar medication during their time at nursery, such medication will be treated as prescription medication with the \*onus being on the parent to provide the medicine/\*nursery providing one specific type of medication should parents wish to use this
- On registration, parents will be asked if they would like to fill out a medication form to consent to their child being given a specific type of liquid paracetamol or anti-histamine in particular circumstances such as an increase in the child's temperature or a wasp or bee sting. This form will state the dose to be given, the circumstances in which this can be given e.g. the temperature increase of their child, the specific brand name or type of non-prescription medication and a signed statement to say that this may be administered in an emergency if the nursery CANNOT contact the parent
- An emergency nursery supply of fever relief (e.g. Calpol) and anti-histamines (e.g. Piriton) will be stored on site. This will be checked at regular intervals by the designated trained first aider to make sure that it complies with any instructions for storage and is still in date
- If a child does exhibit the symptoms for which consent has been given to give nonprescription medication during the day, the nursery will make every attempt to contact the child's parents. Where parents cannot be contacted then the nursery manager will take the decision as to whether the child is safe to have this medication based on the time the child has been in the nursery, the circumstances surrounding the need for this medication and the medical history of the child on their registration form.
- Giving non-prescription medication will be a last resort and the nursery staff will use other methods first to try and alleviate the symptoms (where appropriate). The child will be closely monitored until the parents collect the child
- For any non-prescription cream for skin conditions e.g. Sudocrem, prior written permission must be obtained from the parent and the onus is on the parent to provide the cream which should be clearly labelled with the child's name
- If any child is brought to the nursery in a condition in which he/she may require medication sometime during the day, the manager will decide if the child is fit to be left at the nursery. If the child is staying, the parent must be asked if any kind of medication has already been given, at what time and in what dosage and this must be stated on the medication form
- As with any kind of medication, staff will ensure that the parent is informed of any nonprescription medicines given to the child whilst at the nursery, together with the times and dosage given
- The nursery DOES NOT administer any medication unless prior written consent is given for each and every medicine.

## Injections, pessaries, suppositories

As the administration of injections, pessaries and suppositories represents intrusive nursing, we will not administer these without appropriate medical training for every member of staff caring for this child. This training is specific for every child and not generic. The nursery will do all it can to make any reasonable adjustments including working with parents and other professionals to arrange for appropriate health officials to train staff in administering the medication.

## Staff medication

All nursery staff have a responsibility to work with children only where they are fit to do so. Staff must not work with children where they are infectious or feel unwell and cannot meet children's needs. This includes circumstances where any medication taken affects their ability to care for children, for example, where it makes a person drowsy.

If any staff member believes that their condition, including any condition caused by taking medication, is affecting their ability to care for children they must inform the manager and seek medical advice. \*The nursery manager/registered provider will decide if a staff member is fit to work, including circumstances where other staff members notice changes in behaviour suggesting a person may be under the influence of medication. This decision will include any medical advice obtained by the individual or from an occupational health assessment.

Where staff may occasionally or regularly need medication, any such medication must be kept in the person's locker/separate locked container in the staff room or nursery room where staff may need easy access to the medication such as an asthma inhaler. In all cases it must be stored securely out of reach of the children, at all times. It must not be kept in the first aid box and should be labelled with the name of the member of staff.

#### Storage

All medication for children must have the child's name clearly written on the original container and kept in a closed box, which is out of reach of all children.

Emergency medication, such as inhalers and EpiPens, will be within easy reach of staff in case of an immediate need, but will remain out of children's reach. Any antibiotics requiring refrigeration must be kept in a fridge inaccessible to children.

All medications must be in their original containers, labels must be legible and not tampered with or they will not be given. All prescription medications should have the pharmacist's details and notes attached to show the dosage needed and the date the prescription was issued. This will all be checked, along with expiry dates, before staff agree to administer medication.

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## SOCIAL NETWORKING POLICY

This policy has been written for Annabel's Nursery to ensure staff, parents and children are protected when using social media. Social media is fast becoming a large part of our lives both personally and professionally and we want to ensure it is used correctly and safely. We may use Facebook to share the children's experiences with their parents and the wider community, as well as

advertising to prospective parents.

Social media can also be used for advertising jobs when looking for new staff members. For this reason, we must ensure a Social Networking Procedure is in place to do this safely online.

