

Managing Behaviour **Achieving Positive Behaviour Policy**



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 feelings, 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.

Procedures:

We have a named person who has overall responsibility for our programme for supporting personal, social and emotional development, including issues concerning behaviour.

Pre-school- Mrs Jukes, Reception class- Mrs Price

- We recognise that codes for interacting with other people vary within 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 role model of behaviour by treating children, parents and one another with friendliness, care, courtesy and respect.
- We familiarise new staff and volunteers with the setting's Achieving Positive Behaviour policy and its guidelines for behaviour.
- We expect all members of our setting; children, staff, parents, volunteers and students, to keep to the guidelines, requiring these to be applied consistently.
- All staff, students and volunteers will receive relevant in-service training on promoting positive behaviour.
- We work in partnership with children's parents. Parents are regularly informed about their children's behaviour by their Key Person (Pre-school)/ class teacher (Reception). We work with parents to address reoccurring inconsiderate behaviour, using our observation records to help us understand the cause and to decide jointly how to respond appropriately.

Strategies with children who engage in inconsiderate behaviour:

- We require all staff, volunteers and students to use positive strategies for handling any inconsiderate behaviour, by helping children to find solutions in ways which are appropriate for the children's ages and stages of development. Such solutions might include, for example, 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 popular 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.
- When children behave in inconsiderate ways, we help them understand the outcome of their actions and support them in learning how to cope more appropriately.

We do not shout or raise our voices in a threatening way to respond to children's inconsiderate behaviour.

- We give pupils choices or alternatives.
First warning then **second** warning then 'Time-in' (Pre-School) 'Time-out' (Reception class) strategy used.

Conflict Resolution is a way of staff helping children to deal with their feelings, manage their own behaviour and solve their own problems. Staff will:

- Approach quickly and calmly.
- Stop any hurtful behaviour.
- Stay calm and get down to the child's level.
- Remain patient
- Acknowledge the feelings of the children involved
- Neutralise the object
- Gather information from the children, listen to all sides.
Restate the problem using the children's own language
- Children are encouraged to agree on a solution to the problem.
Staff will give follow up support where necessary.

- We never use physical or corporal punishment and do not use techniques intended to humiliate and single out individual children.
- We use physical restraint, such as holding, only to prevent physical injury to children or adults and/or serious damage to property.
- Details of such an event (what happened, what action was taken and by whom, and the names of witnesses) are brought to the attention of the setting leader and are recorded in the child's personal file. The child's parent/s is/are informed on the same day.
- In cases of serious misbehaviour, such as racial or other abuse, we make clear immediately the unacceptability of the behaviour and attitudes, by means of explanations rather than personal blame.

Hurtful behaviour:

We take hurtful behaviour very seriously. Most children in the EYFS will hurt at some stage 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 young children, hurtful behaviour is momentary, spontaneous and often without recognition 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 to manage these feelings by offering support, calming the child who is angry, as well as the one who has been hurt by the behaviour.
- We do not engage in punitive responses to a young child's rage as this will have the opposite effect.
- 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 verbalise their feelings better, talking through the feelings themselves 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 are aware that the same problem may happen over and over before skills such as sharing and turn-taking develop. The 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 the 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.

Staff record hurtful behaviour on Behaviour Incident sheets and discuss these with parents/carers. Where this does not work we use the Special Educational Needs and Disability Code of Practice (SEND 2014) to support the child and family, making the appropriate referrals to the Area SENCO, Sycamore Behaviour Outreach, the Educational Psychologist and/ or CAHMS.

Positive behaviour

Rules are negotiated with the children and worded positively. Class rules are reinforced regularly by staff through praise and rewards and through the use of sanctions, if necessary.

Rules

- To try to follow instructions
- To try to keep my hands and my feet to myself
- To try to use nice words

Rewards

Verbal praise, positive feedback, compliments

Encouragement

Social rewards, smiling, clapping

Treats, rewards, privileges e.g. let the child choose a story/ song or what toy they would like to play with

Token rewards; Give the child stars, stickers, certificates, stamps etc.

Sent to another teacher with work/ head teacher

Praise wall/ displays in class

Reward charts (reception class)

Opportunities to receive praise in assemblies

Circle time is used to raise self esteem and to reflect on attitudes and behaviour. It is also used to communicate and co-operate as a group to help learning and relationships.

Sanctions

If a pupil fails to follow the class rules the following sanctions will be applied:

Verbal reminder to the pupil of the rule they have broken

Reiteration of the rule and the pupil warned of the consequence.

- Continued disruption will lead to a **'time in'** in a quiet area away from the situation where an adult will talk through the rules with the child.
- Owing Time charts will be used where necessary and children will 'pay back' the time owed during child initiated play sessions.
- Behaviour Incident sheets will be completed and shared with parents.
- Poor behaviour at lunchtime can lead to children being kept inside for part of the playtime.
- The Head teacher will be informed of persistent unwanted behaviour and parents will be invited in to discuss their child's behaviour and support a strategy for improvement.

It is crucial that parents are fully aware of the EYFS policy on behaviour and a copy will be issued to parents each year. We expect that early interventions and discussions with parents will nip an issue in the bud. Early involvement will also make it easier to offer advice about how they can support the schools strategies.

Exclusion

Exclusion is seen as the last resort; after all other attempts to modify behaviour have failed.

Staff/other professionals will work co-operatively with parents/ carers of children who are experiencing difficulty with behaviour, however, staff will not tolerate aggressive, physical or verbal behaviour that will cause injury/ harm to other children, themselves or staff.

Fantasy aggression

Young children often engage in play that has aggressive themes such as superhero and weapon play, some children appear preoccupied 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 will develop strategies to contain play that are agreed with the children and understood by them with acceptable behavioural boundaries to ensure children are not hurt.

We recognise that fantasy play also contains many violently dramatic strategies, e.g. blowing up and shooting, and that themes often refer to 'goodies and baddies' and as such offer opportunities to explore concepts of right and wrong.

As experienced practitioners we are able to tune into the content of children's 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.

Bullying (See main school policy for more details)

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

Any serious or persistent incidents must be reported to the Head teacher Mrs Mason.

If a child bullies another child/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/children
- We explain to the child doing the bullying why her/his behaviour is not acceptable
- We give reassurance to the child/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 practice 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 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.

Review Date: September 2017

Health: **Administering Medicines**

Policy statement

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

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

The Key Person is responsible for the correct administration of medication for children for whom they are key Person (Pre-school), and Reception class teaching assistants are responsible for the correct administration of medication in reception class. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures. In the absence of the key person, the manager is responsible for overseeing the administering of medication.

It is preferable for the parents to undertake the responsibility of administering prescribed medicine to their child. In the absence of a parent a designated member of staff will be responsible for the correct administration of the prescribed medicine. No child may self administer medicine.

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.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only medication prescribed by a doctor is administered. It must be in date and prescribed for the current condition.
- No medication shall be administered to any child without prior written consent of the parent /carer.

The staff giving the medication must ask the parent to sign a consent form stating:

- The full name of the child;
- The name of medication and strength;
- The dosage to be given in setting;
- How the medication is to be stored and
- The signature of the parent, their printed name and date.

- Each time medicine is given the Key Person/ Manager sign the record book to acknowledge administration of the medicine. The book is signed by two members of staff in Pre-School.
- Parents are shown the record at the end of each day and asked to sign the book to acknowledge the administration of the medicine.
- Staff to check the medication is clearly marked with the child's name, dosage and date of dispensing.
- Dosages should be recorded in written form with time/ date and amounts, retained for the future, and signed by staff and parent/carers.
- Staff will be required to check the dates on long term medicine.
- Only prescribed medication will be administered in school.

Storage

Storage of medicines

- Medication will be stored in their original containers, in a safe, secure place depending on storage instructions and away from children. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.
- The designated adult is responsible for ensuring that any medicine is returned to the parent at the end of the day.
- For some conditions medication may be kept in the setting to be administered on a regular or as-and-when-required basis. Key Persons check that any medication is in date and return any out-of-date medicine back to the parent. (e.g. prescribed medication for allergies/skin conditions).
- If the administration of the prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.
- No child may self administer. Where children are capable of understanding when they need medication, for example with asthma, they should be encouraged to tell their Key Person (Pre-school) or any member of staff in Reception class what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.

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

A Care Plan/Risk Assessments is carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the manager alongside the Key Person. Other medical or social care personnel may need to be involved in the Care Plan/Risk Assessments.

Parents will also contribute to a Care Plan/risk assessment. They should be shown around the setting, understand the routines and activities and point out anything which they think may be a risk factor for their child.

For some medical conditions, key staff will need to have training in a basic understanding of the condition, as well as how the medication is to be administered correctly. The training needs for staff forms part of the risk assessment.

The risk assessment includes vigorous activities and any other activity that may give cause for concern regarding and individual child's health needs.

A health care plan for the child is drawn up with the parents; outlining the Key Person's role and what information must be shared with other staff who care for the child.

The health care plan includes measures to be taken in an emergency.

The health care plan is reviewed every six months, or more frequently if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.

Parents receive a copy of the health care plan and each contributor, including the parents, signs it.

Managing medicines on trips and outings:

If children are going on trips and outings, staff accompanying the children must include the Key Person for the child with a risk assessment, or with another member of staff who is fully informed about the child's needs and/ or medication.

Medication for a child is taken in a sealed plastic box clearly labelled with the child's name and the name of the medication. Inside the box there is a copy of the consent form and a completed medicines form to record when it has been given, including all the details that need to be recorded in the medicines form as stated above. Parent's signs the medicines form after the visit.

If a child on medication has to be taken to hospital, the child's medication is taken in a sealed plastic box clearly labelled with the child's name and the name of the medication. Inside the box there is a copy of the consent form signed by the parent.

As a precaution children should not eat whilst travelling in vehicles.

This procedure is read alongside the outings procedure.

Review Date: September 2017

Amblecote Pre-school

Admissions Policy

It is our intention to make Amblecote Pre-school genuinely accessible to children and families from all sections of the local community. In order to accomplish this:

We are registered with Ofsted to provide sessional day care to children aged 3 and 4 years. Our priority is to give places to children aged 3 and over who qualify for the early education funding. Our waiting list is arranged in order of date of birth, not date of application, taking into account all other relevant priorities. (please see below)

We ensure that the existence of Amblecote Pre-school is widely known in all local communities.

Parents/carers and their child are warmly invited to view Amblecote Pre-school. If they wish to apply for a place at Amblecote Pre-school, they need to complete an application form which will be held on file. The Pre-school Manager will contact parents in the term before their child's intended admission date and the offer of a Pre-school place is made. An induction session is booked as is a home visit.

Further play sessions are booked after the induction and home visit which enables the child to meet all the staff, their new friends, explore the surroundings and for parents/carers to ask any further questions that may have arisen since the home visit.

Prior to admission all paperwork relating to the child must be completed by the parents/carers and shared with the child's Key Person. This includes full details of any support required for a child with a medical condition (please see separate policy).

