

1.0 Child Protection

1.1 Children's rights and entitlements

Policy Statement

- We promote children's right to be strong, resilient and listened to by creating an environment in our setting that encourages children to develop a positive self image, which includes their heritage arising from their colour and ethnicity their languages spoken at home, their religious beliefs, cultural traditions and home background.
- We promote children's right to be strong, resilient and listened to by encouraging children to develop a sense of autonomy and independence.
- We promote children's right to be strong, resilient and listened to by enabling children to have the self-confidence and the vocabulary to resist inappropriate approaches.
- We help children to establish and sustain satisfying relationships within their families, with peers, and with other adults.
- We work with parents to build their understanding of, and commitment to, the principles of safeguarding all our children.

1.2 Safeguarding children and child protection (including managing allegations of abuse against a member of staff)

Policy Statement

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

Procedures

Staff and volunteers

- Our designated person (a member of staff) who co-ordinates child protection issues is:

Susan Farber or Kath O'Shea (deputy)
- We ensure all staff are trained to understand our safeguarding policies and procedures and parents are made aware of them too.
- All staff have an up to date knowledge of safeguarding issues.
- We provide adequate and appropriate staffing resources to set the needs of children.
- Applicants for posts within the provision are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974.
- Candidates are informed of the need to carry out "enhanced disclosure" checks with the Disclosure & Barring Service (DBS) before posts can be confirmed.
- Where applications are rejected because of information that has been disclosed, applicants have the right to know and to challenge incorrect information. We abide by Ofsted requirements in respect of references and DBS checks for staff and volunteers, to ensure that no disqualified person or unsuitable person works at the provision or has access to the children.
- We record information about staff qualifications, and the identity checks and vetting processes that have been completed including:
 - the DBS reference number;
 - the date the disclosure was obtained; and
 - details of who obtained it.
- We inform all staff that they are expected to disclose any convictions, cautions, court orders or reprimands and warnings which may affect their suitability to work with children (whether received before or during their employment with us).
- Volunteers do not work unsupervised.
- We abide by the Safeguarding Vulnerable Groups Act (2006) requirements 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.
- We have procedures for recording the details of visitors to the setting.

- We take security steps to ensure that we have control over who comes into the provision so that no unauthorised person has unsupervised access to the children.
- We take steps to ensure children are not photographed or filmed on video for any other purpose than to record their development or their participation in events organised by us. Parents sign a consent form and have access to records holding visual images of their child.

Responding to suspicions of abuse

- We acknowledge that abuse of children can take different forms - physical, emotional, and sexual as well as neglect.
- When children are suffering from physical, sexual or emotional abuse, or may be experiencing neglect, this may be demonstrated through:
 - significant changes in their behaviour;
 - deterioration in their general well being;
 - their comments which may give cause for concern, or the things they say (direct or indirect disclosure);
 - changes in their appearance, their behaviour, or their play;
 - unexplained bruising, marks or signs of possible abuse or neglect; and
 - any reason to suspect neglect or abuse outside the setting.
- We take into account factors affecting parental capacity, such as social exclusion, domestic violence, parent's drug or alcohol abuse, mental or physical illness or parent's learning disability.
- We are aware of other factors that affect children's vulnerability such as abuse of disabled children, fabricated or induced illness, child abuse linked to beliefs in spirit possessions, sexual exploitation of children such as through internet abuse and Female Genital Mutilation that may affect or may have affected children and young people using our provision.
- We also make ourselves aware that some children and young people are affected by gang activity by complex or organised abuse, through forced marriage or honour based violence or may be victims of child trafficking. While this may be less likely to affect young children in our care we may become aware of any of these factors affecting older children and young people who we may come into contact with.
- Where we believe a child in our care or known to us may be affected by any of these factors we follow the procedure for reporting child protection concerns.
- Where such evidence is apparent, the child's key person makes a dated record of the details of the concern and discusses what to do with member of staff who is acting as the "designated person". The information is stored in a secure file for safeguarding.
- We refer concerns to the Barnet's Multi Agency Safeguarding Hub (Mash) and co-operate fully in any subsequent investigation.
- We take care not to influence the outcome either through the way we speak to children or by asking questions of children.
- We take account of the need to protect young people as defined by the Children Act 1989. This may include students or school children on work placement, young employee or young parents. Where abuse is suspected we follow the procedure for reporting any other child protection concerns. The views of the young person

will always be taken into account, but the setting may override the young person's refusal to consent to share information if it feels that it is necessary to prevent a crime from being committed or intervene where one may have been or to prevent harm to a child or adult. Sharing confidential information without consent is done only where not sharing it could be worse than the outcome of having shared it.

Recording suspicions of abuse and disclosures

- Where a child makes comments to a member of staff that gives cause for concern (disclosure), observes signs or signals that gives cause for concern, such as significant changes in behaviour, deterioration in general well-being; unexplained bruising, marks or signs of possible abuse or neglect, that member of staff;
 - listens to the child, offers reassurance and gives assurance that she or he will take action;
 - does not question the child;
 - makes a written record that forms an objective record of the observation or disclosure that includes:
 - the date and time of the observation or the disclosure;
 - the exact words spoken by the child as far as possible;
 - the name of the person to whom the concern was reported, with date and time; and
 - the names of any other person present at the time.
- These records are signed and dated and kept in the child's personal file which is kept securely and confidentially.
- The manager acting as the Designated Person is informed of the issue at the earliest opportunity
- Where the Local Safeguarding Children Board stipulates the process for recording and sharing concerns, we include those procedures alongside this procedure and follow the steps set down by the Local Safeguarding Children Board.

Making a referral to the local authority Multi Agency Safeguarding Hub (MASH)

- We follow the local authority (MASH) procedures for making a referral.
- All information available on the Barnet website or mash@barnet.gov.uk
- We keep a copy of this document alongside procedures.

Informing Parents

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

- This will usually be the case where the parent is the likely abuser. In these cases the social workers will inform the parents.

Liaison with other agencies

- We refer to working together to safeguard children Mar. 2015
- We have the current version of “What to do if you’re worried a child is being abused” for parents and staff and all staff are familiar with what to do if they have concerns.
- We have procedures for contacting MASH, including maintaining a list of names, addresses and telephone numbers, to ensure that we are able to contact the relevant professional .
- We notify the registration authority (Ofsted) of any incident or accident and any changes in our arrangements which may affect the well-being of children or where an allegation of abuse is made against a member of staff (whether the allegations relate to harm or abuse committed on our premises or elsewhere). Notifications to Ofsted are made as soon as is reasonable practicable, but at the latest within 14 days of the allegations being made.

Allegations against staff

- We ensure that all parents know how to complain about the behaviour or actions of staff or volunteers within the provision. (poster on view)
- We respond to any inappropriate behaviour displayed by members of staff, or any other person working with the children, which includes:
 - inappropriate sexual comments;
 - excessive one-to-one attention beyond the requirements of their usual role and responsibilities, or
 - inappropriate sharing of images.
- We respond to any disclosure by children or staff that abuse by a member of staff or volunteer within the setting, may have taken, or is taking place, by first recording the details of any such alleged incident.
- We refer any such complaint immediately to the local authority’s social care department to investigate. We also report any such alleged incident to Ofsted and what measures we have taken. We are aware that it is an offence not to do this.
- We co-operate entirely with any investigation carried out by children’s social care in conjunction with the police.
- Where the manager and children’s social care agree it is appropriate in the circumstances, the owner/manager will suspend the member of staff on full pay, or the volunteer, for the duration of the investigation. This is not an indication of admission that the alleged incident has taken place, but is to protect the staff as well as children and families throughout the process.

Allegations against the manager

- Any other member of staff should report the matter directly to the registered agency (Ofsted) and follow the procedures of “allegations of abuse made against an adult in the setting.

Disciplinary action

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

Training

- We seek out training opportunities for all adults involved in the setting to ensure that they are able to recognise the signs and signals of possible physical abuse, emotion abuse, sexual abuse and neglect and that they are aware of the local authority guidelines for making referrals.
- We ensure that all staff know the procedures for reporting and recording their concerns in the setting.

Planning

- The layout of the setting allows for constant supervision. No child is left alone with staff or volunteers in a one-to-one situation without being visible to others.

Confidentiality

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

Support to families

- We believe in building trusting and supportive relationships with families, staff and volunteers in the group.
- We make clear to parents our role and responsibilities in relation to child protection, such as for the reporting of concerns, information sharing, monitoring of the child and liaising at all times with the local children's social care team.
- We will continue to welcome the child and the family whilst investigations are being made in relation to any alleged abuse
- We follow the Child Protection Plan as set by the child's social care worker in relation to the setting's designated role and tasks in supporting that child and heir family, subsequent to any investigation.
- Confidential records kept on a child are shared with the child's parents or those who have parental responsibility for the child in accordance with the Confidentiality and Client Access to Records procedures and only if appropriate under the guidance of the the Local Safeguarding Children Board.

British Values

- We introduce key elements of keeping children safe into our programme to promote the personal, social and emotional development of all children, so that they may grow to be strong, resilient and listened to and that they develop an understanding of why and how to keep safe.
- We create within the setting a culture of value and respect for the individual, having positive regard for children's heritage arising from their colour, ethnicity, languages spoken at home, cultural and social background.¹

¹ To promote British Values to include rule of law, democracy, tolerance for those with different faiths and beliefs individual liberty and mutual respect.

