



# **Elmore Kindergarten**

## **Health & Safety (inc First Aid) Policy**

To be Adopted: October 2020

Last Updated: 1<sup>st</sup> October 2021

Review date: March 2022

### **1. Policy Statement**

Elmore Kindergarten believes the health and safety of our children is of paramount importance. We aim to provide a safe, healthy and hygienic environment for children, parents and staff.

- We aim to make children, parents and staff aware of health and safety issues and to minimize the hazards and risks to enable the children to thrive in our environment.
- Our Nursery Managers have overall responsibility for health and safety, who along with other senior staff perform regular daily checks & assessments the nurseries. There is also an appointed Health & Safety Lead within each nursery.
- Staff have been trained to be fully competent to carry out these responsibilities and undertake health and safety training, and they regularly update their knowledge and understanding.
- The Lead Health & Safety Lead completes and submits a monthly H&S Checklist carried out across the nursery (internally/externally)
- Health and safety posters are displayed in the entrance of each nursery.
- Health and safety is always discussed at staff meetings.
- Public and employment liability insurance is in place for each nursery and the annual certificate is displayed in the entrance of each nursery.

### **2. Procedures for health and safety induction training includes:**

- Clear explanations of health and safety issues so all adults adhere to our policies and procedures, understanding their responsibilities for health and safety.
- Employee well-being which includes safe lifting and the use and storage of cleaning materials.
- Records are kept of all induction training, and staff are asked to sign the records to confirm they have read and understood all information shown.

### **3. In order to maintain safety staff will follow these safety procedures:**

- Children will always be supervised by a responsible member of staff and will be kept out of kitchens or areas where hazardous materials and equipment are kept.
- Staff and children will be signed in/out at the time they arrive and leave and nursery.
- Children will only leave with a known authorised adult whose name has been provided by the parents/carer.
- Adults and visitors will also be asked to sign into a visitor's book and signed out when they leave.
- Daily safety checks will be carried out on the premises and equipment, both indoors and outdoors before the start of each session and any issues reported.
- Windows, sockets, heaters and potentially dangerous materials and the layout of activities and equipment (indoors and outdoors) will be closely supervised to minimise hazards.
- All floor surfaces are checked daily to make sure they are not uneven, wet or damaged.
- A minimum of two adults will be present at all times to supervise children – no child is to be left unattended at any time.

- Equipment and activities available to children will take into account the children's age and stage of development.
- All equipment and resources are stored or stacked safely to prevent them accidentally falling or collapsing.
- Every member of staff will know where the first aid boxes are kept; a notice is displayed in the entrance of each nursery stating where they are located.
- The Health & Safety Lead within each nursery will be responsible for checking the contents of the first aid boxes.
- A list of all first aid qualified staff, their usual room location and certificate qualification date is displayed in the entrance of each nursery.
- Accidents and incidents are recorded on Famly by staff, with all relevant information recorded and available to parents who must acknowledge on Famly that they have viewed the report.
- Accident and incident reports will be reviewed monthly and risk assessments updated where necessary.
- Training will be offered to provide and make staff aware of the health & safety policy and to understand its importance.

#### **4. Risk Assessments**

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

The basis of our risk assessment is to follow five steps:

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

Our risk assessment process covers adults and children and Includes:

- Checking for and noting hazards and risks indoors and outside and in our premises and for activities
- Assessing the level of risk and who might be affected
- Deciding which areas need attention
- Developing an action plan that specifies the action required, the timescales for action, the person responsible for the action and any funding required.
- Where more than five staff and volunteers are employed the risk assessment is written and is reviewed regularly.
- We check our site daily before the session; any issues are reported and dealt with as necessary.

Risk assessments are made available to staff on Famly to be regularly reviewed and referred to.

#### **5. Electrical/ Gas Equipment**

- All electrical/gas equipment conforms to safety requirements and is checked regularly.
- Our boiler/electrical switch gear/meter cupboards are not accessible to the children.

- Electric sockets, wires and leads are properly guarded, and the children are taught not to touch them.
- There are sufficient sockets to prevent overloading.
- The temperature of hot water is controlled to prevent scalds.
- Lighting and ventilation are adequate in all areas including storage areas.

## **6. Outdoor Areas**

- All our outdoor areas are securely fenced
- A member of staff will do daily checks removing hazards and rubbish.
- The outdoor setting is cleared and reset by staff and children each night.
- Make sure that all external gates and doors are secure at all times, unless areas with doors are being used for indoor/outdoor provision, then supervision is paramount.
- Children outdoors are supervised at all times.

## **7. Fire Safety**

- Fire extinguishers, call points and fire alarm panels are checked/serviced annually
- CO2 Carbon Monoxide alarms are checked annually.
- Procedures for fire/evacuation drills will be known by the adults and children and displayed in the nursery entrances.
- Fire doors will never be obstructed.
- Fire drills will be carried out termly at varying times during the day by different staff with the time and number of people on site recorded.

