

**November 2014**

**Health and Safety Policy**

**Statement of intent**

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

We liaise on a regular basis with our early years team for updates to any OFSTED requirements.

**Aim**

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 a healthy and safe environment.

**Methods**

The member of staff responsible for health and safety is The Manager.

She is competent to carry out these responsibilities. She has undertaken health and safety training and regularly updates his/her knowledge and understanding. We display the necessary Health and Safety poster in our kitchen. The settings have had an environmental health check completed.

**Risk assessment**

Our risk assessment process includes:

Checking for hazards and risks indoors and outside, and in our activities and procedures. Our assessment covers adults and children;

This assessment will be carried out daily and weekly and all final assessments and any findings will be dealt with immediately. These will be recorded and any adverse findings communicated to all staff members deciding which areas need attention and developing an action plan that specifies the action required, the timescales for action,

the person responsible for the action and any funding required.

We maintain lists of health and safety issues, which are checked: daily before the session begins; weekly; and termly - when a full detailed risk assessment is carried out.

**Insurance cover**

We have public liability insurance and employers' liability insurance. The certificate for public liability insurance is displayed in the main activity area.

**Awareness raising**

Our induction training for staff and volunteers includes a clear explanation of health and safety issues so that all adults are able to adhere to our policy and understand their shared responsibility for health and safety. The induction training covers matters of employee well being, including safe lifting and the storage of potentially dangerous substances.

Records are kept of these induction training sessions and new staff and volunteers are asked to sign the records to confirm that they have taken part.

Health and safety issues are explained to the parents of new children so that they understand the part played by these issues in the daily life of the setting.

As necessary, health and safety training is included in the annual training plans of staff, and health and safety is discussed regularly at staff meetings.

We have a no smoking policy on the site and in accordance with current legislation.

Children are made aware of health and safety issues through discussions, planned activities and routines.

**Children's safety**

We ensure all staff employed have been checked for criminal records by an enhanced disclosure from the Disclosure and Barring Service (DBS).

Adults do not normally supervise children on their own. All children are supervised by adults at all times.

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

**Security**

Systems are in place for the safe arrival and departure of children. The times of the children's arrivals and departures are recorded as detailed in our daily register

All children who are to be picked up by someone else will have to sign a book of collection and will also need to quote a password which has been given by the parents as a security code.

The arrival and departure times of adults - staff, volunteers and visitors - are recorded in the register and also in the Visitors Book.

Our systems prevent unauthorised access to our premises. Our systems prevent children from leaving our premises unnoticed. The personal possessions of staff and volunteers are securely stored during sessions.

**Doors and floors**

We take precautions to prevent children's fingers from being trapped in doors. Floors are kept safe from slippage and dangerous obstacles. All surfaces are checked daily to ensure they are clean and not uneven or damaged.

**Kitchen**

Children do not have unsupervised access to the kitchen. All surfaces are clean and non-porous. Cleaning materials and other dangerous materials are stored out of children's reach. When children take part in cooking activities, they are supervised at all times; are kept away from hot surfaces and hot water; and do not have unsupervised access to electrical equipment.

**Electrical/gas equipment**

All electrical/gas equipment conforms to safety requirements and is checked regularly.

Our boiler/electrical switchgear/meter cupboard is not accessible to the children.

Fires, heaters, electric sockets, wires and leads are properly guarded and the children are taught not to touch them.

Storage heaters are checked daily to make sure they are not covered.

There are sufficient sockets to prevent overloading. The temperature of hot water is controlled to prevent scalds. Lighting and ventilation is adequate in all areas including storage areas.

**Storage**

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

**Outdoor area**

Our outdoor area is securely fenced.

Our outdoor area is checked for safety and cleared of rubbish before it is used.

Adults and children are alerted to the dangers of poisonous plants, herbicides and pesticides.

All the area is risk assessed on a daily basis with an adult witnessing that this has taken place

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

**Hygiene**

We regularly seek information from the Environmental Health Department and the Health Authority to ensure that we keep up to date with the latest recommendations.

Our daily routines encourage the children to learn about personal hygiene. We have a daily cleaning routine for the setting, which includes the main room, kitchen, toilets and nappy changing areas. We have a schedule for cleaning resources and equipment, dressing-up clothes and furnishings.