The Prevent Duty

- We provide a safe space and we have safeguarding arrangements in place to promote pupils' welfare.
- We focus on risk assessment, working in partnership, staff training and IT policies. 2

Whistle blowing policy

This ensures that all adults are clear about what to do if they are concerned about the behaviour of any other adult in the setting, this includes those with management responsibility or the registered person.

All allegations or concerns must be reported straight away.

The Ofsted hotline is 0300 123 3155.

The email is whistleblowing@ofsted.gov.uk.

Or write to WBHL Ofsted Piccadilly Gate, Store Street, Manchester M1 2WD.

It is the responsibility of all staff including volunteers and students to report concerns/suspicions of abuse.

1.3 Uncollected Child

Policy Statement

In the event that a child is not collected by an authorised adult at the end of a session/ day Laurel Way Playgroup puts into practice agreed procedures. These ensure that the child is cared for safely by an experienced and qualified practitioner who is known to the child.

In the event that a child is not collected by an authorised adult, we will ensure that the child receives a high standard of care in order to cause as little distress as possible. We inform parents/carers of our procedures so that, if they are unavoidably delayed, they will be reassured that their children will be properly cared for.

Procedures

Parents of children starting at the setting are asked to provide specific information that is recorded on the Registration Form, the Emergency Form and will also provide each term contact telephone numbers and photographs of any person without parental responsibility. Photographs to be put in Collection Book.

- home address and telephone numbers
- place of work, address and telephone number (if applicable)
- mobile telephone numbers (if applicable)
- names and telephone numbers of adults authorised by the parents to collect their child.
- information about any person who does not have legal access to the child; and (to include photo to be put in Collection Book)
- who has parental responsibility.

On occasions when parents are aware that they will not be at home or in their usual place of work, they must either put in writing who will be collecting their child, or write on parents note board. To also provide photographs of people who might be collecting their child on these occasions for our Collection Book.

Parents are informed that if they are not able to collect the child as planned, they must inform us so that we can begin to take back-up procedures. We provide parents with our contact number to phone or to send SMS message. We also inform parents that – in the event that their children are not collected from the setting by an authorised adult and the staff can no longer supervise the child on our premises – we apply our child protections procedures as set out in our child protection policy.

If a child is not collected at the end of the session, we follow the following procedures:

- All reasonable attempts are made to contact the parents or nominated carers
- The child does not leave the premises with anyone other than those named on the forms and whose photograph is in our Collection Book

- If no one collects the child after one hour and there is no one who can be contacted to collect the child, we apply the procedures for uncollected children.
- We contact our local authority (MASH) or the out of hours duty officer.(020 8359 2000)

Local Authority MASH tel. 020 8359-4066

- The child stays at the setting in the care of two fully-vetted staff members until the child is safely collected either by the parent/carer or by a social worker;
- Social services will aim to find the parent or relative if they are unable to do so, the child will be admitted into the care of the local authority.
- Under no circumstances are staff to go to look for the parent, nor do they take the child home with them
- A full written report of the incident is recorded
- Depending on circumstances, we reserve the right to charge parents for the additional hours worked by our staff.

1.4 Missing Child

Procedure

If a child goes missing from the setting

- The person in charge (**Susan Farber**) will carry out a thorough search of the building and out lying areas after phoning the police.
- The register is checked to make sure no other child has also gone astray.
- Doors and gates are checked to see if there has been a breach of security whereby a child could wander out.
- Person in charge talks to staff to establish what happened.
- If the child is not found the parents are contacted and the missing child is reported to the police, Ofsted and Local Area Safeguarding Children Committee on:

Senior Safeguarding Officer

Address:

North London Business Park (NLBP),
Oakleigh Road South,
London N11 1NP

Email: naseema.ahmad@barnet.gov.uk

- Follow Police Instructions
- Do a risk assessment

If a child goes missing from an outing where parents are not attending and responsible for their own child, the setting ensures that the following procedure is followed.

- As soon as it is noticed that a child is missing, staff on the outing ask children to stand with their designated person and carry out a headcount to ensure that no other child has gone astray.
- One staff searches the immediate vicinity but does not search beyond that.
- The person in charge is informed, if she is not on the outing she will make her way to the venue to aid the search and to be the point of contact for the police as well as to support staff.
- Staff take the remaining children back to the setting.
- The person in charge of the setting contacts the child's parents who make their way to the setting or outing venue as agreed with the person in charge
- Staff contact the police using the mobile phone and report the child missing.
- In an indoor venue, the staff contact the venue's security who will handle the search and contact the police if the child is not found

The Investigation

- the person in charge (Susan Farber) writes an incident report detailing;
 - the date and time of the report
 - what staff/children were in the group/outing;
 - when the child was last seen in the group/outing;

- what has taken place in the group/outing since then; and
- the time it is estimated that the child went missing.

- a conclusion is drawn as to how the breach of security happened
- if the incident warrants a police investigation all staff co-operate fully. In this case, the police will handle all aspects of the investigation, including interviewing staff. Social Services may be involved if it seems likely that there is a child protection issue to address.

The incident is reported under RIDDOR arrangements and is recorded in the incident book; the local authority health and safety officer may want to investigate and will decide if there is a case to prosecution.

- OFSTED is informed

- The insurance Department at the Pre School Learning Alliance is informed.

1.5 Use of mobile phones and cameras

Policy statement

We take steps to ensure that there are effective procedures in place to protect children, young people, and vulnerable adults from the unacceptable use of mobile phones and cameras in the setting.

Procedures

Personal Mobile Phones

- Personal mobile phones belonging to members of staff are not used on premises during working hours.
- At the beginning of each individual's shift, personal mobile phones are stored in lockers. If no lockers are provided, they must be stored in a safe place as designated.
- In the event of an emergency, personal mobile phones may be used in the privacy of the office with permission from the manager.
- Members of staff ensure that the telephone number of the setting is known to immediate family and other people who need to contact them in an emergency.
- If members of staff take their own mobile phones on outings, for use in the case of an emergency, they must not make or receive personal calls as this will distract them.
- Members of staff will not use their personal mobile phones for taking photographs of children. The manager has the school's mobile phone which is used during the session to liaise with parents, for parents to contact the manager, to maintain a partnership with parents. Photos taken on the school mobile phone by the manager are downloaded into the children's files on the school computer and deleted from the mobile phone.
- Parents and visitors are requested not to use their mobile phones whilst on the premises. There is an exception if a visitor's company or organisation operates a lone working policy that requires contact with their office periodically throughout the day. Visitors will be advised of a quiet space where they can use their mobile phone where there are no children present.

Cameras and videos

- Members of staff must not bring their own cameras or video recorders into the setting.
- Photographs and recordings of children are only taken for valid reasons, i.e. to record their learning and development, or for displays within the setting.
- Photographs or recordings of children are only taken on equipment belonging to the setting.
- Camera and video use is monitored by the setting manager
- Where parents request permission to photograph or record their own children at special events, permission will first be gained from all parents for their children to be included. Photographs and recordings of children are only taken of children if there is written permission to do so (found on the individual child's registration form)

2.0 Suitable People

2.1 Employment

Policy Statement

We meet the Safeguarding and Welfare Requirements of the Early Years Foundation Stage, ensuring that our staff are appropriately qualified, and we carry out checks for criminal and other records through the Criminal Records Bureau in Accordance with statutory requirements.

Procedures

Vetting and Staff Selection

- We work towards offering equality of opportunity by using non-discriminatory procedures for staff recruitment and selection. All staff have job descriptions, which set out their staff roles and responsibilities.
- We use Ofsted guidance on obtaining references and enhanced criminal record checks through the Criminal Records Bureau for staff and volunteers who will have unsupervised access to children. This is in accordance with requirements under the Safeguarding Vulnerable Groups Act (2006) for the vetting and barring scheme.
- We keep all records relating to employment of staff and volunteers, in particular those demonstrating that checks have been done, including the date and number of the enhanced CRB check.
- Staff are expected to disclose any convictions, cautions, court orders, reprimands and warnings which may affect their suitability to work with children - i whether received before, or at any time during, their employment with us

Disqualification

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

Changes to staff

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

Training and staff development

- Our setting leader holds a BS Educ and EYPS and our deputy holds a Level 3 Certificate in Early Years Childcare and the remainder of the staff hold a Level 3 Certificate in Early Years Childcare.

- We provide regular in service training to all staff - whether paid staff or volunteers - through the London Borough of Barnet.
- We provide staff induction training at the beginning of employment which includes our Health and Safety Policy and Safeguarding Children and Child Protections. Other policies and procedures will be introduced with an induction plan.
- We support the work of our staff by holding regular meetings and appraisals.

Staff taking Medication/other substances.

- If a member of staff is taking medication which may affect their ability to care for children, we ensure that they seek further medical advice. Staff will only work directly with the children if medical advice confirms that the medication is unlikely to impair their ability to look after children properly.
- Staff medication on the premises will be stored securely and kept out of reach of the children at all times.

Managing staff absences and contingency plans for emergencies.