## PROCEDURE

At Annabel's Nursery we want to keep the parents, children and staff safe when using social media by:

- Making sure we gain parental consent for the use of social media and sharing photos of their children when they first start at the setting.
- Only staff members are allowed to post on the setting's social media pages.
- All comments will be monitored by staff to ensure nothing offensive is written. Anything that we consider to be unacceptable will be removed.
- All staff must be aware that no confidential information about the setting or the children is to be shared on social media. This includes any information in comments.
- Staff must not friend request parents of the children in the setting (unless the friendship was already made before the child started).
- We will ensure that there is no promoting of any forms of hate or discrimination, anywhere on social media.
- To report any concerns to the DSL, about what parents have been commenting or posting on social media.
- If any of the above points are not followed then the member of staff involved will face disciplinary action, which could result in dismissal.

Any communication between parents should be professional and done through the correct platforms and not through social media, an example of this would be speaking to the Key Person at the beginning or end of the day or ringing the setting phone.

All of the parents are also aware of our Social Networking Policy and have been informed that they are not to post information about any child other than their own on social media. All of this is to ensure that the children are protected and their information is kept safe.

Policy Title	
Author	
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## STAFF BEHAVIOUR POLICY

At Annabel's Nursery we take the safety and welfare of our children and staff seriously. This policy ensures staff behave in an appropriate manner to act as a role model for and protect all children in their care. Within this policy we will also ensure that any changes to staff behaviours or ways of working are closely monitored, discussed and supported to ensure all children are safeguarded throughout their time here.

# Expected staff behaviour

Within our nursery we expect our staff to:

- Put our children first, their safety, welfare and ongoing development is the most important part of their role
- Behave as a positive role model for the children in their care by always remaining professional and demonstrating caring attitudes to all
- Work as part of the wider team, cohesively and openly
- Be aware of their requirements under the Statutory Framework for the EYFS and the nursery policies and procedures designed to keep children safe from harm whilst teaching children and supporting their early development
- React appropriately to any safeguarding concerns quickly and concisely in accordance to the nursery / safeguarding partners and training received
- Not share any confidential information relating to the children, nursery or families using the nursery
- Maintain the public image of the nursery and do nothing that will put the setting into disrepute
- Ensure that parental relationships are professional and external social relationships are not forged. If a relationship exists prior to the child starting at the setting, discussions with management will be held to ensure the relationship remains professional.
- Adhere to the Mobile Phone and Other Electronic Device policy and Social Networking
   policy
- Report to management immediately any changes in their personal life that may impact on the ability to continue the role. These may include (but not limited to) changes in police record, medication, any social service involvement with their own children.

## Monitoring staff behaviour

Within the nursery we:

- Conduct regular peer observations using all staff and management, during which we observe interactions between staff and children
- Have regular supervisions with all staff in which ongoing suitability is monitored and recorded
- Have a whistleblowing policy that enables team members to discuss confidentially any concerns about their colleagues
- Operate staff suitability forms and clauses in staff contracts to ensure any changes to their suitability to work with children are reported immediately to management
- Ensure all new staff members are deemed suitable with the appropriate checks as detailed in the safeguarding policy.

Some behaviours that may cause concern and will be investigated further include:

- Change in moods
- Sudden change in religious beliefs / cultural beliefs (may be a sign of radicalisation)

- Changes in the way they act towards the children or the other members of the team (becoming more friendly and close, isolation, avoidance, agitation etc.)
- Sudden outbursts
- Becoming withdrawn
- Secretive behaviours
- Missing shifts, calling in sick more often, coming in late
- Standards in work slipping
- Extreme changes in appearance.

## Procedures to be followed:

If we have a concern about changes in staff behaviour within the nursery, an immediate meeting will be called with the individual and a member of management to ascertain how the person is feeling. We will aim to support the staff wherever possible and will put support mechanisms in place where appropriate.

Ultimately we are here to ensure all staff are able to continue to work with the children as long as they are suitable to do so, but if any behaviours cause concern about the safety or welfare of the children then the safeguarding/child protection procedure will be followed as in the case of allegations against a team member and the Local Authority Designated officer (LADO) will be called.

All conversations, observations and notes on the staff member will be logged and kept confidential.

