Section 4. Health

**Safeguarding and Welfare Requirements: Health**.

Providers must have and implement 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.

4.1 Administering medicines

4.2 Managing children who are sick, infectious, or with allergies

4.3 Recording and reporting of accidents and incidents

4.4 First Aid

4.4 Nappy changing

4.5 Food and drink

4.6 Food hygiene

4.7 Sun safety

4.8 Staff medicine

Every Child Matters-supporting the 5 outcomes

Be Healthy

Stay Safe

Safeguarding and Welfare Requirements: Health

Providers must have and implement 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.

**4.1 Medicine Administration**

**Policy Statement**

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

**Procedures**

* Children taking prescribed medicine must be well enough to attend the setting.
* Only medication prescribed by a doctor (or other medically qualified person) is administered. The only exception to this would be topical creams for ongoing skin conditions such as eczema where over the counter creams can be used with written consent.
* The medicine must be in date, in the original containers and clearly labelled with the child’s details.
* Parents must complete a Medication Consent form giving written permission for the administration of medication. The Medication Consent form contains the following details;
* Full name and date of birth of the child
* Name of the medication
* Who prescribed it
* The dosage to be given in the setting
* Where the medication should be stored
* Names of staff to administer
* Signature of the parent
* The administration of medication is recorded accurately including name and dosage of the medication, time to be given and when given, is signed and witnessed. The parent/carer must sign the Medication Administration sheet to acknowledge the administration of a medicine. Medication is to be returned at end of session/day if appropriate.

**Storage of medicines**

* All medicines are stored safely either in the locked medication cabinet or office refrigerator as required.
* Medication is to be returned at end of session/day if appropriate.
* Inhalers to be stored in individual zip bags in a box on a high shelf within the appropriate room.
* If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional

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

* A Health Care Needs Risk assessment is carried out for each child with long term medical needs that require ongoing medication. This is the responsibility of the Manager.
* The parents will contribute to the Risk Assessment; they will be shown around the setting, understand the routines and activities and point out anything they identify as a risk for their child.
* For some medical conditions, key staff will need to have training in the understanding of the condition as well as any medication administration. This will form part of the risk assessment. A training record will be kept and updated as required.
* The risk assessment highlights the measures put in place by the setting to the child’s needs are met and any risks are reduced.
* The Risk Assessment will include taking medicines out on outings seeking advice from parents & health professionals if required.
* The Health Care plan and any Emergency Plan is drawn up by a Health Professional and the parents and shared with the Preschool.
* All staff will have a copy of the settings Allergies/medical list, and all emergency plans for children in the setting.
* The Health Care Plan will be reviewed every six months or more frequently if required.

**Managing medication on outings**

* If going out on an outing, which is outside the school site, staff accompanying the child must include the key person for the child with a Health Risk Assessment and the manager or deputy, and another staff member who is fully informed about the child’s needs and had the relevant medication training.
* Medication for a child is taken in a clear zip bag, clearly labelled with the child’s name. Inside the zip folder will also include a copy of the Medication Administration parental consent form and a blank Medication Administration sheet.
* If any medication is administered on outings the parent’s signature will be sought at the end of the session.
* If emergency medication is administered on an outing the Emergency Plan will be followed.
* If a child on medication has to be taken to hospital the child’s medication is taken in the zip folder along with the signed Medication Administration parental consent form.

This procedure works alongside our Outings Policy in Section

**6.0 Safety and Suitability of Premises, Environment and Equipment**

**Safeguarding and Welfare Requirements**: Health

The provider must promote the good health of the 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.

**4.2 Managing children who are sick, infectious, or with allergies**

**Policy statement**

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

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

* If children appear unwell during the day- have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach- the parents will be called to collect their child, or send a known carer to collect their child on their behalf.
* If a child has a temperature, they are kept cool, by removing some clothing and giving a cool drink. They are made comfortable and kept away from draughts but not wrapped in blankets which could raise the body temperature further.
* The child’s temperature will be taken at regular intervals until parents arrive.
* A child who has vomited or is suffering from diarrhoea will be cared for away from the other children until they can be collected, to minimise spreading of illness.
* In extreme cases of emergency, the child will be taken to hospital and the parents contacted.
* Parents are asked to keep their children at home if they have any infection, and to inform the pre-school as to the nature of the infection. This will allow the pre-school to alert other parents as necessary and to make careful observations of any child who seems unwell.
* Parents are asked not to bring into the pre-school any child who has been vomiting or had diarrhoea until at least 48 hours has elapsed since the last episode.
* Children needing regular doses of medication to reduce pain or fever, such as paracetamol suspension, should stay at home.
* Where children have been prescribed antibiotics parents are asked to keep them at home for 48 hours before returning to the setting to ensure there are no adverse side effects from the antibiotics and the child is well enough.
* The setting has a list of excludable diseases and current exclusion times; this is obtainable from Gov.uk; Public Health England; this publication includes information on childhood diseases