- Our staff take their holiday breaks when the setting is closed. Where staff may need to take time off for any reason other than sick leave or training, this is agreed with the manager with sufficient notice.
- Where staff are unwell and take sick leave in accordance with their contract of employment, we organise cover to ensure ratios are maintained.

2.2 Student Placements

Policy Statement

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

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

Procedures

- We require students on qualification courses to meet the 'suitable people' requirements of Ofsted and have CRB checks carried out.
- We require students in our setting to have a sufficient understanding and use of English to contribute to the well being of children in our care.
- We require schools placing students under the age of 17 years with the setting to vouch for their good character.
- We supervise students under the age of 17 years at all times and do not allow them to have unsupervised access to the children.
- Students undertaking qualification courses who are placed in our setting on a short term basis are not counted in our staffing ratios.
- Trainee staff employed by the setting and students over the age of 17 may be included in the ratios if they are deemed competent and responsible.
- We take out employers' liability insurance and public liability insurance, which covers both trainees and voluntary helpers.
- We require students to keep to our Confidentiality and Client Access to Records Policy.
- We cooperate with students' tutors in order to help students to fulfil the requirements of their course of study.
- We provide students, at the first sessions of their placement, with a short induction on how our setting is managed, how our sessions are organised and our policies and procedures.
- We make the needs of the children paramount by not admitting students in numbers that hinder the essential work of the setting.
- We ensure that trainees and students placed with us are engaged in bona fide early years training, which provides the necessary background understanding of children's development and activities.

3.0 Staff Qualifications, Training, Support and Skills

3.1 Induction of staff and volunteers

Policy Statement

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

Procedures

- We have a written induction plan for all new staff, which includes the following:
(staff handbook kept in Kitchen)
 - introductions to all staff and volunteers
 - familiarising with the building, health and safety and fire and evacuation procedures.
 - details of the tasks and daily routines to be completed

3.2 First Aid and Emergency

Policy Statement

In our setting, staff are able to take action to apply first aid treatment in the event of an accident involving a child or adult. All members of staff who hold a valid first aid certificate is displayed on the parents notice board. The first aid qualification includes first aid training for infants and young children. We aim to ensure that first aid training is local authority approved and is relevant to staff caring for young children.

Procedures

The first aid kit

Our first aid kit is accessible at all times, complies with the Health and Safety (First Aid) Regulations 1981 and contains the following items:

- Triangular bandages (ideally at least one should be sterile) x 4
- Sterile dressings:
 - a) Small x 3
 - b) Medium x 3
 - c) Large x 3
- Composite pack containing 20 assorted (individually wrapped) plasters x 2
- Sterile eye pads
- Contain or 6 safety pins x 1
- Guidance card as recommended by HSE x 1

In additions to the first aid equipment there are:

- 2 pairs of disposable plastic disposable gloves
- a children's forehead "strip" thermometer.
- the first aid box is easily accessible to adults and is kept out of the reach of children
- No un-prescribed medication is given to children
- At the time of each child's admission to the setting, parents written permission for obtaining emergency medical advise or treatment is sought. Parents sign and date their written approval.
- Parents sign a consent form at registration. If emergency medical treatment is required staff will dial 999

Emergency Policy

If an emergency arises and contact with the Parent/Guardian/or Carer is not possible and if the Head Teacher deems it necessary, the following will apply:

- 1) If the accident is serious and to move the child would be detrimental, the Head Teacher will contact the emergency services on "999". This applies to members of staff if seriously injured or in need of medical treatment.
- 2) If the child sustains a wound which requires attention and if the Head Teacher deems it necessary, the child will be taken to Finchley Memorial Hospital Out-Patients Casualty Dept. for treatment. If necessary, the attending member of staff, will accompany the Head Teacher. The Head Teacher will take all vital information from the Emergency Register to the Casualty Dept.
- 3) In the event of a child being hurt, a qualified First Aider or the Head Teacher will administer appropriate care and the staff member who witnesses the incident will comfort and attend the qualified First Aider or the Head Teacher throughout. The incident will be noted in the Accident Book and signed by the parent/guardian or carer.
- 4) The Head Teacher will notify in writing, the London Borough of Barnet Social Services, of any actions that were taken with regard to the injured child.
- 5) All parents will complete an Emergency Form and are responsible for keeping the information up to date. (See enclosed form) **Contact people should be local i.e. neighbour, relative or friend and knowingly available.**
- 6) Medicine and Medication are to be given only with written instructions to the Head Teacher. Medicines and medication are to be kept in the cupboard in the kitchen, safely out of the children's reach. If the parent/carer wishes for a prescribed medication to be administered the Medication Policy and Consent Form must be completed. This is obtained from any member of staff. If the child is in need of regular medication the parent/carer may supply up to a weeks supply, which must be in a properly labelled container supplied and labelled by a pharmacist.

EMERGENCY FORM

Child's Name _____

Address _____

Date of Birth _____ Sex _____

Name of person who usually collects the child and relationship

_____ Telephone No. _____

Name of person **other than the parents** who could collect the child if the above is not available _____

relationship (friend/relative) _____

Telephone Number of the above: _____

Name of G.P. _____

Address of G.P. _____

Telephone No. of G.P.: _____

Does the child have any allergies? ie food/pollen/medication. If yes, please explain?

Does the child take any regular medication? If yes, please clarify _____

Please list child's immunisations and date _____

Does the child have any ongoing health problems? ie asthma, eczema. If yes please explain _____

Are there any reasons why your child should not or cannot be treated at Finchley Memorial Casualty Dept? If yes, please explain: _____

I give my permission for my child to be taken to hospital by a member of staff in case of emergency.

Signed _____ date _____

4.0 Key Persons

4.1 The role of the key person and settling - in

We believe that children settle best when they are familiar with the setting and with all members of staff who care for the children in our setting. During our drop in sessions prior to the child beginning, both child and parent spend time in the setting engaging with staff and building relationships, developing confidence and also allowing the parent to feel that staff are committed and that the setting is a happy and dedicated place to attend. Children therefore have the express right to choose who they feel most confident with and who they related best to.

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

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

As a holistic setting the initial key person is determined by the child's preference.

Procedures

- In the beginning we allocate a key person based on the child's preference to offer support and to be there to meet the child's needs.
- All staff are responsible for the induction of the family and for settling the child. This person works with the parent and the child to assist and plan for the child's well being, care and learning.
- No child is to be separated from their parent before the child is ready for the separation. We work together with the parent to build trust and understanding.

Settling In

- Before a child starts to attend the setting, we use a variety of ways to provide his/ her parents with information. These include written information (including our prospectus and policies), on line information, displays, open days and individual meetings with prospective parents. (Drop In Policy)
- During the half term before a child is enrolled, we provide "drop in" sessions
- When a child starts to attend, we explain the process of settling in and jointly decide the best procedure to help the child to settle into the setting. (Settling in Policy)
- We judge a child to be settled when they have formed a relationship with a key person; and when parents leave, we ask them to say goodbye to their child and explain that they will be coming back and when.
- Individual plans are made for each child based on their level of development and preferences.

- We do not believe that leaving a child to cry will help them to settle any quicker. We believe that a child's distress will prevent them from learning and gaining the best from the setting
- Within the first term of starting, we focus and work with the child's parents to begin to create their child's record of achievement. (Summative/formative Assessment/Observations for planning and their Learning Journals.)

Policy Statement

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

We feel that familiarity with the setting and with the staff will make the child and the parent feel secure and comfortable. Visits to the nursery enable both child and parent/ carer to become familiar with our routines, our policies and our aims and objectives. Visits will take place in the last 6 weeks of the term prior to entrance.

Procedures

Parents/carers will pre arrange sessions by telephoning the nursery on 8445 7514 during the session from 9-3pm.

- 1st visit from 10-11am or 1-2pm to include free play and snack time
- 2nd visit from 10-11am or 1-2pm as above
- 3rd & 4th visit from 11-12am or 2-3pm to include snack, music and story time
- 5th visit will be a full session

If it is not possible to have 5 visits then other arrangements can be made but we feel this time is most important and helps the child separate from parent/carer with confidence.

Policy Statement

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

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

Procedures

- Before a child starts to attend the nursery, we use a variety of ways to provide his/her parents with information. These include written information (including our prospectus), displays and information and meetings with parents.
- During the half term before a child is enrolled, we provide opportunities for the child and his/her parent/carer to visit on a pre arranged "drop in" basis.
- We endeavour to prevent children from being left in a stressful state. Therefore we encourage parents/carers to stay until they are happy for you to leave.
- When a child starts to attend, we work with the parents to decide on the best way to help the child to settle.
- Depending on the child's level of development, it maybe necessary for new children to be collected prior to the end of a session after "free play" ends and a group singing and story time begins.
- New children find "group" times difficult and we do not expect new children to sustain the same level of concentration as children who have been previously settled.
- We then gradually increase the time span as the child develops confidence. (See Settling in Procedure)
- We feel that leaving the group on a happy and positive note helps the child develop the confidence to join in singing and to listen to stories.
- This applies to all children even when English is a second language.

The progress check at age two

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

5.0 Staff: Child Ratios

5.1 Policy Statement

We provide a staffing ratio in line with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage (2012) to ensure that children have sufficient individual attention and to guarantee care and education of a high quality. Our staff appropriately qualified and we carry out checks for criminal and other records through the Criminal Records Bureau in accordance with statutory requirements.

