Providers must have and implement a policy, and procedures, to safeguard children.

# 1.1 Children's rights and entitlements

## **Policy statement**

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

## What it means to promote children's rights and entitlements to be 'strong, resilient and listened to'.

- 1.6 To be strong means to be:
- secure in their foremost attachment relationships, where they are loved and cared for by at least one person who is able to offer consistent, positive and unconditional regard and who can be relied on;
- safe and valued as individuals in their families and in relationships beyond the family, such as day care or school:
- self-assured and form a positive sense of themselves including all aspects of their identity and heritage;
- included equally and belong in our setting and in community life;
- confident in their own abilities and proud of their achievements;
- progressing optimally in all aspects of their development and learning;
- part of a peer group in which they learn to negotiate, develop social skills and an identity as global citizens,
   respecting the rights of others in a diverse world; and
- able to represent themselves and participate in aspects of service delivery that affects them, as well
  asaspects of key decisions that affect their lives.
- 1.7 To be resilient means to:
- be sure of their self-worth and dignity;

- be able to be assertive and state their needs effectively;
- be able to overcome difficulties and problems;
- be positive in their outlook on life;
- be able to cope with challenge and change;
- have a sense of justice towards themselves and others;
- develop a sense of responsibility towards themselves and others; and
- be able to represent themselves and others in key decision making processes.

## 1.8 To be listened to means:

- adults who are close to children recognise their need and right to express and communicate their thoughts, feelings and ideas;
- adults who are close to children are able to tune in to their verbal, sign and body language in order to understand and interpret what is being expressed and communicated;
- adults who are close to children are able to respond appropriately and, when required, act upon their understanding of what children express and communicate; and
- adults respect children's rights and facilitate children's participation and representation in imaginative and child centred ways in all aspects of core services.

This policy was adopted by	Zikora Day Nursery and Preschool

Providers must have and implement a policy, and procedures, to safeguard children.

# 1.2 Safeguarding children, young people and vulnerable adults

# **Policy statement**

Our setting will work with children, parents and the community to ensure the rights and safety of children, young people\* and vulnerable adults. Our Safeguarding Policy is based on the three key commitments of the Pre-school Learning Alliance Safeguarding Children Policy.

#### **Procedures**

We carry out the following procedures to ensure we meet the three key commitments of the Alliance Safeguarding Children Policy, which incorporates responding to child protection concerns.

## Key commitment 1

We are committed to building a 'culture of safety' in which children, young people and vulnerable adults are protected from abuse and harm in all areas of our service delivery.

 Group provision: Our designated person (a member of staff) who co-ordinates child, young person and vulnerable adult protection issues is:

# Alka Patel (Deputy Manager)

- When the setting is open but the designated person is not on site, a suitably trained deputy is available at all times for staff to discuss safeguarding concerns.
- Our designated officer (a member of the management team) who oversees this work is:

# Mohammed A. Uddin (Nursery Manager) and Alka Patel (Deputy Manager)

- The designated person, the suitably trained deputy and the designated officer ensure they have relevant links with statutory and voluntary organisations with regard to safeguarding.
- The designated person (and the person who deputises for them) understands (Local Safeguarding Children Board) LSCB safeguarding procedures, attends relevant LSCB training at least every two years and refreshes their knowledge of safeguarding at least annually.
- 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, are alert to potential indicators and signs
  of abuse and neglect and understand their professional duty to ensure safeguarding and child
  protection.

- Concerns are reported to the local authority children's social care team or the NSPCC. They receive
  updates on safeguarding at least annually.
- All staff are confident to ask questions in relation to any safeguarding concerns and know not to just take things at face value but can be respectfully sceptical.
- All staff understand the principles of early help (as defined in Working Together to Safeguard Children, 2015) and are able to identify those children and families who may be in need of early help and enable them to access it.
- All staff understand LSCB thresholds of significant harm and understand how to access services for families, including for those families who are below the threshold for significant harm.
- All staff understand how to escalate their concerns in the event that they feel either the local authority and/or their own organisation has not acted adequately to safeguard.
- All staff understand what the organisation expects of them in terms of their required behaviour and conduct, and follow our policies and procedures on positive behaviour, online safety (including use of mobile phones), whistleblowing and dignity at work.
- Children have a key person to build a relationship with, and are supported to articulate any worries, concerns or complaints that they may have in an age appropriate way.
- All staff understand our policy on promoting positive behaviour and follow it in relation to children showing aggression towards other children.
- Adequate and appropriate staffing resources are provided to meet the needs of children.
- Applicants for posts within the setting are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974.
- Enhanced criminal records and barred lists checks and other suitability checks are carried out for staff
  and volunteers prior to their post being confirmed, to ensure that no disqualified person or unsuitable
  person works at the setting or has access to the children.
- Where applications are rejected based on information disclosed, applicants have the right to know and to challenge incorrect information.
- Enhanced criminal records and barred lists checks are carried out on anyone living or working on the premises.
- Volunteers must:
  - be aged 17 or over;
  - be considered competent and responsible;
  - receive a robust induction and regular supervisory meetings;
  - be familiar with all the settings policies and procedures;
  - be fully checked for suitability if they are to have unsupervised access to the children at any time.
- Information is recorded about staff qualifications, and the identity checks and vetting processes that have been completed including:
  - the criminal records disclosure reference number;
  - certificate of good conduct or equivalent where a UK DBS check is not appropriate;
  - the date the disclosure was obtained; and

- details of who obtained it.
- All staff and volunteers are informed that they are expected to disclose any convictions, cautions, court
  orders or reprimands and warnings which may affect their suitability to work with children (whether
  received before or during their employment with us).
- All staff and volunteers are required to notify us if anyone in their household (including family members, lodgers, partners etc.) has any relevant convictions, cautions, court orders, reprimands or warnings or has been barred from, or had registration refused or cancelled in relation to any childcare provision or have had orders made in relation to care of their children.
- We notify the Disclosure and Barring Service 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.
- Procedures are in place to record the details of visitors to the setting.
- Security steps are taken to ensure that we have control over who comes into the setting so that no unauthorised person has unsupervised access to the children.
- Steps are taken 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.
- Any personal information is held securely and in line with data protection requirements and guidance from the ICO.
- The designated person in the setting has responsibility for ensuring that there is an adequate online safety policy in place.
- We keep a written record of all complaints and concerns including details of how they were responded to.
- We ensure that robust risk assessments are completed, that they are seen and signed by all relevant staff and that they are regularly reviewed and updated, in line with our health and safety policy.
- The designated officer will support the designated person to undertake their role adequately and offer advice, guidance, supervision and support.
- The designated person will inform the designated officer at the first opportunity of every significant safeguarding concern, however this should not delay any referrals being made to children's social care, the LADO, Ofsted or Riddor.

## Key commitment 2

We are committed to responding promptly and appropriately to all incidents, allegations 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' (HMG, 2015) and the Care Act 2014.

## Responding to suspicions of abuse

- We acknowledge that abuse of children can take different forms physical, emotional, and sexual, as well as neglect.
- We ensure that all staff have an understanding of the additional vulnerabilities that arise from special educational needs and/or disabilities, plus inequalities of race, gender, language, religion, sexual

- orientation or culture, and that these receive full consideration in relation to child, young person or vulnerable adult protection.
- 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
  - disclosure);
  - changes in their appearance, their behaviour, or their play;
  - unexplained bruising, marks or signs of possible abuse or neglect; and
  - any reason to suspect neglect or abuse outside the setting.
- We are aware of the 'hidden harm' agenda concerning parents with drug and alcohol problems and consider other factors affecting parental capacity and risk, such as social exclusion, domestic violence, radicalisation, mental or physical illness and parent's learning disability.
- We are aware that children's vulnerability is potentially increased when they are privately fostered and when we know that a child is being cared for under a private fostering arrangement, we inform our local authority children's social care team.
- We are aware of other factors that affect children's vulnerability that may affect, or may have affected, children and young people using our provision, such as abuse of children who have special educational needs and/or disabilities; fabricated or induced illness; child abuse linked to beliefs in spirit possession; sexual exploitation of children, including through internet abuse; Female Genital Mutilation and radicalisation or extremism.
- In relation to radicalisation and extremism, we follow the Prevent Duty guidance for England and Wales published by the Home Office and LSCB procedures on responding to radicalisation.
- The designated person completes online Channel training, online Prevent training and attends local WRAP training where available to ensure they are familiar with the local protocol and procedures for responding to concerns about radicalisation.
- We are aware of the mandatory duty that applies to teachers and health workers to report cases of Female Genital Mutilation to the police.
- 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/I] may become aware of any of these factors affecting older children and young people who we may come into contact with.
- Where we believe that a child in our care or that is known to us may be affected by any of these factors we follow the procedures below for reporting child protection concerns and follow the LSCB procedures.
- Where such evidence is apparent, the child's key person makes a dated record of the details of the concern and discusses what to do with the member of staff who is acting as the designated person. The information is stored on the child's personal file.

- In the event that a staff member or volunteer is unhappy with the decision made of the designated person in relation to whether to make a safeguarding referral they must follow escalation procedures.
- We refer concerns to the local authority children's social care team and co-operate fully in any subsequent investigation. NB in some cases this may mean the police or another agency identified by the Local Safeguarding Children Board.
- We take care not to influence the outcome either through the way we speak to children or by asking questions of children.
- We take account of the need to protect young people aged 16-19 as defined by the Children Act 1989. This may include students or school children on work placement, 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.
- All staff are also aware that adults can also be vulnerable and know how to refer adults who are in need of community care services.
- We have a whistleblowing policy in place.
- Staff/volunteers know they can contact the organisation Public Concern at Work for advice relating to whistleblowing; if they feel that the organisation has not acted adequately in relation to safeguarding they can contact the NSPCC whistleblowing helpline.

## 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 guestion the child, although it is OK to ask guestions for the purposes of clarification;
  - 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 person is informed of the issue at the earliest opportunity, and within one working day.
- Where the Local Safeguarding Children Board stipulates the process for recording and sharing concerns, we include those procedures alongside this procedure and follow the steps set down by the Local Safeguarding Children Board.

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

- The Pre-school Learning Alliance's publication Safeguarding Children contains procedures for making a
  referral to the local children's social care team, as well as a template form for recording concerns and
  making a referral.
- We keep a copy of this document alongside the procedures for recording and reporting set down by our Local Safeguarding Children Board, which we follow where local procedures differ from those of the Preschool Learning Alliance.
- The Multi Agency Safeguarding Hub (MASH) can be contacted where concerns have been raised relating to the welfare and safeguarding of children. MASH can be contacted on 0203 373 4600 during office hours and on 0208 430 2000 out of hours.

## Escalation process

- If we feel that a referral made has not been dealt with properly or that concerns are not being addressed or responded to, we will follow the LSCB escalation process.
- We will ensure that staff are aware of how to escalate concerns.

## Informing parents

- Parents are normally the first point of contact. Concerns are discussed with parents to gain their view of events, unless it is felt that this may put the child at risk, or interfere with the course of a police investigation. Advice will be sought from social care if necessary.
- Parents are informed 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 social care, 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 at risk.
- This will usually be the case where the parent is the likely abuser.
- If there is a possibility that advising a parent beforehand may place a child at greater risk (or interfere with a police response) the designated person should seek advice from children's social care, about whether or not to advise parents beforehand, and should record and follow the advice given.

## Liaison with other agencies

- We work within the Local Safeguarding Children Board guidelines.
- The current version of 'What to do if you're worried a child is being abused' is available for parents and staff and 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 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 published across the site to ensure it is readily available. NSPCC can be contacted on 0808 800 500 or at help@nspcc.org.uk

## 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, volunteer or any other person living or working on the premises, 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 ensure that all staff and volunteers know how to raise concerns about a member of staff or volunteer within the setting. We respond to any concerns raised by staff and volunteers who know how to escalate their concerns if they are not satisfied with our response
- 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 and/or offer advice, contact details are published across the site to ensure it is easily accessible. Our current LADO is Nick Pratt, 0203 3733803/ 0203 3736706 -

# Email: lado@newham.gov.uk/Nick.Pratt@newham.gov.uk

- We also report any such alleged incident to Ofsted (unless advised by LADO that this is unnecessary due to the incident not meeting the threshold), 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 member of staff or volunteer will be suspended 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, we will notify the Disclosure and 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.

## Key commitment 3

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

## Training

- Training opportunities are sought 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 (including child sexual exploitation) and neglect and that they are aware of the local authority guidelines for making referrals.
- Designated persons receive appropriate training, as recommended by the Local Safeguarding Children
   Board every two years and refresh their knowledge and skills at least annually.
- We ensure that all staff know the procedures for reporting and recording any concerns they may have about the provision.
- We ensure that all staff receive updates on safeguarding via emails, newsletters, online training and/or discussion at staff meetings at least once a year.

#### **Planning**

• The layout of the rooms allows for constant supervision. For group provision: No child is left alone with staff or volunteers in a one-to-one situation without being within sight and/or hearing of other staff or volunteers.

#### 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.

## Support to families

- We believe in building trusting and supportive relationships with families, staff and volunteers.
- We make clear to parents our role and responsibilities in relation to child protection, such as for the reporting of concerns, information sharing, monitoring of the child, and liaising at all times with the local children's social care team.
- We will continue to welcome the child and the family whilst investigations are being made in relation to any alleged abuse.
- We follow the Child Protection Plan as set by the child's social 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.

## Legal framework

## Primary legislation

- Children Act (1989 s47)
- Protection of Children Act (1999)
- The Children Act (2004 s11)
- Safeguarding Vulnerable Groups Act (2006)
- Childcare Act (2006)

# Secondary legislation

- Sexual Offences Act (2003)
- Criminal Justice and Court Services Act (2000)
- Equality Act (2010)
- Data Protection Act (1998)
- Childcare (Disgualification) Regulations (2009)
- Children and Families Act (2014)
- Care Act (2014)
- Serious Crime Act (2015)
- Counter-Terrorism and Security Act (2015)

## Further guidance

- Working Together to Safeguard Children (HMG, 2015)
- What to do if you're Worried a Child is Being Abused (HMG, 2015)
- Framework for the Assessment of Children in Need and their Families (DoH 2000)
- The Common Assessment Framework for Children and Young People: A Guide for Practitioners (CWDC 2010)
- Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004 (HMG 2008)
- Hidden Harm Responding to the Needs of Children of Problem Drug Users (ACMD, 2003)
- Information Sharing: Guidance for Practitioners providing Safeguarding Services (DfE 2015)
- Disclosure and Barring Service: www.gov.uk/disclosure-barring-service-check
- Revised Prevent Duty Guidance for England and Wales (HMG, 2015)
- Inspecting Safeguarding in Early Years, Education and Skills Settings, (Ofsted, 2016)

## Other useful Pre-school Learning Alliance publications

- Safeguarding Children (2013)
- Safeguarding through Effective Supervision (2013)
- Employee Handbook (2016)
- People Management in the Early Years (2016)

\*A 'young person' is defined as 16 to 19 years old – in our setting they may be a student, worker, volunteer or parent.

This policy was adopted by Zikora Day Nurse	ery and Preschool
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Providers must have and implement a policy, and procedures, to safeguard children.

# 1.3 Looked after children

## **Policy statement**

We are committed to providing quality provision based on equality of opportunity for all children and their families. All staff in our provision are committed to doing all they can to enable 'looked after' children in our 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 also recognise that not all looked after children have experienced abuse and that there are a range of reasons for children to be taken in to 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. Most local authorities do not place children under five with foster carers who work outside the home; however, there are instances when this does occur or where the child has been placed with another family member who works. It is not appropriate for a looked after child who is under two years to be placed in a day care setting in addition to a foster placement.

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 new expectations made upon them.

## **Principles**

- The term 'looked after child' denotes a child's current legal status; this term is never used to categorise a child as standing out from others. We do not refer to such a child using acronyms such as LAC.
- We do not normally offer placements for babies and children under two years who are in care; we offer
  instead other services to enable a child to play and engage with other children while their carer stays with
  them.

- In exceptional circumstances, we offer places to two-year-old children who are in care. In such cases, the child should have been with the foster carer for at least two months and show signs of having formed a secure attachment to the carer, and the placement in the setting will last a minimum of three months.
- We offer places for funded three and four-year-olds who are in care to ensure they receive their entitlement to early education. 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 will 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 two to five years old who is still settling with their foster carer, or who is only temporarily being looked after.
- 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 the placement for the child.

## **Procedures**

- The designated person for looked after children is the designated child protection co-ordinator.
- Every child is allocated a key person before they start and this is no different for a looked after child. The designated person ensures the key person has the information, support and training necessary to meet the looked after child's needs.
- The designated person and the key person liaise with agencies, professionals and practitioners involved with the child and his or her family and ensure that 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 parent's 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 a placement there is a professional's meeting to determine the objectives of the placement and draw up a care plan 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, culture, language(s) and identity and how this is to be supported;
  - their need for sociability and friendship;
  - their interests 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 to 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, such as outings and fun-days etc. alongside the foster carer.
- The settling-in process for the child is agreed. It should be the same as for any other child, with the foster carer taking the place of the parent, unless otherwise agreed. It is even more important that the 'proximity' stage is followed until it is visible that the child has formed a sufficient relationship with his or her key person for them to act as a 'secure base' to allow the gradual separation from the foster carer. This process may take longer in some cases, so 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 firm 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 the setting's safeguarding children procedure.
- Regular contact should be maintained with the social worker through planned meetings that will include the foster carer.
- The transition to school will be handled sensitively. The designated person and/or the child's key person
  will liaise with the school, passing on relevant information and documentation with the agreement of the
  looked after child's birth parents.

## Further guidance

- Guidance on the Education of Children and Young People in Public Care (DfEE 2000)
- Who Does What: How Social Workers and Carers can Support the Education of Looked After Children (DfES 2005)
- Supporting Looked After Learners A Practical Guide for School Governors (DfES 2006)

This policy was adopted by	Zikora Day Nursery and Preschool

Providers must have and implement a policy, and procedures, to safeguard children.

# 1.4 Whistle-blowing policy & procedure

1.41 This policy applies to all employees and applies equally to those designated as casual, temporary or work experience students.

1.42 As childcare provider's it is our individual responsibility to maintain the welfare of both the children and staff. It is our duty to express any concerns or issues to a senior member of staff as soon as we notice anything that could raise concern.

## What is whistleblowing?

1.43 Whistleblowing is a term used when someone who works in or for an organisation wishes to raise concerns about malpractice in the organisation. Whistleblowing encourages and enables staff to raise serious concerns within the nursery, rather than overlooking a problem or "blowing the whistle" outside.

## **Policy Statement**

- 1.44 Zikora Day Nursery is committed to the highest possible standards of openness, honesty and accountability. Making a disclosure in the public interest (whistleblowing) is essential for keeping children safe in the setting and to ensure good quality practice across the setting.
- 1.45 We encourage employees to feel confident in raising concerns and to question and act upon concerns and practise, we aim:
  - To provide avenues for employees to raise concerns in confidence and receive feedback on any action taken.
  - To reassure employees that they will be protected from possible reprisals or victimisation if they have a reasonable belief that a disclosure was made in good faith.
  - To ensure that employees receive a response to their concerns and that they are aware of how to escalate if employees are not satisfied.
- 1.46 Zikora Day Nursery will not tolerate any harassment or victimisation (including informal pressures) and will take appropriate action to protect you when you raise a concern in good faith, that you will not suffer any personal detriment as a result of raising any genuine concern about misconduct or malpractice within the setting.
- 1.47 This policy should be read in conjunction with the safeguarding policy and complaints.