Policy Title	
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## STAFF SUPERVISION POLICY

At Annabel's Nursery we implement a system of supervision for all of our staff following their induction and probation period. Supervision is part of the nursery's overall performance management system and promotes a culture of mutual support, teamwork and continuous improvement. It encourages the confidential discussion of sensitive issues including the opportunity for staff and their managers to:

- Discuss any issues particularly concerning children's development or well-being, including child protection concerns
- Identify solutions to address issues as they arise
- Receive coaching to improve their personal effectiveness
- Develop their own skills/training needs in order to progress in their role
- Discuss any concerns relating to changes in personal circumstances that might affect an
  individual's ability/suitability to work with children. (This should include any incidents
  resulting in a reprimand, caution or prosecution by the police, any court orders or
  changes to their health. These changes are recorded as a declaration on the individual
  member of staff's supervision form and appropriate action is taken, where applicable, in
  line with the safeguarding/child protection and disciplinary procedure).

The frequency of supervision meetings is bimonthly according to individual needs.

There should always be something that a member of staff can discuss, e.g. a particular child's development, strengths or concerns. However, if there are times where staff may be struggling to identify areas to discuss in a supervision we will ask them to identify three things they have enjoyed about their job/done well since the last supervision and one thing they have least enjoyed/requires further improvement. They will be asked to complete this prior to supervision (as set out in their responsibilities).

There may be times when supervision may be increased for members of the team as and when needed, i.e. if they have concerns about a child or if they are going through personal circumstances at home, for new starters, staff returning after long-term illness, on request from staff.

It is the responsibility of the manager to plan time to ensure that all staff have supervisions.

At Annabel's nursery supervision is carried out by the Nursery Manager. If for any reason a supervision is cancelled a new date will be rearranged within 7 days.

All members of staff responsible for carrying out supervisions are trained and supported prior to carrying these out.

Staff have a responsibility to ensure that they are available for supervision meetings and that the necessary paperwork is complete. Information shared in supervision sessions is confidential. The supervision process will be evaluated once/twice a year through staff feedback and is used as part of the overall performance monitoring system at the nursery.

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### SUN CARE POLICY

This policy has been written for Annabel's Nursery to ensure the safety of the children when out in the sun. We understand that some exposure to UV light from the sunlight is important for children's health and helps them to gain vitamin D. However too much exposure to the sun can lead to very damaging effects including sun burn, sun stroke and skin cancer.

To ensure the safety of our children when out in the sun we will follow the guidance provided by the weather reports on a daily bases as well as our own sun safety procedure. When the days are starting to get brighter and sunnier, it is the responsibility of the setting to contact parents and inform them that they must bring in a hat and sun cream for their child along with written consent for the practitioner to apply the sun cream to the child. The staff must educate the parents in sun safety and share with them guidance from the NHS.

### PROCEDURE

- Each day the Manager/Deputy will check the weather forecast for the UV index.
- A sun safety risk assessment must be carried out.
- All children will be required to bring in a sun hat to wear at all times when out in sunny weather.
- Parents will be asked to put sun cream on their children before they arrive at the setting.
- A bottle of sun cream with the child's name on will be kept in the tray. The team will reapply the sun cream throughout the day.
- The staff must check the dates on the children's sun cream and if they are out of date they must inform the parents and request a new bottle.
- A nursery sun cream will be kept in the tray in case any parent forgets to pack their child's sun cream.
- Sufficient shade will be available for children play in when outside.
- Water will be available to the children all day.
- Children will be encouraged to drink more water on hot and sunny days.
- If the UV is too high at certain points of the day the manager will make the decision to keep the children inside.
- If a child becomes sun burnt or has symptoms of sun stroke the staff must call the parents immediately to inform them and follow the guidelines from the NHS website and administer first aid if necessary.

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## USE OF IMAGES AND PHOTOGRAPHIC POLICY

At Annabel's Nursery we have clear policy which outlines the safety guidelines for the use of photography and mobile phones within the setting

The use of images can be divided into three categories:

- Images taken by the setting i.e. observations
- Images taken by parents at setting events
- Images taken by third parties

Staff or volunteers must not use personal technological devices (including mobile phones and cameras) to take images of children that attend the setting. The setting must consider the appropriate use of staff and volunteer technological devices and should have a clear policy which outlines the agreed protocol.