Procedure

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

- Children aged two years (under 3): 1 adult: 4 children
 - at least one member of staff holds a full and relevant level 3 qualification;
 - and
 - at least half of all other staff hold a full and relevant level 2 qualification.

- Children aged three and over: 1 adult: 8 children
 - at least one member of staff holds a full and relevant level 3 qualification;
 - and
 - at least half of all other staff hold a full and relevant level 2

- We follow the Early Years Foundation Stage Safeguarding and Welfare Requirements where a Qualified Teacher, Early Years Professional or other suitable level 6 qualified person is working directly with the children aged three and over between the hours of 8am and 4pm as follows:
 - there is at least one member of staff for every 13 children; and
 - at least one other member of staff holds a full and relevant level 3

qualification.

- The key persons plan with the parents for the child's well being and development in the setting. The key persons meet with the family/parent for discussion and consultation on their child's progress and offers support. All staff are available to assist and answer questions.
- We hold regular staff meetings to undertake curriculum planning and to discuss children's progress, their achievements and any difficulties that may arise from time to time.

6.0 Health

6.1 Administering medicines

Policy Statement

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

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

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

Key persons are responsible for the correct administration of medication to children. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only medication prescribed by a doctor (or other medically qualified person) will be administered. (NO non prescriptive drugs will be given to any children which contains aspirin or ibuprofen unless prescribed by a doctor. Children who require non prescriptive drugs should not attend school for example Calpol or other temperature reducing drugs.
- Children's prescribed medicines are stored in their original containers, are clearly labeled and are inaccessible to the children.
- Parents give prior written permission for the administration of medication. The staff receiving the medication must ask the parent to sign a consent form stating the following information. No medication may be given without these details being provided:
 - the full name of the child and date of birth;
 - the name of the medication and strength;
 - who prescribed it;
 - the dosage to be given in the setting;

- how the medication should be stored and its expiry date;
 - any side effects that may be expected; and
 - the signature of the parent, their printed name and the date.
- The administration of medicine is recorded accurately in our medication record book each time it is given and is signed by the key person. Parents are shown the record at the end of the session and asked to sign the record book to acknowledge the administration of the medicine. The medication record book records the:
 - name of the child;
 - name and strength of the medication;
 - date and time of the dose;
 - dose given and method;
 - signature of the key person; and
 - parent's signature.

Storage of medicines

- All medication is stored safely in a cupboard in a clearly marked plastic box
- The key person is responsible for ensuring medicine is handed back at the end of the day, if applicable, to the parent.
- For some conditions, medication may be kept in the setting to be administered on a regular or as and when required basis. Key person check that any medication held in the setting is in date and return any out of date medication back to the parent.
- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.
- No child may self-administer.

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

- A risk assessment is carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the manager.
- Parents will also contribute to a risk assessment
- Training will be sought if applicable.
- A health care plan for the child should include the measures to be taken in an emergency.
- The health care plan is to be reviewed every six months.

Managing medicines on trips and outings

- Medication is taken in the child's sealed plastic box.
- All procedures remain the same as if the child was in the setting.

Health Care Plan for _____

Date _____

Condition or illness

Emergency Plan

Use Bullet Points

Signs/Symptoms	Actions to be taken
1.	1.

Details of Medication

<u>Name</u>	<u>Dose</u>	<u>Frequency</u>

Medication Consent Form

Please complete if you wish the school to administer medication to your child. The school will not give your child medicine unless you complete and sign this form

CHILD'S DETAILS

Child's Name:

Date of Birth:

Condition of illness:

MEDICATION

Name/Type of Medication (as described on container)

Date dispensed

Expiry date

For how long will your child take this medication?

DIRECTIONS FOR USE

Dosage and method:

Timing:

Are there any side effects that we need to know about?:

I understand that I must deliver the medicine personally to an agreed member of staff and accept that this is a service that the school is not obliged to undertake.

I understand that I must notify the nursery of any changes in writing.

I give my permission for a member of staff to administer medication as given to my child.

Date:

Signature:

Relationship to child:

LAUREL WAY PLAYGROUP

Care Plans for Children needing Injection of Adrenaline (EpiPen) While in an Early Year Setting

Name of Child:

.....

Date of Birth:

.....

Allergic to:.....

.....

Epi-pen 1 Expiry date:.....

.....

Epi-pen 2 Expiry date:.....

.....

Antihistamine Expiry date:.....

.....

Location of Epi-pen (1) and spare (2).....

Individualised Prevention Plan (to be completed with parent/carer:

Particular signs to look for in.....(Name of Child)

- 1.
- 2.
- 3.

Treatment Plan for.....(Name of Child)

- 1.
- 2.
- 3.

AGREEMENT FOR THE ADMINISTRATION OF ADRENALINE (EPIPENS) IN EARLY YEARS SETTING

Child's Name:

.....

Date of Birth:

.....

Address:

.....

.....

Home Tel.

Number.....

Significant Carer's Day-time Contact No.....

Name of GP:

Telephone Number:

Details of Allergy:

.....

.....

Details of Foods to be avoided:

.....

.....

Summary of Treatment Measures:

.....

.....

Consent to be given in writing:

Parents/Significant Carer: I consent to members of Laurel Way Playgroup staff, following appropriate training, giving the above treatment to my child in an emergency,

Signature..... Print Name:.....Date:

School Head teacher: Named members of staff are prepared to be trained to carry out the necessary treatment.

Signature..... Print Name:.....Date:

NB: It is the responsibility of the early years setting or school to request training for new staff and for annual updates.

Copies distribute to : Parents, early year setting, and GP

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

(including reporting notifiable diseases)

Policy Statement

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

Procedures for children who are sick or infectious

- If the children appear unwell during the day - have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach - the manager calls the parents and asks them to collect the child, or send a known carer to collect the child on their behalf.
- If a child has a temperature, they are kept cool, by removing top clothing and sponging their heads with cool water, but kept away from draughts.
- The child's temperature is taken using a forehead thermometer strip, kept in the first aid box.
- In extreme cases of emergency we call 999 and inform the parents.
- Where children have been prescribed antibiotics, parents are asked to keep them at home for 48 hours before returning to the setting.
- After diarrhoea, parents are asked to keep children home for 48 hours or until a formed stool is passed.
- The setting has a list of excludable diseases and current exclusion times. The full list is obtainable from www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1194947358374 and includes common childhood illnesses such as measles.

Reporting of “notifiable diseases”

- If a child or adult is diagnosed as suffering from a notifiable under the Health Protection (Notification) Regulations 2010, the GoP will report this to the Health Protection Agency.
- When the setting becomes aware, or is formally informed of the notifiable disease, the manager informs Ofsted and acts on any advice given by the Health Protection Agency.

Nits and Head Lice

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

Procedures for children with allergies

- When parents start their children at the setting they are asked if their child suffers from any allergies. This is recorded on the Registration Form.
- If a child has an allergy, a risk assessment form is completed to detail the following:
 - The allergen (i.e. the substance, material or living creature the child is allergic to such as nuts, eggs, bee stings, cats etc.)
 - The nature of the allergic reactions
 - What to do in case of allergic reactions, any medication used and how it is to be used (e.g. Epipen);
 - Control measures - such as how the child can be prevented from contact with the allergen.
 - Review
- Parents train staff in how to administer special medication in the event of an allergic reaction.
- Our setting has a NO NUT or NUT PRODUCT Policy.
- Parents are made aware so that no nut or nut products are accidentally brought in to the nursery.

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

Oral Medication

- Oral medication must be prescribed by a GP and have manufacturer's instructions clearly written on them
- The setting must be provided with clear written instructions on how to administer such medication.
- All risk assessment procedures need to be adhered to for the correct storage and administration of the medication
- The setting must have the parents or guardians prior written consent. This consent must be kept on file.

Life saving medication and invasive treatments.

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

- The provider must have;
 - a letter from the child's GP/consultant stating the child's condition and what medication if any is to be administered;
 - written consent from the parent or guardian allowing staff to administer medication; and
 - proof of training in the administration of such medication by the child's GP, a district nurse, children's nurse specialist or a community paediatric nurse.

6.3 Recording and reporting of accidents and incidents

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

Policy Statement

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

Procedures

Our Accident Book:

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

Reporting accidents and incidents

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

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

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

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

We meet our legal requirements in respect of the safety of our employees and the public by complying with RIDDOR. We report to the Health and Safety Executive:

- any work related accident leading to any injury to a child or adult, for which they are taken to hospital;
- any work related injury to a member of staff, which results in them being unable to work for seven consecutive days;
- when a member of staff suffers from a reportable work related disease or illness;
- any death, or a child or adult, that occurs in connection with activities relating to our work; and
- any dangerous occurrences. This may be an event that causes injury or fatalities or any event that does not cause an accident but could have done; such as a gas leak.

Our Incident Book

- We keep an incident book for recording minor incidents within the nursery setting.
- The key person will complete and give a copy to the parent
- We record the date and time of the incident, the nature of the even, who was affected, what was done about it and who dealt with the incident.
- Our incident book is for recording issues involving a child.

Incident Form

Name of Child	date:
	time:
Circumstances of incident:	
Action taken:	
Staff Responsible	

6.4 Food and drink

Policy Statement

Our provision regards snack as an important part of our day. Eating represents a social time for children and adults and helps children to learn about healthy eating. We promote healthy eating.