## **8. Staff**

- Staff are provided with a step stool to reach up to storage equipment. Chairs or tables must not be used.
- Staff are made aware of lifting and handling procedures through their induction training.
- Staff absence and accidents is recorded and reviewed.
- A record is kept of all hazardous substances (COSHH) such as cleaning chemicals. These state their use, risk and what to do if there is contact with skin, eyes or are ingested
- Chemicals are clearly labelled, kept out of children's reach and stored in a secure cupboard.

## **9. Health Procedures**

- Activities take into account of children's health needs- dietary and physical exercise.
- No smoking will be allowed on the premises or surrounding areas
- Animals in the setting will be fed and watered daily and cages cleaned weekly.
- Children will be encouraged to handle animals and help care for them and hands washed after handling.
- Parents will be required to keep children at home if they have infectious diseases or diarrhoea and sickness - this includes children of staff this is up to 48 hours after the last symptom has occurred.
- Staff will be required to stay off work for 48hrs if they have vomiting and diarrhoea after the last symptom has occurred.
- Parents will be informed if there is any infection such as head lice, scabies, worms, impetigo or childhood infectious diseases which may affect other children, parents, new mums.
- Staff to role model hand washing using anti-bacterial soaps to encourage the children to do the same.
- Cuts and wounds will be dressed appropriately.
- All staff aware of allergies or allergic reactions and how to deal with them.
- All employees are offered healthy working conditions, heating, good toilet facilities, staff room/ rest area, tea/coffee and food making area.

## 10. Hygiene Procedures

- In order to avoid the spread of infection we maintain personal hygiene by following these hygiene procedures.
- Our daily routines and good role modelling by the staff encourage children to learn about personal hygiene.
- Everyone washes their hands with anti-bacterial soap or anti-bacterial bio-guard after using the toilet.
- Individual paper towels will be available and disposed of hygienically.
- Children are encouraged by role modelling and word to put their hands over their mouth when coughing, then to wash hands as necessary.
- Children are encouraged to wash their hands prior to snack and mealtimes.
- Tissues are available and used to blow noses; tissues will be disposed of hygienically, in appropriate bins in the setting or flushed away.
- Clean tables between activities
- Staff regularly cleans and checks the toilets and potties; nappies are disposed of hygienically.
- Staff record each time they have checked and cleaned the toilets.
- Disposable gloves and aprons are used where necessary (we supply both latex and non-latex gloves for our staff.)
- Provide clean clothes for the children.
- Provide wipes and tissues.
- Ensure the individual use of flannels and towels.
- Wash sheets and blankets each night.
- Always wash hands before preparing food.
- Wash raw fruit or vegetables which are to be eaten.
- Not coughing or sneezing near food.
- Store food appropriately- raw and cooked separate; kept covered and refrigerated.
- Ensure cloths for drying crockery and hands are clean and hygienic.
- Use different cleaning cloths for kitchen and toilet areas.
- Keep utensils, crockery and pots clean and undamaged, ready for use.

**If a child or staff member has an accident which results in bleeding or vomit, the following procedure will be followed.**

- Wear disposable gloves and other PPE as need (apron)
- Wash the wound with water.
- Apply a suitable dressing.
- Wrap blood stained tissues or wastepaper in a plastic bag and dispose of it separately to other daily waste.
- Wash blood splashes off the skin with warm soapy water.
- Clean area affected by blood, vomit, urine or faeces with diluted household bleach.
- Waste cleaning materials will be put in plastic bags and disposed of separately to other waste, other children kept away until area is clean
- Clothes, soft toys or soft furnishings stained by body fluids will be washed thoroughly

## 11. Activities and Resources

- Toys or other resources will be washed and sterilized to limit spreading germs or infection.
- All purchased loaned or donated equipment and resources are checked before they are used by the children to make sure they are suitable.
- All equipment and resources are checked regularly to make sure they are clean and safe for the children to use any broken or damaged items are disposed of or repaired.
- All materials, including paint and glue are non-toxic.

- Sand is clean and suitable for the children to use.
- Physical play areas are well supervised. Children are encouraged to handle and store any tools safely.
- Our children learn about health, safety and hygiene through activities we provide at the setting. Any equipment that is faulty or damaged is removed, reported to the day/manager repaired or discarded.

## **12.Special Note RE: HIV/AIDS**

- We will follow the same procedure when dealing with accidents resulting in bleeding vomiting or in cases of diarrhoea and changing nappies.
- No one has the right to know if another person is HIV positive or has AIDS.
- This information should not be shared with anyone else without the permission of the person concerned, and in the child's case the parents/carer.