Parents/carers are entitled to claim early education funding for 3 and 4 year olds.

Parents/carers do not have to accept all the sessions offered and have a choice to split them with another setting if they so wish. Fees may also be charged if a child exceeds their 15 hours of funding across different settings. The fees are reviewed annually. We aim to be flexible about attendance patterns so as to accommodate the needs of individual children and families.

Amblecote Pre-school has a 24 place morning session and a 24 place afternoon session. Places are allocated as per the criteria below:

1. looked after children
2. To children for whom the setting is the most suitable available setting to meet either the child's special educational needs or medical needs.
3. For children who attend Amblecote Time for Two's (T4T's) provision
4. To children who have a brother or sister already at Amblecote Primary school who will be attending the school at time of entry.
5. On the basis of proximity.

Review Date: September 2017

Animals in the Setting

Policy statement

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

Procedures:

- We carry out a risk assessment with a knowledgeable person accounting for any hygiene or safety risks posed by the animal or creature.
- We provide suitable housing for the animal or creature and ensure this is cleaned out regularly and is kept safely.
- We ensure the correct food is offered at the right times.
- We make arrangements for weekend and holiday care for the animal or creature.
- We make sure all vaccinations and other regular health measures are up-to-date and recorded.
- Children are taught correct handling and care of the animal or creature and do not have contact with animal soil or soiled bedding.
- Children wash their hands after handling the animal or creature.
- If animals or creatures are brought in by visitors to show the children the safety of the animal or creature is the responsibility of the owner.
- The manager/deputy manager can refuse the admission of any animal or creature that they consider to be dangerous or inappropriate. The children's safety is paramount at all times.

Visits to Farms:

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

- The outings procedure is followed.
- Children wash their hands after contact with animals.
- Outdoor footwear worn to visit farms should be removed upon return to the setting and should not be worn indoors.

Review Date: September 2017

Safeguarding Children

Children's Records

Policy statement

There are record keeping systems in place that meet legal requirements; means of storing and sharing that information take place within the framework of the Data Protection Act and the Human Rights Act.

This policy and procedure is taken in conjunction with the Confidentiality Policy and our procedures for information sharing.

Procedures

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

Developmental records (to include Electronic Learning Journeys)

- These include observations of children in the setting, photographs, video clips and samples of their work and summary developmental reports.
- These are usually kept in the classroom and can be freely accessed, and contributed to, by staff, the child and the child's parents.

Personal records

- These include registration and admission forms, signed consent forms, and 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 the office/ Pre-school.
- 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.

Other records

- 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 recognised qualifications and training, when they are observing in the setting, are advised of our confidentiality policy and are required to respect it.
- 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.

**Pre-school is registered with the Information Commissioners Office (ICO) under
Amblecote Primary Schools registration**

Review Date: September 2017

Safeguarding Children

Confidentiality and Client Access to Records

Definition: 'Confidential information is information of some sensitivity, which is not already lawfully in the public domain or readily available from another public source, and which has been shared in a relationship where the person giving the information understood it would not be shared with others.'

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; means of storing and sharing that information take place within the framework of the Data Protection Act and the Human Rights Act.

We are registered with the Information Commissioners Office as part of Amblecote Primary school

Confidentiality procedures

- We always check whether parents regard the information they share with us to be regarded as confidential or not.
- Some parents sometimes 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 record keeping procedures) - 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 record keeping procedures).

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 may be asked to be made in writing to the Governors or Manager.
- The setting leader informs the Governors/Care Committee and sends a written acknowledgement.
- The setting commits to providing access within 14 days, although this may be extended.
- The setting's leader or manager prepares 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 social services, the health authority, etc. It is usual for agencies to refuse consent to disclose, preferring the individual to go directly to them.
- When all the consents/refusals to disclose have been received these are attached to the copy of the request letter.
- A photocopy of the complete file is taken.
- The setting leader and governor go through the file and remove any information which a third party has refused consent to disclose. This is best done with a thick black marker, 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 Manager, so that it can be explained.
- Legal advice may be sought before sharing a file, especially where the parent has possible grounds for litigation against the setting or another (third party) agency.

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

Review Date: September 2017

Suitable People

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 Disclosure Barring Service in accordance with statutory requirements.

Procedures

Vetting and staff selection

- We work towards offering equality of opportunity by using non-discriminatory procedures for staff recruitment and selection.
- All staff have job descriptions which set out their staff roles and responsibilities.
- We welcome applications from all sections of the community. Applicants will be considered on the basis of their suitability for the post, regardless of disability, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation, sex, age, marriage or civil partnership. Applicants will not be placed at a disadvantage by our imposing conditions or requirements that are not justifiable.
- We use Ofsted guidance on obtaining references and enhanced criminal record checks through the Disclosure and Barring Service (DBS) for staff and volunteers who will have unsupervised access to children. This is in accordance with requirements under the Safeguarding Vulnerable Groups Act 2006 for the vetting and barring scheme.
- We keep all records relating to employment of staff and volunteers, in particular those demonstrating that checks have been done, including the date and number of the enhanced DBS check.
- Staff are expected to disclose any convictions, cautions, court orders, reprimands and warnings which may affect their suitability to work with children-whether received before, or at any time during, their employment with us.

Disqualification

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

Training and staff development

- We provide regular in-service training to all staff.
- Our Pre-School budget allocates resources to training.
- We provide staff induction training in the first week of employment. This induction includes our Health and Safety Policy and Procedures and Safeguarding Children and Child

Protection Policy. Other policies and procedures will be introduced within an agreed induction plan.

- We support the work of our staff by holding regular supervision meetings and appraisals.
- We are committed to recruiting, appointing and employing staff in accordance with all relevant legislation and best practice.

Staff taking medication/other substances

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

Managing staff absences and contingency plans for emergencies

- 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.
- Sick leave is monitored and action is taken where necessary in accordance with the contract of employment.
- We have contingency plans to cover staff absences.

Review Date : September 2017

Staff Qualifications, Training, Support and Skills

First Aid

Policy Statement

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

Procedures

Our first aid kit is accessible at all times, complies with the Health and Safety (First Aid) Regulations 1981. We follow recommendations given by lead practitioners on First Aid courses as to what should be in our First Aid Box.

In addition to the first aid equipment, each box is supplied with:

- 2 pairs of disposable plastic (PVC or vinyl) gloves.
- 1 plastic disposable apron.
- 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, parents or staff.
- At the time of admission to the setting, parents' written permission for emergency medical advice or treatment is sought. Parents sign and date their written approval.
- Parents sign a consent form at registration allowing staff to take their child to the nearest Accident and Emergency unit to be examined, treated or admitted as necessary on the understanding that parents have been informed and are on their way to the hospital.

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Review Date: September 2017

Health

Food and Drink

Policy statement

This setting regards snack time as an important part of our day. Eating represents a social time for children and adults and helps children to learn about healthy eating. We promote healthy eating using a range of resources and materials and at snack time, we aim to provide nutritious food, which meets the children's individual dietary needs.

Procedures

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

- Before a child starts to attend the setting, we find out from parents their children's dietary needs and preferences, including any allergies.
- We record information about each child's dietary needs in the Registration Form and parents sign the form to say that it is correct.
- We regularly consult with parents to ensure that our records of their children's dietary needs - including any allergies - are up-to-date.
- We display current information about individual children's dietary needs so that all staff and volunteers are fully informed about them.
- We implement systems to ensure that children receive only food and drink that is consistent with their dietary needs and preferences, as well as their parents' wishes.
- We display the school meal menu for parents to view and a copy is sent home. (Reception class)
- We provide nutritious snacks and include foods from the diet of each of the children's cultural backgrounds, providing children with familiar foods and introducing them to new ones.
- We take care not to provide food containing nuts or nut products and are especially vigilant where we have a child who has a known allergy to nuts.
- Through discussion with parents we obtain information about dietary rules of the religious groups, to which the children and their parents belong, and of vegetarians and vegans, as well as about food allergies. We take account of this information in the provision of food and drinks.
- We organise snack times so that they are social occasions in which children and staff participate.
- Staff show sensitivity in providing for children's diets and allergies and do not make a child feel singled out because of her/ his diet or allergy.

- We use snack times to help children to develop independence through making choices, serving food and drink and feeding themselves.
- We provide children with utensils that are appropriate for their ages and stages of development and that take account of the eating practices in their cultures.
- Children are requested to bring a water bottle to school daily which is sent home to be washed at the end of each session.
- For children who drink milk, we provide whole pasteurised milk.

Packed lunches

- We inform parents of our policy on healthy eating.
- We encourage parents to provide sandwiches with a healthy filling, fruit, and milk based deserts such as yoghurt or crème fraîche. We discourage sweet drinks and inform parents that no glass bottles are allowed.
- We encourage parents to provide an ice pack to keep food cool, particularly in the summer. We do not have the provision to store packed lunches in the refrigerator.
- Through our healthy eating policy and our focus topics in class we try to encourage a healthy balance of foods in the children's lunchboxes. (Reception class)

Review Date: September 2017

Health-Food Hygiene

Policy statement

In the EYFS we provide food for the children on the following basis:

- Snacks,
- Food tasting and
- Weekly cooking activities

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

Procedures

- At least one person has a valid food hygiene certificate.
- We use reliable suppliers for the food we purchase.
- Food is stored at the correct temperatures and is checked to ensure it is in-date and not subject to contamination by pests, rodents or mould. Fridge temperatures are recorded daily.
- Food is labelled with opening date.
- Food preparation areas are cleaned before use as well as after use.
- There are separate facilities for hand washing and for washing up.
- All surfaces are clean and non-porous.
- All utensils, crockery, etc are clean and stored appropriately.
- Waste food is disposed of daily.
- Cleaning materials and other dangerous materials are stored out of children's reach.
- When children take part in cooking activities, they:
 - are supervised at all times;
 - understand the importance of hand washing and simple hygiene rules;
 - are kept away from hot surfaces and hot water; and
 - do not have unsupervised access to electrical equipment such as blenders.

Reporting of food poisoning

- Food poisoning can occur for a number of reasons; not all cases of sickness or diarrhoea are as a result of food poisoning and not all cases of sickness and diarrhoea are reportable.
- Where children and/ or adults have been diagnosed by a GP or hospital doctor to be suffering from food poisoning and where it seems possible that the source of the outbreak is within the setting, the manager will contact the Environmental Health Department and

the Health Protection Agency, to report the outbreak and will comply with any investigation.

- Any confirmed cases of food poisoning affecting two or more children looked after on the premises are notified to Ofsted as soon as reasonably practical, and always within 14 days of the incident.

Review Date: September 2017

Safeguarding and Welfare Requirement:

Safety and Suitability of Premises, Environment and Equipment. Health and general standards

Policy statement

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

- We aim to make children, parents and staff aware of health and safety issues 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 Mrs A. Mason.
- We display the necessary health and safety poster in the school office.
- We have public liability insurance and employer's liability insurance.