The toilet area has a high standard of hygiene including hand washing and drying facilities and the disposal of nappies.

* We implement good hygiene practices by:
* cleaning tables between activities;
* checking toilets regularly;
* wearing protective clothing - such as aprons and disposable gloves - as appropriate;
* providing sets of clean clothes;
* providing tissues and wipes;

**Activities**

Before purchase or loan, equipment and resources are checked to ensure that they are safe for the ages and stages of the children currently attending the setting.

The layout of play equipment allows adults and children to move safely and freely between activities.

All equipment is regularly checked for cleanliness and safety and any dangerous items are repaired or discarded.

All materials - including paint and glue - are non-toxic. Sand is clean and suitable for children's play. Physical play is constantly supervised. Children are taught to handle and store tools safely.

Children who are sleeping are checked regularly. Children learn about health, safety and personal hygiene through the activities we provide and the routines we follow.

**Food and drink**

Staff who prepare and handle food receive appropriate training and understand - and comply with - food safety and hygiene regulations.

All food and drink is stored appropriately.

Adults do not carry hot drinks through the play area and do not place hot drinks within reach of children.

Snack and meal times are appropriately supervised and children do not walk about with food and drinks. Snack is given that is healthy and nutritious and which is checked against children’s allergies.

Fresh drinking water is available to the children at all times.

We operate systems to ensure that children do not have access to food/drinks to whichthey are allergic.

**Outings and visits**

We have agreed procedures for the safe conduct of outings. Parents sign a general consent on registration for their children to be taken out as a

part of the daily activities of the setting. Parents always sign consent forms before major outings. A risk assessment is carried out before an outing takes place. Our adult to child ratio is high, normally one adult to three children.

Named children are assigned to individual staff to ensure each child is individually supervised and to ensure no child gets lost and that there is no unauthorised access to children.

Outings are recorded in an outings record book stating the date and item of outing the venue and mode of transport names of staff assigned to named children time of return

Staff takes a mobile phone on outings, and supplies of tissues, wipes, pants etc. as well as a mini first aid pack, a snack and water.

The amount of equipment will vary and be consistent with the venue and the number of children as well as how long they will be out for.

Records are kept of the vehicles used to transport children, with named drivers and appropriate insurance cover.

A minimum of two staff should accompany children on outings and a minimum of two should remain behind with the rest of the children.

**Missing child (also see Safety – section c)**

If a child goes missing from the setting the person in charge will immediately carry out a thorough search of the building and garden.

The register is checked to make sure no other child has also gone astray.

Doors and gates are checked to see if there has been a breach of security whereby a child could wander out.

Person in charge talks to staff immediately to establish what happened

If the child is not found the parent is contacted and the missing child is reported to the police.

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

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

The person in charge is informed, if s/he is not on the outing and makes his/her way to the venue to aid the search and be the point of contact for the police as well as support staff.

Staff takes the remaining children back to the setting. The person in charge of the setting contacts the child's parent who makes their way to the setting or outing venue as agreed with the person in charge. The staff contacts the police using the mobile phone and report the child as missing.

In an indoor venue, the staff contacts the venue's security who will handle the search and contact the police if the child is not found.

The person in charge contacts the chairperson of the management committee who comes down to the setting as soon as possible.

**The investigation**

The manager carries out a full investigation taking written statements from all the staff present at the time, or who were on the outing.

The key person/ staff writes an incident report detailing the date and time of the report, what staff/ children were in the group/outing, when the child was last seen in the group/outing;

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

A conclusion is drawn as to how the breach of security happened.

If the incident warrants a police investigation all staff co-operate fully. In this case, the police will handle all aspects of the investigation, including interviewing staff. Social Services may be involved if it seem

is likely that there is a child protection issue to address.

The incident is reported to the Early Years advisers and is recorded in the incident book; the local authority health and safety officer may want to investigate and will decide if there is a case for prosecution.

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

**Animals**

Animals visiting the setting are free from disease and safe to be with children, and do not pose a health risk.

Our setting's pets are free from disease, safe to be with children, and do not pose a health risk.

Children wash their hands after contact with animals.

