SAFETY POLICY

Statement of Intent

Good Hope Pre-School and Care Centre believes that the health and safety of children is of paramount importance. We make our pre-school a safe and healthy place for children, parents, staff and volunteers.

Aim

We aim to make children, parents and staff aware of health and safety issues and to minimise the hazards and risks to enable the children to thrive in a healthy and safe environment.

Methods

The members of staff are responsible for health and safety. They are competent to carry out these responsibilities. We display the necessary health and safety poster in our Operational Plan file and on the notice board in the foyer.

Risk Assessment

Our risk assessment process includes:

1. checking for hazards and risks indoors and outside, and in our activities and procedures. Our assessment covers adults and children;
2. deciding which areas need attention; and
3. developing an action plan that specifies the action required, the timescales for action, the person responsible for the action and any funding required.

We maintain lists of health and safety issues, which are checked:

1. daily before the session begins;
2. weekly; and
3. termly - when a full risk assessment is carried out.

Awareness Raising

1. Our induction training for staff and volunteers includes a clear explanation of health and safety issues so that all adults are able to adhere to our policy and 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.
2. Records are kept of these induction training sessions and new staff and volunteers are asked to sign the records to confirm that they have taken part.
3. Health and safety issues are explained to the parents of new children so that they understand the part played by these issues in the daily life of the setting.
4. As necessary, health and safety training is included in the annual training plans of staff, and health and safety is discussed regularly at staff meetings.
5. We have a no smoking policy.
6. Children are made aware of health and safety issues through discussions, planned activities and routines.

Children's Safety

1. We ensure all staff employed have been checked for criminal records by an enhanced disclosure from the Criminal Records Bureau.
2. Adults do not normally supervise children on their own.
3. All children are supervised by adults at all times.

4. Whenever children are on the premises at least two adults must be present.

Security

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

Windows, Doors and Floors

1. Low level windows are made from materials that prevent accidental breakage or are made safe.
2. Windows are protected from accidental breakage or vandalism from people outside the building.
3. We take precautions to prevent children's fingers from being trapped in doors.
4. All surfaces are checked daily to ensure they are clean and not uneven or damaged.

Kitchen

1. Children do not have unsupervised access to the kitchen.
2. All surfaces are clean and non-porous.
3. There are separate facilities for hand-washing and for washing up.
4. Cleaning materials and other dangerous materials are stored out of children's reach.

Electrical/gas Equipment

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

Storage

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

Outdoor Area

1. Our outdoor area is securely fenced.
2. Our outdoor area is checked for safety and cleared of rubbish before it is used.
3. Adults and children are alerted to the dangers of poisonous plants, herbicides and pesticides.
4. Where water can form a pool on equipment, it is emptied before children start playing outside.
5. All outdoor activities are supervised at all times.

Hygiene

1. We regularly seek information from the Environmental Health Department and the Health Authority to ensure that we keep up to date with the latest recommendations.
2. Our daily routines encourage the children to learn about personal hygiene.

3. We have a daily cleaning routine for the setting which includes play room(s), kitchen, rest area, toilets and nappy changing areas.
4. We have a schedule for cleaning resources and equipment, dressing-up clothes and furnishings.
5. The toilet area has a high standard of hygiene including hand washing and drying facilities and the disposal of nappies.

Activities

1. 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.
2. The layout of play equipment allows adults and children to move safely and freely between activities.
3. All equipment is regularly checked for cleanliness and safety and any dangerous items are repaired or discarded.
4. All materials - including paint and glue - are non-toxic.
5. Sand is clean and suitable for children's play.
6. Physical play is constantly supervised.
7. Children are taught to handle and store tools safely.
8. Children who are sleeping are checked regularly.
9. Children learn about health, safety and personal hygiene through the activities we provide and the routines we follow.

Food and Drink

1. Staff who prepare and handle food receive appropriate training and understand - and comply with - food safety and hygiene regulations.
2. All food and drink is stored appropriately.
3. Adults do not carry hot drinks through the play area(s) and do not place hot drinks within reach of children.
4. Snack and meal times are appropriately supervised and children do not walk about with food and drinks.
5. Fresh drinking water is available to the children at all times.
6. We operate systems to ensure that children do not have access to food/drinks to which they are allergic.

Outings and visits

1. We have agreed procedures for the safe conduct of outings.
2. Parents sign a general consent on registration for their children to be taken out as a part of the daily activities of the setting.
3. Parents always sign consent forms before major outings.
4. A risk assessment is carried out before an outing takes place.
5. Our adult to child ratio is high, normally one adult to two children.
6. Named children are assigned to individual staff to ensure each child is individually supervised and to ensure no child gets lost and that there is no unauthorised access to children.
7. Outings are recorded in our day book:
    1. the date and item of outing
    2. the venue and mode of transport
    3. names of staff assigned to named children
    4. time of return
8. Staff take a mobile phone on outings, and supplies of tissues, wipes, pants etc as well as a mini first aid pack, a snack 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.
9. Records are kept of the vehicles used to transport children, with named drivers and appropriate insurance cover.
10. A minimum of two staff should accompany children on outings and a minimum of two should remain behind with the rest of the children.

Missing child

If a child goes missing from our pre-school

1. The person in charge will carry out a thorough search of the building and garden.
2. The register is checked to make sure no other child has also gone astray.
3. Doors and gates are checked to see if there has been a breach of security whereby a child could wander out.
4. Person in charge talks to staff to establish what happened
5. If the child is not found the parent is contacted and the missing child is reported to the police.