Providers must have and implement a policy, and procedures, to safeguard children.

## Confidentiality

1.48 The management will do its best to protect a person's identity when a concern is raised, however in some circumstances identities will have to be revealed to the person complained against and the complainant may be asked to provide written or verbal evidence in support of their complaint. If a person's identity is to be disclosed, he or she will be told before the disclosure and the reasons why this is necessary. Once the concerns have been raised, we expect that the complainant will not talk about this to any other person inside or outside the setting.

## **Anonymous Complaints**

1.49 When a concern is expressed anonymously it is much less powerful and harder to investigate. However, they may still be considered and looked at.

## **Unfounded allegations**

1.410 If an allegation is made in good faith but it is not confirmed by the investigation, no action will be taken against the complainant. If, however, an allegation proves to be malicious, action may be taken against the person responsible for the malicious act.

#### How to raise a concern?

1.411 In the first instance, concerns should be raised with the Nursery Manager – Mohammed A Uddin. However, this may not always be appropriate, in which case concern should be raised with the Proprietor – Dorothy Ede. Concerns are best raised in writing, included in this should be the background and history of the concern, giving names, dates, places where possible and the reason why you are particularly concerned.

1.412 The earlier you express your concerns the easier it is to take action. If you do not wish to put the allegations in writing, the person to whom you are making the complaint will make a written record of the interview and will ask you to sign to confirm accuracy of the notes taken. Although you will not be expected to prove the truth of your allegations, you will be required to demonstrate that there are sufficient grounds for your concern.

#### 1.413 You should not:

- Investigate the matter yourself
- · Alert those suspected of being involved
- Approach or accuse individuals

Providers must have and implement a policy, and procedures, to safeguard children.

• Tell anyone other than the designated person's i.e. Manager and Proprietor

1.414 Within a week of the receipt of your concern, you will receive a written acknowledgement of your concern, with a copy of your statement where appropriate. The Manager and Proprietor will investigate your concern and within 2 weeks you will be informed of what action is being taken and you will be kept up to date on the progress of the investigation. You will also be informed of the outcome of any investigation.

1.415 If your concerns cannot be expressed to the Manager or Proprietor then you can contact the LADO (Local Area Designated Officer) Nick Pratt, 0203 3733803/0203 3736706 - Email: lado@newham.gov.uk/Nick.Pratt@newham.gov.uk

1.416 If you are not satisfied with the outcome of the investigation, you may elevate your concerns directly to the National Society for the Prevention of Cruelty to Children (NSPCC). The NSPCC is also a prescribed person for providing protection to those making any disclosures about child welfare and protection. NSPCC can be contacted on 0808 800 500 or at help@nspcc.org.uk

1.417 Alternatively you can contact Ofsted on their whistleblowing hotline on 0300 1233155 (8am to 6pm, Monday to Friday), emailing at whistleblowing@ofsted.gov.uk.

This policy was adopted by	Zikora Day Nursery and Preschool

Providers must have and implement a policy, and procedures, to safeguard children.

# 1.5 Missing child

## **Policy statement**

Children's safety is our highest priority, both on and off the premises. Every attempt is made, through the implementation of our outings procedure and our 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 child's key person/the relevant member of staff alerts our setting manager.
- The register is checked to make sure no other child has also gone astray.
- Our manager will carry out a thorough search of the building and garden.
- Doors and gates are checked to see if there has been a breach of security whereby a child could wander out.
- If the child is not found, our manager calls the police immediately and reports the child as missing. If it is suspected that the child may have been abducted, the police are informed of this.
- The parent(s) are then called and informed.
- A recent photo and a note of what the child is wearing is given to the police.
- Our manager talks to our staff to find out when and where the child was last seen and records this.
- Our manager contacts our, directors and reports the incident. Our, directors will come to the provision immediately to carry out an investigation, with our management team where appropriate.
- Our children will be supervised and supported to minimise distress for children who understands what is going
  on.

## Child going missing on an outing

This describes what to do when our staff have taken a small group on an outing, leaving our manager and other staff back in our setting premises. If our manager has accompanied children on the outing, the procedures are adjusted accordingly. What to do when a child goes missing from a whole group outing may be a little different, as parents usually attend and are responsible for their own child.

- As soon as it is noticed that a child is missing, the staff members on the outing ask children to stand with their designated carer and carry out a headcount to ensure that no other child has gone astray.
- One staff member searches the immediate vicinity, but does not search beyond that.
- Our senior staff member on the outing contacts the police and reports that child as missing.

- Our manager is contacted immediately if not on the outing and the incident is recorded.
- Our manager /operations manager contacts the parent(s).
- Our staff take the remaining children back to the setting as soon as possible.
- According to the advice of the police, a senior member of staff, or our manager where applicable, should remain at the site where the child went missing and wait for the police to arrive.
- A recent photo and a description of what the child is wearing is given to the police.
- Our manager contacts our directors and reports the incident. Our directors will come into our premises immediately to carry out an investigation, with our management team (where appropriate)].
- Our staff keep calm and do not let the other children become anxious or worried.

## The investigation

- Ofsted are informed as soon as possible and kept up-to-date with the investigation.
- Our, directors, carries out a full investigation, taking written statements from all our staff and volunteers who were present.
- Our manager, together with the directors and management team speaks with the parent(s) and explains the process of the investigation.
- The parent(s) may also raise a complaint with us or Ofsted.
- Each member of staff present writes an incident report detailing:
  - The date and time of the incident.
  - Where the child went missing from e.g. the setting or an outing venue.
  - Which staff/children were in the premises/on the outing and the name of the staff member who was designated as responsible for the missing child.
  - What the child was wearing and his/her general appearance.
  - When the child was last seen in the premises/or on the outing, including the time it is estimated that the child went missing.
  - What has taken place in the premises or on the outing since the child went missing.
  - The report is counter-signed by the senior member of staff and the date and time added.
- A conclusion is drawn as to how the breach of security happened.
- If the incident warrants a police investigation, all our staff co-operate fully. In this case, the police will handle all aspects of the investigation, including interviewing staff and parents. Children's social care may be involved if it seems likely that there is a child protection issue to address.
- In the event of disciplinary action needing to be taken, Ofsted are advised.
- The insurance provider is informed.

## Managing people

- Missing child incidents are very worrying for all concerned. Part of managing the incident is to try to keep everyone as calm as possible.
- Our staff will feel worried about the child, especially the key person or the designated carer responsible for
  the safety of that child for the outing. They may blame themselves and their feelings of anxiety and distress
  will rise as the length of time the child is missing increases.

- They may be the understandable target of parental anger and they may be afraid. Our manager ensures that any staff under investigation are not only fairly treated, but receive support while feeling vulnerable.
- The parents will feel angry, and fraught. They may want to blame our staff and may single out one staff member over others; they may direct their anger at our manager. When dealing with a distraught and angry parent, there should always be two members of staff one of whom is our manager and the other should be our operational manager or directors No matter how understandable the parent's anger may be, aggression or threats against our staff are not tolerated, and the police should be called.
- The other children are also sensitive to what is going on around them. They too may be worried. Our remaining staff caring for them need to be focused on their needs and must not discuss the incident in front of them. They should answer children's questions honestly, but also reassure them.
- In accordance with the severity of the final outcome, our staff may need counselling and support. If a child is not found, or is injured, or worse, this will be a very difficult time. Our chair, directors will use their discretion to decide what action to take.
- Our staff must not discuss any missing child incident with the press without taking advice.

Zikora Day Nursery and Prescribor	This policy was adopted by	Zikora Day Nursery and Preschool
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The safeguarding policy and procedures must include an explanation of the action to be taken in the event of an allegation being made against a member of staff, and cover the use of mobile phones and cameras in the setting.

# 1.6 Online safety (Inc. mobile phones and cameras)

# **Policy statement**

We take steps to ensure that there are effective procedures in place to protect children, young people and vulnerable adults from the unacceptable use of Information Communication Technology (ICT) equipment or exposure to inappropriate materials in the setting.

This policy is to compliment our safeguarding children, young people and vulnerable adults policy.

#### **Procedures**

 Our designated person (Manager, Deputy Manager) responsible for co-ordinating action taken to protect children is:

Mohammed A. Uddin and Alka Patel

# Information Communication Technology (ICT) equipment

- Only ICT equipment belonging to the setting is used by staff and children.
- The designated person is responsible for ensuring all ICT equipment is safe and fit for purpose.
- All computers have virus protection installed.
- The designated person ensures that safety settings are set to ensure that inappropriate material cannot be accessed.

#### Internet access

- Children do not normally have access to the internet and never have unsupervised access.
- If staff access the internet with children for the purposes of promoting their learning, written permission is gained from parents who are shown this policy.
- The designated person has overall responsibility for ensuring that children and young people are safeguarded and risk assessments in relation to online safety are completed.
- Children are taught the following stay safe principles in an age appropriate way prior to using the internet;
  - only go on line with a grown up
  - be kind on line
  - keep information about me safely
  - only press buttons on the internet to things I understand

- tell a grown up if something makes me unhappy on the internet
- Designated persons will also seek to build children's resilience in relation to issues they may face in the
  online world, and will address issues such as staying safe, having appropriate friendships, asking for
  help if unsure, not keeping secrets as part of social and emotional development in age appropriate
  ways.
- If a second-hand computer is purchased or donated to the setting, the designated person will ensure that no inappropriate material is stored on it before children use it.
- All computers for use by children are located in an area clearly visible to staff.
- Children are not allowed to access social networking sites.
- Staff report any suspicious or offensive material, including material which may incite racism, bullying or discrimination to the Internet Watch Foundation at www.iwf.org.uk.
- Suspicions that an adult is attempting to make inappropriate contact with a child on-line is reported to the National Crime Agency's Child Exploitation and Online Protection Centre at www.ceop.police.uk.
- The designated person ensures staff have access to age-appropriate resources to enable them to assist children to use the internet safely.
- If staff become aware that a child is the victim of cyber-bullying, they discuss this with their parents and refer them to sources of help, such as the NSPCC on 0808 800 5000 or www.nspcc.org.uk, or ChildLine on 0800 1111 or www.childline.org.uk.

#### Email

- Children are not permitted to use email in the setting. Parents and staff are not normally permitted to
  use setting equipment to access personal emails.
- Staff do not access personal or work email whilst supervising children.
- Staff send personal information by encrypted email and share information securely at all times.

## Mobile phones – children

Children do not bring mobile phones or other ICT devices with them to the setting. If a child is found to
have a mobile phone or ICT device with them, this is removed and stored in locked drawer until the
parent collects them at the end of the session.

## Mobile phones – staff and visitors

- Personal mobile phones are not used by our staff on the premises during working hours. They will be stored in locked drawer.
- In an emergency, personal mobile phones may be used in an area where there are no children present, with permission from the manager. A room is designated for the staff to make a phone call when an emergency arises.
- Our staff and volunteers ensure that the setting telephone number is known to family and other people
  who may need to contact them in an emergency.

- If our members of staff or volunteers take their mobile phones on outings, for use in case of an emergency, they must not make or receive personal calls, or take photographs of children.
- A designated person will be appointed to make calls for on and behalf of the nursery.
- Parents and visitors are requested not to use their mobile phones whilst on the premises. We make an
  exception if a visitor's company or organisation operates a lone working policy that requires contact with
  their office periodically throughout the day. Visitors can use the designated room to make any
  necessary calls These rules also apply to the use of work-issued mobiles, and when visiting or
  supporting staff in other settings.

#### Cameras and videos

- Our staff and volunteers must not bring their personal cameras or video recording equipment into the setting.
- Photographs and recordings of children are only taken for valid reasons i.e. to record their learning and development, or for displays within the setting, with written permission received by parents (see the Registration form). Such use is monitored by the manager/operational manager.
- Where parents request permission to photograph, or record their own children at special events, general permission is gained from all parents for their children to be included. Parents are advised that they do not have a right to photograph anyone else's child or to upload photos of anyone else's children.
- If photographs of children are used for publicity purposes, parental consent must be given and safeguarding risks minimised, for example, ensuring children cannot be identified by name or through being photographed in a sweatshirt with the name of their setting on it.

## Social media

- Staff are advised to manage their personal security settings to ensure that their information is only available to people they choose to share information with.
- Staff should not accept service users, children and parents as friends due to it being a breach of expected professional conduct.
- In the event that staff name the organisation or workplace in any social media they do so in a way that is not detrimental to the organisation or its service users.
- Staff observe confidentiality and refrain from discussing any issues relating to work
- Staff should not share information they would not want children, parents or colleagues to view.
- Staff should report any concerns or breaches to the designated person in their setting.
- Staff avoid personal communication, including on social networking sites, with the children and parents with whom they act in a professional capacity. If a practitioner and family are friendly prior to the child coming into the setting, this information is shared with the manager prior to a child attending and a risk assessment and agreement in relation to boundaries is agreed.

## Electronic learning journals for recording children's progress

- Managers seek permission from the senior management team prior to using any online learning journal.
   A risk assessment is completed with details on how the learning journal is managed to ensure children are safeguarded.
- Staff adhere to the guidance provided with the system at all times.

## Use and/or distribution of inappropriate images

- Staff are aware that it is an offence to distribute indecent images. In the event of a concern that a
  colleague or other person is behaving inappropriately, safeguarding children, young people and
  vulnerable adults policy is followed.
- Staff are aware that grooming children and young people on line is an offence in its own right and concerns about a colleague's or others' behaviour are reported (as above).

# Further guidance

 NSPCC and CEOP Keeping Children Safe Online training: www.nspcc.org.uk/what-you-can-do/getexpert-training/keeping-children-safe-online-course/

# Other useful Pre-school Learning Alliance publications

Safeguarding Children (2013)

Employee Handbook (2012)

This policy was adopted by	Zikora Day Nursery and Preschool
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Providers must have and implement a policy, and procedures, to safeguard children.

# 1.7 Covid-19 Policy & Procedure

## **Policy Statement**

- 1.71 Zikora Day Nursery intend to use this policy to provide precautionary measures to minimize transmission risks of disease in the setting during an epidemic or pandemic.
- 1.72 Legislation and leading authorities which have guided and influenced this policy are: Coronavirus Act 2020, Health and Safety at Work Act (1974), Health and Safety Executive (HSE), Government Briefings, Public Health England (PHE) and World Health Organization (WHO). Advice from but not limited to, The Secretary of State, The Chief Medical Officer, Local Authority (LA) and Department for Education (DfE). The policy also has regard to Ofsted and Early Years Foundation Stage (EYFS) guidance where appropriate.

## **Aim of Policy**

- 1.73 This Policy defines and assists the operating arrangements in place within the setting that assures compliance to the Government and leading bodies requirements with relation to the outbreak of a pandemic such as Covid19. This policy will be reviewed regularly in line with the government guidelines.
- 1.74 As early years providers we ensure to offer a continuum of extremely high standards of practice of childcare and education. The fundamental principles to be outlined in this policy are set out to ensure physical distancing is enabled and implement good hygiene practices as well as avoiding coming into contact with infected children and adults or anyone displaying symptoms. It states the protective measures put in place for children, parents, and staff as best as possible to ensure the risk of transmission is reduced. We will continue to follow our other policies if they do not conflict with this policy.
- 1.75 The main areas we will be considering are:
  - Minimising contact with individuals who are unwell
  - Maintaining personal and respiratory hygiene (handwashing, catch it, kill it, bin it)
  - Ensuring cleanliness of the environment (especially frequently touched surfaces and resources)
  - Minimising general contact and mixing (creating bubbles)
  - The use of Protective and Personal Equipment (PPE)
  - Testing

Providers must have and implement a policy, and procedures, to safeguard children.

#### **Attendance**

- 1.76 Only children who are symptom free or have completed the required isolation period should attend the setting.
- 1.77 On arrival, if staff recognise any symptoms, employees will check the child's temperature and will determine whether the child needs to go home to recover.
- 1.78 It is the parent / careers responsibility to be open and honest with the setting and keep your child at home if they or anyone in the same household is showing any of the following symptoms: HIGH TEMPRETURE, CONTINUOUS COUGH, LOSS OF TASTE OR SMELL or has had a positive test result or been contacted by track at trace.

## Physical Distancing/grouping

- 1.79 Children in small groups should have the same staff team caring for them wherever possible to limit the amount of people coming into contact with each other.
- 1.710 Care routines including provision of meals, nappy changing, and toileting should be within the space allocated to each room and thoroughly deep cleaned after every use.
- 1.711 The use of communal internal spaces should be restricted as much as possible and outdoor spaces should be utilised as much as possible during the day.

## Wellbeing and education

- 1.712 Children should be supported in age appropriate ways to understand the steps they can take to keep themselves safe including regular hand washing on entry and continuously throughout the day, coughing/ sneezing into an elbow, using a tissue and adopting a catch it, kill it, bin it regime.
- 1.713 Children should be supported to understand the changes and challenges they may be encountering because of Covid-19 and staff need to ensure they are aware of children's attachments and their need for emotional support at this time.
- 1.714EYFS framework will continue to be delivered through play and adult led activities.
- 1.715 Children will have access of fresh drinks of water throughout the day if they are thirsty, staff will monitor this to ensure no cross contamination of beakers.

Providers must have and implement a policy, and procedures, to safeguard children.

#### **Workforce Attendance**

- 1.716 Zikora Day Nursery will follow current government guidelines to manage staff who have tested positive or are showing symptoms. Staff are provided with a rapid test to determine if they have contracted Covid.
- 1.717 Staff hours, days they work and length of day may change in order to meet childcare demands and considerations within this policy.

## Physical distancing/ grouping /safety

- 1.718 Staff to be informed of measures in place and any new or updated policies and procedures.
- 1.719 Staff continue to wear PPE in the setting.
- 1.720 After dealing with an ill child who displayed symptoms the staff member should continue to wear PPE and clean the affected area with disinfectant.
- 1.721 All PPE should be removed and disposed of following current government guidelines, the staff member should wash their hands for at least 20 seconds.
- 1.722 The staff member who supported the unwell child does not need to go home unless they are developing symptoms themselves.
- 1.723 Staff will be responsible to ensure appropriate cleaning takes place and enough ventilation is in the room such as opening windows. If doors are open, staff will ensure the safety of the children is maintained through continuous risk assessments.
- 1.724 Staff to wear fresh, clean clothes for each day.

## **Training**

- 1.725 Where possible, meetings and training sessions should be conducted through virtual conferencing.
- 1.726 All staff members must receive appropriate instruction and training in infection control and the standard operating procedure and risk assessments within which they will be operating.

Providers must have and implement a policy, and procedures, to safeguard children.

1.727 Online training may be available to allow their training levels to be maintained if appropriate.

## **Parents Physical distancing**

- 1.728 Only parents who are symptom free and or have completed the required isolation periods will be able to drop off or collect their child.
- 1.729 When parents are waiting to drop off or collect their child, physical distancing should be maintained in a safe area.