## **13.Guidance on Infection Control in Childcare Settings**

A poster has been created using the Public Health England guidance 'Infection control in schools and childcare settings' published September 2017 that provides valuable advice as well as information regarding infections and the length of time recommended for children to be kept at home in each case. The poster can be found following this link below or on the 'Parent Hub' page of our [www.elmorekindergarten.com](http://www.elmorekindergarten.com).

[https://www.publichealth.hscni.net/sites/default/files/Guidance\\_on\\_infection\\_control\\_in%20schools\\_poster.pdf](https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools_poster.pdf)

## **14.Reporting of Notifiable Diseases**

If a child or adult is diagnosed suffering from a notifiable disease under the public health (infectious diseases) regulations 1988, the GP will report this to the Public Health England. When the setting becomes aware, or is informed of the notifiable disease, the Manager will inform OFSTED and acts on advice given by the Public Health England.

## **15.Recording and Reporting Accidents or Injuries**

We follow guidelines of reporting injuries, diseases and dangerous occurrences, (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.

## **16.When to Report Accidents or Injuries to Ofsted**

Minor accidents, injuries or illness suffered by child do not need to be reported to Ofsted.

### **Serious Injuries, Accidents and Illnesses**

Ofsted must be informed about any of the following:

- Anything that requires resuscitation
- Admittance to hospital for more than 24 hours
- A broken bone or fracture
- Dislocation of any major joint, such as the shoulder, knee, hip or elbow
- Any loss of consciousness
- Severe breathing difficulties, including asphyxia
- Anything leading to hypothermia or heat-induced illness
- Any confirmed cases of coronavirus (COVID-19) in staff or children

### **Minor Injuries**

Ofsted do not need to be informed about minor injuries, even if treated at a hospital (for less than 24 hours). These include:

- Animal and insect bites, such as a bee sting that doesn't cause an allergic reaction
- Sprains, strains and bruising, for example if a child sprains their wrist tripping over their shoelaces
- Cuts and grazes
- Minor burns and scalds
- Dislocation of minor joints, such as a finger or toe
- Wound infections

### **Eyes**

You must report to Ofsted if a child suffers any loss of sight, whether it is temporary or permanent. You must also tell Ofsted about any:

- Penetrating injury to the child's eye
- Chemical or hot metal burn to the child's eye

### **Substances and Electricity**

If a child suffers any injury from, or requires medical treatment for, any of the following situations you must tell Ofsted:

From absorption of any substance:

- By inhalation
- By ingestion
- Through the skin
- From an electric shock or electrical burn
- Where there is reason to believe it resulted from exposure to:
  - A harmful substance
  - A biological agent
  - A toxin
  - An infected material

## **17. First Aid Training**

In our setting staff are able to take action to apply first aid treatment in the event of an accident involving a child or adult. Every member of staff will attend a 12hr paediatric first aid course within 3 months of joining Elmore Kindergarten, or hold a valid certificate from their previous employment. The qualification is renewed every three years.

## **18. The First Aid Kit**

Our first aid kit complies with the Health and Safety (First Aid) Regulations 1981 and contains the following items only:

- Triangular bandages (ideally at least one should be sterile) - x 4.
- Sterile dressings:
  - Small (formerly Medium No 8) - x 3.
  - Medium (formerly Large No 9) – HSE 1 - x 3.
  - Large (formerly Extra-Large No 3) – HSE 2 - x 3.
- Composite pack containing 20 assorted (individually- wrapped) plasters 1.
- Sterile eye pads (with bandage or attachment) e.g. No 16 dressing 2.
- Container of 6 safety pins.
- Foil blanket x1
- Tweezers
- First aid sheers.
- Guidance card as recommended by HSE 1.

In addition to the first aid equipment, we supply:

- Disposable plastic (PVC or vinyl) gloves.
- A children's contactless thermometer.
- The first aid box is easily accessible to adults and is kept out of the reach of children.
- All staff are first aid trained within three months of employment or hold a valid paediatric first aid certificate.
- First aid boxes are located as a minimum in the Nursery Office, Kitchen and at least one allocated to each age group – therefore shared between physical rooms in some cases.
- We also have three pouches which are used for outings.
- No un-prescribed medication is given to children, parents or staff, including Calpol. Calpol can only be provided in an urgent situation and authorised by the Nursery Manager.
- At the time of admission to the setting, parents' written permission for emergency medical advice or treatment is sought.
- Parents sign a consent form at registration allowing staff to take their child to the nearest Accident and Emergency unit to be examined, treated or admitted as necessary on the understanding that parents have been informed and are on their way to the hospital.