**Reporting of ‘notifiable diseases’**

* If a child or adults is diagnosed as suffering from a notifiable disease under Health Protection Notification Regulations 2010, the GP will report it to Public Health England.
* When the setting becomes aware, or is formally informed of the notifiable disease, the manager informs OFSTED and acts on any advice given by Public Health England.

**Head lice**

* Head lice are not an excludable condition, although in exceptional cases a parent may be asked to keep the child away until an infestation has cleared up.
* On identifying cases of head lice, an accident /incident form is completed and the parents are informed. Parents sign the sheet and are advised to treat their child before their next session.
* Parents are advised to remain vigilant by regularly combing children’s hair through with conditioner and a nit comb.
* Staff members finding infestation of their own hair must treat and clear the problem before returning to work.

**Procedures for children with allergies**

* All new families are required to complete a registration pack recording any allergies their child has.
* If a child has a severe allergy, such as nuts, eggs or bee stings, a risk assessment is carried out to detail the following;
* The allergen
* The nature of the allergic reaction e.g. anaphylactic shock, including rash, reddening or swelling, breathing problems etc.
* What to do in case of a allergic reaction including any medication
* Control measures; preventing the child from coming into contact with the allergen
* Review date
* All details are added onto the allergies list for all staff; including emergency plans
* Busy Bees Preschool is a Nut Free setting; all parents are made aware of this prior to starting.
* Lunch boxes will be checked for nut products and alternative foods given if necessary.

**Further Guidance**

* Managing Medicines in Schools and Early Years Settings (DFE 2005) check for new one
* Statutory Framework for the Early Years Foundation Stage.

**Safeguarding and Welfare Requirements**: Health

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

**4.3 Recording and Reporting of accidents and incidents**

**Policy statement**

We follow guidelines of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations – RIDDOR- for the reporting of accidents and incidents. We also record minor incidents and accidents to enable us to communicate these to parents as appropriate.

**Procedures**

Our accident books;

* There is an accident record in both rooms which are kept on a clipboard in a secure place
* They are accessible to staff and volunteers, who all know how to complete them, as part of their induction.
* All accident sheets are completed and signed by the person who saw the accident and also by a witness. If there was no witness the staff member must report the incident directly to the Room Leader.
* All accident sheets are signed by parents at the end of each session.
* In the event of no signature being collected the Room Leader must telephone the parent/carer the same day, as soon as possible to advise the parent of the accident and collect a signature during the child’s next session.
* Childminders who collect a child must sign the sheet and be given a copy of the accident form to pass to the parent/carer

Accidents which must be recorded:

* A bump to the head. A qualified first aider should check this type of injury and regular observations taken of the child throughout the day The room leader will take responsibility for this.
* Any cut which requires medical attention including applying dressings or plasters.
* A bite or other physical injury from one child to another should be recorded on an Accident sheet and in the incident book as well as the Manager/Deputy being informed so that the parents/carers can be notified as appropriate.
* Any accident that leaves a physical mark on the skin.
* Any accident that a practitioner thinks that the parent/carer should be made aware of ie. Winded, choking, extremely upset
* The Accident Sheets will comply with the Data Protection Act 1998 which states that personal details entered into accident books/sheets must remain confidential. Each page can be removed and is stored in a secure location.
* Accidents involving staff, volunteers, visitors and parents/carers need to be recorded in the accident book which is kept in the office

**Incident book;**

A notebook will be provided on a daily basis to note down any incidents that occurred during the session. Incidents do not require a parent signature.

Incidents to be noted could take the form of the following:

* A disagreement between children.
* A fall which leaves no marks.
* An emotional child and the reasons behind why they became emotional ie. tired or wanted Mummy.
* A situation where a practitioner had to intervene physically to prevent a child hurting themselves, hurting others or seriously damaging property.

**Setting incident reports**

The setting has access to telephone numbers for emergency services, including the local police and the Wiltshire Council Emergency contacts for critical incidents.