Procedures

- Before a child starts to attend the parent/carer indicates any allergies their child might have.
- To meet the standards, some foods in packed lunches need to be refrigerated until lunchtime.
- Perishable items such as cooked meat, fish or poultry, either on its own or in a sandwich, egg, rice, pasta dishes, and any dairy products must be packed in separate containers marked with your child's name.
- All such foods will be put into our cool box upon arrival and then transferred into the refrigerator which will be at the appropriate ambient temperature as set out by Environmental Health.
- We organise snack time to help children to develop independence through making choices, serving food and drink and feeding themselves.
- We have fresh drinking water constantly available for the children. We inform the children about how to obtain the water.
- We have rules about children sharing and swapping their food with one another in order to protect children with food allergies.
- On occasion we provide whole and pasteurised milk.
- We have an information sheet for parents/carers whose children stay for lunch.
Information for Children Staying for Lunch

If your child stays for lunch the following will apply for your child's protection.

- Taking into account our storage facilities, some foods in packed lunches need to be refrigerated and thus stored in suitable containers,
- Perishable items such as cooked meat, fish or poultry, either on its own or in a sandwich, egg, rice, pasta dishes, and any dairy products must be packed in separate containers marked with your child's name.
- All such foods will be put into our cool box upon arrival and then transferred into the refrigerator that will be at the appropriate ambient temperature as set out by Environmental Health.
- We are unable to reheat cooked foods.

7.0 Managing Behaviour

7.1 Achieving positive behaviour

Policy Statement

Our setting believes that children flourish best when their personal, social and emotional needs are met and where there are clear and developmentally appropriate expectations for their behaviour.

Children need to learn to consider the views and feeling needs and rights, of others and the impact that their behaviour has on people, places and objects. This is a developmental task that requires support, encouragement, teaching and setting the correct example. The principles that underpin how we achieve positive and considerate behaviour exist within our programme for promoting personal, social and emotional development.

Procedure

Susan Farber has the overall responsibility for our programme for supporting personal, social and emotional development, including issues concerning behaviour. The Deputy, Victoria Witton and all staff share responsibility.

- We require the named person (**Susan Farber**) to:
 - keep herself up-to-date with legislation, research and thinking on promoting positive behaviour and on handling children's behaviour where it may require additional support.
 - access relevant sources of expertise on promoting positive behaviour within our setting for supporting personal, social and emotional development; and
 - check that all staff have relevant in-service training on promoting positive behaviour.

We keep a record of staff attendance at this training.

- We recognise that codes for interacting with other people vary between cultures and require staff to be aware of, and respect, those used by members of the setting.
- We require all staff, volunteers and students to provide a positive model of behaviour by treating children, parents and one another with friendliness, care and courtesy.
- We familiarise new staff and students with the setting's Achieving Positive Behaviour Policy and its guidelines for behaviour.
- We expect all members of our setting to keep to the guidelines, requiring these to be applied consistently.
- We work in partnership with children's parents. When required we inform parents about their children's behaviour. We work with parents to address recurring inconsiderate behaviour, using our observation records to help us to understand the cause and to decide jointly how to respond appropriately.

Strategies with children who engage in inconsiderate behaviour

- We require all staff to use positive strategies for handling any inconsiderate behaviour, by helping children to find solutions in ways which are appropriate for the children's ages and stages of development. Such solutions might include, for example, acknowledgement of feelings, explanation as to what was not acceptable, and supporting children to gain control of their feelings, so that they can learn a more appropriate response.
- We ensure that there are enough relevant toys and resources and sufficient activities available so that children are meaningfully occupied without the need for unnecessary conflict over sharing and waiting for turns.
- We acknowledge considerate behaviour such as kindness and willingness to share
- We support each child in developing self esteem, confidence and feelings of competence.
- We support each child in developing a sense of belonging in our group, so that they feel valued and welcome.
- We avoid creating situations in which children receive adult attention only in return for inconsiderate behaviour.
- When children behave in inconsiderate ways, we help them to understand the outcomes of their actions and support them in learning how to copy more appropriately.
- We never send children out of the room by themselves, nor do we use a "naughty chair" or a "time out" strategy that excludes children from group.
- We never use physical or corporal punishment, such as smacking or shaking. Children are never threatened with these.
- We do not use techniques intended to single out and humiliate individual children.
- We use physical restraint, such as holding, only to prevent physical injury to children or adults and/or serious damage to property.
- Details of any event (what happened, what actions was taken and whom, and the names of witnesses) are brought to the attention of our setting leader and are recorded in our incident book. The child's parent(s) is/are informed on the same day.
- In cases of serious misbehaviour, such as racial or other abuse, we make clear immediately the unacceptability of the behaviour and attitudes, by means of explanations rather than personal name.
- We do not shout or raise our voices in a threatening way to respond to children's inconsiderate behaviour.

Children Under three years

- When children under three behave in inconsiderate ways we recognise that the strategies for supporting them will need to be developmentally appropriate and differ from those for older children.
- We recognise that babies and very young children are unable to regulate their own emotions, such as fear, anger or distress, and require sensitive adults to help them do this.
- Common inconsiderate or hurtful behaviours of young children include tantrums, biting or fighting. Staff are calm and patient, offering comfort to intense emotions, helping children to manage their feelings and talk about them to help resolve issues and promote understanding.
- If tantrums, biting or fighting are frequent, we try to find out the underlying cause. Sometimes if a child has not settled in well and the behaviour may be the result of “separation anxiety”.
- We focus on ensuring a child’s attachment figures in the setting, and all staff help the child build a relationship to provide security to the child. We allow the children to show a preference as we value them as individuals.

Rough and tumble play and fantasy aggression

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

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

Hurtful behaviour

We take hurtful behaviour very seriously. Most children under the age of five will at some stage hurt or say something hurtful to another child, especially if their emotions are high

at the time, but it is not helpful to label this behaviour as 'bullying'. For children under five, hurtful behaviour is momentary, spontaneous and often without cognisance of the feelings of the person whom they have hurt.

- We recognise that young children behave in hurtful ways towards others because they have not yet developed the means to manage intense feelings that sometimes overwhelm them.
- We will help them manage these feelings, as they have neither the biological means nor the cognitive means to do this for themselves.
- We understand that self-management of intense emotions, especially of anger, happens when the brain has developed neurological systems to manage the physiological processes that take place when triggers activate responses of anger or fear.
- Therefore we help this process by offering support, calming the child who is angry, as well as the one who has been hurt by the behaviour. By helping the child to return to a normal state, we are helping the brain to develop the physiological response system that will help the child be able to manage his or her own feelings.
- We do not engage in punitive responses to a young child's rage as that will have the opposite effect.
- Our way of responding to pre-verbal children is to calm them through holding and cuddling. Verbal children will also respond to cuddling to calm them down, but we offer them an explanation and discuss the incident with them to their level of understanding.
- We recognise that young children require help in understanding the range of feelings they experience. We help children recognise their feelings by naming them and helping children to express them, making a connection verbally between the event and the feeling. "Adam took your car, didn't he, and you were enjoying playing with it. You didn't like it when he took it, did you? Did it make you feel angry? Is that why you hit him?" Older children will be able to verbalise their feelings better, talking through themselves the feelings that motivated the behaviour.
- We help young children learn to empathise with others, understanding that they have feelings too and that their actions impact on others' feelings. "When you hit Adam, it hurt him and he didn't like that and it made him cry."
- We help young children develop pro-social behaviour, such as resolving conflict over who has the toy. "I can see you are feeling better now and Adam isn't crying any more. Let's see if we can be friends and find another car, so you can both play with one."
- We are aware that the same problem may happen over and over before skills such as sharing and turn-taking develop. In order for both the biological maturation and cognitive development to take place, children will need repeated experiences with problem solving, supported by patient adults and clear boundaries.
- We support social skills through modelling behaviour and through activities, drama and stories. We build self-esteem and confidence in children, recognising their emotional needs through close and committed relationships with them.

- We help a child to understand the effect that their hurtful behaviour has had on another child; we do not force children to say sorry, but encourage this where it is clear that they are genuinely sorry and wish to show this to the person they have hurt.
- When hurtful behaviour becomes problematic, we work with parents to identify the cause and find a solution together. The main reasons for very young children to engage in excessive hurtful behaviour are that:
 - they do not feel securely attached to someone who can interpret and meet their needs - this may be in the home and it may also be in the setting;
 - their parent, or carer in the setting, does not have skills in responding appropriately, and consequently negative patterns are developing where hurtful behaviour is the only response the child has to express feelings of anger;
 - the child may have insufficient language, or mastery of English, to express him or herself and may feel frustrated;
 - the child is exposed to levels of aggressive behaviour at home and may be at risk emotionally, or may be experiencing child abuse;
 - the child has a developmental condition that affects how they behave.
- Where this does not work, we use the Special Educational Needs Code of Practice to support the child and family, making the appropriate referrals to a Behaviour Support Team where necessary.

Bullying

We take bullying very seriously. Bullying involves the persistent physical or verbal abuse of another child or children. It is characterised by intent to hurt, often planned, and accompanied by an awareness of the impact of the bullying behaviour.