## **19. Accident Reporting**

Accidents and incidents involving children are recorded on Famly. Accidents involving staff are recorded on an 'Accident Form'. If an accident needs to be reported to Ofsted, or any other authority, the report is also recorded on a hard 'Accident Form' and along with any additional supporting documentation, including incidents forms completed by staff, saved centrally in SharePoint.

When reporting an accident staff should ensure the following information is provided:

- Child/staff name involved
- Date and time
- Where the accident occurred
- What caused the accident
- What injuries occurred
- Treatment given
- If medical aid was sought
- Name of the person dealing with the incident
- Name of witness to the accident
- Parents/carers are asked to read and acknowledge on Famly the accident report involving their child

Ofsted will be notified of any serious injury requiring a child or staff member to seek hospital attention or the death of a child or adult.

- We would also make a report to the health and Safety executive using the format for the Reporting of Injuries, Diseases and Dangerous Occurrences. (RIDDOR)
- We would also consult 'Early Years Alliance' for advice.

## **20. Transport to Hospital**

If the Nursery Manager considers it necessary, the injured person will be sent directly to hospital (normally by ambulance). Parents/carers will also be informed. No casualty should be allowed to travel to hospital unaccompanied and an accompanying adult will be designated in situations where the parents cannot be contacted.

## **21. Administration of Medicines**

It is the policy of Elmore Kindergarten to follow the advice of the Local Authority on the administering of medicines within nursery.

Therefore, we would not agree to administer antibiotic medicines or cough medicines to children but would suggest some alternatives to parents/carers.

- The child remains at home until the course of treatment is complete
- To administer medicines before or after the nursery session
- In some circumstances a parent/guardian may make special arrangements with us, to enable them to visit the nursery at a specified time, to administer the medicines to their child.
- Exemptions will be made for children suffering from asthma, epilepsy etc. Asthma inhalers will be kept in a lockable medicine cabinet with the name and picture of the child clearly displayed.
- Information regarding the child's medical needs will be kept on Family. Any medicine information will be photographed and also saved on Family.
- Where risk assessed as necessary training will be put in place for staff who are asked to administer/apply medicines.
- Special arrangements may be needed when children are attending educational visits with the nursery.
- Parents/carers are always welcome to discuss such matters with any member of staff, and each case will be considered on the individual circumstances.

## **22. Medical Health Care Plans**

Medical health care plans are in place for those children with complex medical needs e.g. chronic or on-going medical conditions (e.g. diabetes, epilepsy, anaphylaxis etc.) Staff under-go specific training related to health conditions of children and administration of medicines (e.g. diabetes, epilepsy, anaphylaxis etc.) by a health professional as appropriate. These plans are reviewed as and when informed by parents/carers and written precautions/procedures made available to staff and saved on the child's Family account.

## **23. Dealing with Incidents**

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

- Any accident to a member of staff requiring treatment by a general practitioner or hospital; and
- Any dangerous occurrences. This may be an event that causes injury or fatalities or an event that does not cause an accident but could have done, such as a gas leak.
- Any dangerous occurrence is recorded via incident forms.

## **24. Incident Forms**

We have ready access to contact numbers for emergency services, including local police, gas and electricity emergency services, maintenance and plumbers.

We complete incident forms for recording incidents including those that that are reportable to the Health and Safety Executive as above.

These incidents include:

- Break in, burglary, theft of personal or the setting's property
- An intruder gaining unauthorised access to the premises
- Fire, flood, gas leak or electrical failure
- Attack on member of staff or parent on the premises or nearby
- Any racist incident involving staff or family on nursery premises
- Death of a child
- A terrorist attack or threat of one.



Through incident forms we record:

- Date and time of the incident
- Nature of the event
- Who was affected
- What was done about it
- If it was reported to the police, a crime number.
- Any follow up, or insurance claim made, should also be recorded
- In the unlikely 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 procedures will be followed, and 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 the premises, for example, through cot death in the case of a baby, or any other means involving an older child, the emergency services are called, and the advice of these services are followed.
- Incident forms are not for recording issues of concern involving a child.

	<b>Broomhill Nursery</b>	<b>Ecclesfield Nursery</b>	<b>Middlewood Nursery</b>
<b>Nursery Manager</b>	Amy Chisell Manager	Hollie Snape Manager	Jemma Flanagan Manager
<b>Health &amp; Safety Lead</b>	Joanne Parkin Early Years Practitioner	Danielle Stancil Lead Senior EYP  Chelsea Codd Lead Senior EYP	Kirsty Kay Early Years Practitioner
<b>First Aid Trained</b>	All Elmore Kindergarten staff are paediatric first aid trained in accordance with EYFS Framework.		

## 25. Additional Relevant Policies

Further Elmore Kindergarten and Government policies can be accessed in the Parent Hub section of our website - [www.elmorekindergarten.com](http://www.elmorekindergarten.com)