In the event of any of the following incidents happening the Manager or Deputy in her absence will complete a setting incident report.

* A break in, or theft of personal belongings in the setting
* An intruder gaining unauthorised access to the premises
* A fire, flood, gas leak or electrical failure
* Any racist incident involving staff or parents on the premises
* An attack on a member of staff or parent on the premises or nearby
* A notifiable disease or illness, or an outbreak of food poisoning affecting 2 or more children
* The death of a child or adult
* The setting incident sheet includes information about the date and time of the incident, who the incident involves, the nature of the incident and what actions need to be taken as a result of the incident
* The incident record is not used to record any incident involving a child. This is recorded on an accident sheet, daily incident book or if it is a child protection issue shared with the Child Protection Officer, Nikki Dawkins, and the necessary paperwork completed.

**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 the premises;
* As serious incident or injury to, or serious illness of, a child in our care and the action we take in response; and
* The death of a child in our care

Local child protection agencies are informed of any serious accident or injury to a child, or the death of any child, while in our care and we act on any advice given by those agencies.

The Wiltshire Psychological Service & Early Years Intervention Team are also informed when a critical incident occurs. A critical incident is classified as an event that is likely to have a wide impact on a community and a settings learning environment. A Critical Incident is generally unexpected and is ***an event that will be received with an emotional response***. This service will support the setting team to work through the incident and advice the setting how to inform parent’s carers and deal with press on the settings behalf.

Critical Incidents include;

* A child, staff member or volunteer lost or injured on site or on an outing/trip
* Staff suicide
* Serious physical attack on a child or staff member
* Terminal illness of child or staff member
* Sudden death of a child or staff member

The emergency contact details are always above the phone in the office; the Red Folder with More information is located near the phone.

Busy Bees Preschool meets our legal requirements in respect of the safety of our employees and the public by complying with RIDDOR. We report the following events to the Health and Safety Executive;

* any work related accident leading to the injury of a child or adult, for which they are taken to hospital
* any work related injury to a member of staff, which results in them being unable to work for seven consecutive days
* when a member of staff suffers from a reportable work related disease or illness’
* any death, of a child or adult , that occurs in the setting or on an outing
* any events that cause dangerous occurrences that may result in injuries or fatalities, such as a gas leak

Legal Framework

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations –RIDDOR- 2013

All RIDDOR report forms are available from [www.hse.gov.uk/riddor](http://www.hse.gov.uk/riddor)

**Safeguarding and Welfare Requirements**: 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.

**4.4 First Aid**

**Policy Statement**

At Busy Bees Preschool, staff are able to take action to apply first aid treatment in the event of an accident. At Busy Bees Preschool there will be a minimum of three members of staff with Paediatric training; two on site at all times. All other staff are strongly encouraged to undertake Paediatric First Aid training. We strive to have all staff First Aid trained.

**Procedures**

* There are first aid kits in both Red and Blue Room and a travel first aid bag for outings
* The first aid kits comply with the Health and Safety (First Aid) Regulations 1981;
* First Aid kits are checked termly by the Health and Safety officer, Emma Thompson, and re-stocked as necessary;
* First aid boxes are easily accessible to adults; and are kept out of the reach of children.
* We will administer hypoallergenic plasters if the need arises. Parents who are aware of an allergy to this type of plaster should advise the pre-school when completing their child’s registration form.
* At the time of admission to the pre-school, parents’ written permission for emergency medical advice or treatment is sought. Parents sign and date their written approval.

**Legal Framework**

Health and Safety (First Aid) Regulations – 1981

Further Guidance can be sought from www.**hse**.gov.uk

**Safeguarding and Welfare Requirements**: Health

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

**4.5 Nappy Changing**

**Policy Statement**

No child is excluded from attending the setting if they are not yet toilet trained and wearing nappies. We work with parents towards toilet training when the child is developmentally ready to do so.

We provide nappy changing facilities and exercise good hygiene practises in order to accommodate children who are not yet toilet trained.