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

1. As soon as it is noticed that a child is missing, staff on the outing ask children to stand with their designated person and carry out a headcount to ensure that no other child has gone astray. One staff searches the immediate vicinity but does not search beyond that.
2. The person in charge is informed, if s/he is not on the outing and makes his/her way to the venue to aid the search and be the point of contact for the police as well as support staff.
3. Staff take the remaining children back to the setting.
4. The person in charge of the setting contacts the child's parent who makes their way to the setting or outing venue as agreed with the person in charge.
5. The staff contact the police using the mobile phone and report the child as missing.
6. In an indoor venue, the staff contact the venue's security who will handle the search and contact the police if the child is not found.
7. The person in charge contacts the chairperson of the management committee who comes down to the setting as soon as possible.

The investigation

1. The management committee chairperson carries out a full investigation taking written statements from all the staff present at the time, or who were on the outing.
2. The key person/ staff writes an incident report detailing:
    1. the date and time of the report;
    2. what staff/ children were in the group/outing;
    3. when the child was last seen in the group/outing;
    4. what has taken place in the group/outing since then; and
    5. the time it is estimated that the child went missing.
3. A conclusion is drawn as to how the breach of security happened.
4. If the incident warrants a police investigation all staff co-operate fully. In this case, the police will handle all aspects of the investigation, including interviewing staff. Social Services may be involved if it seems likely that there is a child protection issue to address.
5. The incident is reported under RIDDOR arrangements and is recorded in the incident book; the local authority health and safety officer may want to investigate and will decide if there is a case for prosecution.
6. OFSTED is informed.
7. The Insurance Department at the Pre-School Learning Alliance is informed.

Animals

1. Animals visiting the setting are free from disease and safe to be with children, and do not pose a health risk.
2. Children wash their hands after contact with animals.
3. Outdoor footwear worn to visit farms are cleaned of mud and debris and should not be worn indoors.

Fire Safety

1. Fire doors are clearly marked, never obstructed and easily opened from inside.

2. Smoke detectors/alarms and fire fighting appliances conform to BSEN standards, are fitted in appropriate high risk areas of the building and are checked as specified by the manufacturer.
3. Our emergency evacuation procedures are approved by the Fire Safety Officer and are:
    1. clearly displayed in the premises;
    2. explained to new members of staff, volunteers and parents; and
    3. practised regularly at least once every six weeks.
4. Records are kept of fire drills and the servicing of fire safety equipment.

First Aid and Medication

At least one member of staff with current first aid training 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.

Our first aid kit:

1. complies with the Health and Safety (First Aid) Regulations 1981;
2. is regularly checked by a designated member of staff and re-stocked as necessary;
3. is easily accessible to adults; and
4. is kept out of the reach of children.

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.

Our Accident Book:

1. is kept safely and accessibly;
2. all staff and volunteers know where it is kept and how to complete it; and
3. is reviewed at least half termly to identify any potential or actual hazards.

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

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

Dealing with incidents

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

1. any accident to a member of staff requiring treatment by a general practitioner or hospital; and
2. 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.
3. Any dangerous occurrence is recorded in our Incident Book. See below.

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

Our Incident Book

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

Administration of medication

1. Only prescribed medication may be administered. It must be in-date and prescribed for the current condition.
2. Children taking prescribed medication must be well enough to attend the setting.
3. Children's prescribed drugs are stored in their original containers, are clearly labelled and are inaccessible to the children.
4. Parents give prior written permission for the administration of medication. This states the name of the child, name/s of parent(s), date the medication starts, the name of the medication and prescribing doctor, the dose and times, or how and when the medication is to be administered.
5. The administration is recorded accurately each time it is given and is signed by staff. Parents sign the record book to acknowledge the administration of a medicine.
6. If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.

Sickness

Our policy for the exclusion of ill or infectious children is discussed with parents. This includes procedures for contacting parents - or other authorised adults - if a child becomes ill while in the setting.

1. We do not provide care for children who are unwell, have a temperature, or sickness and diarrhoea, or who have an infectious disease.
2. Children with headlice are not excluded, but must be treated to remedy the condition.
3. Parents are notified if there is a case of headlice in the setting.
4. Parents are notified if there is an infectious disease, such as chicken pox.
5. HIV (Human Immunodeficiency Virus) may affect children or families attending the setting. Staff may or may not be informed about it.
6. Children or families are not excluded because of HIV.
7. Good hygiene practice concerning the clearing of any spilled bodily fluids is carried out at all times.
8. Staff suffering from sickness and diarrhoea do not handle food.
9. Ofsted is notified of any infectious diseases that a qualified medical person considers notifiable.

Safety of Adults

1. Adults are provided with guidance about the safe storage, movement, lifting and erection of large pieces of equipment.
2. When adults need to reach up to store equipment or to change light bulbs they are provided with safe equipment to do so.
3. All warning signs are clear and in appropriate languages.
4. Adults do not remain in the building on their own or leave on their own after dark.
5. 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.

Records

In accordance with the National Standards for Day Care, we keep records of:

Adults

1. names and addresses of all staff on the premises, including temporary staff who work with the children or who have substantial access to them;
2. names and addresses of the owners or of all members of the management committee;
3. all records relating to the staff's employment with the setting, including application forms, references, results of checks undertaken etc.

Children

1. names, addresses and telephone numbers of parents and adults authorised to collect children from setting;
2. the names, addresses and telephone numbers of emergency contacts in case of children's illness or accident;
3. the allergies, dietary requirements and illnesses of individual children;
4. the times of attendance of children, staff, volunteers and visitors;
5. accidents and medicine administration records;
6. consents for outings, administration of medication, emergency treatment; and
7. incidents