Procedures:

- 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 policies 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 they have taken part.
- Health and safety issues are explained to 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 at phase 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:

- All adults in the group, both staff and visitors, will be aware of and respect safety policies.
- There is a Lone Working Policy in place.
- 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 all cleaning chemicals in their original containers.

- If adults need to reach up for stored equipment, they will be provided with something safe to stand on. Heavy materials will not be stored above head height.

Windows

- Low level windows are made from materials that prevent accidental damage 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

- Lighting and ventilation is adequate in all areas including storage areas.
- Electric sockets, wires and leads are properly guarded and the children are taught not to touch them.
- All electrical/ gas equipment conforms to safety requirements and is checked regularly.
- The temperature of the hot water is controlled to prevent scalds.

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 danger of poisonous plants, herbicides and pesticides.
- Where water can form a pool on equipment, it is emptied before children start playing outside.
- Our outdoor sandpit is covered when not in use and is cleaned regularly.
- All outdoor activities are supervised at all times.

Hygiene

- Our daily routines encourage children to learn about personal hygiene.
- We have a daily cleaning routine for the setting which includes classrooms and toilets. **(Pre-school)**
- We have a schedule in place for cleaning resources and equipment, dressing up clothes and furnishing.
- 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; and
 - providing tissues and wipes.

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.

Management

- A folder will be available at all times for the reporting of any accident/incidents.
- Regular safety monitoring will include checking of the accident record as a basis for risk assessment.
- All adults, including parents and other carers, will be aware of the system(s) in operation for children's arrivals and departures and an adult will be at the door during these periods.
- Adults will not walk about with hot drinks or place hot drinks within reach of children.
- A correctly stocked first aid box will be available at all times.

Special considerations

Some areas and activities pose particular hazards. All staff will be aware of these:

- Children playing with or near water will be continuously supervised.
- There will be safe surfaces beneath and around all climbing equipment and such activities will be appropriately supervised.
- All cooking activities involving the use of heat will be continuously supervised. Children will not be allowed in the kitchen for any other purpose.
- Systems will be in place to ensure that no child can leave the premises unattended.

Risk Assessment

- A daily risk assessment is carried out and signed off by designated staff members for indoor and outdoor areas of the setting **and** a more detailed annual risk assessment is carried out. Findings of the risk assessment will be communicated to all persons affected.
- The need for a detailed risk assessment must be considered after any recorded accidents or incidents.
- Any incident that causes or could potentially have caused serious injury must be risk assessed as soon as possible.

Review Date: September 2017

Safeguarding Children

Information Sharing

We recognise that parents have a right to know that information they share will be regarded as confidential as well as be informed about the circumstances and reasons when 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 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 senior management team. The three critical criteria are:

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

Procedures

Our procedure is based on the *7 golden rules for information sharing as set out in Information Sharing: Guidance for Practitioners and Managers (DCSF 2008)*.

1. 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. Inform families from the outset about why, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
 - We ensure parents receive information about our information sharing policy when starting their child at Pre-School and they sign a form to say they understand circumstances when information may be shared.
 - We ensure parents have information about our Safeguarding Children and Child Protection policy.
 - We ensure parents have information about the 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, however, in the interests of the child, we are able to judge when it is reasonable to override their wish.
 - Guidelines for consent are part of this procedure.
 - Managers are conversant with this and are able to advise staff accordingly.
5. Consider the safety and welfare of the child when making a decision about sharing information – if there are concerns regarding 'significant harm' the child's well being and safety is paramount.
 - We record concerns and discuss these with the setting's *designated person* for child protection matters. Record decisions made and the reasons why information will be shared and to whom.

- We follow the procedures for reporting concerns and record keeping.

6. Information shared should be accurate and up-to-date, necessary for the purpose it is being shared for and shared only with those who need to know and shared securely.

- Our Safeguarding Children and Child Protection Procedure and record keeping procedures set out how and where information should be recorded and what information should be shared with another agency when making a referral.

7. Reasons for decisions to share information, or not, are recorded.

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

Consent

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

- Our policies and procedures set out our responsibility regarding gaining consent to share information and when it may not be sought or overridden.

We cover this verbally during Inductions. Written consent is obtained on Induction forms and referral forms from other professionals.

Review Date: September 2017

Looked After Child

Policy statement

At Amblecote we are committed to providing quality provision based on equality of opportunity for all children and their families. All staff in the EYFS are committed to doing all they can to enable 'looked after' children in their care to achieve and reach their full potential.

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

We recognise that children who are being looked after have often experienced traumatic situations; physical, emotional or sexual abuse or neglect. However, we recognise that not all looked after children have experienced abuse and that there are a range of reasons for children to be taken into the care of the local authority. Whatever the reason, a child's separation from their home and family signifies a disruption in their lives that has an impact on their emotional well being.

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

Principles:

The term 'looked after' denotes a child's current legal status; this term is never used to categorise a child from standing out from others. We do not refer to such a child using acronyms such as LAC.

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

Procedures

- The designated person for looked after children is the **The Designated Safeguarding Lead** .
- Every child is allocated a Key Person (Pre-school) and a class teacher (Reception class) before they start and this is no different for a looked after child. **The Designated Safeguarding Lead** (Mrs Perigo/ Mrs Mason) ensures the Key Person has the information, support and training necessary to meet the looked after child's needs.
- The Designated Safeguarding Lead and the Key Person liaise with agencies, professionals and practitioners involved with the child and his or her family and ensure appropriate information is gained and shared.
- The setting recognises the role of the local authority children's social care department as the child's 'corporate parent' and the key agency in determining what takes place with the child. Nothing changes, especially with regard to the birth parents or foster carer's role in relation to the setting, without prior discussion and agreement with the child's social worker.
- At the start of the placement there is a professionals meeting to determine the objectives of the placement and draw up a Personal Educational Plan (PEP) that incorporates the child's learning needs. This plan is reviewed after two weeks, six weeks and three months. Thereafter at three to six monthly intervals.

- The care plan needs to consider issues for the child such as:
 - Their emotional needs and how they are to be met;
 - How any emotional issues and problems that affect behaviour are to be managed;
 - Their sense of self, cultural, language(s) and identity- and how this is to be supported;
 - Their need for sociability and friendship;
 - Their interest and abilities and possible learning journey pathway; and
 - How any special needs will be supported.
- In addition the care plan will also consider:
 - How information will be shared with the foster carer and local authority (as the 'corporate parent'), as well as what information is shared with whom and how it will be recorded and stored;
 - What contact the child has with his/ her birth parent(s) and what arrangements will be in place for supervised contact. If this is to be at the setting, when, where and what form the contact will take will be discussed and agreed;
 - What written reporting is required;
 - Wherever possible, and where the plan is for the child's return home, the birth parent(s) should be involved in planning; and
 - With the social worker's agreement, and as part of the plan, the birth parent(s) should be involved in the setting's activities that include parents alongside the foster carers.
- The settling in process for the child is agreed. It should be the same as for any other child, with the foster parent taking the role of the parent, unless otherwise agreed. The separation time from the foster carer may take longer and time needs to be allowed for it to take place without causing further distress or anxiety to the child.
- In the first two weeks after settling-in, the child's well being is the focus of observation, their sociability and their ability to manage their feelings with or without support.
- Further observations about communication, interests and abilities will be noted to form a picture of the whole child in relation to the Early Years Foundation Stage prime and specific areas of learning and development.
- Concerns about the child will be noted in the child's file and discussed with the foster carer.
- If the concerns are about the foster carer's treatment of the child, or if abuse is suspected, these are recorded in the child's file and reported to the child's social care worker according to our safeguarding and child protection procedure.
- Regular contact will be maintained with the social worker through planned meetings that will include the foster carer.
- Transition for Pre-school to reception class will be handled sensitively. The Designated Safeguarding Lead and Manager will liaise with school, passing on relevant information and documentation with the agreement of the looked after child's birth parents.

Review Date: September 2017

Safeguarding and Welfare Requirements

Maintaining children's safety and security on premises.

Policy statement

We maintain the highest possible security on our premises to ensure that each child is safely cared for during their time with us. EYFS staff are committed to provide a safe, secure environment where each child can play freely.

Procedures

Children's personal safety

- We ensure all employed staff have been checked for criminal records by an enhanced disclosure from the DBS (Disclosure Barring Service).
- All children are supervised by adults at all times.
- Adults do not normally supervise children on their own.
- We carry out risk assessments to ensure children are not made vulnerable within any part of our premises nor by an activity.

Security

Visitors to the EYFS will not be left unsupervised at any time. Adequate identification will be provided and prior appointments should be made wherever possible.

- Systems are in place to monitor the safe arrival and departure of children. A member of staff will monitor the doors to ensure the security of the children. Parents and carers wanting to talk to staff will be advised to wait until an appropriate time to ensure the safety of all children.
- Children's arrivals and departures are recorded (Pre-school).
- Staff, volunteers and visitors sign in and out at reception and in Pre-school.
- Children won't be released to anyone other than the recognised parent/carer unless prior notice is given. If staff are unsure, the child will remain in the EYFS and parents will be contacted. Parents are required to list other persons that may collect their children from school. Pre-school parents/ carers sign their child in/ out of Pre-school.
- Outdoor play areas will be checked before the children are taken outside. Our systems prevent unauthorised access to our premises.
- The personal possessions of staff and volunteers are securely stored during sessions but are left at the owner's risk.

Review Date: September 2017

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 our 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 procedures for dealing with these concerns. We aim to bring all concerns about the running of our setting to a satisfactory conclusion for all parties involved.

Procedures:

Making a complaint:

Step 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 child's Key Person.
- Most complaints should be resolved amicably and informally at this stage.
- If this does not have a satisfactory outcome, or if the problem reoccurs contact should be made with the head teacher, **Mrs A Mason or Mrs Perigo** (Pre-school.)
- All complaints and comments will be recorded in a complaints file and a verbal response given.
- If a written complaint is received by the setting, a written response will be sent.
- Records of complaints to be kept for at least 3 years and stored in the child's personal file.

Step 2:

- If the parent/ carer is not satisfied with the outcome of the investigation, then he/ she requests a meeting with the Manager and the governors. The parent should have a friend or partner present if required and the leader should have the support of the chairperson, or the senior manager, present.
- 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. This will be logged.

Step 3:

- If at the stage 2 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.
- The mediator keeps all discussions confidential. The mediator keeps an agreed written record of any meetings that are held and of any advice s/he gives.

Stage 4:

- When the mediator has concluded her/ his investigations, a final meeting between all parties 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 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.

Parents may approach Ofsted directly at any stage of this complaints procedure.