**Procedures**

* Routine nappy changes will be completed by the child’s Key person or other familiar adults from within the room.
* Details of self-care routines are discussed with the child’s parent at stay and play sessions; and ongoing.
* Changing area is safe, private and warm for children.
* Parents are to provide nappies/pull ups and wipes for their child; the preschool will have supplies in case a parent forgets to bring them.
* All staff are familiar with the hygiene procedures and carry these out when changing nappies; this includes using a waterproof mat, new gloves and apron for each child, laying paper towel for the child to lay on and cleaning the area before and after each change.
* Nappies and pull ups are individually bagged and disposed of in the nappy bins which are emptied daily.
* Soiled and wet clothes are bagged (double wrapped if necessary) and sent home to parents. We do not attempt to rinse out wet or soiled clothing as we do not have the facilities to do this hygienically.
* Children’s independence is promoted during self-care routines to boost children’s confidence and self-esteem.
* Adults to be respectful and gentle at all times when changing children.
* All nappy or clothing changes are witnessed by a second person who will be discreetly nearby, allowing the child privacy during change times; following the settings Safeguarding procedures.
* Children are encouraged to use the toilet or explore the toilet area when they show curiosity to do so.
* Routine changes occur during each session or as required; children are not knowingly left in wet or soiled nappies/pull ups/clothes.
* Children are to be lifted safely by placing hands under the arms of the child and not pulling their arms. When bending or lifting children staff should follow health and safety advice and bend knees keeping their back straight.
* Red room have a dedicated changing area within the room. Blue room children are changed within the children’s toilets to promote an interest in using the toilet. The cubical furthest from the door is used as much as possible to maximise privacy for the child.

**Safeguarding and Welfare Requirements**: Health

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

**4.6 Food and drink**

**Policy Statement**

The sharing of refreshments can play an important part in the social life of the preschool as well as teaching children about the importance of healthy eating.

At snack time we aim to provide nutritious food, which meets the children’s individual dietary needs.

**Procedures**

* Before a child attends the group, staff discusses with parents the child’s dietary needs, including any allergies or cultural needs and makes appropriate arrangements to meet them. See *Managing children who are sick, infectious or with allergies* policy
* Dietary information is recorded in the Registration pack filled in by parents and discussed with the preschool manager/deputy.
* Allergies lists are available to staff at all times; information is checked regularly (termly) with parents to ensure they are kept up to date.
* We implement systems to ensure that children with any allergies only receive food and drink that is consistent with their individual dietary needs. During snack or lunch when there is a child with a Health Risk Assessment there will always be an allergy trained member of staff present.
* All meals and snacks provided are nutritious, avoiding large quantities of fat, sugar, salt, additives, preservatives and colourings. Drinks offered are milk or water. Rarely and only on some special occasions such as a party will children be offered squash with no added sugar.
* Water is constantly available and children are encouraged to drink throughout the day.
* The dietary rules of religious groups and also of vegetarians/vegans are known and met in appropriate ways. The pre-school will ensure information is gathered regarding cultural diets/eating to ensure sensitivity and understanding by all staff and so that our snacks are reflective of the cultures of children that attend our setting.
* The Preschool is a nut free setting
* Parents providing packed lunches will be advised about safe storage at registration, in the parent/carer welcome pack and within the packed lunch leaflet.
* Milk provided is fresh, pasteurised and semi-skimmed according to the current government advice and guidelines.
* We use snack times to help children to develop independence through making choices, helping to prepare snacks, pouring drinks and tidying up.
* Food and milk stored in the fridges is checked daily to ensure it is within date and showing no signs of spoiling.
* After each snack time left overs are disposed of. Opened packets of dry snacks should be kept in an air tight container or suitable food storage bag.

**Packed lunches**

* We provide parents with information about the settings healthy eating ethos and suggestions of what to put into a packed lunch and recommend that they provide an ice pack to keep the food cool.
* Children are allowed to bring warm food in a thermos container and staff will ensure the food is not too hot to eat. Higher risk food products such as rice and chicken are discouraged.
* Busy Bees Preschool will not heat up foods brought in from home.
* We provide children with packed lunches with plates, cups and cutlery if required.

**Safeguarding and Welfare Requirements**: Health

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

**4.7 Food Hygiene**

**Policy Statement**

Busy Bees preschool maintains the highest possible food hygiene standards with regard to the purchase, storage, preparation and serving of snacks and cooking activities.

**Procedures**

Our pre-school promotes a healthy lifestyle and a high standard of hygiene in its day to day work with children and adults. This is achieved in the following ways:

* The pre-school will observe current legislation regarding food hygiene, registration and training.
* Any member of staff handling food will have appropriate in-house training and at least two members of staff in the setting will hold a current Basic Food Hygiene Certificate.