#### **Communications**

- 1.730 Parents should receive clear communication regarding the role they play in the safe operating procedure and all measures being taken to ensure the safety of their children and themselves.
- 1.731 Parents should inform the setting of their circumstances and if they plan to keep their child away.
- 1.732 Any parent meetings are being conducted face to face with requirement to maintain PPE and social distancing.

## **Visitors**

- 1.733 Attendance to the setting should be restricted to only children and staff as far as practically possible and visitors are permitted to the setting by appointment only.
- 1.734 A health screening questionnaire on Covid will be emailed to visitors or potential parents prior to the appointment which must be completed in advance.
- 1.735 All visitors or potential parents will be asked to wear appropriate PPE including shoe covers, use of hand sanitizer and maintaining social distancing.

## **Travel**

1.736 Outings from the setting will still continue to local parks and outside walks but will be restricted in more confined areas to ensure mixing with members of the public does not happen.

Providers must have and implement a policy, and procedures, to safeguard children.

1.737 Children and staff will have both indoor and outdoor shoes that will be used accordingly. Parents are also asked to wear shoe covers, use hand sanitiser and maintain wearing masks to minimise the spread of Covid.

## Hygiene and Health & Safety

- 1.738 All children and staff must wash their hands upon arrival at the nursery for at least 20 seconds.
- 1.739 Hand washing stations are located outside the front and side entrance. In Ongar they are located inside the front door.
- 1.740 Children and staff members should be encouraged to wash their hands frequently, this includes before and after eating food, after visiting the toilet or playing outdoors, after sneezing, blowing their nose or coughing into their hand and dealing with unwell individuals.
- 1.741 Bodily fluid spills should follow the correct procedures as normal.

## Cleaning

- 1.742 An enhanced cleaning schedule must be implemented that includes furniture, surfaces and children's toys and equipment and all staff are responsible in their area of work.
- 1.743 Communal area, touch points and hand washing facilities must be cleaned and sanitised regularly and cleaned thoroughly every night.

## Waste disposal

- 1.744 All waste must be disposed of in a hygienic and safe manner following government guidelines.
- 1.745 Tissues must be immediately disposed of and placed in a bin with a bag.
- 1.746 Bodily fluids must be double bagged and disposed of in a bin with a bag, lid, and foot pedal.

## Laundry

1.747 Items such as towels, flannels and bedding must not be shared by children. These will be washed after every use.

Providers must have and implement a policy, and procedures, to safeguard children.

#### Risk assessment

- 1.748 The setting and all activity should be risk assessed before opening or going ahead to address the risks from the virus and due consideration given to any adaptations to usual practice.
- 1.749 It is expected that would include, but not be limited, to the suspension of learning experiences involving materials which are not easily washable such as malleable materials (dough, clay) and the suspension of the sharing of food and utensils.
- 1.750 Cut down on the available resources out in the setting.

## PPE

- 1.751 Government guidance is that PPE is not required for general use in early years settings to protect against COVID- 19 transmission.
- 1.752 PPE should continue to be worn and disposed of as normal for nappy changing, one to one care and the administration of first aid.
- 1.753 If a child shows symptoms, staff should wear a face mask, disposable gloves, and apron if a 2-meter distance cannot always be maintained. PPE should be disposed of following government guidelines

## **Premises Building**

1.754 We will wear possible keep windows open where possible to ensure good levels of ventilation.

#### Resources

- 1.755 Children should not be permitted to bring items from home into the setting unless essential for their wellbeing. Anything that is brought in from home should remain in the child's bag on their peg.
- 1.756 All resources required for play and learning experiences of children should be regularly washed and/or sterilized. Any resources which are difficult to clean should be removed.

Providers must have and implement a policy, and procedures, to safeguard children.

## **Supplies Procurement & monitoring**

- 1.757 The setting should ensure an adequate supply of essential supplies and contingency plans such as additional suppliers are in place to minimise the impact of any shortages of supplies.
- 1.758 In case the supply of food is interrupted, procedures must be implemented to ensure the appropriate food alternatives are sourced and normal food safety and hygiene processes are followed.

## Responding to a suspected case

- 1.759 In the event of a child developing suspected coronavirus symptoms whilst attending the setting, they should be collected as soon as possible and isolate at home in line with the current NHS guidance.
- 1.760 Whilst waiting for the child to be collected they should be isolated with a 'Key Person' from others in the isolation room.
- 1.761 The area should be thoroughly cleaned, immediately.
- 1.762 The person responsible for cleaning ideally should be the person dealing with the unwell child and should continue to wear their PPE. This should then be disposed of according to current government guidelines.
- 1.763 In the event of a staff member developing suspected coronavirus symptoms whilst working at the nursery, current government guidance will be followed to take appropriate action. They should also follow current testing advice for themselves and their household.

## In the event of a positive case

- 1.764 Parents/ carers are responsible to notify a member of the management team at the earliest point of receiving a positive test result.
- 1.765 If a staff member has tested positive, parents and carers will be notified.
- 1.766 The manager will notify Ofsted, environmental health, and the local authority as well as gain advice from the London coronavirus cell and DFE (department for education).
- 1.766The child will have to isolate until fully recovered.

Providers must have and implement a policy, and procedures, to safeguard children.

This policy was adopted by	Zikora Day Nursery and Preschool

## Safeguarding and Welfare Requirement: Suitable People

Providers must ensure that adults looking after children are suitable to fulfil the requirements of their roles.

## 2.2 Student Placements

# **Policy statement**

We recognise that qualifications and training make an important contribution to the quality of the care and education we provide. As part of our commitment to quality, we offer placements to students undertaking early years' qualifications and training. We also offer placements for school pupils on work experience.

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

We take out employers' liability insurance and public liability insurance, which covers both students and voluntary helpers.

#### **Procedures**

- We expect all students to visit the nursery for an interview, followed by their student induction and nursery tour. At this time, students will have the opportunity to read and discuss relevant policy and procedures and are asked to sign as confirmation that they have understood and will adhere to these whilst employed at our setting. Students will also be asked to sign their contract.
- We require students on qualification courses to meet the Suitable Person requirements of the Early Years Foundation Stage and have a satisfactory enhanced DBS check with barred list check(s).
- We require students in our setting to have a sufficient understanding and use of English to contribute to the well-being of children in our care.
- We require schools, colleges or universities placing students under the age of 17 years with us to vouch for their good character.
- We supervise students under the age of 17 years at all times and do not allow them to have unsupervised access to children.
- Students undertaking qualification courses who are placed in our setting on a short-term basis are not counted in our staffing ratios.
- Students and apprentices, over the age of 17, who are undertaking a level 3 qualification may be considered to be counted in the ratios if our manager deems them to be suitably qualified and experienced.
- 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, 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.
- We communicate a positive message to students about the value of qualifications and training.
- We make the needs of the children paramount by not admitting students in numbers that hinder the essential work of the setting.
- We ensure that trainees and students placed with us are engaged in bona fide early years training, which provides the necessary background understanding of children's development and activities.

This policy was adopted by	Zikora Day Nursery and Preschool

## Safeguarding and Welfare Requirement: Suitable People

Providers must ensure that people looking after children are suitable to fulfil the requirements of their roles.

# 2.3 Allegation against a Staff Member

Should any staff member have a concern about the behaviour of a member of staff, this should be voiced immediately.

You should inform your manager or designated person - Mohammed A Uddin, Nursery Manager and Alka Patel, Deputy Manager of any incidents where you feel the code of conduct has been breached.

In the absence of your manager or the designated person, in the instance that the concern is against your manager/designated person you are advised to contact the LADO (Local Authority Designated Officer) Nick Pratt, 0203 3733803/ 0203 3736706 - Email: lado@newham.gov.uk/Nick.Pratt@newham.gov.uk without delay.

Ofsted must be informed as soon as possible but within at least 14 days.

YOU MUST NOT speak to the member of staff or adult concerned OR take any action about the allegation until you have spoken with the LADO, as this could jeopardise any possible subsequent investigation.

## Allegation procedure

Handling allegations, particularly serious ones, is a complex and delicate process. All allegations need to be taken seriously. Good record keeping is essential to the success of child protection practises.

- 1. **Allegation is made:** All allegations against staff or any observations of inappropriate behaviour by a member of staff should be brought to the attention of a senior member of management in the strictest confidence.
- 2. **Report allegation:** The senior member of staff will notify LADO immediately. The manager must also report this allegation to Ofsted.
- 3. **Initiate allegation procedures:** The LADO will decide whether the incident fits the criteria of an "Allegations against a member of staff" in other words: Did the alleged incident potentially cause harm to the child? Does the alleged incident constitute a

# Safeguarding and Welfare Requirement: Suitable People

Providers must ensure that people looking after children are suitable to fulfil the requirements of their roles.

criminal offence? Does the alleged incident suggest that this person is potentially unsuitable to work with children?

- 4. Workplace arrangements: The LADO will advise whether the member of staff should remain in the workplace or whether they should go on "gardening leave" or be suspended until the investigation is resolved. If the member of staff remains in the workplace, safeguards will be put into place to protect the member of staff and the child/children involved. The member of staff will be advised to contact their union representative (if applicable) and the senior member of staff will keep both the member of staff and the family up to date with regard to timescales of meetings and the procedures being put in place.
- meeting: The 5. Strategy LADO will schedule strategy meeting with the representative from the setting and from the police. A new police check will be prior to the strategy meeting to determine whether conducted any previous incidents involving that member of staff are known and have not been declared.
- 6. **Decisions and next steps:** Professionals at the strategy meeting will decide what next steps to take- these may include criminal proceedings, child protection procedures, internal investigation, disciplinary procedures, training needs, or no further taken.

This policy was adopted by	Zikora Day Nursery and Preschool

# Safeguarding and Welfare Requirement: Staff Qualifications, Training, Support and Skills

Providers must ensure that all staff receive induction training to help them understand their roles and responsibilities.

# 3.1 Induction of employees and volunteers

#### **Policy Statement**

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

#### **Procedures**

- We have a written induction plan for all new staff, which includes the following:
  - Introductions to all employees and volunteers [including management committee members].
  - Familiarisation with the building, health and safety, and fire and evacuation procedures.
  - Ensuring our policies and procedures are read and adhered to.
  - Introduction to the parents, especially parents of allocated key children where appropriate.
  - Familiarisation with confidential information in relation to any key children where applicable.
  - Details of the tasks and daily routines to be completed.
- The induction period lasts at least two weeks. For group provision: The manager inducts new employees and volunteers. A member of the senior management team inducts new managers. During the induction period, the individual must demonstrate understanding of and compliance with policies, procedures, tasks and routines.
- Successful completion of the induction forms part of the probationary period.
- Following induction, we continue to support our staff to deliver high quality performance through regular supervision and appraisal of their work.

- Employee Handbook (2012)
- Recruiting and Managing Employees (2011)

Preschool

# Safeguarding and Welfare Requirement: Staff Qualifications, Training, Support and Skills

At least one person who has a current paediatric first aid certificate must be on the premises and available at all times when children are present, and must accompany children on outings.

#### Health

Providers must ensure there is a first aid box accessible at all times with appropriate content for use with children. Providers must keep a written record of accidents or injuries and first aid treatment.

#### 3.2 First aid

#### **Policy Statement**

We are able to take action to apply first aid treatment in the event of an accident involving a child or adult. At least one adult with a current first aid certificate is on the premises, or on an outing, at any one time. Newly qualified staff who achieved an early year's qualification at level 2 or 3 on or after 30 June 2016 also have a paediatric first aid certificate in order to be counted in the adult: child ratios. The first aid qualification includes first aid training for infants and young children. We have evidence of due diligence when choosing first aid training and ensure that it is relevant to adults caring for young children.

#### **Procedures**

The first aid kit

Our first aid kit is accessible at all times and contains the following items [please adjust the list to include anything else which is deemed necessary:

- Triangular bandages (ideally at least one should be sterile) x 4.
- Sterile dressings:
  - Small x 3.
  - Medium x 3.
  - Large x 3.
- Composite pack containing 20 assorted (individually-wrapped) plasters x 1.
- Sterile eye pads (with bandage or attachment) e.g. No 16 dressing x 2.
- Container of 6 safety pins x 1.
- Guidance card as recommended by HSE x 1.

In addition, the following equipment is kept near to the first aid box:

- 2 pairs of disposable plastic (PVC or vinyl) gloves.
- 1 plastic disposable apron.
- A children's forehead 'strip' thermometer.
- A supply of ice is kept in the freezer.

- Information about who has completed first aid training and the location of the first aid box is provided to all our staff and volunteers.
- The first aid box is easily accessible to adults and is kept out of the reach of children.
- There is a named person in the setting who is responsible for checking and replenishing the first aid box contents.
- Medication is only administered in line with our Administering Medicines policy.
- In the case of minor injury or accidents, first aid treatment is given by a qualified first aider.
- In the event of minor injuries or accidents, we normally inform parents when they collect their child, unless the child is unduly upset or we have concerns about the injury. In which case we will contact the child's parents for clarification of what they would like to do, i.e. whether they wish to collect the child and/or take them to their own GP.
- An ambulance is called for children requiring emergency treatment. We contact parents immediately and inform them of what has happened and where their child has been taken.
- Parents sign a consent form at registration allowing a member of staff/me to take their child to the nearest
  Accident and Emergency unit to be examined, treated or admitted as necessary on the understanding that
  they have been informed and are on their way to the hospital.
- Accidents and injuries are recorded in our accident record book and, where applicable, notified to the
  Health and Safety Executive, Ofsted and/or local child protection agencies in line with our Recording and
  Reporting of Accident and Incidents Policy.

### Legal framework

Health and Safety (First Aid) Regulations (1981)

#### Further guidance

- First Aid at Work: Your questions answered (HSE Revised 2009)
- Basic Advice on First Aid at Work (HSE Revised 2008)
- Guidance on First Aid for Schools (DfEE)

- First Aid Management Record (2016)
- Medication Administration Record (2015)

This policy was adopted by	Zikora Day Nursery and Preschool

# Safeguarding and Welfare Requirement: Key Person

Each child must be assigned a key person. Their role is to help ensure that every child's care is tailored to meet their individual needs, to help the child become familiar with the setting, offer a settled relationship for the child and build a relationship with their parents

# 4.1 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.

The key person role is set out in the Safeguarding and Welfare Requirements of the Early Years Foundation Stage. Each setting must assign a key person for each child.

The procedures set out a model for developing a key person approach that promotes effective and positive relationships for children who are in settings.

#### **Procedures**

- We allocate a key person before the child starts.
- The key person is responsible for the induction of the family and for settling the child into our setting.
   The key person offers unconditional regard for the child and is non-judgemental.
- The key person works with the parents to plan and deliver a personalised plan for the child's well-being, care and learning.
- Completing relevant forms with parents, including consent forms.
- Explaining our policies and procedures to parents with particular focus on policies such as safeguarding and our responsibilities under the Prevent Duty.
- 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.
- The 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 provide a back-up key person so the child and the parents have a key contact in the absence of the child's key person.
- We promote the role of the key person as the child's primary carer in our setting, and as the basis for establishing relationships with other staff and children.

# Settling-in

- Before a child starts to attend the setting, we use a variety of ways to provide his/her parents with information. These include written information (including our prospectus and policies), displays about activities available within the setting, information days and evenings 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 may offer a home visit by the person who will be the child's key person, to ensure all relevant information about the child can be made known.
- We use pre-start visits and the first session at which a child attends to explain and complete, with his/her parents, the child's registration records.
- When a child starts to attend, we explain the process of settling-in with his/her parents and jointly decide on the best way to help the child to settle into the setting.
- We have an expectation that the parent, carer or close relative, will stay for most of the session during
  the first week, gradually taking time away from their child, increasing this as and when the child is able to
  cope.
- Younger children will take longer to settle in, as will children who have not previously spent time away
  from home. Children who have had a period of absence may also need their parent to be on hand to resettle them.
- 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. We expect that the parent will honour the commitment to stay for at least the first week, or possibly longer, until their child can stay happily without them.
- 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 reserve the right not to accept a child into the setting without a parent or carer if the child finds it distressing to be left. This is especially the case with very young children.

• Within the first four to six weeks of starting, we discuss and work with the child's parents to begin to create their child's record of achievement.

#### The progress check at age two

- The key person carries out the progress check at age two in accordance with any local procedures that are
  in place and referring to the guidance A Know How Guide: The EYFS progress check at age two.
- The progress check aims to review the child's development and ensures that parents have a clear picture of their child's development.
- Within the progress check, the key person will note areas where the child is progressing well and identify
  areas where progress is less than expected.
- The progress check will describe the actions that will be taken by the setting to address any developmental concerns (including working with other professionals where appropriate) as agreed with the parent(s).
- The key person will plan activities to meet the child's needs within the setting and will support parents to
  understand the child's needs in order to enhance their development at home. Our setting encourages our
  children to play outside and there will be an outdoor play procedure displayed for all staff and parents to
  see.

- Statutory Framework for the Early Years Foundation Stage: With non-statutory supporting documentation (2014)
- Being a Key Person in an Early Years Setting (2015)
- Creating a Learning Environment in the Home (2015)

This policy was adopted by	Zikora Day Nursery and Preschool

Safeguarding and Welfare Requirement: Staff:Child ratios

Staffing arrangements must meet the needs of all children and ensure their safety

# 5.1 Staffing

# **Policy Statement**

We provide a staffing ratio in line with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage to ensure that children have sufficient individual attention and to guarantee care and education of a high quality. Our staff are appropriately qualified and we carry out checks for enhanced criminal records and barred list checks through the Disclosure and Barring Service in accordance with statutory requirements.

#### **Procedures**

For childcare on non-domestic premises (e.g. nurseries and pre-schools) or on domestic premises.

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

- Children under two years of age: 1 adult: 3 children:
  - at least one member of staff holds a full and relevant level 3 qualification and is suitably experienced in working with children under two;
  - at least half of all other staff hold a full and relevant level 2 qualification;
  - at least half of all staff have received training that specifically addresses the care of babies; and
  - where there is an under two-year-olds' room, the member of staff in charge of that room has suitable experience of working with under twos.
- Children aged two years: 1 adult: 4 children:
  - at least one member of staff holds a full and relevant level 3 qualification; and
  - at least half of all other staff hold a full and relevant level 2 qualification.
- Children aged three years and over: 1 adult: 8 children:
  - at least one member of staff holds a full and relevant level 3 qualification; and
  - at least half of all other staff hold a full and relevant level 2 qualification.
- We follow the Early Years Foundation Stage Safeguarding and Welfare Requirements where a Qualified Teacher, Early Years Professional or other suitable level 6 qualified person is working directly with children aged three and over between the hours of 8am and 4pm as follows:
  - there is at least one member of staff for every 13 children; and
  - at least one other member of staff holds a full and relevant level 3 qualification.
- The number of children for each key person takes into account the individual needs of the children and the capacity of the individual key person to manage their cohort.