OFSTED

Piccadilly Gate, Store Street,
Manchester

M1 2WD

Helpline: 0300 123 4666

Website: www.ofsted.gov.uk/parents

Review Date: September 2017

Health

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

Policy statement:

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

Procedures for children who are sick or infectious:

- If children appear unwell during the day – have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach a member of staff informs the Manager/Teacher before calling the parents to collect the child, or send a known carer to collect on their behalf. If the reception class teacher is unable to leave the class s/he will ask another member of the reception staff or a member of the office staff to call the child's parents.
- If a child has a temperature, they are kept cool, by removing top clothing, sponging their heads with cool water, but kept away from draughts.
- The child's temperature is taken using a forehead thermometer strip, kept in the first aid box.
- In extreme cases of emergency the child should be taken to the nearest hospital and the parent informed.
- In some cases parents are asked to take their child to the doctor before returning them to the setting; staff can refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease.
- 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.

Reporting of 'notifiable diseases'

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

HIV/AIDS/Hepatitis procedure

- HIV virus, like other viruses such as Hepatitis, (A, B and C) are spread through body fluids. Hygiene precautions for dealing with body fluids are the same for all children and adults.
- Single use vinyl gloves and aprons are worn when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Protective rubber gloves are used for cleaning clothing after changing.
- Soiled clothing is rinsed and double bagged for parents to collect.
- Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and mops; cloths used are disposed of with the clinical waste.
- Tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit are cleaned using a disinfectant.

Procedures for children with allergies:

- When parents start their children at the setting they are asked if their child suffers from any known allergies. This is recorded on the registration form.
- If a child has an allergy a letter must be obtained by the GP/consultant to confirm that there is an allergy and contain procedures for dealing with the child's health if a reaction occurs, a Care Plan is completed by the SENCO/Manager to detail the following:
 - The allergen (i.e. the substance, material or living creature the child is allergic to such as nuts, eggs, bee stings, cats etc).
 - The nature of the allergic reactions e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc.
 - What to do in case of allergic reactions, any medication used and how it is to be used (e.g. EpiPen).
 - Control measures – such as how the child can be prevented from contact with the allergen.
 - Review date.

Further advice regarding the Care Plan may be sought by medical professionals and the PIMIS team before the child can start at the setting.

- This form is kept in the grab bag (Pre-school)
- EpiPens and Care Plans will be kept on the Reception classrooms noticeboard in line with the revised Amblecote Primary School Policy.
- Parents/ school nurse train staff in how to administer special medication in the event of an allergic reaction.
- No nuts or nut products are used within the setting.
- Parents are made aware so that no nut or nut products are accidentally brought in, for example to a party, staff check all foods.

Oral Medication:

At all times the administration of medication must be compliant with the Safeguarding and Welfare Requirements of the EYFS.

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

Life saving medication & invasive treatments:

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

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

- Prior written consent must be obtained from the child's parent or guardian to give treatment and/or medication prescribed by the child's GP.
- The key person must have the relevant medical training/experience and the school nurse will be contacted.

Review Date: September 2017

Missing Child Policy

Policy statement

Children's safety is our highest priority at all times, both on and off the premises. Every attempt is made, through carrying out the outings policy and the exit/ entrance procedure, to ensure the security of children is maintained at all times. In the unlikely event of a child going missing, our missing child procedure is followed.

Procedures

Child going missing on the premises

- As soon as it is noticed that a child is missing the key person/staff alerts the setting leader.
- The setting leader will carry out a thorough search of the building and outdoor area.
- The register is checked to make sure that no other child has gone astray.
- Doors and gates are checked to see if there has been a breach of security whereby a child could wander out.
- The setting leader talks to the staff to find out when and where the child was last seen and records this.
- If the child is not found, the setting leader contacts the police and reports the child as missing and then calls the parents.
- The school governor's will be informed and the incident reported. An investigation will be carried out immediately.

Child going missing on an outing

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

When a child goes missing from a whole setting outing may be different as Pre-school parents/ carers always attend and are responsible for their own child.

- As soon as it is noticed that a child is missing, staff on the outing ask children to stand with their designated person and carry out a head count to ensure that no other child has gone astray. One staff member searches the immediate vicinity, but does not search beyond that.
- The head teacher, Mrs A Mason (if not on the outing) is contacted immediately and the incident is reported.
- Mrs Mason contacts the police and reports the child as missing.
- Mrs Mason contacts the parent, who make their way to the setting.
- Staff take the remaining children back to the setting.
- In an indoor venue the staff will alert the venue's security who will handle the search and contact the police if the child is not found.
- The school governor's will be informed and the incident reported. An investigation will be carried out immediately with the senior management team.
- The setting leader or designated staff member may be advised by the police to stay at the venue until they arrive.

The investigation

- Staff keep calm and do not let other children become anxious or worried.
- Mrs Perigo/ Mrs Price together with a representative from the senior management team, speaks with the parent(s).
- Written statements are taken from all members of staff on the outing detailing.
- The key person/ staff member writes an incident report detailing:
 - Date and time of the report.

- What staff/ children were in the group/ outing and the name of staff designated responsible for the missing child.
- When the child was last seen in the group.
- What has taken place in the group or outing since the child went missing.
- The estimated time 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 cooperate fully.
- The incident is reported under RIDDOR arrangements, the insurance provider is informed and OFSTED notified.

When the situation has been resolved members of staff should review the reasons for it happening and ensure measures are taken to ensure that it does not happen again.

Review Date: September 2017

Health

Nappy changing

Policy statement:

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

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

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

Procedures:

- Children from two years should normally wear 'pull ups' or other types of trainer pants, as soon as they are comfortable with this and their parents agree.
- Key persons undertake changing young children in their key groups; back up key persons change them if the key person is absent. The key person always notifies another member of staff before changing a child.
- Changing areas are warm and there are safe areas to lay young children.
- Each child has their own bag, kept on their own named peg, with their 'pull ups' and changing wipes.
- Gloves and aprons are put on before changing starts and the areas are prepared.
- All staff are familiar with the hygiene procedures and carry these out when changing pull-ups.
- In addition, key persons ensure that nappy changing is relaxed and a time to promote independence in young children.
- Children are encouraged to take an interest in using the toilet; they may just want to sit on it and talk to a friend who is also using the toilet.
- They should be encouraged to wash their hands and have soap and towels to hand.
- Key persons are gentle when changing; they avoid pulling faces and making negative comment about 'nappy contents'.
- Key persons do not make inappropriate comments about children's genitals when changing their nappies.
- Older children access the toilet when they have the need to and are encouraged to be independent.

- 'Pull ups' are disposed of hygienically. Any soil (faeces) in pull ups is flushed down the toilet and the pull up is double bagged and put in the nappy bin (Main Schools First Aid Room). Ordinary pants/ clothing that has been wet or soiled is double bagged for the parent to take home.
- The changing mat is disinfected and wiped clean after each use.
- Staff and parents sign the record sheet to acknowledge the toilet incident. (Signed by two members of staff in Pre-School.)
- No child is left in wet or soiled 'pull ups' in the setting as we have a 'duty of care' towards children's personal needs.

Review Date: September 2017

Amblecote Pre-school

No Smoking Policy

The School recognises the health hazards of smoking for smokers and non-smokers and acknowledges the rights of staff, children, parents and carers to work or play in a smoke free environment. Consequently, it has adopted a "No Smoking Policy" as follows:

- Smoking is not allowed anywhere on the school premises. This applies to everyone including staff, volunteers, students, visitors, parents and carers.
- The objective of the 'No Smoking Policy' is to establish a healthy environment for all children, staff, volunteers, students, visitors, parents and carers; its success depends upon the consideration and co-operation of both smokers and non-smokers. All staff, students, visitors, parents and carers are expected to respect the statement.
- Violations of the 'No Smoking Policy' should be reported to senior management.
- A copy of this policy is placed on the website and in the noticeboard and is available to all staff, volunteers, students, visitors, parents and carers.

Thank you for your co-operation and support for the benefit of our children.

Policy Reviewd –September 2017

Partnership

Parental Involvement

Policy Statement

We believe that children benefit most from early year's 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 year's 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 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. 'Parental responsibility' is *all the rights, duties, powers and responsibilities and authority which by law a parent of a child has in relation to the child and his property.*

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, through Amblecote Primary School website and through regular informal communication. We check to ensure parents understand the information that is given to them.
- 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 workshops and training.
- We consult with parents about the times of meetings to avoid excluding anyone.
- 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.
- 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.

Review Date: September 2017

Amblecote Pre-school Physical Handling Policy

Staff within the setting aim to help children take responsibility for their own behaviour. The age of a child and their level of development and understanding **MUST** be taken into consideration. A 2 year old child would not be emotionally ready to take responsibility for their own behaviour as would a 4 year old with a developmental delay also be unable to do. Achieving positive behaviour can be done through a combination of approaches, in partnership with the parent/carer, which include:

positive role modelling

planning a range of interesting and challenging activities

setting and enforcing appropriate boundaries and expectations

providing positive feedback

However, there may be occasional times when a child's behaviour presents particular challenges that may require physical handling. This policy sets out expectations for the use of physical handling.

Definitions:

There are three main types of physical intervention:

Positive handling: The positive use of touch is a normal part of human interaction. Touch might be appropriate in a range of situations:

- giving guidance to children (such as how to hold a paintbrush or when climbing)
- providing emotional support (such as placing an arm around a distressed child)
- physical care (such as first aid or toileting).

Staff must exercise appropriate care when using touch. There are some children for whom touch would be inappropriate such as those with a history of physical or sexual abuse. Our setting's policy is not intended to imply that staff should no longer touch children.

Physical intervention: Physical intervention can include mechanical and environmental means such as high chairs, stair gates or locked doors. These may be appropriate ways of ensuring a child's safety.

Restrictive physical intervention: This is when a member of staff uses physical force intentionally to restrict a child's movement against his or her will reducing any risk to the child, other children or adults in the immediate area. In most cases this will be through the use of the adult's body rather than mechanical or environmental methods. This policy refers mainly to the use of restrictive bodily physical intervention.

Restrictive physical handling should be used in the context of positive behaviour management approaches.

Pre-school staff will only use restrictive physical intervention in extreme circumstances. It must not be the preferred way of managing children's behaviour. Physical intervention should only be used in the context of a well-established and well implemented positive framework.

There are clearly rare situations of such extreme danger that create an immediate need for the use of restrictive physical intervention. Restrictive physical intervention in these circumstances can be used with other strategies such as saying "**stop**".

All staff have a **duty of care** towards the children in their setting. When children are in danger of hurting themselves, others or of causing significant damage to property, staff have a responsibility to intervene. In most cases this involves an attempt to divert the child

to another activity or a simple instruction to "stop!" However, if it is judged as necessary, staff may use restrictive physical intervention.

When physical intervention is used, it is used within the principle of **reasonable minimal force**. Staff should use as little restrictive force as necessary in order to maintain safety. Staff should use this for as short a period as possible.

Who can use restrictive physical intervention?

A member of staff (Key Person) who knows the child well is involved in a restrictive physical intervention. The Key Person is most likely to be able to use other methods to support the child and keep them safe without using physical intervention. In an emergency, other staff can use restrictive physical intervention as long as it is consistent with the policy.