A child who is bullying has reached a stage of cognitive development where he or she is able to plan to carry out a premeditated intent to cause distress to another. Bullying can occur in children five years old and over and may well be an issue in after school clubs and holiday schemes catering for slightly older children.

If a child bullies another child or children:

- we show the children who have been bullied that we are able to listen to their concerns and act upon them;
- we intervene to stop the child who is bullying from harming the other child or children;
- we explain to the child doing the bullying why her/his behaviour is not acceptable;
- we give reassurance to the child or children who have been bullied;
- we help the child who has done the bullying to recognise the impact of their actions;
- we make sure that children who bully receive positive feedback for considerate behaviour and are given opportunities to practise and reflect on considerate behaviour;
- we do not label children who bully as 'bullies';
- we recognise that children who bully may be experiencing bullying themselves, or be subject to abuse or other circumstances causing them to express their anger in negative ways towards others;

- we recognise that children who bully are often unable to empathise with others and for this reason we do not insist that they say sorry unless it is clear that they feel genuine remorse for what they have done. Empty apologies are just as hurtful to the bullied child as the original behaviour;
- we discuss what has happened with the parents of the child who did the bullying and work out with them a plan for handling the child's behaviour; and
- we share what has happened with the parents of the child who has been bullied, explaining that the child who did the bullying is being helped to adopt more acceptable ways of behaving.

8.0 Safety and Suitability of Premises, Environment and Equipment

8.1 Health and safety general standards

Policy statement

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

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

Insurance cover

We have public liability insurance and employers' liability insurance. The certificate for public liability insurance is displayed in:

Procedures

Awareness raising

- Our induction training for staff and volunteers includes a clear explanation of health and safety issues, so that all adults are able to adhere to our policy and procedures as they understand their shared responsibility for health and safety. The induction training covers matters of employee well-being, including safe lifting and the storage of potentially dangerous substances.
- Records are kept of these induction training sessions and new staff and volunteers are asked to sign the records to confirm that they have taken part.
- Health and safety issues are explained to the parents of new children, so that they understand the part played by these issues in the daily life of the setting.
- As necessary, health and safety training is included in the annual training plans of staff, and health and safety is discussed regularly at staff meetings.
- We operate a no-smoking policy.
- Children are made aware of health and safety issues through discussions, planned activities and routines.

Safety of adults

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

Windows

- Low level windows are made from materials that prevent accidental breakage or are made safe.

Doors

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

Floors

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

Electrical/gas equipment

- All electrical/gas equipment conforms to safety requirements and is checked regularly.
- Our boiler/electrical switch gear/meter cupboard is not accessible to the children.
- Fires, heaters, electric sockets, wires and leads are properly guarded and the children are taught not to touch them.
- There are sufficient sockets to prevent overloading.
- The temperature of hot water is controlled to prevent scalds.
- Lighting and ventilation is adequate in all areas including storage areas.

Storage

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

Outdoor area

- Our outdoor area is securely fenced.
- Our outdoor area is checked for safety and cleared of rubbish before it is used.
- Adults and children are alerted to the dangers of poisonous plants, herbicides and pesticides.

- Our outdoor sand pit is covered when not in use and is cleaned regularly.
- All outdoor activities are supervised at all times.

Hygiene

- We seek information from the Health Protection Agency to ensure that we keep up-to-date with the latest recommendations.
- Our daily routines encourage the children to learn about personal hygiene.
- We have a daily cleaning routine for the setting, which includes the play room(s), kitchen, rest area, toilets and nappy changing areas.
- We have a schedule for cleaning resources and equipment, dressing-up clothes and furnishings.
- The toilet area has a high standard of hygiene, including hand washing and drying facilities and disposal facilities for nappies.
- We implement good hygiene practices by:
 - cleaning tables between activities;
 - cleaning and checking toilets regularly;
 - wearing protective clothing - such as aprons and disposable gloves - as appropriate;
 - providing sets of clean clothes;
 - providing tissues and wipes; and

Activities and resources

- Before purchase or loan, equipment and resources are checked to ensure that they are safe for the ages and stages of the children currently attending the setting.
- The layout of play equipment allows adults and children to move safely and freely between activities.
- All equipment is regularly checked for cleanliness and safety, and any dangerous items are repaired or discarded.
- All materials, including paint and glue, are non-toxic.
- Sand is clean and suitable for children's play.
- Physical play is constantly supervised.
- Children are taught to handle and store tools safely.
- Children learn about health, safety and personal hygiene through the activities we provide and the routines we follow.
- Any faulty equipment is removed from use and is repaired. If it cannot be repaired it is discarded.
- Large pieces of equipment are discarded as appropriate

8.2 Maintaining children's safety and security on premises

Policy statement

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

Procedures

Children's personal safety

- We ensure all employed staff have been checked for criminal records via an enhanced disclosure through the Criminal Records Bureau.
- Adults do not normally supervise children on their own.
- All children are supervised by adults at all times.
- Whenever children are on the premises at least two adults are present.
- We carry out risk assessments to ensure children are not made vulnerable within any part of our premises, nor by any activity.

Security

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

8.3 Supervision of children on outings and visits

Policy statement

Children benefit from being taken out of the setting to go on visits or trips to local parks, or other suitable venues, for activities which enhance their learning experiences. Some settings do not have direct access to outdoor provision on their premises and will need to take children out daily. Staff in our setting ensure that there are procedures to keep children safe on outings; all staff and volunteers are aware of and follow the procedures as laid out below.

Procedures

- Parents sign a general consent on registration for their children to be taken out as a part of the daily activities of the setting.
- This general consent details the venues used for daily activities.
- There is a risk assessment for each venue carried out, which is reviewed regularly.
- Parents are always asked to sign specific consent forms before major outings.
- A risk assessment is carried out before an outing takes place.
- All venue risk assessments are made available for parents to see.
- Our adult to child ratio is high, normally one adult to two children, depending on their age, sensibility and the type of venue, as well as how it is to be reached.
- Named children are assigned to individual staff to ensure that each child is well supervised, that no child goes astray and that there is no unauthorised access to children.
- Outings are recorded in an outings record book kept in the setting, stating:
 - The date and time of the outing.
 - The venue and mode of transport used.
 - The names of the staff members assigned to each of the children.
 - The time of return.
- Staff take a mobile phone on outings, as well as supplies of tissues, wipes, spare clothing and nappies, medicines required for individual children, a mini first aid kit, snacks and water. The amount of equipment will vary and be consistent with the venue and the number of children, as well as how long they will be out for.
- Staff take a list of children with them with contact numbers of parents/carers, as well as an accident book and a copy of our Missing Child Policy.
- Records are kept of the vehicles used to transport children, with named drivers and appropriate insurance cover.
- A minimum of two staff accompany children on outings and a minimum of two remain behind with the rest of the children.

8.4 Risk assessment

Policy statement

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

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

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

Procedures

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

8.5 Fire safety and emergency evacuation

Policy statement

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

Procedures

- The basis of fire safety is risk assessment, carried out by a 'competent person'.
- The manager has received training in fire safety sufficient to be competent to carry out the risk assessment; this will be written where there are more than five staff and will follow the Government guidance Fire Safety Risk Assessment - Educational Premises (HMG 2006).
- Where we rent premises, we will ensure that we have a copy of the fire safety risk assessment that applies to the building and that we contribute to regular reviews.
- Fire doors are clearly marked, never obstructed and easily opened from the inside.
- Smoke detectors/alarms and fire fighting appliances conform to BS EN standards, are fitted in appropriate high risk areas of the building and are checked as specified by the manufacturer.
- Our emergency evacuation procedures are approved by the Fire Safety Officer and are:
 - clearly displayed in the premises;
 - explained to new members of staff, volunteers and parents; and
 - practised regularly, at least once every six weeks.
- Records are kept of fire drills and of the servicing of fire safety equipment. (held in office of Nansen Village)

Emergency evacuation procedure

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

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

The fire drill record book must contain:

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

8.6 No-smoking

Policy statement

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

Procedures

All staff, parents and volunteers are made aware of our No-smoking Policy.

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

9.0 Equal Opportunities

9.1 Valuing diversity and promoting equality

Policy statement

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

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

We understand that these factors affect the well-being of children and can impact on their learning and attainment. Our setting is committed to anti-discriminatory practice to promote equality of opportunity and valuing diversity for all children and families. We aim to:

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

Procedures

Admissions

Our setting is open to all members of the community.

- We advertise our service widely.
- We reflect the diversity of our society in our publicity and promotional materials.
- We provide information in clear, concise language, whether in spoken or written form.
- We provide information in as many languages as possible.
- We base our Admissions Policy on a fair system.
- We ensure that all parents are made aware of our Valuing Diversity and Promoting Equality Policy.
- We do not discriminate against a child or their family, or prevent entry to our setting, on the basis of a protected characteristic as defined by the Equalities Act (2010). These are:
 - disability;
 - race;
 - gender reassignment;
 - religion or belief;
 - sex;
 - sexual orientation;
 - age;
 - pregnancy and maternity; and
 - marriage and civil partnership.
- We do not discriminate against a child with a disability or refuse a child entry to our setting for reasons relating to disability.
- We ensure, wherever possible, that we have a balanced intake of boys and girls in the setting.
- We develop an action plan to ensure that people with impairments can participate successfully in the services offered by the setting and in the curriculum offered.
- We take action against any discriminatory behaviour by staff or parents whether by:
 - direct discrimination – someone is treated less favourably because of a protected characteristic e.g. preventing families of some racial groups from using the service;
 - indirect discrimination - someone is affected unfavourably by a general policy e.g. children must only speak English in the setting;
 - association – discriminating against someone who is associated with a person with a protected characteristic e.g. behaving unfavourably to someone who is married to a person from a different cultural background; or
 - perception – discrimination on the basis that it is thought someone has a protected characteristic e.g. making assumptions about someone's sexual orientation because of their mannerisms or how they speak.
- Displaying of openly discriminatory and possibly offensive materials, name calling, or threatening behaviour are unacceptable on, or around, the premises and will be dealt with in the strongest manner.