- We only include those aged 17 years or older within our ratios. Where they are competent and responsible, we may include students on long-term placements and regular volunteers.
- A minimum of two staff/adults are on duty at any one time; one of whom is either our manager, operational manager or deputy.
- Our manager deploys our staff, students and volunteers to give adequate supervision of indoor and outdoor areas, ensuring that children are usually within sight and hearing of staff, and always within sight or hearing of staff at all times.
- All staff are deployed according to the needs of the setting and the children attending.
- Our staff, students and volunteers inform their colleagues if they have to leave their area and tell
  colleagues where they are going.
- Our staff, students and volunteers focus their attention on children at all times and do not spend time in social conversation with colleagues while they are working with children.
- We assign each child a key person to help the child become familiar with the setting from the outset and to
  ensure that each child has a named member of staff with whom to form a relationship. The key person
  plans with parents for the child's well-being and development in the setting. The key person meets
  regularly with the family for discussion and consultation on their child's progress and offers support in
  guiding their development at home.
- We hold regular staff meetings to undertake curriculum planning and to discuss children's progress, their achievements and any difficulties that may arise from time to time.

- Employee Handbook (2012)
- Recruiting Early Years Staff (2016)
- People Management in the Early Years (2016)

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# Safeguarding and Welfare Requirement: Health

Providers must have and implement a policy, and procedures, for administering medicines. It must include systems for obtaining information about a child's needs for medicines, and for keeping this information up-to-date.

# 6.1 Administering medicines

#### **Policy Statement**

While it is not our policy to care for sick children, who should be at home until they are well enough to return to the setting, we will agree to administer medication as part of maintaining their health and well-being or when they are recovering from an illness. We ensure that where medicines are necessary to maintain health of the child, they are given correctly and in accordance with legal requirements.

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, especially a baby/child under two, it is advised that the parent keeps the child at home for the first 48 hours to ensure there are no adverse effects, as well as to give time for the medication to take effect.

Our staff are responsible for the correct administration of medication to children for whom they are the key person. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures The Nursery Manager and deputy are responsible for the overseeing of administering medication. We notify our insurance provider of all required conditions, as laid out in our insurance policy.

#### **Procedures**

- Children taking prescribed medication must be well enough to attend the setting.
- We only usually administer medication when it has been prescribed for a child by a doctor (or other medically qualified person). It must be in-date and prescribed for the current condition.
- Non-prescription medication, such as pain or fever relief (e.g. Calpol) and teething gel, may be administered, but only with prior written consent of the parent and only when there is a health reason to do so, such as a high temperature. Children under the age of 16 years are never given medicines containing aspirin unless prescribed specifically for that child by a doctor. The administering of un-prescribed medication is recorded in the same way as any other medication. NB We may administer children's paracetamol (un-prescribed) for children under the age of one year with the verbal consent of the parents in the case of a high temperature. This is to prevent febrile convulsion and where a parent or named person is on their way to collect the child.

- Children's prescribed medicines are stored in their original containers, are clearly labelled and are
  inaccessible to the children. On receiving the medication, the member of staff checks that it is in date and
  prescribed specifically for the current condition.
- Parents must give prior written permission for the administration of medication. The staff member receiving the
  medication will ask the parent to sign a consent form stating the following information. No medication may be
  given without these details being provided:
  - the full name of child and date of birth
  - the name of medication and strength
  - who prescribed it
  - the dosage and times to be given in the setting
  - the method of administration
  - how the medication should be stored and its expiry date
  - any possible side effects that may be expected
  - the signature of the parent, their printed name and the date
- The administration of medicine is recorded accurately in our medication record book each time it is given and is signed by the person administering the medication and a witness. Parents are shown the record at the end of the day and asked to sign the record book to acknowledge the administration of the medicine. The medication record book records the:
  - name of the child
  - name and strength of the medication
  - name of the doctor that prescribed it
  - date and time of the dose
  - dose given and method
  - signature of the person administering the medication and a witness who verifies that the medication has been given correctly
  - parent's signature (at the end of the day).
- We use the Pre-school Learning Alliance Medication Administration Record book for recording the administration of medicine and comply with the detailed procedures set out in that publication.
- If the administration of prescribed medication requires medical knowledge, we obtain individual training [for the relevant member of staff] by a health professional.
- If rectal diazepam is given, another member of staff must be present and co-signs the record book.
- No child may self-administer. Where children are capable of understanding when they need medication, for
  example with asthma, they should be encouraged to tell their key person what they need. However, this does
  not replace staff vigilance in knowing and responding when a child requires medication.
- We monitor the medication record book to look at the frequency of medication given in the setting. For
  example, a high incidence of antibiotics being prescribed for a number of children at similar times may indicate
  a need for better infection control.

#### Storage of medicines

- All medication is stored safely in a locked cupboard or refrigerated as required. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.
- The child's key person is responsible for ensuring medicine is handed back at the end of the day to the parent.
- For some conditions, medication may be kept in the setting to be administered on a regular or as-and-whenrequired basis. Key persons check that any medication held in the setting, is in date and return any out-ofdate medication back to the parent.

All medicines are stored safely in the kitchen area, in the fridge, staff are aware of this -Management administer this medication

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

- We carry out a risk assessment for each child with a long term medical condition that requires on-going medication. This is the responsibility of our manager /operational manager alongside the key person. Other medical or social care personnel may need to be involved in the risk assessment.
- Parents will also contribute to a risk assessment. They should be shown around the setting, understand the
  routines and activities and point out anything which they think may be a risk factor for their child.
- For some medical conditions, key staff/ will need to have training in a basic understanding of the condition, as well as how the medication is to be administered correctly. The training needs for staff/My training needs form part of the risk assessment.
- The risk assessment includes vigorous activities and any other activity that may give cause for concern regarding an individual child's health needs.
- The risk assessment includes arrangements for taking medicines on outings and advice is sought from the child's GP if necessary where there are concerns.
- An individual health plan for the child is drawn up with the parent; outlining the key person's/my role and what information must be shared with other adults who care for the child.
- The individual health plan should include the measures to be taken in an emergency.
- We review the individual health plan 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 individual health plan and each contributor, including the parent, signs it.

# Managing medicines on trips and outings

- If children are going on outings, the key person for the child will accompany the children with a risk assessment, or another member of staff who is fully informed about the child's needs and/or medication.
- Medication for a child is taken in a sealed plastic box clearly labelled with the child's name, the original pharmacist's label and the name of the medication. Inside the box is a copy of the consent form and a card to record when it has been given, including all the details that need to be recorded in the medication record as stated above. For medication dispensed by a hospital pharmacy, where the child's details are not on the

dispensing label, we will record the circumstances of the event and hospital instructions as relayed by the parents.

- On returning to the setting the card is stapled to the medicine record book and the parent signs it.
- 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 is a copy of the consent form signed by the parent.
- This procedure should be read alongside the outings procedure.

# Legal framework

The Human Medicines Regulations (2012)

- Medication Administration Record (2015)
- Daily Register and Outings Record (2015)

This policy was adopted by	Zikora Day Nursery and Preschool
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#### Safeguarding and Welfare Requirement: Health

The provider must promote the good health of children attending the setting. They must have a procedure, discussed with parents and/or carers, for responding to children who are ill or infectious, take necessary steps to prevent the spread of infection, and take appropriate action if children are ill.

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

### **Policy Statement**

We aim to 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 trigger.

This policy is to be used in conjunction with the Covid-19 Policy.

#### Procedures for children who are sick or infectious

- If children appear unwell during the day for example, if they have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach our manager will call the parents and ask them to collect the child, or to send a known carer to collect the child on their behalf.
- If a child has a temperature, they are kept cool, by removing top clothing and sponging their heads with cool water, but kept away from draughts.
- If we suspect covid-19, we will take appropriate action in line with the Covid-19 policy & procedure.
- The child's temperature is taken using a forehead thermometer strip, kept in the first aid box.
- If the child's temperature does not go down and is worryingly high, then we may give them Calpol or
  another similar analgesic, after first obtaining verbal consent from the parent where possible. This is to
  reduce the risk of febrile convulsions, particularly for babies. Parents sign the medication record when they
  collect their child.
- In extreme cases of emergency, an ambulance is called and the parent informed.
- Parents are asked to take their child to the doctor before returning them to the setting; we can refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease.
- Where children have been prescribed antibiotics for an infectious illness or complaint, we ask parents to keep them at home for 48 hours before returning to the setting.
- After diarrhoea, we ask parents keep children home for 48 hours following the last episode.
- Some activities, such as sand and water play, and self-serve snacks where there is a risk of crosscontamination may be suspended for the duration of any outbreak.
- We have a list of excludable diseases and current exclusion times. The full list is obtainable from www.hpa.org.uk/webc/HPAwebFile/HPAweb\_C/1194947358374 and includes common childhood illnesses such as measles.

#### Reporting of 'notifiable diseases'

- If a child or adult is diagnosed as suffering from a notifiable disease under the Health Protection (Notification) Regulations 2010, the GP will report this to Public Health England.
- When we become aware, or are formally informed of the notifiable disease, our manager informs Ofsted and contacts Public Health England, and act[s] on any advice given.

#### 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. We

- Wear single-use vinyl gloves and aprons when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Use protective rubber gloves for cleaning/sluicing clothing after changing.
- Rinse soiled clothing and either bag it for parents to collect or launder it in the setting.
- Clear spills of blood, urine, faeces or vomit using mild disinfectant solution and mops; any cloths used are disposed of with the clinical waste.
- Clean any tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit using a disinfectant.
- Ensure that children do not share tooth brushes, which are also soaked weekly in sterilising solution.

#### Nits and head lice

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

#### Procedures for children with allergies

- When children start at the setting we ask their parents if their child suffers from any known allergies. This is recorded on the Registration Form.
- If a child has an allergy, we complete a risk assessment form 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 measures.
- This risk assessment form is kept in the child's personal file and a copy is displayed where our staff]can see it.
- Generally, 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.

Insurance requirements for children with allergies and disabilities

- If necessary, our insurance will include children with any disability or allergy, but certain procedures must be strictly adhered to as set out below. For children suffering life threatening conditions, or requiring invasive treatments; written confirmation from our insurance provider must be obtained to extend the insurance.
- At all times we ensure that the administration of medication is compliant with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage.

#### · Oral medication:

- Asthma inhalers are now regarded as 'oral medication' by insurers and so documents do not need to be forwarded to our insurance provider. Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them.
- We must be provided with clear written instructions on how to administer such medication.
- We adhere to all risk assessment procedures for the correct storage and administration of the medication.
- We must have the parents or guardians prior written consent. This consent must be kept on file. It is not necessary to forward copy documents to [our/my] insurance provider.
- Life-saving medication and invasive treatments:

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

- We must have:
  - a letter from the child's GP/consultant stating the child's condition and what medication if any is to be administered;
  - written consent from the parent or guardian allowing our staff to administer medication; and
  - proof of training in the administration of such medication by the child's GP, a district nurse, children's nurse specialist or a community paediatric nurse.
- Copies of all three documents relating to these children must first be sent to [the Pre-school Learning
  Alliance Insurance Department for appraisal (if you have another provider, please check their
  procedures with them)]. Written confirmation that the insurance has been extended will be issued by
  return.
- Key person for special needs 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, which may include receiving appropriate instructions from parents or guardians.
  - Copies of all letters relating to these children must first be sent to [the Pre-school Learning Alliance Insurance Department for appraisal (if you have another provider, please check their procedures with them)]. Written confirmation that the insurance has been extended will be issued by return.
- If we are unsure about any aspect, we contact [the Pre-school Learning Alliance Insurance Department on 020 7697 2585 or email <a href="mailto:membership@pre-school.org.uk/insert">membership@pre-school.org.uk/insert</a> details of your insurance provider].

- Good Practice in Early Years Infection Control (2009)
- Medication Administration Record (2013)

This policy was adopted by Zikora Day Nursery and Preschool	This policy was adopted by	Zikora Day Nursery and Preschool
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#### Safeguarding and Welfare Requirement: Health

Providers must keep a written record of accidents or injuries and first aid treatment.

# 6.3 Recording and reporting of accidents and incidents

### **Policy Statement**

We follow the guidelines of the Reporting of 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 our staff and volunteers, who all know how to complete it; and
- is reviewed at least half termly to identify any potential or actual hazards.

#### Reporting accidents and incidents

- Ofsted is notified as soon as possible, but at least within 14 days, of any instances which involve:
  - food poisoning affecting two or more children looked after on our premises
  - a serious accident or injury to, or serious illness of, a child in our care and the action we take in response
  - the death of a child in our care
- Local child protection agencies are informed of any serious accident or injury to a child, or the death of any child, while in our care and we act on any advice given by those agencies.
- Any food poisoning affecting two or more children or adults on our premises is reported to the local Environmental Health Department.
- We meet our legal requirements in respect of the safety of our employees and the public by complying with RIDDOR. We report to the Health and Safety Executive (HSE):
  - Any work-related accident leading to an injury to a member of the public (child or adult), for which they are taken directly to hospital for treatment.
  - Any work-related accident leading to a specified injury to one of our employees
  - Specified injuries include injuries such as fractured bones, the loss of consciousness due to a head injury, serious burns or amputations.
  - Any work-related accident leading to an injury to one of our employees which results in them being unable to work for seven consecutive days.
  - All work-related injuries that lead to one of our employees being incapacitated for three or more days are recorded in our accident book.

- When one of our employees or one of my employees suffers from a reportable occupational disease or illness as specified by the HSE.
- Any death, of a child or adult, that occurs in connection with a work-related accident.
- 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.
- Information for reporting incidents to the Health and Safety Executive is provided in the Pre-school Learning Alliance's Accident Record publication. Any dangerous occurrence is recorded in our incident book (see below).

#### Incident book

- We have ready access to telephone numbers for emergency services, including the local police. Where we are responsible for the premises we have contact numbers for the gas and electricity emergency services, and a carpenter and plumber. Where we rent premises, we ensure we have access to the person responsible and that there is a shared procedure for dealing with emergencies.
- We ensure that our staff and volunteers carry out all health and safety procedures to minimise risk and that they know what to do in an emergency.
- On discovery of an incident, we report it to the appropriate emergency services fire, police, ambulance –
  if those services are needed.
- If an incident occurs before any children arrive, our manager, operational manager risk assesses this
  situation and decides if the premises are safe to receive children. Our manager may decide to offer a
  limited service or to close the setting.
- Where an incident occurs whilst the children are in our care and it is necessary to evacuate the
  premises/area, we follow the procedures in our Fire Safety and Emergency Evacuation Policy or, when on
  an outing, the procedures identified in the risk assessment for the outing.
- If a crime may have been committed, we ask all adults witness to the incident make a witness statement including the date and time of the incident, what they saw or heard, what they did about it and their full name and signature.
- We keep an incident book for recording major incidents, including some of those that that are reportable to the Health and Safety Executive as above.
- These incidents include:
  - a break in, burglary, or theft of personal or our setting's property
  - an intruder gaining unauthorised access to our premises
  - a fire, flood, gas leak or electrical failure
  - an attack on an adult or child on our premises or nearby
  - any racist incident involving families or our staff on the setting's premises
  - a notifiable disease or illness, or an outbreak of food poisoning affecting two or more children looked after on our premises
  - the death of a child or adult
  - a terrorist attack, or threat of one

- 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, is also recorded.
- In the event 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 and Emergency Evacuation Policy will be followed and our staff will take charge of their key children. The incident is recorded when the threat is averted.
- In the unlikely event of a child dying on our premises, through cot death in the case of a baby for example, the emergency services are called and the advice of these services are followed.
- The incident book is not for recording issues of concern involving a child. This is recorded in the child's own file.

#### **Common Inspection Framework**

 As required under the Common Inspection Framework, we maintain a summary record of all accidents, exclusions, children taken off roll, incidents of poor behaviour and discrimination, including racist incidents, and complaints and resolutions.

#### Legal framework

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995 (As Amended)

# **Further guidance**

- Common Inspection Framework: Education, Skills and Early Years (Ofsted 2015)
- Early Years Inspection Handbook (Ofsted 2015)
- RIDDOR Guidance and Reporting Form: www.hse.gov.uk/riddor

- Accident Record (2013)
- CIF Summary Record (2016)
- Reportable Incident Record (2015)

This policy was adopted by	Zikora Day Nursery and Preschool

# Safeguarding and Welfare Requirement: Safety and suitability of premises, environment and equipment

Providers must ensure there are suitable hygienic changing facilities for changing any children who are in nappies.

# 6.4 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 provide nappy changing facilities and exercise good hygiene practices 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**

- Our key persons have a list of personalised changing times for the children in their care who are in nappies or 'pull-ups'; and change nappies according to this schedule, or more frequently where necessary.
- We encourage young children from two years to normally wear pull ups, or other types of trainer pants, as soon as they are comfortable with this and if their parents agree.
- For group provision: Our key persons undertake changing children in their key groups; back up key persons change them if the key person is absent.
- Babies and young children are changed within sight of other staff whilst maintaining their dignity and privacy at all times.
- Our changing area is warm, with a safe area to lay children and no bright lights shining down in their eyes.
- Each child has their own basket to hand with their nappies or pull ups and changing wipes.
- Our staff put on gloves and aprons before changing starts and the areas are prepared. Paper towel is put down on the changing mat freshly for each child.
- For group provision: All our staff are familiar with our hygiene procedures and carry these out when changing nappies. We are familiar with my hygiene procedures and carry these out when changing nappies.
- We talk to our babies about changing their nappy and even informing them of their nappy being changed to maintain dignity and value to the child
- Our staff never turn their back on a child or leave them unattended whilst they are on the changing mat.

- We are gentle when changing; we avoid pulling faces and making negative comments about 'nappy contents'.
- We do not make inappropriate comments about children's genitals when changing their nappies.
- In addition, we ensure that nappy changing is relaxed and a time to promote independence in young children.
- We encourage children 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.
- We encourage children to wash their hands, and have soap and towels to hand. They should be allowed time for some play as they explore the water and the soap.
- We do not use anti-bacterial hand wash liquid or soap for young children; young skin is quite delicate and anti-bacterial products kill off certain good bacteria that children need to develop their own natural resistance to infection.
- Older children access the toilet when they have the need to and are encouraged to be independent.
- We dispose of nappies and pull ups hygienically.
- We have a 'duty of care' towards children's personal needs. If children are left in wet or soiled nappies/pull ups in the setting this may constitute neglect [and will be a disciplinary matter].

This policy was adopted by	Zikora Day Nursery and Preschool

#### Safeguarding and Welfare Requirement: Health

Where children are provided with meals, snacks and drinks, they must be healthy, balanced and nutritious.

### 6.5 Food and drink

#### **Policy statement**

We regard snack and meal times 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 resources and materials from the Pre-school Learning Alliance. At snack and meal times, 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 ask their parents about their dietary needs and preferences, including any allergies. See the Managing Children who are Sick, Infectious or with Allergies Policy
- We record information about each child's dietary needs in the Registration Form and parents sign the form to signify 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. Parents sign the updated record to signify that it is correct.
- We display current information about individual children's dietary needs so that all our 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 plan menus in advance, involving children.
- We display the menus of meals/snacks for parents to view.
- We provide nutritious food for all meals and snacks, avoiding large quantities of saturated fat, sugar and salt and artificial additives, preservatives and colourings.
- We include a variety of foods from the four main food groups:
  - meat, fish and protein alternatives;
  - dairy foods;
  - grains, cereals and starch vegetables; and
  - fruit and vegetables.
- We 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 we are especially vigilant where we have a child who has a known allergy to nuts.