Where individual children's behaviour means that they are likely to require restrictive physical intervention, staff should identify members of staff who are most appropriate to be involved. It is important that such staff have received training and support. **A Physical Handling Plan** will need to be in place. Staff and children's physical and emotional health will need to be considered when such plans are made. All plans must be shared with the child's parent/carer.

When can restrictive physical intervention be used?

Physical intervention can be justified when:

- someone is injuring themselves or others
- someone is damaging property
- there is suspicion that although injury or damage has not yet happened, it is at immediate risk of occurring.

Amblecote Pre-schools **Duty of Care** means that staff might have to use restrictive physical intervention if a child is trying to leave the site and it is judged that the child would be at risk. Staff will also use other protective measures, such as securing the site and ensuring appropriate staffing levels are provided. This duty of care also extends beyond the site boundaries: when staff have control or charge of children off site (e.g. on trips).

In some cases the use of restrictive physical intervention might make the situation worse so an alternative strategy like issuing an instruction to stop, seek help, or make the area safe would be consistent with the settings duty of care.

The use of restrictive physical intervention is to restore safety, both for the child and those around him or her. Restrictive physical intervention will never be used out of anger, as a punishment or as an alternative to measures which are less intrusive and which staff judge would be effective.

What type of restrictive physical intervention can and cannot be used?

The use of physical intervention in our setting is consistent with the principle of reasonable minimal force. Where it is judged that restrictive physical intervention is necessary, staff should:

- aim for side-by-side contact with the child. Avoid positioning themselves in front (to reduce the risk of being kicked) or behind (to reduce the risk of allegations of sexual misconduct)
- aim for no gap between the adult's and child's body, where they are side by side. This minimises the risk of impact and damage

- aim to keep the adult's back as straight as possible

Staff should:

- Be aware in particular of head positioning, to avoid head butts from the child
- not hold children by "long" bones, i.e. avoid grasping at joints where pain and damage are most likely
- ensure that there is no restriction to the child's ability to breathe. In particular, this means avoiding holding a child around the chest cavity or stomach.
- avoid lifting mobile children where possible.

The Pre-school Manager will identify and arrange access to appropriate staff training (e.g. Managing Behaviour in the Early Years)

In an emergency Pre-school staff will do their best within their duty of care and using reasonable minimal force. After an emergency the situation is reviewed and plans for an appropriate future response will be made. This will be based on a risk assessment which considers:

- the risks presented by the child's behaviour
- the potential targets of such risks
- preventative and responsive strategies to manage these risks.

A risk assessment is used to help write the individual behaviour plan that is developed to support a child. If a behaviour plan includes restrictive physical intervention it will be just one part of a whole approach to supporting a child's behaviour. The behaviour plan should outline:

- an understanding of what the child is trying to achieve or communicate through their behaviour
- how the Pre-school environment can be adapted to better meet the child's needs
- how the child can be encouraged to use new, more appropriate behaviours
- how staff respond when the child's behaviour is challenging (responsive strategies).

Pre-school staff will pay particular attention to responsive strategies. There is a range of approaches such as humour, distraction, relocation, and offering choices which are direct alternatives to using restrictive physical intervention.

Amblecote Pre-school will draw from as many different viewpoints as possible when it is known that an individual child's behaviour is likely to require some form of restrictive physical intervention. If behaviour is identified during the Induction process then the child will not be allowed to start at the setting until all plans are in place. The child's parents/carers will be involved and any visiting support staff (such as Specialist Early Years' Service, Educational Psychologists, Speech and Language Therapists and Social Care team). The outcome from these planning meetings will be recorded and a signature will be sought from the parent/carer to confirm their knowledge of the planned approach. These plans will be reviewed at least once every four to six months, or more frequently if there are major changes to the child's circumstances.

Recording and reporting:

It is important that any use of restrictive physical intervention is recorded. The records will show who was involved (child and staff, including observers), the reason physical intervention was considered appropriate, how the child was held, when it happened (date and time) and for how long, any subsequent injury or distress and what was done in relation to this. This should be done as soon as possible and within 24 hours of the incident. According to the nature of the incident, the incident should be noted in other records, such as the accident book or the child's tracking sheets.

After using restrictive physical intervention, the Parent/carer will be informed and will be asked to read and sign the record form by the Manger/Key Person.

Supporting and reviewing:

It is distressing to be involved in a restrictive physical intervention, whether as the person doing the holding, the child being held or someone observing or hearing about what has happened. After a restrictive physical intervention, support is given to the child so that they can understand why they were held. A record is kept about how the child felt about this where this is possible. Staff should help the child to record their views. Where appropriate, staff may have the same sort of conversations with other children who observed what happened (dependent upon their age and level of understanding). In all cases, staff should wait until the child has calmed down enough to be able to talk productively and understand this conversation. If necessary, an independent member of staff (Foundation Stage Co-ordinator) will check for injury.

Support will be given to the adults who were involved, either actively or as observers. The adults should be given the chance to talk through what has happened with the most appropriate person from the Pre-school team or a member of the Care Committee.

The key aim of after-incident support is to repair any potential strain to the relationship between the child and the adult that restrained him or her. After a restrictive physical intervention, staff consider reviewing the individual behaviour plan so that the risk of needing to use restrictive physical intervention again is reduced.

Complaints:

The use of physical intervention can lead to allegations of inappropriate or excessive use. Where anyone (child, carer, staff member or visitor) has a concern, this should be dealt with through the Pre-school's setting's complaints procedure.

Monitoring:

The policy will be reviewed annually. Monitoring the use of restrictive physical intervention will help identify trends and therefore help develop the setting's ability to meet the needs of children without using restrictive physical intervention.

Review Date: September 2017

Promoting British Values at Amblecote Pre-school

The DfE have recently reinforced the need "to create and enforce a clear and rigorous expectation on all schools to promote the fundamental British values of democracy, the rule of law, individual liberty and mutual respect and tolerance of those with different faiths and beliefs." The Government set out its definition of British values in the 2011 Prevent Strategy, and these values have been reiterated this year (2014).

At Amblecote Pre-school we understand that the society we live in is diverse and therefore, our curriculum and life within school reflects this. For our pupils, we aim to continually weave the thread of social, cultural, moral and spiritual British values throughout day to day school life. Underpinning this are the values and understanding of democracy, law, liberty, respect, tolerance, tradition and heritage. The 'Equality Act 2010' protects all individuals from discrimination and it is the Pre-schools duty to ensure that all individuals have equal access and opportunity to all that is on offer. Funding, including that for pupils with special educational needs and disabilities (SEND) and disadvantaged pupils, is used to target inequalities, to ensure equality.

At Amblecote Pre-school we uphold and teach pupils about British Values which are defined as:

- Democracy
- Rule of Law
- Individual Liberty
- Mutual respect
- Tolerance of those of different faiths and beliefs

These values are taught explicitly through Personal Social and Emotional Development and Social and Emotional Aspects of Learning (SEAL). We also teach British Values through planning and delivering a broad and balanced curriculum.

The Pre-school takes opportunities to actively promote British values through our daily activities and assemblies. We also actively promote British values through ensuring that our curriculum planning and delivery includes real opportunities for exploring these values. Actively promoting British values means challenging pupils, staff or parents expressing opinions contrary to fundamental British values including extremist views.

At Amblecote Pre-school, British Values are reinforced regularly and in the following ways:

Democracy

Democracy is embedded within the Pre-school. Pupils are always listened to by adults and are taught to listen carefully and with concern to each other, respecting the right of every individual to have their opinions and voices heard. Pupils also have the opportunity to air their opinions and ideas and have their voices heard through small and large group times.

The Rule of Law

The importance of Laws, whether they be those that govern the class, the Pre-school, or the country, are consistently reinforced throughout regular school days, as well as when dealing with behaviour and through school assemblies. The children are aware of the consequences of not following the rules in their Pre-school community. The children learn to understand the difference between right and wrong in all aspects of school life throughout the session. Pupils are taught the value and reasons behind laws, that they govern and protect us, the responsibilities that this involves and the consequences when laws are broken. Visits from authorities such as the Police, Health and Fire Service are regular parts of our calendar and help reinforce this message.

To encourage and promote good behaviour, attitude and work, we have devised a reward system. As a Pre-school, we are committed to praising children's efforts.

We endeavour to praise the children informally, individually, during the session or in front of the whole class. Children are praised by teachers within main school also. Children are rewarded not only for achievement in curriculum areas, but for behaviour. Rewards are given in the form of stickers and certificates. Children's achievements are also recognised during weekly Praise Assemblies and through our Open Door Policy with parents/carers.

Individual Liberty

At Amblecote Pre-school, our pupils are actively encouraged to make choices, knowing that they are in a safe and supportive environment. We educate and provide boundaries for our pupils to make informed choices, through a safe environment and an empowering education. Our children are encouraged to give their opinions and share these ideas with due regard for the feelings of others. As part of our PSED curriculum we place a huge emphasis on the social and emotional learning of our children. We celebrate achievements both in and out of school in assemblies and Family Groups, through certificates and stickers which are sent home.

Mutual Respect

Mutual respect is at the heart of our values. Children learn that their behaviours have an effect on their own rights and those of others. All members of the Pre-school community treat each other with respect. Posters around the Pre-school promote respect for others and this is reiterated through our classroom and learning rules, as well as our behaviour policy. Young children will challenge each other when not showing respect and encourage each other to be respectful. They will inform staff and staff follow through with "Conflict Resolutions".

Tolerance of those of Different Faiths and Beliefs

This is achieved through enhancing pupils understanding of their place in a culturally diverse society and by giving them opportunities to experience such diversity. Assemblies and discussions involving prejudices and prejudice-based bullying have been followed and supported by learning in SEAL and PSED. Members of different faiths or religions, especially parents and other family members are encouraged to share their knowledge to enhance learning within the Pre-school. We actively promote diversity through our celebrations of different faiths and cultures.

Members of different faiths and religions are encouraged to share their knowledge to enhance learning within the Pre-school. Throughout school life the children are encouraged to discuss differences between people such as their faith, ethnicity, disability, gender or sexuality (where appropriate). They also discuss differences in family life such as looked after children or young carers.

British Traditions and Heritage

We celebrate the role of Britain both historically and in the present. We want pupils to have knowledge of and be proud of their British heritage and the cultural and historical traditions that we are renowned for the world over. This involves celebrating Royal events, Remembrance Day, festivals such as Harvest, Christmas, and Easter.

Review Date: September 2017

Health

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 Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) for the reporting of accidents and incidents.

Child protection matters or behavioural incidents between children are NOT regarded as incidents and there are separate procedures for this.

Procedures

Our accident book:

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

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 on the 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 requirement in respect of the safety of our employees by complying with RIDDOR (the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations). We report to the health and safety executive:

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

Any dangerous occurrence is recorded in the main schools incident book.