Employment

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

Training

- We seek out training opportunities for staff and volunteers to enable them to develop anti-discriminatory and inclusive practices, which enable all children to flourish.
- We ensure that staff are confident and fully trained in administering relevant medicines and performing invasive care procedures when these are required.
- We review our practices to ensure that we are fully implementing our policy for Valuing Diversity and Promoting Equality.

Curriculum

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

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

- making children feel valued and good about themselves and others;
- ensuring that children have equality of access to learning;
- undertaking an access audit to establish if the setting is accessible to all children;
- making adjustments to the environment and resources to accommodate a wide range of learning, physical and sensory impairments;
- making appropriate provision within the curriculum to ensure each child receives the widest possible opportunity to develop their skills and abilities, e.g. recognising the different learning styles of girls and boys;
- positively reflecting the widest possible range of communities in the choice of resources;
- avoiding stereotypes or derogatory images in the selection of books or other visual materials;
- celebrating a wide range of festivals;
- creating an environment of mutual respect and tolerance;
- differentiating the curriculum to meet children's special educational needs;

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

Valuing diversity in families

- We welcome the diversity of family lifestyles and work with all families.
- We encourage children to contribute stories of their everyday life to the setting.
- We encourage mothers, fathers and other carers to take part in the life of the setting and to contribute fully.
- For families who speak languages in addition to English, we will develop means to ensure their full inclusion.
- We offer a flexible payment system for families of differing means and offer information regarding sources of financial support.
- We take positive action to encourage disadvantaged and under-represented groups to use the setting.

Food

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

Monitoring and reviewing

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

9.2 Supporting Children with Special Educational Needs and Disabilities

Inclusions Policy

At Laurel Way Playgroup we have regard for the Special Education Needs and Disability Code of Practice 2014 and the Equality Act (2010).

All children are welcomed into our community, regardless of need or disability. When we know that a child may have a special education need or disability (SEND) before they start with us, we will endeavour to set up a good transition for them into our setting involving child, parents/carers and any outside professionals know to the child. This may involve the child visiting out setting on a number of occasions and/or a home visit by one of our members of staff.

We have a named SENCO (Special Educational Needs Co-ordinator) and their name is:
Susan Farber

The SENCO is there to support all members of staff in the early identification of special needs. The SENCO is also responsible for the day-to-day provision for children with SEND. The individual needs of all our children are taken into consideration when planning the curriculum so as to ensure it is accessible to the needs of all our children.

Together with your child's key person, our SENCO maintains and oversees all records for children with SEND in our setting. Following discussion and consultation with parents/carers the SENCO may liaise with other staff and outside agencies as appropriate (such as health, education and social services) regarding the Special Educational Needs and Disabilities of a child.

We are committed to effective collaboration between all agencies working with a child together with a multi-disciplinary approach to meeting children's special education needs.

The detailed systems and procedures on the "Graduated Approach to Identifying and Planning for needs in the Early Years' protocol (see attached) ensure that where there is an identified need, we will work in true partnership with the child, their family and other professionals to achieve the best possible outcomes.

10.0 Information and Records

10.1 Our Prospectus (available to prospective parents)

10.2 Admissions

Policy statement

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

Procedures

- We ensure that the existence of our setting is widely advertised in places accessible to all sections of the community.
- We ensure that information about our setting is accessible and provided in written and spoken form.
- We will provide translated written materials where language needs of families suggest this is required, as well as access to an interpreter. Where necessary, we will try to provide information in Braille, or through British Sign Language.
- We arrange our waiting list in birth order. In addition, our policy may take into account the following:
 - the vicinity of the home to the setting; and
 - siblings already attending the setting.
- We keep a place vacant, if this is financially viable, to accommodate an emergency admission.
- We describe our setting and its practices in terms that make it clear that it welcomes both fathers and mothers, other relations and other carers, including childminders.
- We describe how our practices treat each child and their family, having regard to their needs arising from their gender, special educational needs, disabilities, social background, religion and ethnicity or from English being a newly acquired additional language.
- We describe how our practices enable children and/or parents with disabilities to take part in the life of the setting.
- We monitor the gender and ethnic background of children joining the group to ensure that our intake is representative of social diversity.
- We make our Valuing Diversity and Promoting Equality Policy widely known.
- We consult with families about the opening times of the setting to ensure we accommodate a broad range of families' needs.
- We are flexible about attendance patterns to accommodate the needs of individual children and families, providing these do not disrupt the pattern of continuity in the setting that provides stability for all the children.

10.5 Parental involvement

Policy statement

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

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

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

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

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

Procedures

- We have a means to ensure all parents are included - that may mean we have different strategies for involving fathers, or parents who work or live apart from their children.
- We consult with all parents to find out what works best for them.
- We ensure ongoing dialogue with parents to improve our knowledge of the needs of their children and to support their families.
- We inform all parents about how the setting is run and its policies, through access to written information and through regular informal communication. We check to ensure parents understand the information that is given to them.
- We encourage and support parents to play an active part in the governance and management of the setting.
- We inform all parents on a regular basis about their children's progress.
- We involve parents in the shared record keeping about their children - either formally or informally – and ensure parents have access to their children's written developmental records.
- We provide opportunities for parents to contribute their own skills, knowledge and interests to the activities of the setting.
- We inform parents about relevant conferences, workshops and training.
- We consult with parents about the times of meetings to avoid excluding anyone.
- We provide information about opportunities to be involved in the setting in ways that are accessible to parents with basic skills needs, or those for whom English is an additional language.

- We hold meetings in venues that are accessible and appropriate for all.
- We welcome the contributions of parents, in whatever form these may take.
- We inform all parents of the systems for registering queries, complaints or suggestions and we check to ensure these are understood. All parents have access to our written complaints procedure.
- We provide opportunities for parents to learn about the curriculum offered in the setting and about young children's learning, in the setting and at home.

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

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

10.6 Children's records

Policy statement

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

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

Procedures

We keep two kinds of records on children attending our setting:

Developmental records

- We use an online Learning Journal called Tapestry to record your child's learning and development. Tapestry is hosted in the UK on secure servers.
- For further information visit <http://eylj.org>.
- Each child will have a personal online Learning Journey which records photos, videos, observations, and assessments to be shared with parents.

Personal records

- These include registration and admission forms, signed consent forms, correspondence concerning the child or family, reports or minutes from meetings concerning the child from other agencies, an ongoing record of relevant contact with parents, and observations by staff on any confidential matter involving the child, such as developmental concerns or child protection matters.
- These confidential records are stored in a lockable file or cabinet and are kept secure by the person in charge in an office or other suitably safe place.
- Parents have access, in accordance with our Client Access to Records Policy, to the files and records of their own children, but do not have access to information about any other child.
- Staff will not discuss personal information given by parents with other members of staff, except where it affects planning for the child's needs. Staff induction includes an awareness of the importance of confidentiality in the role of the key person.
- We retain children's records for three years after they have left the setting, except records that relate to an accident or child protection matter, which are kept until a child reaches the age of 21 years. These are kept in a secure place.

Other records

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

10.7 Provider records

Policy statement

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

- Records pertaining to our registration.
- Landlord/lease documents and other contractual documentation pertaining to amenities, services and goods.
- Financial records pertaining to income and expenditure.
- Risk assessments.
- Employment records of staff including their name, home address and telephone number.
- Names, addresses and telephone numbers of anyone else who is regularly in unsupervised contact with the children.

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

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

Procedures

- All records are the responsibility of the manager who ensures they are kept securely.
- All records are kept in an orderly way in files and filing is kept up-to-date.
- Financial records are kept up-to-date for audit purposes.
- Health and safety records are maintained; these include risk assessments, details of checks or inspections and guidance etc.
- Our Ofsted registration certificate is displayed.
- Our Public Liability insurance certificate is displayed.
- All our employment and staff records are kept securely and confidentially.
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We notify Ofsted of any change:

- in the address of the premises;
- to the premises which may affect the space available to us or the quality of childcare we provide;
- to the name and address of the provider, or the provider's contact information;
- to the person managing the provision;
- any significant event which is likely to affect our suitability to look after children; or
- any other event as detailed in the Statutory Framework for the Early Years Foundation Stage (DfE 2012).