- Through discussion with parents and research reading, we obtain information about the dietary rules of the
  religious groups to which 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 provide a vegetarian alternative on days when meat or fish are offered and make every effort to ensure
   Halal meat or Kosher food is available for children who require it.
- We show sensitivity in providing for children's diets and allergies. We do not use a child's diet or allergy as
  a label for the child, or make a child feel singled out because of her/his diet or allergy.
- We organise meal and snack times so that they are social occasions in which children and adults participate.
- We use meal and 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.
- We have fresh drinking water constantly available for the children. We inform the children about how to
  obtain the water and that they can ask for water at any time during the day.
- In accordance with parents' wishes, we offer children arriving early in the morning, and/or staying late, an appropriate meal or snack.
- We inform parents who provide food for their children about the storage facilities available in our setting.
- We give parents who provide food for their children information about suitable containers for food.
- In order to protect children with food allergies, we discourage children from sharing and swapping their food with one another.
- For young children who drink milk, we provide whole pasteurised milk. Although we slowly introduce semiskimmed milk from the age of two years; firstly, into meals and dishes, such as on cereal or in white sauces, before offering it as a drink, so that the transition is gradual.
- For each child under two, we provide parents with daily written information about feeding routines, intake
  and preferences.

#### Packed lunches

Where we cannot provide cooked meals and children are required to bring packed lunches, we:

- ensure perishable contents of packed lunches are refrigerated or contain an ice pack to keep food cool;
- inform parents of our policy on healthy eating;
- inform parents of whether we have facilities to microwave cooked food brought from home;
- encourage parents to provide sandwiches with a healthy filling, fruit, and milk based deserts, such as
  yoghurt or crème fraiche, where we/l can only provide cold food from home. We discourage sweet drinks
  and can provide children with water or diluted fresh fruit juice;
- discourage packed lunch contents that consist largely of crisps, processed foods, sweet drinks and sweet products such as cakes or biscuits. We reserve the right to return this food to the parent as a last resort;
- provide children bringing packed lunches with plates, cups and cutlery; and
- ensure that adults sit with children to eat their lunch so that the mealtime is a social occasion.

# Legal framework

Regulation (EC) 852/2004 of the European Parliament and of the Council on the Hygiene of Foodstuffs.

# Further guidance

Safer Food, Better Business (Food Standards Agency 2011)

- Nutritional Guidance for the Under Fives (Ed. 2010)
- The Early Years Essential Cookbook (2009)
- Healthy and Active Lifestyles for the Early Years (2012)

This policy was adopted by Zikora D	ay Nursery and Preschool
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#### Safeguarding and Welfare Requirement: Health

Where children are provided with meals, snacks and drinks, they must be healthy, balanced and nutritious.

# 6.6 Food Hygiene

#### **Policy statement**

6.61 We provide and/or serve food for children on the following basis

- Snacks.
- Meals.

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

6.63 We are registered as a food provider with the local authority Environmental Health Department.

#### **Procedures**

6.64 Our staff with responsibility for food preparation understand the principles of Hazard Analysis and Critical Control Point (HACCP) as it applies to our setting. This is set out in Safer Food, Better Business [for Caterers (for groups)/for Childminders (which groups will also find helpful)] (Food Standards Agency 2011).

6.65 The basis for this is risk assessment of the purchase, storage, preparation and serving of food to prevent growth of bacteria and food contamination.

- All our staff follow the guidelines of Safer Food, Better Business.
- For group provision: All our staff who are involved in the preparation and handling of food have received training in food hygiene;
- The person responsible for food preparation and serving carries out daily opening and closing checks on the kitchen to ensure standards are met consistently. (See Safer Food, Better Business)
- We use reliable suppliers for the food we purchase.
- Food is stored at correct temperatures and is checked to ensure it is in-date and not subject to contamination by pests, rodents or mould.
- Packed lunches are stored in a cool place; un-refrigerated food is served to children within 4 hours of preparation at home.
- Food preparation areas are cleaned before and 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.

- 6.66 Cleaning materials and other dangerous materials are stored out of children's reach.
- 6.67 Children do not have unsupervised access to the kitchen.
- 6.68 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 etc.

### Reporting of food poisoning

6.69 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 or diarrhoea are reportable.

6.610 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 our setting, the manager will contact the Environmental Health Department to report the outbreak and will comply with any investigation.

6.611 We notify Ofsted as soon as reasonably practicable of any confirmed cases of food poisoning affecting two or more children looked after on the premises, and always within 14 days of the incident.

# Legal framework

6.612 Regulation (EC) 852/2004 of the European Parliament and of the Council on the Hygiene of Foodstuffs

# **Further guidance**

6.613 Safer Food Better Business (Food Standards Agency 2011)

This policy was adopted by	Zikora Day Nursery and Preschool
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#### Safeguarding and Welfare Requirement: Health

Where children are provided with meals, snacks and drinks, they must be healthy, balanced and nutritious.

# **6.7 Healthy Eating Policy**

6.71 Zikora Day Nursery provides healthy, nutritious and balanced food and drinks. Food and drink are safely prepared with regard to the dietary and religious requirements of the children in our care. We ask parents to notify us regarding any special dietary requirements or allergies when they register their child.

6.72 Information regarding food allergies is recorded which is visible to staff whilst food is being prepared.

6.73 Zikora Day Nursery promotes healthy eating and leads by example. Staff responsible for food preparation, handling and storage have received appropriate training.

- We provide suitable healthy snacks for all the children.
- Children are encouraged to develop good eating skills and table manners.
- All children are given plenty of time to eat.
- Where appropriate, children are involved in planning and preparing food and snacks.
- Fresh drinking water is available at all times.
- Fresh fruit is available at all sessions.
- Withholding food is never used as a form of punishment.
- Staff discuss with children the importance of a balanced diet where appropriate.
- We do not regularly provide sweets for children.
- We limit access to fatty or sugary foods.
- Children are never forced to eat or drink anything against their will.

6.74 Written in accordance with the Statutory Framework for the Early Years Foundation Stage (2014): Safeguarding and Welfare Requirements: Food and drink [3.47-3.48].

This policy was adopted by	Zikora Day Nursery and Preschool
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### Safeguarding and Welfare Requirement: Managing behaviour

Providers are responsible for managing children's behaviour in an appropriate way.

# 7.1 Promoting positive behaviour

### **Policy Statement**

We believe that children flourish best when their personal, social and emotional needs are understood, supported and met and where there are clear, fair and developmentally appropriate expectations for their behaviour.

As children develop, they learn about boundaries, the difference between right and wrong, and to consider the views and feelings, and needs and rights, of others and the impact that their behaviour has on people, places and objects. The development of these skills requires adult guidance to help encourage and model appropriate behaviours and to offer intervention and support when children struggle with conflict and emotional situations. In these types of situations key staff can help identify and address triggers for the behaviour and help children reflect, regulate and manage their actions.

#### **Procedures**

In order to manage children's behaviour in an appropriate way we will:

- attend relevant training to help understand and guide appropriate models of behaviour;
- implement the setting's behaviour procedures including the stepped approach;
- have the necessary skills to support other staff with behaviour issues and to access expert advice, if necessary;
- ensure all staff complete the Promoting Positive Behaviour programme online.

#### Stepped approach

#### Step 1

- We will ensure that EYFS guidance relating to 'behaviour management' is incorporated into relevant policy and procedures;
- We will be knowledgeable with, and apply the setting's procedures on Promoting Positive Behaviour;
- We will undertake an annual audit of the provision to ensure the environment and practices supports healthy
  social and emotional development. Findings from the audit are considered by management and relevant
  adjustments applied. (A useful guide to assessing the well-being of children can be found at
  www.kindengezin.be/img/sics-ziko-manual.pdf)

• ensure that all staff are supported to address issues relating to behaviour including applying initial and focused intervention approaches (see below).

### Step 2

- We address unwanted behaviours using the agreed and consistently applied initial intervention approach. If the unwanted behaviour does not reoccur or cause concern, then normal monitoring will resume.
- Behaviours that result in concern for the child and/or others will be discussed between the key person, Special
  Educational Needs Coordinator (SENCO) or/and manager. During the meeting, the key person will use their
  knowledge and assessments of the child to share any known influencing factors (new baby, additional needs,
  illness etc.) in order to place the behaviour into context. Appropriate adjustments to practice will be agreed
  and if successful normal monitoring resumed.
- If the behaviour continues to reoccur and remains a concern, then the key person and SENCO should liaise with parents to discuss possible reasons for the behaviour and to agree next steps. If relevant and appropriate, the views of the child relating to their behaviour should be sought and considered to help identify a cause. If a cause for the behaviour is not known or only occurs whilst in the setting, then we may consider using a focused intervention approach to identify a trigger for the behaviour.
- If a trigger is identified, then the SENCO and key person will meet with the parents to plan support for the child through developing an action plan. If relevant, recommended actions for dealing with the behaviour at home should be agreed with the parent/s and incorporated into the plan. Other members of the staff team should be informed of the agreed actions in the action plan and help implement the actions. The plan should be monitored and reviewed regularly by the key person and SENCO until improvement is noticed.

All incidents and intervention relating to unwanted and challenging behaviour by children should be clearly and appropriately logged.

#### Step 3

- If, despite applying the initial intervention and focused intervention approaches, the behaviour continues to occur and/or is of significant concern, then the SENCO will invite the parents to a meeting to discuss external referral and next steps for supporting the child in the setting.
- It may be agreed that the Common Assessment Framework (CAF) or Early Help process should begin and that specialist help be sought for the child this support may address either developmental or welfare needs. If the child's behaviour is part of a range of welfare concerns that also include a concern that the child may be suffering or likely to suffer significant harm, follow the Safeguarding Children Policy. It may also be agreed that the child should be referred for an Education, Health and Care assessment. (See Supporting Children with SEN policy.
- Advice provided by external agencies should be incorporated into the child's action plan and regular multidisciplinary meetings held to review the child's progress.

#### Initial intervention approach

- We use an initial problem solving intervention for all situations in which a child or children are distressed on in conflict. All staff use this intervention consistently.
- This type of approach involves an adult approaching the situation calmly, stopping any hurtful actions, acknowledging the feelings of those involved, gathering information, restating the issue to help children reflect, regain control of the situation and resolve the situation themselves.

# Focused intervention approach

- The reasons for some types of behaviour are not always apparent, despite the knowledge and input from key staff and parents.
- Where we have considered all possible reasons, then a focused intervention approach should then be applied.
- This approach allows the key person to observe, reflect, and identify causes and functions of unwanted behaviour in the wider context of other known influences on the child.
- We follow the ABC method which uses key observations to identify a) an event or activity (antecedent) that occurred immediately before a particular behaviour, b) what behaviour was observed and recorded at the time of the incident, and c) what the consequences were following the behaviour. Once analysed, the focused intervention should help determine the cause (e.g. ownership of a toy or fear of a situation) and function of the behaviour (to obtain the toy or avoid a situation) and suitable support will be applied.

#### Use of rewards and sanctions

- All children need consistent messages, clear boundaries and guidance to intrinsically manage their behaviour through self-reflection and control.
- Rewards such as excessive praise and stickers may provide an immediate change in the behaviour but will not teach children how to act when a 'prize' is not being given or provide the child with the skills to manage situations and their emotions. Instead, a child is taught how to be 'compliant' and respond to meet adult's own expectations in order to obtain a reward (or for fear of a sanction). If used then the type of rewards and their functions must be carefully considered before applying.
- Children should never be labelled, criticised, humiliated, punished, shouted at or isolated by removing them from the group and left alone in 'time out' or on a 'naughty chair'. However, if necessary children can be accompanied and removed from the group in order to calm down and if appropriate helped to reflect on what has happened.

# Use of physical intervention

The term physical intervention is used to describe any forceful physical contact by an adult to a child such as
grabbing, pulling, dragging, or any form of restraint of a child such as holding down. Where a child is upset or
angry, staff will speak to them calmly, encouraging them to vent their frustration in other ways by diverting the
child's attention.

- Staff should not use physical intervention or the threat of physical intervention, to manage a child's behaviour unless it is necessary to use 'reasonable force in order to prevent children from injuring themselves or others or damage property '(EYFS).'
- If 'reasonable force' has been used for any of the reasons shown above, parents are to be informed on the same day that it occurs. The intervention will be recorded as soon as possible within the child's file, which states clearly when and how parents were informed.
- Corporal (physical) punishment of any kind should never be used or threatened.

#### Challenging Behaviour/Aggression by children towards other children

- Any aggressive behaviour by children towards other children will result in a staff member intervening immediately to challenge and prevent escalation.
- If the behaviour has been significant or may potentially have a detrimental effect on the child, the parents of the child who has been the victim of behaviour and the parents of the child who has been the perpetrator should be informed.
- The designated person will contact children's social services if appropriate and will consider whether notifying the police if appropriate.
- The designated person will make a written record of the incident, which is kept in the child's file; in line with the Safeguarding children, young people and vulnerable adults policy.
- The designated person should complete a risk assessment related to the child's challenging behaviour to avoid any further instances.
- The designated person should meet with the parents of the child who has been affected by the behaviour to advise them of the incident and the setting's response to the incident.
- Ofsted should be notified if appropriate.
- Relevant health and safety procedures and procedures for dealing with concerns and complaints should be followed.
- Parents should also be asked to sign risk assessments where the risk assessment relates to managing the behaviour of a specific child.

#### Challenging unwanted behaviour from adults in the setting

- Settings will not tolerate behaviour from an adult which demonstrates a dislike, prejudice and/or discriminatory attitude or action towards any individual or group. This includes negativity towards groups and individuals living outside the UK (xenophobia). This also applies to the same behaviour if directed towards specific groups of people and individuals who are British Citizens residing in the UK.
- Allegations of discriminatory remarks or behaviour including xenophobia made in the setting by any adult will
  be taken seriously. The perpetrator will be asked to stop the behaviour and failure to do so may result in the
  adult being asked to leave the premises and in the case of a staff member, disciplinary measures being taken.
- Where a parent makes discriminatory or prejudiced remarks to staff at any time, or other people while on the premises, this is recorded on the child's file and is reported to the setting manager. The procedure is

explained and the parent asked to comply while on the premises. An 'escalatory' approach will be taken with those who continue to exhibit this behaviour. The second stage comprises a letter to the parent requesting them to sign a written agreement not to make discriminatory remarks or behave in a discriminatory or prejudiced manner; the third stage may be considering withdrawing the child's place.

# Further guidance

• Special Educational Needs and Disability Code of Practice (DfE 2014)

- Behaviour Matters (2016)
- CIF Summary Record (2016)

This policy was adopted by	Zikora Day Nursery and Preschool

# Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Providers must take reasonable steps to ensure the safety of children, staff and others on the premises.

#### Health

The provider must promote the good health of children attending the setting.

# 8.1 Health and safety general standards

#### **Policy Statement**

- 8.1 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, staff and volunteers aware of health and safety issues and to minimise the hazards and risks to enable the children to thrive in a healthy and safe environment.
- Staff responsible for health and safety are Mohammed A. Uddin and Alka Patel
- We are responsible for health and safety in the setting.
- We both are competent to carry out these responsibilities.
- Both have undertaken health and safety training and regularly updates our knowledge and understanding.
- We display the necessary health and safety poster in:

#### The main office area at Zikora Day Nursery

#### Insurance cover

8.2 We have employers' liability insurance. The certificate for public liability insurance is displayed on:

### the parents' board

### Awareness raising

- 8.3 Our induction training for staff and volunteers includes a clear explanation of health and safety issues, so that all adults are able to adhere to our policy and procedures as they understand their shared responsibility for health and safety. The induction training covers matters of employee well-being, including safe lifting and the storage of potentially dangerous substances.
- 8.4 We keep records of these induction training sessions and new staff and volunteers are asked to sign the records to confirm that they have taken part.
- 8.5 We explain health and safety issues to the parents of new children, so that they understand the part played by these issues in the daily life of the setting.

- 8.6 As necessary, health and safety training is included in the annual training plans of staff, and health and safety is discussed regularly at our staff meetings.
- 8.7 We operate a no-smoking policy.
- 8.8 We make children aware of health and safety issues through discussions, planned activities and routines.

#### **Doors**

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

#### Floors and walkways

- 8.10 All our floor surfaces are checked daily to ensure they are clean and not uneven, wet or damaged. Any wet spills are mopped up immediately.
- 8.11 Walkways left clear and uncluttered.

#### Electrical/gas equipment

- 8.12 We ensure that all electrical/gas equipment conforms to safety requirements and is checked regularly.
- 8.13 Our boiler/electrical switch gear/meter cupboard is not accessible to the children.
- 8.14 Fires, heaters, wires and leads are properly guarded and we teach the children not to touch them.
- 8.15 We check storage heaters daily to make sure they are not covered.
- 8.16 There are sufficient sockets in our setting to prevent overloading.
- 8.17 We switch electrical devices off from the plug after use.
- 8.18 We ensure that the temperature of hot water is controlled to prevent scalds.
- 8.19 Lighting and ventilation is adequate in all areas of our setting, including storage areas.

#### Storage

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

#### **Outdoor area**

- 8.23 Our outdoor area is securely fenced/gated. All gates and fences are childproof and safe.
- 8.24 Our outdoor area is checked for safety and cleared of rubbish, animal droppings and any other unsafe items before it is used.
- 8.25 Adults and children are alerted to the dangers of poisonous plants, herbicides and pesticides.
- 8.26 Where water can form a pool on equipment, it is emptied and cleaned before children start playing outside.
- 8.27 Our outdoor sand pit is covered when not in use and is cleaned regularly.
- 8.28 We check that children are suitably attired for the weather conditions and type of outdoor activities; ensuring that sunscreen is applied and hats are worn during the summer months.
- 8.29 We supervise outdoor activities at all times.

#### Hygiene

- 8.30 We seek information from the Public Health England to ensure that [we/I] keep up-to-date with the latest recommendations.
- 8.31 Our daily routines encourage the children to learn about personal hygiene.
- 8.32 We have a daily cleaning routine for the setting, which includes the play room(s), kitchen, rest area, toilets and nappy changing areas. Children do not have unsupervised access to the kitchen.
- 8.33 We have a schedule for cleaning resources and equipment, dressing-up clothes and furnishings.
- 8.34 The toilet area has a high standard of hygiene, including hand washing and drying facilities and disposal facilities for nappies.
- 8.35 We implement good hygiene practices by:
  - cleaning tables between activities;
  - cleaning and checking toilets regularly;
  - wearing protective clothing such as aprons and disposable gloves as appropriate;
  - providing sets of clean clothes;
  - providing tissues and wipes; and
  - ensuring individual use of flannels, towels and toothbrushes.