Our incident book

- We have ready access to telephone numbers for emergency services, including the local police.
- We use main schools incident book for reporting major incidents, including those that are reportable to the Health and Safety Executive.
- These incidents include:
 - a break in, burglary, or theft of personal or the setting's property;
 - an intruder gaining unauthorised access to the premises;
 - a fire, flood, gas leak or electrical failure;
 - an attack on member of staff or parent on the premises or nearby;
 - any racist incident involving staff or family on the setting's premises;
 - a notifiable disease or illness, or an outbreak of food poisoning affecting two or more children looked after on the premises;
 - the death of a child or adult, and

- a terrorist attack, or threat of one.

- In the main school incident book we or the office manager will record the date and time of the incident, nature of the event, who was affected, what was done about it or if it was reported to the police. Any follow up, or insurance claim made, is also recorded.
- In the unlikely event of a terrorist attack, we follow the advice of the emergency services with regards to the evacuation, medical aid and contacting children's families. Our standard Fire Safety and Emergency Evacuation Policy will be followed and staff will take charge of their key children. The incident is recorded when the threat is averted.
- The incident book is not for recording issues of concern involving a child. This is recorded in the child's own file.

Review Date: September 2017

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.

The basis of this policy is risk assessment. Our risk assessment processes follow five steps as outlined below:

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

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.
- The risk assessment 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.

Review Date: **September 2017**

Child Protection and Safeguarding Children Policy

(This policy runs alongside Amblecote Primary School's Child Protection and Safeguarding Children Policy)

"Safeguarding is everyone's responsibility"

"Everyone who works with children including teachers, GP's , nurses, midwives, Health visitors, Early Years professionals, youth workers, police, accident and emergency staff, paediatrician, voluntary and community workers –has a responsibility for keeping them safe..."(Working Together to Safeguard children, 2014)

Policy statement:

Our setting will work with children (anyone who has not yet reached their 18th birthday), parents and the community to ensure the rights and safety of children and to give them the very best start in life. We are committed to building a 'culture of safety' in which children are protected from abuse and harm. We are committed to responding promptly and appropriately to all incidents or concerns of abuse that may occur and to work with statutory agencies in accordance with the procedures that are set down in 'What to do if you're worried a child is being abused.' At Amblecote we promote awareness of child abuse issues through CPD training opportunities. We are also committed to empowering young children, through our EYFS curriculum, promoting their right to be strong, resilient and listened to.

Procedures

- Our **Designated Safeguarding Lead** who co-ordinates child protection issues is: **H Perigo** (Pre-School) in her absence Mrs Jukes and **Mrs Mason** co-ordinates child protection in school.
- We ensure all staff are trained to understand our safeguarding policies and procedures and that parents are made aware of them too.
- All staff have an up-to-date knowledge of safeguarding issues.
- We provide adequate and appropriate staffing resources to meet the needs of children.
- Candidates are informed of the need to carry out 'enhanced disclosure' checks with the Criminal Records Bureau before posts can be confirmed.
- Where applications are rejected because of obtaining information that has been disclosed, applicants have the right to know and to challenge incorrect information.
- We abide by Ofsted requirements in respect of references and Disclosure and Barring Service (DBS) checks for staff and follow procedures for volunteers within the setting, to ensure that no disqualified person or unsuitable person works at the setting or has access to the children.
- Volunteers do not work unsupervised.
- The school office records information about staff qualifications, and the identity checks and vetting processes that have been completed.
- 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. Staff annually complete the relevant forms.
- 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 a child protection concern.
- We have procedures for recording the details of visitors to the setting.
- We take security steps to ensure that we have control over who comes into the setting so that no unauthorised person has unsupervised access to the children.
- We take steps to ensure children are not photographed or filmed on video for any other purpose than to record their development or their participation in events organised by us. Parents sign a consent form and have access to records holding visual images of their child.

Responding to suspicions of abuse:

- We acknowledge that abuse of children can take different forms - physical, emotional, and sexual, domestic abuse, as well as neglect.
- When children are suffering from physical, sexual or emotional abuse, or experiencing neglect, this may be demonstrated through:
 - significant changes in their behaviour;
 - deterioration in their general well-being;
 - their comments which may give cause for concern, or the things they say (direct or indirect)

- changes in their appearance, their behaviour, or their play;
- unexplained bruising, marks or signs of possible abuse or neglect; and
- any reason to suspect neglect or abuse outside the setting.

- We take into account factors affecting parental capacity, such as social exclusion, domestic violence, parent's drug or alcohol abuse, mental or physical illness or parent's learning disability.
- We are aware of other factors that affect children's vulnerability such as, abuse of disabled children; fabricated or induced illness; child abuse linked to beliefs in spirit possession; sexual exploitation of children, such as through internet abuse; and Female Genital Mutilation; that may affect, or may have affected, children and young people using our provision.
- Staff promote the fundamental **British values of Democracy**, the rule of law, individual liberty, and mutual respect and tolerance of those with different faiths and beliefs. (See policy for details.)
- We also make ourselves aware that some children and young people are affected by gang activity, by complex, multiple or organised abuse, through forced marriage or honour based violence or may be victims of child trafficking. While this may be less likely to affect young children in our care, we may become aware of any of these factors affecting older children and young people who we may come into contact with.
- We take account of the need to protect young people aged 16-19 as defined by the Children Act 1989. This may include students, young employees or young parents. Where abuse is suspected we follow the procedure for reporting any other child protection concerns. The views of the young person will always be taken into account, but the setting may override the young person's refusal to consent to share information if it feels that it is necessary to prevent a crime from being committed or intervene where one may have been, or to prevent harm to a child or adult. Sharing confidential information without consent is done only where not sharing it could be worse than the outcome of having shared it.

Recording suspicions of abuse and disclosures:

- Where a child makes comments to a member of staff that give cause for concern (disclosure), or a member of staff observes signs or signals that give cause for concern, such as significant changes in behaviour; deterioration in general well-being; unexplained bruising, marks or signs of possible abuse or neglect; that member of staff:
 - listens to the child, offers reassurance and gives assurance that she or he will take action;
 - Does not ask leading questions the child;
 - makes a written record that forms an objective record of the observation or disclosure that includes: the date and time of the observation or the disclosure; the exact words spoken by the child as far as possible; the name of the person to whom the concern was reported, with the date and time; and the names of any other person present at the time.
- These records are signed and dated and kept in the child's personal file, which is kept securely and confidentially.
- The member of staff acting as the **Designated Safeguarding Lead** 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.

Prevent Duty:

The *Prevent Duty Guidance* came into force on 1 July 2015. Amblecote Pre-school 'have due regard to prevent people from being drawn into terrorism'.

To be both effective and lawful, we must meet specific legal duties including those arising from the Prevent Duty. This sets out the need for 'British Values' to help everyone live in safe and welcoming communities where they feel they belong. These **British Values** are defined as:

- democracy
- the rule of law
- individual liberty and mutual respect
- tolerance of those with different faiths and beliefs

These values are fundamental to helping all children become compassionate, considerate adults who form part of a fair and equal society.

Amblecote Pre-school demonstrate these values through the management and implementation of the EYFS, and through policies and procedures relating to equality, behaviour, safeguarding and British values, with which the Prevent Duty is consistent.

Amblecote Pre-school share these values, and that they are understood and applied by all staff, volunteers, and where appropriate, parents.

We ensure:

- children's personal, social and emotional development, ensuring children learn right from wrong, mix and share with other children, value other's views, know about similarities and differences between themselves and others, and challenge negative attitudes and stereotypes
- that we are alert to harmful behaviours by influential adults in the child's life. This may include discriminatory and/or extremist discussions between parents, family and/or staff members
- that we take action when we observe behaviour of concern
- that we are able to identify children who may be vulnerable to radicalization, and know what to do when they are identified
- that we assess the risk of children being drawn into terrorism, and work in partnership with local partners such as the police, Prevent Co-ordinators, Channel Police Practitioners and Dudley Safeguarding Board, to take account of local risks and respond appropriately
- that we make referrals to local Channel Panels, Channel Police Practitioners or the Dudley Safeguarding Board, if there are concerns that an individual may be vulnerable to being drawn into terrorism or extremism
- that we assess staff training needs in the light of their assessment of the risk

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

See whole school policy (Reception)

Informing parents:

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

Liaison with other agencies:

- We work within the Local Safeguarding Children Board guidelines. We have the current version of '**What to do if you're worried a child is being abused**' available for parents and staff and ensure that all staff are familiar with what they need to do if they have concerns.
- We have procedures for contacting the local authority regarding child protection issues, including maintaining a list of names, addresses and telephone numbers of social workers, to ensure that it is easy, in any emergency, for the setting and children's social care to work well together.
- We notify the registration authority (Ofsted) of any incident or accident and any changes in our arrangements which may affect the well-being of children or where an allegation of abuse is made against a member of staff (whether the allegations relate to harm or abuse committed on our premises or elsewhere). Notifications to Ofsted are made as soon as is reasonably practicable, but at the latest within 14 days of the allegations being made.
- Contact details for the local National Society for the Prevention of Cruelty to Children (NSPCC) are also kept.

Allegations against staff:

- We ensure that all parents know how to complain about the behaviour or actions of staff or volunteers within the setting, or anyone living or working on the premises occupied by the setting, which may include an allegation of abuse.
- We respond to any inappropriate behaviour displayed by members of staff or any other person working with the children, which includes:
inappropriate sexual comments;
excessive one-to-one attention beyond the requirements of their usual role and responsibilities, or inappropriate sharing of images.
- We follow the guidance of the Local Safeguarding Children Board when responding to any complaint that a member of staff or volunteer within the setting, or anyone living or working on the premises occupied by the setting, has abused a child.
- We respond to any disclosure by children or staff that abuse by a member of staff or volunteer within the setting, or anyone living or working on the premises occupied by the setting, may have taken, or is taking place, by first recording the details of any such alleged incident.
- We refer any such complaint immediately to the Local Authority Designated Officer (LADO) to investigate:
- We also report any such alleged incident to Ofsted, as well as what measures we have taken. We are aware that it is an offence not to do this.
- We co-operate entirely with any investigation carried out by children's social care in conjunction with the police.
- Where the management team and children's social care agree it is appropriate in the circumstances, the chair/director/owner will suspend the member of staff on full pay, or the volunteer, for the duration of the investigation. This is not an indication of admission that the alleged incident has taken place, but is to protect the staff, as well as children and families throughout the process.

Disciplinary action

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

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

Training:

- We seek out training opportunities for all adults involved in the setting to ensure that they are able to recognise the signs and signals of possible physical abuse, emotional abuse, sexual abuse and neglect and that they are aware of the local authority guidelines for making referrals.
- We ensure that designated persons receive training in accordance with that recommended by the Local Safeguarding Children Board.
- We ensure that all staff know the procedures for reporting and recording any concerns they may have about the provision.