In particular, each adult will:

* Always wash hands under running water before handling food and after using the toilet.
* Not be involved in the preparation of food if suffering from any infectious/contagious illness or skin trouble.
* Wear appropriate protective clothing; blue apron and blue disposable gloves.
* Food preparation areas will be cleaned before and after use
* Waste food is disposed of daily
* All utensils, plates etc. are clean and stored appropriately
* Cleaning materials are kept out of reach of children on high shelves.
* The pre-school is a non-smoking environment.
* Prepare raw and cooked foods in separate areas.
* Keep food covered and either refrigerated or piping hot when appropriate.
* Label food once it has been opened to ensure ‘use by’ and ‘best before date’ and ‘storage instructions’ are adhered to.

When children take part in cooking activities, they;

* Are supervised at all times
* Understand the importance of washing hands and simple hygiene rules,
* Are kept away from hot surfaces, water and cooking equipment
* Are supervised when using any electrical equipment

**Reporting of food poisoning**

* The pre-school will notify Ofsted immediately of any food poisoning affecting two or more children looked after on the premises or within 14 days at the latest.

**Legal Framework**

Regulation 852/2004 of the European Parliament and of the COUNCIL ON THE Hygiene of Foodstuffs

**Further guidance available from** www.**food**.gov.uk

**4.7 Sun safety**

**Policy statement**

We are aware of the dangers of exposing a young child to direct sunlight. During sunny weather, children either will not go outside where possible when the sun is at its strongest (usually between 11 am and 1 pm) or we will make use of shaded areas outside to avoid the sun’s dangerous UV rays. If they do, we will ensure that there is a shady area available.

**Procedures**

Relevant posters will be displayed during the hot weather and children will be educated through stories and circle time about ‘playing safe in the sun’. Where possible, safety advice will be made available in the parent’s area and through talks by the local Health Visitor.

At Busy Bees we aim to:

* Protect – providing an environment that enables children and staff to stay safe in the sun.
* Educate – learning about sun safety to increase knowledge and influence behaviour.
* Collaborate – working with parents/carers and children to reinforce awareness about sun safety at Busy Bees.
* Children and staff are encouraged to wear hats outside and preferably tops that cover their shoulders. Hats should be clearly marked with the child’s name.
* Children will be encouraged to apply cream themselves and staff will support and discuss the dangers of the sun with them as part of the daily routine. Stay Safe (Every Child Matters) 2003.
* Drinking water will be available to the children throughout the session, and on any trips around the local community

All parents/carers are advised to apply sun cream (factor 15+) to their children **before** arriving at pre-school. Children playing out in the sun will have sun cream applied prior to the outing by a staff member. Sun cream at the setting must be provided by parents and clearly named. You will be requested to sign a consent form for the application of sunscreen during registration, however it is the parents responsibility to provide it.

Safeguarding and Welfare Requirements: Staff taking medication/other substances

Providers must ensure that those practitioners (taking medication) only work directly with children if medical advice confirms that the medication is unlikely to impair that staff member’s ability to look after children properly. Staff medication on the premises must be securely stored, and out of reach of children, at all times.

**4.8 – Staff Medicine**

**Policy Statement**

Any staff member who is taking any medication must ensure that they are fit for work and that the medication does not affect their ability to care for children. It must be stored and consumed safely.

**Procedures**

* Staff needing to take any prescribed medicine must complete a Staff Medication form. This details the nature of the medicine, what it is for and how it must be taken. This form must be signed by both the staff member and manager or deputy and filed in the Medication folder.
* The medicine must be in date, in the original containers and clearly labelled with the staff member’s details. Management reserve the right to inspect medication if it is felt necessary.
* Non-prescription medicines such as cough and cold remedies or over the counter painkillers may be used whilst at Busy Bees and do not require a Staff Medication form. However they are subject to the same procedures with regards to storage and consumption.
* With the exception of emergency medication such as inhaler or epi-pen, all medication must be stored either locked in the preschool medicine cabinet, locked in staff locker or in the staff fridge if necessary. Medication must ***never*** be kept in coat pockets or any other place on your person.
* Emergency medication such as inhaler or epi-pen should be kept in the room where the staff member normally works in a box or zip wallet, on a high shelf out of children’s reach.
* Medicines must be consumed in the office or within the disabled toilet.
* Medicines must ***never*** be taken into either room or any areas which children use.

Section 4. Health

This policy was adopted at a meeting of Busy Bees Preschool

Signed by Manager

Signed by Officer Date;