#### Activities, resources and repairs

- 8.36 Before purchase or loan, we check equipment and resources to ensure that they are safe for the ages and stages of the children currently attending the setting.
- 8.37 The layout of our play equipment allows adults and children to move safely and freely between activities.
- 8.38 All our equipment is regularly checked for cleanliness and safety, and any dangerous items are repaired or discarded.
- 8.39 We make safe and separate from general use any areas that are unsafe because of repair is needed.
- 8.40 All our materials, including paint and glue, are non-toxic.
- 8.41 We ensure that sand is clean and suitable for children's play.
- 8.42 Physical play is constantly supervised.
- 8.43 We teach children to handle and store tools safely.
- 8.44 We check children who are sleeping at regular intervals, at least every ten minutes for under one year olds and fifteen minutes for over one year olds. This is recorded with the times checked and the initials of the person undertaking the check.
- 8.45 If children fall asleep in-situ, it may be necessary to move or wake them to make sure they are comfortable.
- 8.46 Children learn about health, safety and personal hygiene through the activities we provide and the routines we follow.
- 8.47 Any faulty equipment is removed from use and is repaired. If it cannot be repaired it is discarded. Large pieces of equipment are discarded only with [the consent of the manager and the management team/my consent.

#### Jewellery and accessories

- 8.48 Our staff do not wear jewellery or fashion accessories, such as belts or high heels, that may pose a danger to themselves or children.
- 8.49 Parents must ensure that any jewellery worn by children poses no danger; particularly earrings which may get pulled, bracelets which can get caught when climbing or necklaces that may pose a risk of strangulation.
- 8.50 We ensure that hair accessories are removed before children sleep or rest.

#### Safety of adults

- 8.51 We ensure that adults are provided with guidance about the safe storage, movement, lifting and erection of large pieces of equipment.
- 8.52 We ensure that all warning signs are clear and in appropriate languages.
- 8.53 We ensure that adults do not remain in the building on their own.
- 8.54 We record the sickness of staff and their involvement in accidents. The records are reviewed termly to identify any issues that need to be addressed.

#### Control of substances hazardous to health

- 8.56 Our staff implement the current guidelines of the Control of Substances Hazardous to Health Regulations (COSHH).
- 8.57 Substances that may be hazardous to health such as cleaning chemicals, or gardening chemicals are stored away and out of reach from children in a designated cupboard.
- 8.58 We carry out a risk assessment for all chemicals used in the setting. This states what the risks are and what to do if they have contact with eyes or skin or are ingested.
- 8.59 We keep all cleaning chemicals in their original containers.
- 8.60 We keep the chemicals used in the setting to the minimum in order to ensure health and hygiene is maintained. We do not use:
  - bleach;
  - anti-bacterial soap/hand wash, unless specifically advised during an infection outbreak such as Pandemic flu; or
  - anti-bacterial cleaning agents, except in the toilets, nappy changing area and food preparation areas. Anti-bacterial spays are not used when children are nearby.
- 8.61 Environmental factors are taken into account when purchasing, using and disposing of chemicals.
- 8.62 All members of staff are vigilant and use chemicals safely.
- 8.63 Members of staff wear protective gloves when using cleaning chemicals.

### **Animals in the Nursery**

8.64 We will adhere to our 'Animals in the setting' policy and procedure, ensuring that a risk assessment is completed with a knowledgeable person accounting for any hygiene or safety risks posed by the animal or creature.

## Legal framework

- Health and Safety at Work Act (1974)
- Management of Health and Safety at Work Regulations (1999)
- Electricity at Work Regulations (1989)
- Control of Substances Hazardous to Health Regulations (COSHH) (2002)
- Manual Handling Operations Regulations (1992 (As Amended 2004))
- Health and Safety (Display Screen Equipment) Regulations (1992)

#### Further guidance

- Health and Safety Law: What You Need to Know (HSE Revised 2009)
- Health and Safety Regulation...A Short Guide (HSE 2003)
- Electrical Safety and You: A Brief Guide (HSE 2012)
- Working with Substances Hazardous to Health: What You Need to Know About COSHH (HSE Revised 2009)
- Getting to Grips with Manual Handling Frequently Asked Questions: A Short Guide (HSE 2011)

This policy was adopted by	Zikora Day Nursery and Preschool
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Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment.

Providers must take reasonable steps to ensure the safety of children, staff and others on the premises.

# 8.2 Maintaining children's safety and security on premises

#### **Policy Statement**

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

#### **Procedures**

#### Children's personal safety

- For employers: We ensure all employed staff have been checked for criminal records via an enhanced disclosure with children's barred list check through the Disclosure and Barring Service.
- Adults do not normally supervise children on their own.
- All children are supervised by adults at all times.
- For groups: Whenever children are on the premises at least two adults are present one is from the management team.
- We carry out risk assessments to ensure children are not made vulnerable within any part of our premises, nor by any activity.

#### Security

- Systems are in place for the safe arrival and departure of children.
- The times of the children's arrivals and departures are recorded.
- The arrival and departure times of adults staff, volunteers and visitors are recorded.
- Our systems prevent unauthorised access to our premises.
- Our systems prevent children from leaving our premises unnoticed.
- We only allow access to visitors with prior appointments.
- Our staff check the identity of any person who is not known before they enter the premises.
- We keep front doors and gates locked shut at all times. Back doors are kept locked shut at all times where they may lead to a public or unsupervised area.
- We have installed entry phones and 'spy holes' in the main door at a suitable height.
- The personal possessions of staff and volunteers are securely stored during sessions.
- Minimal petty cash is kept on the premises.

# Other useful Pre-school Learning Alliance publications

• Managing Risk (2009)

This policy was adopted by Zikora Day Nursery and Preschool
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# Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Children must be kept safe while on outings.

# 8.3 Supervision of children on outings and visits

#### **Policy statement**

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

#### **Procedures**

- All off site activity has a clearly identified educational purpose with specific learning and development outcomes.
- There is a designated lead for each excursion who is clear about their responsibility as designated lead.
- We ask parents to sign a general consent on registration for their children to be taken out on local short outings as a part of the daily activities of the setting. This general consent details the venues used for daily activities.
- We assess the risks for each local venue used for daily activities, which is reviewed regularly.
- We always ask parents to sign specific consent forms before major outings; and the risks are assessed before the outing takes place.
- Our manager and all staff taking part in the outing sign off every risk assessment.
- Children with allergies or other specific needs have a separate risk assessment completed i.e. child with allergies visiting a supermarket.
- An excursion will not go ahead if concerns are raised about its viability at any point.
- Any written outing risk assessments are made available for parents to see.
- For group provision: Our adult to child ratio is high, normally one adult to two children, depending on their age, sensibility and the type of venue, as well as how it is to be reached.
- For group provision: A minimum of two staff accompany children on outings. Unless the whole setting is on an outing, a minimum of two staff also remain behind with the rest of the children.
- Named children are assigned to individual staff member to ensure that each child is well supervised, that
  no child goes astray and that there is no unauthorised access to children. I ensure that all children on the
  outing are well supervised, that no child goes astray and that there is no unauthorised access to children.
- Staff frequently count their designated children and ensure hands are held when on the street and crossing the road.

- Parents who accompany us on outings are responsible for their own child only. Where parents have undergone vetting with us as volunteers, they may be included in the adults to child ratio and have children allocated to them.
- Parents that are not vetted can join up with a member of staff and the staff member is responsible for taking the children to the toilet
- Outings are recorded in an outing record book kept in the setting, stating:
  - The date and time of the outing.
  - The venue and mode of transport used.
  - The names of the staff members assigned to each of the children
  - The time of return.
- We take a mobile phone on outings, as well as supplies of tissues, wipes, spare clothing and nappies, medicines required for individual children, a mini first aid kit, snacks and water. The amount of equipment will vary and be consistent with the venue and the number of children, as well as how long they will be out for. We apply sun cream to children as needed and ensure they are dressed appropriately for the type of outing and weather conditions.
- We take a list of children with us with contact numbers of parents/carers, as well as an accident book and a copy of our Missing Child Policy.
- We provide children with badges or 'high viz' vests to wear that contain the name and setting telephone number but not the name of the child.
- Records are kept of the vehicles used to transport children, with named drivers and appropriate insurance cover.
- We ensure that seat belts are worn whilst travelling in vehicles and that booster seats and child safety seats are used as appropriate to the age of the child.
- We use public transport, children sit on the seating supervised and we go for short distances, parents are given consent forms
- As a precaution, we ensure that children do not eat when travelling in vehicles.
- We ensure that contracted drivers are from reputable companies, do not have unsupervised access to the children and are not included in the ratios.

#### Other useful Pre-school Learning Alliance publications

- Daily Register and Outings Record (2015)
- Managing Risk (2009)

This policy was adopted by	Zikora Day Nursery and Preschool	
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# Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Providers must take reasonable steps to ensure the safety of children, staff and others on the premises.

#### Health

The provider must promote the good health of children attending the setting.

# 8.5 Fire safety and emergency evacuation

## **Policy statement**

We ensure the highest possible standard of fire precautions are in place. The person in charge and our staff are familiar with the current legal requirements. Where necessary we seek the advice of a competent person, such as our Fire Officer or Fire Safety Consultant. A Fire Safety Log Book is used to record the findings of risk assessment, any actions taken or incidents that have occurred and our fire drills.

#### **Procedures**

Fire safety risk assessment

- The basis of fire safety is risk assessment, carried out by a 'competent person'.
- The manager has received training in fire safety sufficient to be competent to carry out the risk assessment; this will follow the Government Guidance Fire Safety Risk Assessment - Educational Premises (HMG 2006).
  - Our fire safety risk assessment focuses on the following for each area of the setting:
  - Electrical plugs, wires and sockets.
  - Electrical items.
  - Electric boilers.
  - Cookers.
  - Matches.
  - Flammable materials including furniture, furnishings, paper etc.
  - Flammable chemicals.
  - Means of escape.
  - Anything else identified.
- Where we rent premises, we will ensure that we have a copy of the fire safety risk assessment that applies to the building and that we contribute to regular reviews.

#### Fire safety precautions taken

- We ensure that fire doors are clearly marked, never obstructed and easily opened from the inside.
- We ensure that smoke detectors/alarms and firefighting appliances conform to BS standards, are fitted in appropriate high risk areas of the building and are checked as specified by the manufacturer.
- We have all electrical equipment checked annually by a qualified electrician. Any faulty
  electrical equipment is taken out of use and either repaired or replaced.
- Our emergency evacuation procedures are approved by the Fire Safety Officer and are:
  - clearly displayed in the premises;
  - explained to new members of staff, volunteers and parents; and
  - practised regularly, at least once every term.
- Records are kept of fire drills and of the servicing of fire safety equipment.

#### Emergency evacuation procedure

When a fire is discovered staff should raise the fire alarm and inform the manager/ deputy manager.

- Upon hearing the fire alarm staff must check the position of the fire in the premises to ensure that they are taking the safest exit when evacuating the premises.
- Children must be told that there is a fire in the building and we are going to leave the building calmly. Children should hold hands in twos and follow the staff member.
- Lead children to the main fire exit to assembly point.
- Room leader/senior staff from each room should take children's register and the headcount sheet with them.
- Student and volunteer must follow the senior staff/ room leader.
- Nursery manager will call 999 to inform the fire brigade.
- Nursery Manager will take staff register and visitor's log book, Parents' emergency contact details book and emergency evacuation bag.
- Manager/ deputy manager to check the premises for children and other staff including toilets.
- Manager and deputy manager will call the parents to inform regarding the incident.
- In the absence of the nursery manager the deputy manager will carry out the above tasks with the help of other senior staff.
- Staff MUST leave all the belongings behind and never enter the premises to collect anything.

#### Fire assembly points

- In front of the nursery, next to the motor bike stand where the assembly point sign is displayed
- 2. In front of lbex house reception.

#### Fire drills

We hold fire drills termly and record the following information about each fire drill in the Fire Safety Log Book:

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

#### Legal framework

Regulatory Reform (Fire Safety) Order 2005

# Further guidance

Fire Safety Risk Assessment - Educational Premises (HMG 2006)

## Other useful Pre-school Learning Alliance publications

Fire Safety Record (2015)

This policy was adopted by Zikora Day	/ Nursery and Preschool
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# General Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Providers must have a no-smoking policy, and must prevent smoking in a room, or outside play area, when children are present or about to be present

# 8.7 No-smoking

## **Policy statement**

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

#### **Procedures**

- All staff, parents and volunteers are made aware of our No-smoking Policy.
- No-smoking signs are displayed prominently.
- The No-smoking Policy is stated in information for parents and staff.
- We actively encourage no-smoking by having information for parents and staff about where to get help to stop smoking if they are seeking this information.
- Staff who smoke do not do so during working hours, unless on a scheduled break and off the premises.
- Staff who smoke during working hours and travelling to and from work must not do so whilst wearing a setting uniform, or must at least cover the uniform.
- E-cigarettes are not permitted to be used on the premises. If permitted, describe any conditions or restrictions
- Staff who smoke or use e-cigarettes during their scheduled breaks go well away from the premises.
- Staff who smoke during their break make every effort to reduce the effects of odour and passive smoking for children and colleagues
- Smoking is not permitted in any vehicles belonging to the setting.
- Staff are made aware that failure to adhere to this policy and procedures may result in disciplinary action.
- It is a criminal offence for employees to smoke in smoke-free areas, with a fixed penalty of £50 or prosecution and a fine of up to £200.

#### Legal framework

- The Smoke-free (Premises and Enforcement) Regulations (2006)
- The Smoke-free (Signs) Regulations (2012)

This policy was adopted by	Zikora Day Nursery and Preschool

# Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Providers must take reasonable steps to ensure the safety of children, staff and others on the premises.

#### Health

The provider must promote the good health of children attending the setting.

# 8.8 Manual Handling Policy

Manual handling is one of the major causes of absence through injury in the workplace. At Zikora Day Nursery we work with our staff, provide training, and undertake risk assessments in order to eliminate hazardous manual handling activities as far as possible.

This policy is written with reference to the *Health and Safety at Work Act 1974*, which places a duty on employers "to ensure so far as is reasonably practicable, the health, safety and welfare of its employees", and to the *Manual Handling Operations Regulations 1992 (as amended)*.

#### **Procedure**

In order to limit the risk of injury from manual handling operations Zikora Day Nursery will:

- Eliminate hazardous manual handling activities, as far as is reasonably practicable
- Assess the risks associated with any manual handling activities that cannot be avoided.

The purpose of the risk assessment is to reduce the risk of injury to the lowest possible levels, and should consider:

- The task
- The load
- The individual undertaking the task
- The working environment.

The main manual handling hazard at the setting is likely to be the setting-up and clearing-away of equipment. This is unavoidable, but staff should carry out the operation with reference to the guidance given in the manual handling training that we provide. It may be necessary to seek the assistance of an additional member of staff in order to minimise the risk of injury, for example when carrying tables and other heavy or bulky items.

#### **Employee's duties**

It is the responsibility of all staff at Zikora Day Nursery to:

- Comply with any instructions and training provided in safe manual handling techniques
- Not put their own health and safety or that of others at risk by carrying out unsafe manual handling activities

# Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Providers must take reasonable steps to ensure the safety of children, staff and others on the premises.

#### Health

The provider must promote the good health of children attending the setting.

• Report to the Manager any problems which may affect their ability to undertake manual handling activities, including physical and medical conditions (eg pregnancy, back problems).

# In summary

**Avoid** Whenever possible, avoid manual handling situations.

**Assess** If avoidance is not possible, make a proper assessment of the hazard and risks.

**Reduce** Reduce the risk of injury by defining and implementing a safe system of work.

**Review** Review your systems regularly, to monitor the overall effectiveness of the policy

Written in accordance with the Statutory Framework for the Early Years Foundation Stage (2014): Safeguarding and Welfare Requirements: Staff Qualifications, training, support and skills [3.20-3.22]

This policy was adopted by	Zikora Day Nursery and Preschool

Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment Providers must follow their legal responsibilities under the Equality Act 2010.

# 9.1 Valuing diversity and promoting inclusion and equality

## **Policy Statement**

We are committed to ensuring that our service is fully inclusive in meeting the needs of all children.

We recognise that children and their families come from a wide range of backgrounds with individual needs, beliefs and values. They may grow up in family structures that include one or two parents of the same or different sex. Children may have close links or live with extended families of grandparents, aunts, uncles and cousins; while other children may be more removed from close kin, or may live with other relatives or foster carers. Some children come from families who experience social exclusion, severe hardship; discrimination and prejudice because of their ethnicity, disability and/or ability, the languages they speak, their religious or personal beliefs, their sexual orientation and marital status. Some individuals face discrimination linked to their gender and some women are discriminated against because of their pregnancy and maternity status. We understand that all these factors can affect the well-being of children within these families and may adversely impact on children's learning, attainment and life outcomes.

We are committed to anti-discriminatory practice to promote equality of opportunity and valuing diversity for all children and families using our setting. We aim to:

- promote equality and value diversity within our service and foster good relations with the local community;
- actively include all families and value the positive contribution they make to our service;
- promote a positive non-stereotyping environment that promotes dignity, respect and understanding of difference in all forms;
- provide a secure and accessible environment in which every child feels safe and equally included;
- improve our knowledge and understanding of issues relating to anti-discriminatory practice,
- challenge and eliminate discriminatory actions on the basis of a protected characteristic as defined by the Equality Act (2010) namely:
  - age;
  - gender;
  - gender reassignment;
  - marital status;
  - pregnancy and maternity;
  - o race;
  - disability;

- o sexual orientation; and
- o religion or belief.
- where possible, take positive action to benefit groups or individuals with protected characteristics who are disadvantaged, have a disproportional representation within the service or need different things from the service.

#### **Procedures**

Admissions

Our setting is open and accessible to all members of the community.

- We base our Admissions Policy on a fair system.
- We do not discriminate against a child or their family in our service provision, including preventing their entry to our setting based on a protected characteristic as defined by the Equality Act (2010).
- We advertise our service widely.
- We provide information in clear, concise language, whether in spoken or written form and provide information in other languages (where ever possible).
- We reflect the diversity of our community and wider society in our publicity and promotional materials.
- We provide information on our offer of provision for children with special educational needs and disabilities.
- We ensure that all parents are made aware of our Valuing Diversity and Promoting Inclusion and Equality Policy.
- We make reasonable adjustments to ensure that disabled children can participate successfully in the services and in the curriculum offered by the setting.
- We ensure, wherever possible, that we have a balanced intake of boys and girls in the setting.
- We take action against any discriminatory, prejudice, harassing or victimising behaviour by our staff, volunteers or parents whether by:
  - direct discrimination someone is treated less favourably because of a protected characteristic e.g.
     preventing families of a specific ethnic group from using the service;
  - indirect discrimination someone is affected unfavourably by a general policy e.g. children must only speak English in the setting;
  - discrimination arising from a disability someone is treated less favourably because of something connected with their disability e.g. a child with a visual impairment is excluded from an activity;
  - association discriminating against someone who is associated with a person with a protected characteristic e.g. behaving unfavourably to someone who is married to a person from a different cultural background; or
  - perception discrimination on the basis that it is thought someone has a protected characteristic e.g.
     making assumptions about someone's sexual orientation.
- We will not tolerate behaviour from an adult who demonstrates dislike or prejudice towards individuals who are perceived to be from another country (xenophobia).