Planning:

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

Curriculum:

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

Confidentiality:

- All suspicions and investigations are kept confidential and shared only with those who need to know. Any information is shared under the guidance of the Local Safeguarding Children Board.
- 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 during the Induction to the setting.
- We will continue to welcome the child and the family whilst investigations are being made in relation to any alleged abuse.
- We follow the Child Protection Plan as set by the child's social care worker in relation to the setting's designated role and tasks in supporting that child and their family, subsequent to any investigation.
- Confidential records kept on a child are shared with the child's parents or those who have parental responsibility for the child in accordance with the Confidentiality and Client Access to Records procedure and only if appropriate under the guidance of the Local Safeguarding Children Board.

Review Date: Sept 2017

Suitable People

Student Placements

Policy statement

This setting recognises that qualifications and training make an important contribution to the quality of the care and education provided in our Early Years Foundation Stage. As part of our commitment to quality, we offer placements to students undertaking early year's 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 person' requirements of Ofsted and have DBS checks carried out.
- We require students in our setting to have a sufficient understanding of English to contribute to the well-being of children in our care.
- We require colleges/schools placing students with us to vouch for their good character.
- We supervise students at all times and do not allow them to have unsupervised access to children.
- Students undertaking qualification courses who are placed in our setting on a short term basis are not counted in our staffing ratios.
- Trainee staff employed by the setting and students over 17 may be included in the ratios if they are deemed competent and responsible.
- We require students to keep to our Confidentiality Policy.
- Employers' liability insurance and public liability insurance covers both trainees and voluntary helpers.
- We require students to keep to our Confidentiality and Client Access to Records Policy.
- We co-operate with students' tutors in order to help students to fulfil the requirements of their course of study.
- We provide students, prior to the commencement of their placement, with an induction on how our setting is managed, how our sessions are organised and our policies and procedures including child protection and our Empty Pockets Policy.
- Students are given information on a 'need to know' basis about children in the setting e.g. Special Educational Needs and Disabilities and Looked After children.
- The students progress will be reviewed on a half termly basis and if staff feel that the student is not meeting the criteria of the placement then discussions with tutors will take place and the contract possibly terminated. However, the placement will be terminated immediately in the event of serious misconduct e.g. issues of child protection or confidentiality.

- We communicate a positive message to students about the value of qualifications and training.
- We ensure that trainees and students placed with us are engaged in appropriate early years training, which provides the necessary background understanding of children's development and activities.

Mrs Perigo is the named Student Placements co-ordinator for the Pre-school

Review Date: September 2017

Safeguarding and Welfare Requirements

Supervision of children on outings and Visits

Policy statement

Children benefit from being taken out of the setting to go on visits or trips which enhance their learning experiences.

Trips and outings will be appropriate to the age and development of the children. Staff in our setting ensure that there are procedures in place to keep children safe on outings; all staff and volunteers are aware of and follow the procedures below.

Procedures

- Parents sign a general consent on registration for their children to be taken out as part of the daily activities of the setting.
- Parents are always asked to sign specific consent forms before major outings.
- The trip letter includes details of the outing, which are as follows: venue, departure time, return time, food requirements, cost of trip (voluntary contribution), clothing needs and travel arrangements.
- To ensure the venue is suitable for the age group, staff will gather as much information about the venue as possible by contacting the management to request an information leaflet which may include a map and where necessary a pre-visit will be made.
- If there are any changes to plans of an outing, parents will be immediately informed.
- Prior to the trip all staff will be given details of the day.
- Volunteers will be asked to attend a meeting prior to the visit taking place where they will be informed of the days activities and events, they will also be told what they should do in the case of an emergency e.g. missing child, accidents etc.
- A risk assessment is carried out before an outing takes place and is made available for parents to see on request.
- Our adult to child ratio is high, normally one adult to 3 children in Pre-School and one adult to 6 in Reception class.
- Named children are assigned to individual staff to ensure each child is individually supervised, to ensure no child goes astray, and that there is no unauthorised access to the children.
- Outings are recorded in an outings folder kept in the setting stating:
 - The date and time of outing.
 - The venue and mode of transport and details of insurance cover.
 - Names of staff assigned to children.
 - Time of return.
- Staff will take a mobile phone on outings and supplies of tissues, wipes, pants etc as well as 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 and will notify school in the event of a child's parent/ carer needing to be contacted. Staff will also take an accident book and a copy of our **Missing Child Policy**.
- A minimum of two staff accompany children on outings and a minimum of two (Pre-school) and 3(reception class) remain behind with the rest of the children.

Review Date: September 2017

Amblecote Pre-school

Supporting Pupils with Medical Conditions

At Amblecote Pre-school we promote the positive medical welfare of all our staff and pupils to ensure that medical needs are met and catered for in line with this outlined policy.

We will endeavour to ensure that children with medical conditions are properly supported so that they have full access to education, including school trips and physical education. The aim is to ensure that all children with medical conditions, in terms of both their physical and mental health, are properly supported in Pre-school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Section 100 of The Children and Families Act 2014 places a duty on the governing body of this school, to make arrangements for supporting children at their premise with medical conditions. The Department of Education have produced statutory guidance 'Supporting Pupils with Medical Conditions' (September 2014) and we will have regard to this guidance when meeting this requirement.

It is our policy to ensure that all medical information will be treated confidentially by the Manager and staff. All administration of medicines is arranged and managed in accordance with the Supporting Pupils with Medical Needs document. All staff have a duty of care to follow and co-operate with the requirements of this policy.

Where children have a disability, the requirement of the Equality Act 2010 will apply.

Where children have an identified special need, the SEND Code of Practice will also apply.

We recognise that medical conditions may impact social and emotional development as well as having educational implications.

Roles and Responsibilities

We recognise that supporting a child with a specific medical condition during the Pre-school sessions is not the sole responsibility of one person and we work collaboratively with parents, carers and outside health professionals as appropriate.

The Care Committee and Pre-school Manager are responsible for:

Ensuring that sufficient staff have received the appropriate training and that pupils are supported to enable the fullest participation in all aspects of school life.

The Manager is responsible for:

Ensuring that staff are aware of the individual child's medical conditions and Health plans as appropriate. That the Pre-school has sufficiently trained staff for example Paediatric First Aiders and that outside agencies deliver training to cover specific medical conditions such as Asthma, diabetes, epilepsy and anaphylaxis.

Pre-school Staff are responsible for:

The day to day immediate first aid of all pupils and referring a child to the Paediatric First Aiders who are trained to deal with more specific first aid needs.

Local Arrangements

Identifying Pupils with Medical Conditions

We will aim to identify children with medical needs on entry to the Pre-school by working in partnership with parents/ carers and other professionals involved with the child

For children joining our Pre-school with pre-existing medical conditions we include transitional periods between other settings to ensure that their Education Health Care plan (EHC) and/or Special Educational Needs (SEN) are catered for. Also arrangements for any staff training or supporting to be put in place.

Where a formal diagnosis is awaited or is unclear, we will plan to implement arrangements to support the child, based on the current evidence available for their condition. We will ensure that every effort is made to involve some formal medical evidence and consultation with the parents.

We recognise that individual Health Care Plans are recommended in particular where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are likely to be helpful in the majority of other cases, especially where medical conditions are long term and complex. However, not all children will require one. The Pre-school SENCO, healthcare professional and parent will agree, based on evidence, when a healthcare plan would be inappropriate or not.

Where children require an individual healthcare plan it will be the responsibility of the Pre-school SENCO to work with parents and relevant healthcare professionals to write the plan.

A health care plan (and its review) may be initiated in consultation with the parent/carer, by a member of Pre-school staff or by a healthcare professional involved in providing care to the child. Staff will work in partnership with the parents/carer, and a relevant healthcare professional e.g. specialist or children's community nurse, who can best advise on the particular needs of the child to draw up and/or review the plan. Where a child has a special educational need identified in a statement or Educational Health Care (EHC) plan, the individual health care plan will be linked to or become part of that statement or EHC plan.

We will use the individual healthcare plan template produced by the Medical Specialist who has direct knowledge of the child's individual care needs.

If a child is returning following a period of hospitalization, the Pre-school SENCO will ensure that the individual health care plan identifies the support the child will need to reintegrate effectively.

The Pre-school SENCO will ensure that all plans are reviewed at least termly or earlier if evidence is presented that the child's needs have changed. Plans should be developed with the child's best interests in mind and ensure that the school assesses and manages the risks to the child's education, health and social well-being and minimise disruption.

Training

The Pre-school staff are all Paediatric First aiders whose training is renewed every three years.

Training will be carried out annually for Asthma, epipen and specific medical conditions outlined on individual health care plans and on a three year basis for paediatric and emergency first aid.

All Pre-school staff are trained how to identify and treat an asthma attack, by the School Health Advisor (Amblecote Primary School), on an annual basis.

Pre-school staff must not administer prescription medicines or undertake any health care procedures without the appropriate training (updated to reflect any individual healthcare plans)

All new staff will be inducted on the policy when they join the Pre-school through their induction training.

Where required we will work with the relevant healthcare professionals to identify and agree the type and level of training required and identify where the training can be obtained from. This will include ensuring that the training is sufficient to ensure staff are competent and confident in their ability to support children with medical conditions. The training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs and therefore allow them to fulfil the requirements set out in the individual healthcare plan.

Any training undertaken will form part of the overall training plan for the Pre-school and refresher awareness training will be scheduled at appropriate intervals agreed with the relevant healthcare professional delivering the training.

Managing Medicines on Pre-school Site

The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible we will encourage parents to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of Pre-school hours. However, the Pre-school are responsible for ensuring children are supported with their medical needs whilst on site, therefore this may include managing medicines where it would be detrimental to a child's health or school attendance not to do so.

We will not give prescription or non-prescription medicines to a child in our care without their parent's/carers' written consent (a 'parental agreement for setting to administer medicines' form will be used to record this.)

The name of the child, dose, expiry and shelf life dates will be checked before medicines are administered.

On occasions where a child refuses to take their medication the parents will be informed at the earliest available opportunity.

We will only accept prescribed medicines that are in date, labelled, provided in the original container as dispensed by the pharmacist and include instructions for administration, their dosage and storage.

Children's inhalers are kept in the Pre-school Grab Bag.

Controlled drugs will be securely stored in a non-portable container which only named staff will have access to. We will ensure that the drugs are easily accessible in an emergency situation. A record will be kept of any doses used and the amount of the controlled drug held in school.

Emergency medicines will be stored in the Grab Bag but not locked away to ensure they are easily accessible in the case of an emergency.

Types of emergency medicines include:

- Injections of adrenaline for acute allergic reactions
- Inhalers for asthmatics
- Injections of Glucagon for diabetic hypoglycaemia

Other emergency medication i.e. rectal diazepam or Buccal Midazolam for major seizures will be stored in accordance with the normal prescribed medicines procedures.

Storage

All medication will be stored in the Grab Bag that is located in the Pre-school store room.

Where medicines need to be refrigerated, they will be stored in the staff refrigerator (Main school cooking kitchen) in a clearly labelled airtight container. There must be restricted access to a refrigerator holding medicines.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will be stored in the Grab Bag. We will also ensure that they are readily available when outside of the Pre-school premises or on school trips.