10.8 Transfer of records to school

Policy statement

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

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

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

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

Procedures

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

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

Transfer of confidential information

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

10.9 Confidentiality and client access to records

Policy statement

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

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

In our setting, staff and managers can be said to have a 'confidential relationship' with families. It is our intention to respect the privacy of children and their parents and carers, while ensuring that they access high quality early years care and education in our setting. We aim to ensure that all parents and carers can share their information in the confidence that it will only be used to enhance the welfare of their children. There are record keeping systems in place that meet legal requirements; the means we use to store and share that information takes place within the framework of the Data Protection Act (1998) and the Human Rights Act (1998).

Confidentiality procedures

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

Client access to records procedures

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

- Any request to see the child's personal file by a parent or person with parental responsibility must be made in writing to the setting manager.
- The setting commits to providing access within 14 days, although this may be extended.
- The setting's owner prepare the file for viewing.

- All third parties are written to, stating that a request for disclosure has been received and asking for their permission to disclose to the person requesting it. Copies of these letters are retained on file.
- 'Third parties' include all family members who may be referred to in the records.
- It also includes workers from any other agency, including children's social care, the health authority, etc. It is usual for agencies to refuse consent to disclose, preferring the individual to go directly to them.
- When all the consents/refusals to disclose have been received, these are attached to the copy of the request letter.
- A photocopy of the complete file is taken.
- The setting owner go through the file and remove any information which a third party has refused consent to disclose. A thick black marker is used, to score through every reference to the third party and information they have added to the file.
- What remains is the information recorded by the setting, detailing the work initiated and followed by them in relation to confidential matters. This is called the 'clean copy'.
- The 'clean copy' is photocopied for the parents, who are then invited in to discuss the contents. The file should never be given straight over, but should be gone through by the setting leader, so that it can be explained.
- Legal advice may be sought before sharing a file, especially where the parent has possible grounds for litigation against the setting or another (third party) agency.
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All the undertakings above are subject to the paramount commitment of the setting, which is to the safety and well-being of the child. Please see also our policy on Safeguarding Children and Child Protection

10.10 Information sharing

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

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

Policy statement

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

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

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

The decision should never be made as an individual, but with the back-up of the staff.

The three critical criteria are:

- Where there is evidence that the child is suffering, or is at risk of suffering, significant harm.
- Where there is reasonable cause to believe that a child may be suffering, or is at risk of suffering, significant harm.
- To prevent significant harm arising to children and young people or adults, including the prevention, detection and prosecution of serious crime.

Procedures

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

1. *Remember that the Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately.*
 - Our policy and procedures on Information Sharing provide guidance to appropriate sharing of information with external agencies.

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

In our setting we ensure parents:

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

In our setting we:

- record concerns and discuss these with the setting's designated person and/or designated officer from the management committee for child protection matters;
 - record decisions made and the reasons why information will be shared and to whom; and
 - follow the procedures for reporting concerns and record keeping.
6. *Necessary, proportionate, relevant, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.*

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

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

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

Consent

- ☒ Our policies and procedures set out our responsibility regarding gaining consent to share information and when it may not be sought or overridden.
- ☒ We may cover this verbally when the child starts or include this in our prospectus.
- ☒ Parents sign our Registration Form at registration to say they understand this.
- ☒ Parents are asked to give written consent to share information about any additional needs their child may have, or to pass on child development summaries to the next provider/school.
- ☒ Copies are given to parents of the forms they sign.

We consider the following questions when we need to share:

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

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

10.11 Working in partnership with other agencies

Policy statement

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

Procedures

- We work in partnership, or in tandem with, local and national agencies to promote the well-being of children.
- Procedures are in place for the sharing of information about children and families with other agencies. These are set out in the Information Sharing Policy, Safeguarding Children and Child Protection Policy and the Supporting Children with Special Educational Needs Policy.
- Information shared by other agencies with us is regarded as third party information. This is also kept in confidence and not shared without consent from that agency.
- When working in partnership with staff from other agencies, we make those individuals welcome in the setting and their professional roles are respected.
- We follow the protocols for working with agencies, for example on child protection.
- Staff from other agencies do not have unsupervised access to the child they are visiting in the setting and do not have access to any other child(ren) during their visit.
- Our staff do not casually share information or seek informal advice about any named child/family.
- When necessary, we consult with local and national agencies who offer a wealth of advice and information that help us to develop our understanding of the issues facing us and who can provide support and information for parents. For example, ethnic/cultural organisations, drug/alcohol agencies, welfare rights advisors or organisations promoting childcare and education, or adult education.

10.12 Making a complaint

Policy statement

Our setting believes that children and parents are entitled to expect courtesy and prompt, careful attention to their needs and wishes. We welcome suggestions on how to improve our setting and will give prompt and serious attention to any concerns about the running of the setting. We anticipate that most concerns will be resolved quickly, by an informal approach to the appropriate member of staff. If this does not achieve the desired result, we have a set of procedures for dealing with concerns. We aim to bring all concerns about the running of our setting to a satisfactory conclusion for all of the parties involved.

Procedures

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

Making a complaint

Stage 1

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

Stage 2

- If this does not have a satisfactory outcome, or if the problem recurs, the parent moves to this stage of the procedure by putting the concerns or complaint in writing to the setting leader and the management team.
- For parents who are not comfortable with making written complaints, there is a template form for recording complaints in the Complaint Investigation Record; the form may be completed with the person in charge and signed by the parent.
- The setting stores written complaints from parents in the child's personal file. However, if the complaint involves a detailed investigation, the setting leader may wish to store all information relating to the investigation in a separate file designated for this complaint.
- When the investigation into the complaint is completed, the setting leader or manager meets with the parent to discuss the outcome.

- Parents must be informed of the outcome of the investigation within 28 days of making the complaint.
- When the complaint is resolved at this stage, the summative points are logged in the Complaint Investigation Record.

Stage 3

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

Stage 4

- If at the stage three meeting the parent and setting cannot reach agreement, an external mediator is invited to help to settle the complaint. This person should be acceptable to both parties, listen to both sides and offer advice. A mediator has no legal powers, but can help to define the problem, review the action so far and suggest further ways in which it might be resolved.
- Staff or volunteers within the Pre-school Learning Alliance are appropriate persons to be invited to act as mediators.
- The mediator keeps all discussions confidential. S/he can hold separate meetings with the setting personnel (setting leader and chair, director or owner) and the parent, if this is decided to be helpful. The mediator keeps an agreed written record of any meetings that are held and of any advice s/he gives.

Stage 5

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

Safeguarding Children Board

- Parents may approach Ofsted directly at any stage of this complaints procedure. In addition, where there seems to be a possible breach of the setting's registration requirements, it is essential to involve Ofsted as the registering and inspection body with a duty to ensure the Safeguarding and Welfare Requirements of the Early Years Foundation Stage are adhered to.
- The number to call Ofsted with regard to a complaint is: **0300 123 1231**
- These details are displayed on our setting's notice board.
- If a child appears to be at risk, our setting follows the procedures of the Local Safeguarding Children Board.
- In these cases, both the parent and setting are informed and the setting leader works with Ofsted or the Local Safeguarding Children Board to ensure a proper investigation of the complaint, followed by appropriate action.

Records

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

10.13 Grievance Policy

Policy Statement

If an employee is dissatisfied he/she must have immediate discussions with her/his immediate supervisor. The aim of a grievance policy is to settle grievances fairly and is near as possible to the point of origin.

Procedure

Step 1: Statement of Grievance

The employee must set out the grievance in writing, and the basis for it and send the statement or copy of it to the Nursery.

Step 2: Meeting

The nursery must invite the employee to attend a meeting to discuss the grievance.

Employees are entitled to be accompanied at all stages of the grievance procedure.

The meeting must not take place unless the employee has informed the nursery what the basis for the grievance is when making the statement under Step 1. The nursery must have a reasonable opportunity to consider a response to that information.

The employee must take all reasonable steps to attend the meeting.

After the meeting, the nursery must inform the employee of its decision as to its response to the grievance in writing and notify him/her of the right to appeal against the decision if he/she is not satisfied with it. The employee should be notified of the decision within 5 days of the meeting. any appeal must be submitted within 5 days of the date of the decision letter.

Step 3: Appeal

If the employee does wish to appeal, she/he must inform the nursery in writing. If the employee informs the nursery of his/her wish to appeal, the nursery must invite him/her to attend a further meeting.

The employee must take all reasonable steps to attend the meeting.

After the appeal meeting, the Nursery must inform the employee of its final decision.

The appeal hearing should be heard, if possible within 15 days of receipt of the appeal

The head/deputy other than those involved in the grievance meeting at the previous stage should hear the appeal if at all possible.

A written record of the meeting will be kept.

A modified procedure will apply in the following cases:

1. the former employee is no longer employed by the Nursery
2. the standard grievance procedure had not commenced or, if it had been commenced, had not been completed before the last day of the employee's employment; and
3. the parties have agreed in writing, after the nursery became aware of the grievance that the mobbed GP should apply in relation to the grievance.

In such circumstances the following procedure will apply:

Step 1: Statement of Grievance

The employee must set out in writing the grievance and the basis for it, and send a copy of it to the nursery. If the employee wishes for the modified procedure to be followed after the employment has ended, then he/she must include this in their statement at step 1 of the process. The nursery can decide whether to accede to the employee's request to have the employer respond in writing or to insist that a meeting takes place in line with the standard grievance procedure.

Step 2: Response

The nursery must set out in writing his response and send the statement or a copy of it to the former employee.