Outdoor footwear worn to visit farms are cleaned of mud and debris and should not be worn indoors or should be cleaned before entering

**Fire safety**

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

Smoke detectors/alarms and fire fighting appliances conform to BSEN standards, are fitted in appropriate high risk areas of the building and are checked as specified by the manufacturer.

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 any visitors to our setting

fire drills are practiced regularly at least once every six weeks but several times to cover all children at different sessions

Records are kept of fire drills within an evaluation book and also clearly marked on the daily register and evidence of the servicing of fire safety equipment is documented.

**First aid and medication**

At least one member of staff with current first aid training is on the premises or on an outing at any one time. The first aid qualification includes first aid training for infants and young children.

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

At the time of admission to the setting, parents' written permission for emergency medical advice or treatment is sought. Parents sign and date their written approval.

Parents sign a consent form at registration allowing staff to take their child to the nearest Accident and Emergency unit to be examined, treated or admitted as necessary on the understanding that parents have been informed and are on their way to the hospital.

**Our accident records**

Accident sheets are kept on file, all staff and volunteers know where they are kept and how to complete the form; accidents are reviewed at least half termly to identify any potential or actual hazards.

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

Ofsted are informed.

**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 in our Incident Book. See below. Information for reporting the incident to Health and Safety Officer is detailed in the Pre school Learning Alliance's publication, Accident Record.

**Our Incident Book**

We keep an incident book 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; - fire, flood, gas leak or electrical failure, attack on member of staff or parent on the premises or near by, any racist incident involving a staff or family on the settings premises, death of a child, and a terrorist attack, or threat of one, damage to property by a child

In the incident book we record the date and time of the incident, nature of the event, who was affected, what was done about it - or if it was reported to the police, and if so a crime number. Any follow up, or insurance claim made, should also be recorded.

In the unlikely even of a terrorist attack we follow the advice of the emergency services with regard to evacuation, medical aid and contacting children's families. Our standard Fire Safety Policy will be followed and staff will take charge of their key children. The incident is recorded when the threat is averted.

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.

The incident book is not for recording issues of concern involving a child. This is recorded in the child's own file.

**Administration of medication**

Only prescribed medication may be administered. It must be in-date and prescribed for the current condition.

Children taking prescribed medication must be well enough to attend the setting. Children's prescribed drugs are stored in their original containers, are clearly labeled and are inaccessible to the children

Parents give prior written permission for the administration of medication. This states the name of the child, name/s of parent(s), date the medication starts, the name of the medication and prescribing doctor, the dose and times, or how and when the medication is to be administered.

The administration is recorded accurately each time it is given and is signed by staff. Parents sign the record book to acknowledge the administration of a medicine

If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.

**Sickness**

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

We do not provide care for children who are unwell, have a temperature, or sickness and diarrhea, or who have an infectious disease.

Children with headlice are not excluded, but must be treated to remedy the condition.

Parents are notified if there is a case of headlice in the setting.

Parents are notified if there is an infectious disease, such as chicken pox.

HIV (Human Immunodeficiency Virus) may affect children or families attending the setting. Staff may or may not be informed about it.

Children or families are not excluded because of HIV. Good hygiene practice concerning the clearing of any spilled bodily fluids is carried out

at all times.

Staffs suffering from sickness and diarrhoea do not handle food.

Ofsted is notified of any infectious diseases that a qualified medical person considers notifiable.

**Safety of adults**

Adults are provided with guidance about the safe storage, movement, lifting and erection of large pieces of equipment.

When adults need to reach up to store equipment or to change light bulbs they are provided with safe equipment to do so.

All warning signs are clear and in appropriate languages.

Adults do not remain in the building on their own or leave on their own after dark. The sickness of staff and their involvement in accidents is recorded. The records are reviewed termly to identify any issues that need to be addressed.

**Records**

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

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

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

In addition, the following procedures and documentation in relation to health and safety are in place:

*National Standard 6: Safety*

Risk assessment. Record of visitors. Fire safety procedures. Fire safety records and certificates. Operational procedures for outings. Vehicle records including insurance. List of named drivers.

*National Standard 7: Health*

Administration of medication,prior parental consent to administer medicine.

Record of the administration of medicines.

Prior parental consent for emergency treatment. Accident record. Sick children.

No smoking.