Storage of medication whilst off site will be maintained at steady temperature and secure. Pre-school staff will be present to administer day to day and emergency medication and copies of individual health care plans will be taken off site to ensure appropriate procedures are followed.

Disposal

It is the responsibility of the parents/carers to dispose of their child's medicines. It is our policy to return any medicines that are no longer required including those where the date has expired to the parents/carers. Parents/carers will be informed of this when the initial agreements are made to administer medicines.

Sharps boxes will be in place for the disposal of needles. Collection and disposal of these will be arranged with the parent who will remove them from site on a monthly basis.

Record Keeping

A record of what has been administered including how much, when and by whom, will be recorded on a 'record of medication' form. The form will be kept on file. Any possible side effects of the medication will also be noted and reported to the parent/carers.

Emergency Procedures

Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and provide a process to follow. All relevant staff will be made aware of the emergency symptoms and procedures.

Where a child is required to be taken to hospital, a member of staff will stay with the child until their parents arrives, this includes accompanying them to hospital by ambulance if necessary (taking any relevant medical information, care plans etc. that the school holds).

Days out/Trips off Site

We will ensure that Pre-school staff are aware of how a child's medical condition will impact on their participation in any off site activity or day trip, but we will ensure that there is enough flexibility for all children to participate according to their own abilities within reasonable adjustments. Parents are always present on Pre-school trips and their child remains their responsibility.

We will consider what reasonable adjustments we might make to enable children with medical needs to participate fully and safely on visits. We will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. We will consult with parents and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely.

Unacceptable Practice

Staff are expected to use their discretion and judge each child's individual healthcare plan on its merits, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;

- ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips e.g. by requiring parents to accompany the child.

Complaints

Should parents or children be dissatisfied with the support provided they can discuss their concerns directly with the Pre-school Manager, if, for whatever reason, this does not resolve the issue, they may make a formal complaint via the Pre-school Care Committee .

Review Date: September 2017

The role of the Key Person and Settling-in

Policy statement

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

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

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

Procedures

- We allocate a key person before the child starts.
- A home visit is carried out before the child starts Pre-school, this is done by the manager and the key person.
- The key person (class teacher in reception) is responsible for the induction of the family and for settling the child into our setting.
- The key person works with the parent to plan and deliver a personalised plan for the child's well-being, care and learning.
- The key person acts as the key contact for the parents and has links with other carers involved with the child, such as a childminder, and co-ordinates the sharing of appropriate information about the child's development with those carers.
- A key person is responsible for developmental records and for sharing information on a regular basis with the child's parents to keep those records up-to-date, reflecting the full picture of the child in our setting and at home.
- The key person encourages positive relationships between children in her/his key group, spending time with them as a group each day.
- We promote the role of the key person as the child's primary carer in our setting (Pre-school) and as a basis for establishing relationships with other staff and children. Teaching assistants in reception class develop positive relationships with all children support them during Child initiated play, whole group times and small group activities.

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) displays about activities available within the setting, information days and individual meetings with parents.
- During the half-term before a child is enrolled, we provide opportunities for the child and his/her parents to visit the setting.

- We allocate a key person to each child and his/her family before she/he starts to attend; the key person welcomes and looks after the child and his/her parents at the child's first session and during the settling-in process.
- We offer a home visit in Pre-school to ensure all relevant information about the child can be made known.
- We use home visits and visits to the setting to explain and complete with his/her parents the child's registration records.
- We judge a child to be settled when they have formed a relationship with their key person; for example the child looks for the key person when he/she arrives, goes to them for comfort, and seems pleased to be with them. The child is also familiar with where things are and is pleased to see other children and participate in activities.
- When parents leave, we ask them to say goodbye to their child and explain that they will be coming back, and when.
- We recognise that some children will settle more readily than others but that some children who appear to settle rapidly are not ready to be left. Often younger children take longer to settle.
- We do not believe that leaving a child to cry will help them to settle any quicker. We believe that a child's distress will prevent them from learning and gaining the best from the setting. We will discuss with parents how soon they would like us to call them if their child does not settle and reduced session times may be discussed with a parent if it is in their child's best interests.
- Within the first four to six weeks of starting we discuss and work with the child's parents to start to create their child's record of achievement.

The progress check at age two

- The key person (Pre-school) will ask parents about the progress check and will plan activities to meet the child's needs within the setting.

Review Date: September 2017

Uncollected Child

Policy statement

In the event that a child is not collected by an authorised adult at the end of the session or day the setting puts into place agreed procedures. These ensure the child is cared for safely by an experienced and qualified practitioner who is known to the child. 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 the following specific information which is recorded on our Registration Form (Pre-School)/ New Pupil Form (Reception class):

- Home address and telephone number- if the parents do not have a telephone, an alternative number must be given, perhaps a neighbour or close relative.
- Place of work, address and telephone number (if applicable).
- Mobile telephone number (if applicable).
- Names and telephone numbers of adults who are authorised by the parents to collect their child from the setting, for example a childminder or grandparent. **Children will only be released into the care of individuals named by the parent.** Written details of names of people with permission to collect children from school will be kept in the classroom.
- Who has parental responsibility for the child.
- Information about any person who does not have legal access to the child.

- On occasions when parents are aware that they will not be at home or in their usual place of work they inform us in writing of how they can be contacted.
- On occasions when parents, or the persons normally authorised to collect the child, are not able to collect the child they provide us with written details or a telephone call with details of the person who will be collecting their child. We agree with parents how to verify the identity of the person who is to collect their child e.g. code word or photograph.
- Parents are informed that if they are not able to collect the child as planned, they must inform us so that we can begin to take back-up measures. We provide parents with our contact telephone number.

- We inform parents that we apply our child protection procedures in the event that their children are not collected by an authorised adult within one hour after the setting has closed and the staff can no longer supervise the child on our premises.

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

- The message book (reception class) or register (Pre-school) is checked for any information about changes to the normal collection routines.
- If no information is available, parents/ carers are contacted at home or at work.
- If this is unsuccessful, authorised adults named by the parents will be contacted using the telephone numbers given.
- 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.
- 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 children's social services care team.

- The child stays at the setting in the care of an authorised person (Reception)/ 2 Key Persons (Pre-school) until the child is safely collected either by the parents, other named person or by a social care worker.
- Social care will aim to find the parents or relative. If they are unable to do so, the child will become looked after by the local authority.
- Under no circumstances will staff go to look for the parent, nor do they take the child home with them.
- A full written report is recorded in the child's file.

Review Date: September 2017

Use of Mobile Phones and Cameras
Empty Pocket Policy

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 capturing image devices in the setting.

Procedures

Personal mobile phones

- Personal mobile phones belonging to members of staff are not to be used on the premises during session times.
- At the beginning of each session working staff and volunteers in Pre-school place electronic devices, which can capture and store images e.g. mobile phones, cameras, games consoles, USB sticks in a secure area in the Pre-school cupboard. Reception staff place mobile phones in their bags in the reception class cupboards.
- In the event of an emergency personal mobile phones may be used in the staffroom with permission from the manager.
- Members of staff ensure that the Pre-school/ school telephone number 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 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 on outings.
- Parents and visitors are requested not to use their mobile phones whilst on the premises (Reception classes). Pre-school staff will collect phones from visitors, if they are visiting when children are in session and store them securely in a box in the cupboard. Visitors will be advised of a quiet space (usually the staff room), where they can use their mobile phone, if essential, where there are no children present.
- Pre-school staff need to be aware that some visitors may have 2 mobile phones, this may be the case with visiting professional, and both phones must be put in the Pre-school cupboard.

Other photographic and image capturing equipment

- Members of staff must not bring their own cameras or video recorders into the setting.
- Photographs and recordings of the children are 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 Mrs Perigo and Mrs Price.
- During special events, parents are requested prior to the start of the performance that they will only photograph their own child and that these photos will not be placed on social networking sites.
- Photographs and recordings of children are only taken if there is written permission to do so. (Forms complete on-entry to Pre-school and Reception)
- Other professionals e.g. PIMIS staff may use other photographic and image capturing equipment if signed consent from the parents has been obtained. Pre-school staff will monitor the use of these devices whilst the professional is in the setting.

Review Date: September 2017

Equal Opportunities

Valuing diversity and promoting equality

Policy statement

We will ensure that our setting 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.

We aim to:

- Provide a secure and accessible environment in which all 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 ethnic and cultural groups and disabled people;
- Improve our knowledge and understanding of issues of anti-discriminatory practice, promoting equality and valuing diversity: and
- Make inclusion a thread that runs through all the activities of the setting.

Procedures

Admissions

Our setting is open to all members of the community.

We provide information in clear, concise language, whether in spoken or written form.

We try to provide information in children's home language where needed.

- We ensure all parents are made aware of our equal opportunities 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).
- We do not discriminate against a child with a disability or refuse a child entry to our setting for reason relating to disability.
- We develop an action plan to ensure that people with disabilities 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. 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.

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 promoting equality, valuing diversity and inclusion.

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. 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;
- 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; and
- ensuring that children learning English as an additional language have full access to the curriculum and are supported in their learning.

Mrs L Jukes is the named person for Equal Opportunities/ Culture and Diversity within the Pre-school.

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 parents/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.

Food

- We work in partnership with parents to ensure that the medical, cultural and dietary needs of children 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 through snacktime, cooking and food tasting activities.

Meetings

- Information about meetings is communicated in a variety of ways – written, verbal and in translation where needed – to ensure that all parents have information about and access to the meetings.

Monitoring and reviewing

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

Review Date: September 2017

Suitable People

Volunteer Placements

Policy statement

This setting recognises the importance of maintaining links with the community and values the contribution that volunteer helpers can make. As part of our commitment to quality, we offer placements to volunteers who may wish to lend their support or knowledge in the setting.

Procedures

- We require volunteers to meet the 'suitable person' requirements of Ofsted.
- We may ask for vouch of character references where deemed necessary.
- We supervise volunteers at all times and do not allow them to have unsupervised access to children.
- We require volunteers to keep to our confidentiality policy.
- We provide volunteers, at the first session of their placement, with a short induction on how our setting is managed, how our sessions are organised and our policies and procedures including child protection and the use of *mobile phones within the setting*.
- Volunteers are given information on a 'need to know' basis about children in the setting e.g. Special Educational Needs and Disabilities and Looked After children.
- If staff feel that the volunteer is not meeting the criteria of the placement then discussions with the volunteer will take place and the arrangement possibly terminated.

Review Date : September 2017

Safeguarding Children **Working in Partnership with Other Agencies**

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

Procedures:

- We work in partnership with, local and national agencies to promote the well-being of children.
- Procedures are in place for 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 Special Educational Needs and Disability procedures.
- 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.
- **Pre-school are registered with the Information Commissioners Office (ICO) under Amblecote Primary Schools registration.**
- 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 issues.
- 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.
- They will wear a visitors badge at all times.
- 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 develop understanding of 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.

Review Date: September 2017