The General Data Protection Regulation (GDPR) and the Data Protection Act 2018 affect the use of photography. An image of a child is personal data and it is, therefore, a requirement that consent is obtained from the parent/carer of a child for any images made such as those used for setting websites, observations, outings and events or other purposes.

It is also important to take into account the wishes of the child, remembering that some children do not wish to have their photograph taken.

A signed consent form should be obtained from the child's parent/carer, and should be kept on the child's file, covering all cases where images of children are to be used. We will annually review 'consent' to ensure that parents and young people, who have previously given consent, have the right to opt out if they no longer want to be included.

Where parents/carers have refused permission for their child/young person to be photographed or have not returned a completed and signed consent form, the child's image must not be recorded.

Where a parent/carer has given consent but a child or young person declines to have an image taken, it should be treated as consent not having been given and other arrangements should be made to ensure that the child/young person is not photographed/filmed. Care should be taken in relation to particularly vulnerable children such as Looked After Children, recently adopted or those who have fled domestic violence/abuse.

## Examples:

A photograph of child is taken as part of their Learning journey. The images are likely to be stored electronically with other personal data and the terms of the GDPR and Data Protection Act will apply.

A small group of children are photographed during an outing and the photo is to be used in the setting newsletter. This will be personal data but will not breach the GDPR and Data Protection Act as long as the children and/or their parents/carers are aware this is happening and the context in which the photo will be used.

Parents wishing to take images of setting events

The GDPR and Data Protection Act 2018 do not prevent parents from taking images at setting events, but these must be for their own personal use. Any other use would require the consent of the parents of other children in the image

## Examples:

A parent takes a photograph of their child and some friends taking part a sponsored fun walk to be put in the family photo album. These images are for personal use and the GDPR and Data Protection Act 2018 do not apply.

Grandparents are invited to the setting nativity play and wish to video it. These images are for personal use and the GDPR and Data Protection Act 2018 do not apply. However, if they

intend to use the video on a social networking site e.g. Instagram, Twitter, they must receive permission from the parents of all the other children involved.

The nursery manager in consultation with the employer must decide when parents are to be permitted to take images. This information must be given to parents.

It is recommended that wherever possible settings take their own 'official' photos or videos, in order to retain control over the images produced.

## Third parties

Staff should challenge anyone who is using a camera, mobile phone or video recorder at the setting whom they do not recognise.

Images taken by the press

If a child is photographed by a newspaper, the photo becomes the property of the newspaper and the newspaper has the final say as to how it is used. (N.B. images can be placed by editors on the newspaper's website). Generally, newspaper photos of groups of 12 or more children do not have the names of the children attached. Photos of smaller groups might include the full name of the child in the accompanying caption; however, the setting/parents are not obliged to provide children's names and it is recommended that they do not do so.

## Example:

A photograph is taken by a local newspaper of a setting event. As long as the setting has agreed to this, and the children and/or their guardians are aware that photographs of those attending the event may appear in the newspaper and given permission, this will not breach the GDPR and Data Protection Act 2018.

Storage of images

The setting has a duty of care to safeguard images so that they cannot be used inappropriately, or outside the agreed terms under which consent has been obtained. Images can be stored digitally, on videotape, in prints or negatives, or electronically, provided the storage is secure.

Images must be maintained securely for authorised setting use only, and disposed of either by return to the child, parents, or by shredding.

## Transfer of images

There is a risk, however small, that images may be lost while in the process of being transferred by either traditional or electronic methods. Therefore, there is the risk that an individual who would use them inappropriately may obtain the images. This risk should be explained to parents and carers.

Publishing or displaying photographs or other images of children

The Department for Education advises that if the photograph is used, avoid naming the child. Whatever the purpose of displaying or publishing images of children care should always be taken to avoid the possibility that people outside the setting could identify and then attempt to contact children directly.

Where possible, general shots of group activities rather than close up pictures of individual children should be used

Children should be in suitable dress

An article could be illustrated by the children's work as an alternative to using an image of the child

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## WHISTLEBLOWING POLICY

Employees are often the first to realise that there may be something wrong within their setting.

However, they may not express their concerns because they feel that speaking up would be disloyal to their colleagues. They may also fear harassment or victimisation as a result of speaking up. In these circumstances, it may be easier to ignore the concern rather than report

what may be just suspicion of malpractice and wrongdoing at work.