Displaying of openly discriminatory xenophobic and possibly offensive or threatening materials, name calling,
or threatening behaviour are unacceptable on, or around, our premises and will be dealt with immediately and
discreetly by asking the adult to stop using the unacceptable behaviour and inviting them to read and to act in
accordance with the relevant policy statement and procedure. Failure to comply may lead to the adult being
excluded from the premises.

### **Employment**

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

#### Training

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

#### Curriculum

The curriculum offered in our setting encourages children to develop positive attitudes about themselves as well as about people who are different from themselves. It encourages development of confidence and self esteem, empathy, critical thinking and reflection.

We ensure that our practice is fully inclusive by:

- creating an environment of mutual respect and tolerance;
- modelling desirable behaviour to children and helping children to understand that discriminatory behaviour and remarks are hurtful and unacceptable;
- positively reflecting the widest possible range of communities within resources;
- avoiding use of stereotypes or derogatory images within our books or any other visual materials;
- celebrating locally observed festivals and holy days;

- ensuring that children learning English as an additional language have full access to the curriculum and are supported in their learning;
- ensuring that disabled children with and without special educational needs are fully supported;
- ensuring that children speaking languages other than English are supported in the maintenance and development of their home languages

We will ensure that our environment is as accessible as possible for all visitors and service users. We do this by:

- undertaking an access audit to establish if the setting is accessible to all disabled children and adults. If
  access to the setting is found to treat disabled children or adults less favourably, then [we/I] make reasonable
  adjustments to accommodate the needs of disabled children and adults.
- fully differentiating the environment, resources and curriculum to accommodate a wide range of learning, physical and sensory needs.

#### Valuing diversity in families

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

#### Food

- We work in partnership with parents to ensure that dietary requirements of children that arise from their medical, religious or cultural needs are met where ever possible.
- 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.

#### Meetings

- Meetings are arranged to ensure that all families who wish to may be involved in the running of the setting.
- We positively encourage fathers to be involved in the setting, especially those fathers who do not live with the child.
- Information about meetings is communicated in a variety of ways written, verbal and where resources allow in translation to ensure that all mothers and fathers have information about, and access to, the meetings.

## Monitoring and reviewing

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

## Public Sector Equality Duty

• We have regard to the Duty to eliminate discrimination, promote equality of opportunity, foster good relations between people who share a protected characteristic and those who do not.

## Legal framework

The Equality Act (2010)

Children Act (1989) & (2004)

Children and Families Act (2014)

Special Educational Needs and Disabilities Code of Practice (2014)

## Other useful Pre-school Learning Alliance publications

- Guide to the Equality Act and Good Practice (2015)
- SEND Code of Practice 2014 for the Early Years (2014)
- Where's Dad? (2009)

This policy was adopted by	Zikora Day Nursery and Preschool
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#### Safeguarding and Welfare Requirement: Equal Opportunities

Providers must have and implement a policy, and procedures, to promote equality of opportunity for children in their care, including support for children with special educational needs or disabilities.

# 9.2 Supporting children with special educational needs

## **Policy Statement**

We provide an environment in which all children with special educational needs (SEN) are supported to reach their full potential.

- We have regard for the Special Educational Needs and Disability Code of Practice (2014).
- We have in place a clear approach for identifying, responding to, and meeting children's SEN¹.
- We support and involve parents (and where relevant children), actively listening to, and acting on their wishes and concerns.
- We work in partnership with the local authority and other external agencies to ensure the best outcomes for children with SEN and their families.
- We regularly monitor and review our policy, practice and provision and, if necessary, make adjustments.

#### **Procedures**

We designate a member of staff to be the Special Educational Needs Co-ordinator (SENCO) and give his/her name to parents. Our SENCO is:

#### Alka Patel, Deputy Manager

- The SENCO works closely with our manager and other colleagues and have responsibility for the day-today operation of our Supporting Children with Special Educational Needs Policy and for co-ordinating provision for children with SEN.
- We ensure that the provision for children with SEN is the responsibility of all members of the setting.
- We ensure that our inclusive admissions practice ensures equality of access and opportunity.
- We provide a broad, balanced and differentiated curriculum for all children.
- We apply SEN support to ensure early identification of children with SEN.
- We use the graduated approach system (assess, plan, do and review) applied in increasing detail and frequency to ensure that children progress.
- We ensure that parents are involved at all stages of the assessment, planning, provision and review of their children's special education including all decision making processes
- We where appropriate, take into account children's views and wishes in decisions being made about them, relevant to their level understanding.

<sup>&</sup>lt;sup>1</sup> This includes disabled children with special educational needs

- We provide parents with information on local sources of support and advice e.g. Local Offer, Information,
   Advice and Support Service.
- We liaise and work with other external agencies to help improve outcomes for children with SEN.
- We have systems in place for referring children for further assessment e.g. Common Assessment Framework/Early Help Assessment and Education, Health and Care (EHC) assessment.
- We provide resources (human and financial) to implement our Supporting Children with Special Educational Needs Policy.
- We ensure that all our staff are aware of our Supporting Children with Special Educational Needs Policy and the procedures for identifying, assessing and making provision for children with SEN. We provide inservice training for parents, practitioners and volunteers.
- We raise awareness of our special education provision via our website and or promotional materials.
- We ensure the effectiveness of our special educational needs provision by collecting information from a range of sources e.g. action plan reviews, staff and management meetings, parental and external agency's views, inspections and complaints. This information is collated, evaluated and reviewed annually.
- We provide a complaints procedure.
- We monitor and review our policy annually.

## Further guidance

- Early Years Foundation Stage Statutory Framework (DfE 2014)
- Working Together to Safeguard Children (DfE 2015)
- Special Educational Needs and Disability Code of Practice (DfE & DoH 2014)

#### Other useful Pre-school Learning Alliance publications

- Guide to the Equality Act and Good Practice (2010)
- SEND Code of Practice for the Early Years (2014)

This policy was adopted by	Zikora Day Nursery and Preschool

# Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment

Providers must follow their legal responsibilities under the Equality Act 2010.

#### 9.3 British values

#### **Policy Statement**

We actively promote inclusion, equality of opportunity, the valuing of diversity and British values.

Under the Equality Act 2010, which underpins standards of behaviour and incorporates both British and universal values, we have a legal obligation not to directly or indirectly discriminate against, harass or victimise those with protected characteristics. We make reasonable adjustments to procedures, criteria and practices to ensure that those with protected characteristics are not at a substantial disadvantage. As we are in receipt of public funding we also have a public-sector equality duty to eliminate unlawful discrimination, advance equality of opportunity, foster good relations and publish information to show compliance with the duty.

Social and emotional development is shaped by early experiences and relationships and incorporates elements of equality and British and universal values. The Early Years Foundation Stage (EYFS) supports children's earliest skills so that they can become social citizens in an age-appropriate way, that is, so that they are able to listen and attend to instructions; know the difference between right and wrong; recognise similarities and differences between themselves and others; make and maintain friendships; develop empathy and consideration of other people; take turns in play and conversation; avoid risk and take notice of rules and boundaries; learn not to hurt/upset other people with words and actions; understand the consequences of hurtful/discriminatory behaviour.

#### **Procedures**

#### British Values

The fundamental British values of *democracy, rule of law, individual liberty, mutual respect and tolerance for those with different faiths and beliefs* are already implicitly embedded in the 2014 EYFS and are further clarified below, based on the *Fundamental British Values in the Early Years* guidance (Foundation Years 2015):

- Democracy, or making decisions together (through the prime area of Personal, Social and Emotional Development)
  - As part of the focus on self-confidence and self-awareness, practitioners encourage children to see
     their role in the bigger picture, encouraging them to know that their views count, to value each other's

- views and values, and talk about their feelings, for example, recognising when they do or do not need help.
- Practitioners support the decisions that children make and provide activities that involve turn-taking, sharing and collaboration. Children are given opportunities to develop enquiring minds in an atmosphere where questions are valued.
- Rule of law, or understanding that rules matter (through the prime area of Personal, Social and Emotional Development)
  - Practitioners ensure that children understand their own and others' behaviour and its consequence.
  - Practitioners collaborate with children to create rules and the codes of behaviour, for example, the rules about tidying up, and ensure that all children understand rules apply to everyone.
- Individual liberty, or freedom for all (through the prime areas of Personal, Social and Emotional Development, and Understanding the World)
  - Children should develop a positive sense of themselves. Staff provide opportunities for children to develop their self-knowledge, self-esteem and increase their confidence in their own abilities, for example through allowing children to take risks on an obstacle course, mixing colours, talking about their experiences and learning.
  - Practitioners encourage a range of experiences that allow children to explore the language of feelings and responsibility, reflect on their differences and understand we are free to have different opinions, for example discussing in a small group what they feel about transferring into Reception Class.
- Mutual respect and tolerance, or treating others as you want to be treated (through the prime areas of Personal, Social and Emotional Development, and Understanding the World)
  - Practitioners create an ethos of inclusivity and tolerance where views, faiths, cultures and races are valued and children are engaged with the wider community.
  - Children should acquire tolerance, appreciation and respect for their own and other cultures; know about similarities and differences between themselves and others, and among families, faiths, communities, cultures and traditions.
  - Practitioners encourage and explain the importance of tolerant behaviours, such as sharing and respecting other's opinions.
  - Practitioners promote diverse attitudes and challenge stereotypes, for example, sharing stories that reflect and value the diversity of children's experiences and providing resources and activities that challenge gender, cultural or racial stereotyping.
- In our setting it is not acceptable to:
  - actively promote intolerance of other faiths, cultures and races
  - fail to challenge gender stereotypes and routinely segregate girls and boys
  - isolate children from their wider community
  - fail to challenge behaviours (whether of staff, children or parents) that are not in line with the fundamental British values of democracy, rule of law, individual liberty, mutual respect and tolerance for those with different faiths and beliefs

#### Prevent Strategy

Under the Counter-Terrorism and Security Act 2015 [we/l] also have a duty "to have due regard to the need to prevent people from being drawn into terrorism"

## Legal framework

Counter-Terrorism and Security Act 2015

## Further guidance

Equality Act 2010: Public Sector Equality Duty - What Do I Need to Know? A Quick Start Guide for Public

Sector Organisations (Government Equalities Office 2011)

Fundamental British Values in the Early Years (Foundation Years 2015)

Prevent Duty Guidance: for England and Wales (HMG 2015)

The Prevent Duty: Departmental Advice for Schools and Childcare Providers (DfE 2015)

## Other useful Pre-school Learning Alliance publications

• Guide to the Equality Act and Good Practice (2015)

This policy was adopted by	Zikora Day Nursery and Preschool
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Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

## 10.2 Admissions

## **Policy Statement**

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

#### **Procedures**

- We ensure that the existence of our setting is widely advertised in places accessible to all sections of the community.
- We ensure that information about our setting is accessible, using simple plain English, in written and spoken form and, where appropriate, provided in different community languages and in other formats on request.
- We arrange our waiting list in birth order. In addition, our policy may take into account:
  - the age of the child, with priority given to children who are eligible for the free entitlement including eligible two year old children;
  - the length of time on the waiting list;
  - the vicinity of the home to the setting;
  - whether any siblings already attend the setting; and
  - the capacity of the setting to meet the individual needs of the child.
- We offer funded places in accordance with the Code of Practice and any local conditions in place at the time.
- We keep a place vacant, if this is financially viable, to accommodate an emergency admission.
- Our setting and its practices are welcoming and make it clear that fathers, mothers, other relations and carers are all welcome.
- Our setting and its practices operate in a way that encourages positive regard for and understanding of difference and ability - whether gender, family structure, class, background, religion, ethnicity or competence in spoken English.
- We support children and/or parents with disabilities to take full part in all activities within our setting.
- We monitor the needs and background of children joining our setting on the Registration Form, to ensure that no accidental or unintentional discrimination is taking place.
- We share and widely promote our Valuing Diversity and Promoting Equality Policy.

- We consult with families about the opening times of our setting to ensure that we accommodate a broad range of families' needs.
- We are flexible about attendance patterns to accommodate the needs of individual children and families, providing these do not disrupt the pattern of continuity in the setting that provides stability for all the children.
- Failure to comply with the terms and conditions may ultimately result in the provision of a place being withdrawn.

# Other useful Pre-school Learning Alliance publications

Seasonal Hello Posters (2006)

This policy was adopted by Zikora Day Nursery and Preschool	
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Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

# 10.3 General Data Protection Regulation (GDPR) Policy

## **Policy Statement**

The General Data Protection Regulation (GDPR) is a new EU law coming into effect on 25th May 2018 replacing the current Data Protection Act 1998. It will give individuals greater control over their own personal data. As a nursery it is necessary for us to collect personal information about the children who attend as well as staff and parents/carers.

#### **GDPR** principle

GDPR condenses the Data Protection Principles into 8 areas, which are referred to as the Privacy Principles. They are:

- You must have a lawful reason for collecting personal data and must do it in a fair and transparent way.
- 2. You must only use the data for the reason it is initially obtained.
- 3. You must not collect any more data than is necessary.
- 4. It must be accurate and there must be mechanisms in place to keep it up to date.
- 5. You cannot keep it any longer than needed.
- 6. You must protect the personal data.
- 7. You must have appropriate measures against unauthorised or unlawful processing or personal data and against accidental loss or destruction/damage to personal Data.
- 8. Personal Data shall not be transferred to any outside agency or country within the EU that does not comply with the new General data protection regulations.

The GDPR provides the following rights for individuals:

- The right to be informed.
- The right of access.
- The right to rectification.
- The right to erase.
- The right to restrict processing.
- The right to data portability.
- The right to object.
- Rights in relation to automated decision-making and profiling.

There are two main roles under the GDPR: the data controller and the data processor. As a childcare provider, we are the data controller. The data is our data that we have collected about

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

the children and their families. We have contracts with other companies to process data, which makes them the data processor. The two roles have some differences but the principles of GDPR apply to both. We have a responsibility to ensure that other companies we work with are also GDPR compliant.

#### Lawful basis for processing personal data

We must have a lawful basis for processing all personal data within our organisation and this is recorded on our Information audit for all the different information we collect. The six reasons as follows:

- (a) Consent: the individual has given clear consent for you to process their personal data for a specific purpose.
- **(b) Contract:** the processing is necessary for a contract you have with the individual, or because they have asked you to take specific steps before entering into a contract.
- **(c) Legal obligation:** the processing is necessary for you to comply with the law (not including contractual obligations).
- **(d) Vital interests:** the processing is necessary to protect someone's life.
- **(e) Public task:** the processing is necessary for you to perform a task in the public interest or for your official functions, and the task or function has a clear basis in law.
- **(f) Legitimate interests:** the processing is necessary for your legitimate interests or the legitimate interests of a third party unless there is a good reason to protect the individual's personal data which overrides those legitimate interests.

For the majority of data we collect, the lawful basis for doing so falls under the category of 'legal obligation' such as names, date of birth and addresses as we have a legal requirement to obtain this data as part of the Statutory Framework for the Early Years Foundation Stage.

Some data we collect, for example, photographs, requires parents to give consent for us to do so. Where this is the case, parents will be required to sign a consent form and are made aware that they have the right to withdraw their consent at any time.

We may also be required to collect data as part of parent's contract with the setting or local authority, for example, for us to claim government funding.

#### **Data retention**

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

We will hold information about individuals only for as long as the law says and no longer than necessary. After this, we will dispose of it securely.

#### Security

We keep data about all individuals secure and aim to protect data against unauthorised change, damage, loss or theft. All data collected is only accessed by authorised individuals. All paper forms are kept locked away and all computers and tablets are password protected.

#### **Privacy notices**

All parents and staff are provided with privacy notices which inform them of our procedures around how and why we collect data, information sharing, security, data retention, access to their records and our commitment to compliance with the GDPR act 2018.

#### **Ensuring compliance**

The member of staff responsible for ensuring that the setting is compliant is Mohammed A Uddin, Nursery Manager and Alka Patel, Deputy Manager. Their main duties are:

- Ensure that the provision is compliant with GDPR.
- Audit all personal data held.
- Ensure all staff are aware of their responsibilities under the law, this may include delivering staff training.
- Undertake investigations when there is a breach of personal data and report to the Information Commissions Office, ICO.
- · Keep up to date with the legislation.

### Legal framework

- The General Data Protection Regulation (2018)
- Human Rights Act 1998

This policy was adopted by	Zikora Day Nursery and Preschool

# 10.3a Privacy notice

# Zikora Day Nursery and Preschool's Privacy Notice

Zikora Day Nursery and Preschool lbex House, 1C Maryland Park

**Forest Lane** 

**Stratford** 

E15 1HR

#### Introduction

Zikora Day Nursery and Preschool is committed to ensuring that any personal data we hold about you and your child is protected in accordance with data protection laws and is used in line with your expectations.

This privacy notice explains what personal data we collect, why we collect it, how we use it and how we protect it.

#### What personal data do we collect?

We collect personal data about you and your child to provide care and learning that is tailored to meet your child's individual needs. We also collect information in order to verify your eligibility for free childcare as applicable.

Personal details that we collect about your child include:

 your child's name, date of birth, address, photographs, health and medical needs, development needs, and any special educational needs.

Where applicable we will obtain child protection plans from social care and health care plans from health professionals.

We will also ask for information about who has parental responsibility for your child and any court orders pertaining to your child.

Personal details that we collect about you include:

 your name, home and work address, photographs of parents and the people who would come to collect the child/ren, phone numbers, emergency contact details, and family details

This information will be collected from you directly in the registration form.

If you apply for up to 30 hours free childcare, we will also collect:

 your national insurance number or unique taxpayer reference (UTR), if you're self-employed. We may also collect information regarding benefits and family credits that you are in receipt of.

## Why we collect this information and the legal basis for handling your data

We use personal data about you and your child in order to provide childcare services and fulfil the contractual arrangement you have entered into. This includes using your data to:

- contact you in case of an emergency
- to support your child's wellbeing and development
- to manage any special educational, health or medical needs of your child whilst at our setting
- to carry out regular assessment of your child's progress and to identify any areas of concern
- to maintain contact with you about your child's progress and respond to any questions you may have
- to process your claim for up to 30 hours free childcare (only where applicable)
- to keep you updated with information about our service

With your consent, we will also record your child's activities for their individual learning record. This may include photographs and videos. You will have the opportunity to withdraw your consent at any time, for images taken by confirming so in writing.

We have a legal obligation to process safeguarding related data about your child should we have concerns about their welfare. We also have a legal obligation to transfer records and certain information about your child to the school that your child will be attending (see *Transfer of Records* policy).

### Who we share your data with

In order for us to deliver childcare services we will also share your data as required with the following categories of recipients:

- Ofsted during an inspection or following a complaint about our service
- banking services to process chip and pin and/or direct debit payments (as applicable)
- the Local Authority (where you claim up to 30 hours' free childcare as applicable)
- the government's eligibility checker (as above)
- our insurance underwriter (if applicable)
- our setting software management provider
- the school that your child will be attending

We will also share your data if:

- we are legally required to do so, for example, by law, by a court or the Charity Commission;
- to enforce or apply the terms and conditions of your contract with us;
- to protect your child and other children; for example, by sharing information with social care or the police;
- it is necessary to protect our/or others rights, property or safety

• we transfer the management of the setting, in which case we may disclose your personal data to the prospective buyer so they may continue the service in the same way.

we will never share your data with any other organisation to use for their own purposes

#### How do we protect your data?

We protect unauthorised access to your personal data and prevent it from being lost, accidentally destroyed, misused, or disclosed by:

Storing the information in a secured cabinet where only authorised persons have access to. The computers are locked with a secure password. The information stored on the computer is also accessed by only the authorised persons. Your contact details would be stored in our company email for emergency uses and only authorised persons have access to that as well.

#### How long do we retain your data?

We retain your child's personal data for up to 3 years after your child no longer uses our setting, or until our next Ofsted inspection after your child leaves our setting. Medication records and accident records are kept for longer according to legal requirements. Your child's learning and development records are maintained by us and handed to you when your child leaves.

In some instances, (child protection, or other support service referrals) we are obliged to keep your data for longer if it is necessary to comply with legal requirements (see our Children's and Provider Records policies).

### **Automated decision-making**

We do not make any decisions about your child based solely on automated decision-making.

#### Your rights with respect to your data

You have the right to:

- request access, amend or correct your/your child's personal data
- request that we delete or stop processing your/your child's personal data, for example where the data is no longer necessary for the purposes of processing; and
- request that we transfer your, and your child's personal data to another person

If you wish to exercise any of these rights at any time or if you have any questions, comments or concerns about this privacy notice, or how we handle your data please contact us. If you have continued to have concerns about the way your data is handled and remain dissatisfied after raising your concern with us, you have the right to complain to the Information Commissioner Office (ICO). The ICO can be contacted at Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF or ico.org.uk/

#### Changes to this notice

We keep this notice under regular review. You will be notified of any changes where appropriate.

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

# 10.5 Working in partnership with other agencies

### **Policy Statement**

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

#### **Procedures**

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

This policy was adopted by	Zikora Day Nursery and Preschool

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

# 10.6 Information Sharing

'Sharing information is an intrinsic part of any frontline practitioners' job when working with children and young people. The decisions about how much information to share, with whom and when, can have a profound impact on individuals' lives. It could ensure that an individual receives the right services at the right time and prevent a need from becoming more acute and difficult to meet. At the other end of the spectrum it could be the difference between life and death.'

Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (HM Government 2015)

#### **Policy Statement**

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

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

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

Group provision: The responsibility for decision-making should not rely solely on an individual, but should have the back-up of the management team. The management team provide clear guidance, policy and procedures to ensure all staff and volunteers understand their information sharing responsibilities and are able to respond in a timely, appropriate way to any safeguarding concerns.

The three critical criteria are:

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

#### **Procedures**

Our procedure is based on the seven golden rules for information sharing as set out in *Information Sharing:*Advice for practitioners providing safeguarding services to children, young people, parents and carers (HM Government 2015). We also follow the guidance on information sharing from the Local Safeguarding Children Board.

 Remember that the General Data Protection Regulation (GDPR), Data Protection Act 2018 and human rights law are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.

Our policy and procedures on Information Sharing provide guidance to appropriate sharing of information both within the setting, as well as with external agencies.

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

In our setting, we ensure parents:

- receive information about our Information Sharing Policy when starting their child in the setting and that
  they sign our Registration Form to say that they understand the circumstances in which information may be
  shared without their consent. This will only be when it is a matter of safeguarding a child or vulnerable
  adult;
- have information about our Safeguarding Children and Child Protection Policy; and
- have information about the other circumstances when information will be shared with externalagencies, for example, with regard to any special needs the child may have or transition to school.
  - 3. Seek advice from other practitioners, or your information governance lead, if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.

Our staff discuss concerns about a child routinely in supervision and any actions are recorded in the child's file.

Our Safeguarding children, young people and vulnerable adults policy sets out the duty of all members of our staff to refer concerns to our manager or deputy, as designated person, who will contact children's social care for advice where they have doubts or are unsure.

Our managers seek advice if they need to share information without consent to disclose.

4. Where possible, share information with consent, and where possible, respect the wishes of those who do not consent to having their information shared. Under the GDPR and Data Protection Act 2018 you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be clear of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.

We base decisions to share information without consent on judgements about the facts of the case and whether it is 'in the public interest'.

Our/My guidelines for consent are part of this procedure.

Our manager is conversant with this and he/she is able to advise staff accordingly.

5. Consider safety and well-being: base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.

In our setting, we

- record concerns and discuss these with our designated person and designated officerfrom the management team for child protection matters;
- · record decisions made and the reasons why information will be shared and to whom; and
- follow the procedures for reporting concerns and record keeping as set out in our Safeguarding children, young people and vulnerable adults policy
- 6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.

Our Safeguarding children, young people and vulnerable adults policy set out how and where information should be recorded and what information should be shared with another agency when making a referral.

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

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

#### Consent

When parents choose our setting for their child, they will share information about themselves and their families. This information is regarded as confidential. Parents have a right to be informed that we will see their consent to share information in most cases, aswell as the kinds of circumstances when [we may not seek their consent, or may override their refusal to give consent. [We/I] inform them as follows:

- Our policies and procedures set out our responsibility regarding gaining consent to share information and when it may not be sought or overridden.
- We may cover this verbally when the child starts or include this in our prospectus.
- Parents sign our Registration Form at registration to confirm that they understand this.
- We ask parents to give written consent to share information about any additional needs their childmay have, or to pass on child development summaries to the next provider/school.
- We give parents copies of the forms they sign.
- We consider the following questions when we assess the need to share:
  - Is there a legitimate purpose to us sharing the information?
  - Does the information enable the person to be identified?
  - Is the information confidential?
  - If the information is confidential, do we have consent to share?
  - Is there a statutory duty or court order requiring us to share the information?
  - If consent is refused, or there are good reasons for us not to seek consent, is there sufficient public interestfor usto share information?
  - If the decision is to share, are sharing the right information in the right way?
  - Have we properly recorded our decision?
- Consent must be *informed* that is the person giving consent needs to understand why information will be shared, what will be shared, who will see information, the purpose of sharing it and the implications for them of sharing that information.
- Consent may be *explicit*, verbally but preferably in writing, or *implicit*, implied if the context is such that sharing information is an intrinsic part of our/my service or it has been explained and agreed at the outset.
- We explain our Information Sharing Policy to parents.

#### **Separated parents**

- Consent to share need only be sought from one parent. Where parents are separated, this would normally be the parent with whom the child resides. Where there is a dispute, we will consider this carefully.
- Where the child is looked after, we may also need to consult the Local Authority, as 'corporate parent' before information is shared.

All the undertakings above are subject to ourparamount commitment, which is to the safetyand well-being of the child. Please also see our Safeguarding children, young people and vulnerable adults policy.

## Legal framework

- GDPR and Data Protection Act 2018
- Human Rights Act (1998)

# Further guidance

- Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (HM Government 2015)
- What to do if you're worried a child is being abused: Advice for practitioners (HM Government 2015)
- Working together to safeguard children: A guide to inter-agency working to safeguard and promote the welfare of children (HM Government 2015)

This policy was adopted by	Zikora Day Nursery and Preschool
This policy was adopted by	Zikora Day Nursery and Preschool

Confidential information and records about staff and children must be held securely and only accessible and available to those who have a right or professional need to see them.

## 10.7 Confidentiality and client access to records

# Policy statement

'Share with informed consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, there is good reason to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case.'

Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (HMG 2015)

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. We have record keeping systems in place that meet legal requirements; the means that we use to store and share that information takes place within the framework of the General Data Protection Regulation (GDPR) 2018 and the Human Rights Act (1998).

### **Confidentiality procedures**

- Most things that happen between the family, the child and the setting are confidential to our setting. In
  exceptional circumstances information is shared, for example with other professionals or possibly social care
  or the police.
- Information shared with other agencies is done in line with our Information Sharing Policy.
- We always check whether parents regard the information they share with us to be confidential or not.
- Some parents may share information about themselves with other parents as well as with our staff; we cannot be held responsible if information is shared by 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 are not responsible should that confidentiality be breached by participants.
- We inform parents when we need to record confidential information beyond the general personal information we keep (see our Children's Records Policy) for example with regard to any injuries, concerns or changes in

relation to the child or the family, any discussions with parents on sensitive matters, any records we are obliged to keep regarding action taken in respect of child protection and any contact and correspondence with external agencies in relation to their child.

- We keep all records securely (see our Children's Records Policy).
- Most information is kept in a manual file. However, our staff may use a computer to type reports, or letters.
   Where this is the case, the typed document is deleted from the PC and only the hard copy kept. We do not keep electronic records on children, other than the register and financial data.
- Where it is helpful to keep an electronic copy, we download it onto a disc, labelled with the child's name and kept securely in the child's file. No documents are kept on the hard drive. This is because the settings' PC's do not have facilities for confidential user folders.
- Our staff discuss children's general progress and wellbeing together in meetings, but more sensitive
  information is restricted to our manager and the child's key person, and is shared with other staff on a need to
  know basis.
- We do not discuss children with staff who are not involved in the child's care, nor with other parents or anyone else outside of the setting.
- Our discussions with other professionals take place within a professional framework and not on an informal or ad-hoc basis.
- Where third parties share information about an individual us; our practitioners and managers check if it is confidential, both in terms of the party sharing the information and of the person whom the information concerns.

## Client access to records procedures

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

- The parent is the 'subject' of the file in the case where a child is too young to give 'informed consent' and has a right to see information that our setting has compiled on them.
- Any request to see the child's personal file by a parent or person with parental responsibility must be made in writing to [the operational manager or manager.
- We acknowledge the request in writing, informing the parent that an arrangement will be made for him/her to see the file contents, subject to third party consent.
- Our written acknowledgement allows 40 working days for the file to be made ready.
- A fee of £10.00 may be charged to the parent.
- Our manager informs their line manager and legal advice may be sought before sharing a file/I may seek legal advice before sharing a file.
- Our manager goes through the file with their line manager and ensures that all documents have been filed correctly, that entries are in date order and that there are no missing pages. They note any information, entry or correspondence or other document which mentions a third party.

- We write to each of those individuals explaining that the subject has requested sight of the file, which contains a reference to them, stating what this is.
- They are asked to reply in writing to our manager giving or refusing consent for disclosure of that material.
- We keep copies of these letters and their replies on the child's file.
- 'Third parties' include each family member noted on the file; so, where there are separate entries pertaining to each parent, step parent, grandparent etc., we will write to each of them to request third party consent.
- Third parties also include workers from any other agency, including children's social care and the health
  authority for example. Agencies will normally refuse consent to share information, preferring instead for the
  parent to be redirected to those agencies for a request to see their file held by that agency.
- Members of our staff should also be written to, but we reserve the right under the legislation to override a refusal for consent or to just delete the name of the staff member and not the information. We may grant refusal if the member of staff has provided information that could be considered 'sensitive' and the staff member may be in danger if that information is disclosed; or if that information is the basis of a police investigation. However, if the information is not sensitive, then it is not in [our interest to withhold that information from a parent. In each case this should be discussed with members of staff and decisions recorded.
- When we have received all the consents/refusals our manager takes a photocopy of the complete file. On the
  copy of the file, our manager removes any information that a third party has refused consent for us to disclose
  and blank out any references to the third party, and any information they have added to the file, using a thick
  marker pen.
- The copy file is then checked by the line manager and legal advisors where possible to verify that the file has been prepared appropriately.
- 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'.
- We photocopy the 'clean copy' again and collate it for the parent to see.
- Our manager informs the parent that the file is now ready and invite[s] him/ her to make an appointment to view it.
- Our manager and their line manager/ meet with the parent to go through the file, explaining the process as well as what the content of the file records about the child and the work that has been done. Only the person(s) with parental responsibility can attend that meeting, or the parent's legal representative or interpreter.
- The parent may take a copy of the prepared file away; but, to ensure it is properly explained to and understood by the parent, we never hand it over without discussion.
- It is an offence to remove material that is controversial or to rewrite records to make them more acceptable.

  Our recording procedures and guidelines ensure that the material reflects an accurate and non-judgemental account of the work we have done with the family.
- If a parent feels aggrieved about any entry in the file, or the resulting outcome, then we refer the parent to our complaints procedure.

- The law requires that the information we hold must be accurate. If a parent says that the information we hold is inaccurate, then the parent has a right to request for it to be changed. However, this only pertains to factual inaccuracies. Where the disputed entry is a matter of opinion, professional judgement, or represents a different view of the matter than that held by the parent, we retain the right not to change that entry, but we can record the parent's view of the matter. In most cases, we would have given a parent the opportunity at the time to state their side of the matter, and it would have been recorded there and then.
- If there are any controversial aspects of the content of a child's file, we must seek legal advice. This might be where there is a court case between parents, where social care or the police may be considering legal action, or where a case has already completed and an appeal process is underway.
- We never 'under-record' for fear of the parent seeing, nor do we make 'personal notes' elsewhere.

Telephone advice regarding general queries may be made to The Information Commissioner's Office Helpline 0303 123 1113.

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

#### Legal framework

- Data Protection Act (1998)
- Human Rights Act (1998)

## Further guidance

• Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (HM Government 2015)

This policy was adopted by	Zilcara Day Nursam, and Drasahaal
This policy was adopted by	Zikora Day Nursery and Preschool

Providers must maintain records and obtain and share information to ensure the safe and efficient management of the setting, and to help ensure the needs of all children are met.

#### 10.8 Children's Records

### **Policy statement**

We have record keeping systems in place that meet legal requirements; the means [we/l] use to store and share that information takes place within the framework of the General Data Protection Regulations (GDPR) (2018) and the Human Rights Act (1998).

This policy and procedure should be read alongside our Privacy Notice, Confidentiality and Client Access to Records Policy and our Information Sharing Policy.

#### **Procedures**

If a child attends another setting, we establish a regular two-way flow of appropriate information with parents and other providers. Where appropriate, we will incorporate comments from other providers, as well as parents and/or carers into the child's records.

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

#### Developmental records

- These include observations of children in the setting, photographs, video clips and samples of their work and summary developmental reports.

#### Personal records

These may include the following (as applicable):

- Personal details including the child's registration form and
- Contractual matters including a copy of the signed parent contract, the a record of the child's fees, any fee reminders or

- Child's developmebeintg,—inchluedinaglatsuhmmannnoodlyou/utbelchild's EYFS profile record of discussions about every day mat tbriengrusith taebout parent.
- Early Support including any additional focussed intervention provided by our setting (e.g. support for behaviour, language or development that needs an SEN action plan) and records of any meetings held.
- Welfare and child protection concerns including records of all welfare and protection concerns, and our resulting action, meetings and telephone conversations about the child, an Education, Health and Care Plan and any information regarding a Looked After Child.
- Correspondence and Reports i n c l u d i n g a c o p y o f t h e c h i l d 's 2 Y e a l letters and emails to and from other agencies and any confidential reports from other agencies.
- These confidential records are stored in a lockable file or cabinet, which is always locked when not in use and which our manager keeps secure in an office or other suitably safe place.
- We read any correspondence in relation to a child, note any actions and file it immediately
- We ensure that access to children's files is restrict them, this being [our manager, deputy or designated person for child protection, the child's ke other staff as authorised by our manager/myself and other staff as authorised by me].
- We may be required to hand children's personal files process; or to local authority staff conducting a S11 audit, as long as authorisation is seen. We ensure that children's personal files are not handed over to any
- Parents have access, in accordance with our Privacy Notice, Confidentiality and 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.
- Our staff will not discuss personal information given by parents with other members of staff, except where it
  affects planning for the child's needs. Our staff induction programme includes an awareness of the importance
  of confidentiality in the role of the key person.
- We retain children's records for ; textorer pterecords tenature late totalint er accident or child protection matter, which are kept until a child reaches the age of 21 years or 24 years respectively. These are kept in a secure place.

## rchiving children's files

- When a child leaves our setting, we remove all paper documen files and placenthem he in a robust envelope, with the front and the date then befin be see and this date and place it in an archive box, stored in a safe place (i.e. a locked cabinet) for three years. After three years it is destroyed.
- If data is kept electronically it is encrypted and stored as above.
- Where there were s.47 child protection investigations, we mark the envelope with a star and archive it for 25 years.
- We store financial information according to our finance procedures.

#### Other records

- We keep a daily record of the names of the children we are caring for, their hours of attendance and the names of their key person.
- Students on Pre-school Learning Alliance or other recognised qualifications and training, when they are
  observing in the setting, are advised of our Confidentiality and Client Access to Records Policy and are
  required to respect it.

## Legal framework

- General Data Protection Regulations (GDPR) (2018)
- Human Rights Act (1998)

## Further guidance

• Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (2015)

This policy was adopted by	Zikora Day Nursery and Preschool

Providers must put in place a written procedure for dealing with concerns and complaints from parents and/or carers.

# 11.1 Making a complaint

#### **Policy Statement**

We believe 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 andserious attention to any concerns about the running of the setting. We anticipate that most concerns will be esolved quickly, by an informal approach with the appropriate member of staff. If this does not achieve the desiredresult, we have a set of procedures for dealing with concerns. Weaim to bring all concerns about the running of our setting to a satisfactory conclusion for all of the parties involved.

#### **Procedures**

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

#### Making a complaint

### Stage 1

- Any parent who has a concern about an aspect of our setting's provision talks over his/her concerns with the manager first of all.
- Most complaints should be resolved amicably and informally at this stage.
- We record the issue on the Complaint Record.

### Stage 2

- If this does not have a satisfactory outcome, or if the problem recurs, the parent moves to this stage of the procedure by putting the concerns or complaint in writing.
- For parents who are not comfortable with making written complaints, there is a template form for recording complaints in the Complaint Record; the form may be completed by our manager and signed by the parent.
- Our setting stores all information relating to written complaints from parents in the complaint record.

- When the investigation into the complaint is completed, our manager meets with the parent to discuss the outcome.
- We inform parents of the outcome of the investigation within 28 days of him/her making the complaint.
- When the complaint is resolved at this stage, we log the summative points in our Complaint Record, which is made available to Ofsted on request.

#### Stage 3

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

## Stage 4

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

#### Stage 5

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

The role of the Office for Standards in Education, Children's Services and Skills (Ofsted) and the Local

#### Safeguarding Children Board

- Parents may approach Ofsted directly at any stage of this complaints procedure. In addition, where there
  seems to be a possible breach of the setting's registration requirements, it is essential to involve Ofsted as the
  registering and inspection body with a duty to ensure the Safeguarding and WelfareRequirements of the Early
  Years Foundation Stage are adhered to.
- Parents can complain to Ofsted by telephone on in writing at:

Ofsted National Business Unit, Piccadilly Gate, Store Street, Manchester M1 2WD

Tel: 0300 123 1231

- These details are displayed on our setting's/my notice board.
- If a child appears to be at risk, we follow the procedures of the Local Safeguarding ChildrenBoard.
- In these cases, both the parent and our setting are informed and our manager work with Ofsted or the Local Safeguarding Children Board to ensure a proper investigation of the complaint, followed byappropriate action.

#### Records

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

#### Other useful Pre-school Learning Alliance publications

Complaint Record (2012)

This policy was adopted by Zikora Day Nursery and Preschool	
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