At Annabel's Nursery we are committed to the highest possible standard of openness. We encourage employees and others with genuine concerns about any person linked with the setting and/or others (e.g. Parents/Carers) to come forward and voice those concerns. This policy document makes it clear that Employees, Parents/Carers and others can voice ANY concern without fear of reprisals.

The Whistleblowing Policy is intended to encourage and enable employees and others to raise

such concerns should they occur at (insert setting name here) rather than overlooking the problem. Any concerns should be taken to the DSL and discussed.

We will follow all legal framework for guidance when it comes to 'whistleblowing'. The Public Interest Disclosure Act 1998, commonly known as the 'Whistleblowing Act'. This act gives employees who raise concerns protection from any backlash.

### How to raise a concern

Where at all possible concerns should normally be raised with the manager, this is dependent upon, the seriousness and sensitivity of the issues involved and who is suspected of any wrong doing.

Staff can raise concerns with any individual within the management team of the setting. If the concern is about any of the management team then they need to contact Ofsted using the contact numbers at the bottom of this document. If the concern is regarding a member of staff and safeguarding you need to report this to your Designated Safeguarding Lead who will contact LADO (Local Authority Designated Officer).

If the concern is about the DSL you must notify LADO immediately.

Concerns should preferably be expressed in writing stating the history of the concern, names involved, dates and places and any other information that is relevant to the concerns they wish to be investigated: the more details that are provided will allow the investigation to be completed in more detail and as promptly as reasonably possible. Although a member of staff is not expected to prove beyond doubt the truth of the allegation, they will need to demonstrate that they have an honest and reasonable suspicion that malpractice has occurred, is occurring or is likely to occur.

## Procedure/investigation

The action taken will depend on the nature of the concern. The appropriate person/s will investigate the concerns thoroughly, ensuring that a written response can be provided within five working days. The response should include details of how the matter was investigated, conclusions drawn from the investigation, and whom to contact should the individual raising the complaint be unhappy with the response and wish to raise the matter. If the investigation cannot be completed within the timescale above, the individual raising the complaint should receive a response that indicates:

- progress to date.
- how the matter is being dealt with.

• how long it will take to provide a final response.

In order to protect individuals, initial enquiries (usually involving a meeting with the individual raising the concern), will be made to decide whether an investigation is appropriate and, if so, what form it should take. Concerns or allegations that raise issues that fall within the scope of other policies/procedures, will be addressed under those procedures. Some concerns may be resolved at this initial stage simply, by agreed action or an explanation regarding the concern, without the need for further investigation.

If you do not feel that the complaint has been dealt with effectively or you still have concerns, you have a right to refer your concerns to Ofsted – see number below.

#### **Confidentiality**

At Annabel's Nursery we will do our best to protect your identity when you raise a concern. However, it must be appreciated that, in the interests of adhering to our safeguarding policies, the investigation process may reveal the source of the information and a statement by you may be required as part of the evidence.

#### Anonymous allegations

You are strongly encouraged to put your name to any allegation you are raising: concerns expressed anonymously are much less powerful. Anonymous allegations will be considered and any action taken at the discretion of Annabel's Nursery and in conjunction with the relevant agencies where appropriate. Keeping in line with this discretion, the following factors will be taken into account when considering how to deal with any allegations:

- The seriousness of the issues raised
- The credibility of the allegation
- The likelihood of confirming the allegation from attributable sources.

#### Untrue allegations

At Annabel's Nursery we accept that deciding to report a concern can be very difficult and uncomfortable. If a member of staff makes an allegation in good faith, but it is not confirmed by the investigation, no action will be taken against him/her. If, however, a member of staff makes an allegation frivolously, maliciously or for personal gain, disciplinary action may be taken against them.

#### How the matter can be taken further

If the complaint has not been dealt with in a manner which is satisfactory to yourself, Parent/ Carer or others involved, then they can contact OFSTED directly at the following address. Ofsted Piccadilly Gate Store Street Manchester M1 2WD E-mail: enquiries@ofsted.gov.uk Telephone: General helpline - 0300 123 1231

Further information regarding whistleblowing can be found on the NSPCC whistleblowing website, their contact number is 0800 028 0285 and e-mail is <u>help@nspcc.org.uk</u>

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