



GREAT TEW PRE-SCHOOL

**POLICIES
&
PROCEDURES
2025 / 2026**



GREAT TEW PRE-SCHOOL

These policies were adopted by:	Great Tew Pre-School
On:	October 2025
Date to be reviewed:	October 2026
Signed on behalf of the provider:	
Name of signatory:	Alexa Jolly
Role:	Chair

Key Contact Details

Gemma Carpenter	manager@greattewpreschool.com
Alexa Jolly	chair@greattewpreschool.com
Amy Richardson	vicechair@greattewpreschool.com



1.1 Children's rights and entitlements

Policy statement

- We promote children's right to be strong, resilient and listened to by creating an environment in our setting that encourages children to develop a positive self-image, which includes their heritage arising from their ethnicity, their languages spoken at home, their religious beliefs, cultural traditions and home background.
- We promote children's right to be strong, resilient and listened to by encouraging children to develop a sense of autonomy and independence.
- We promote children's right to be strong, resilient and listened to by encouraging them to develop their self-confidence and the vocabulary to resist inappropriate approaches.
- We support children to establish and sustain satisfying relationships within their families, with peers, and with other adults.
- 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*'.

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 able to 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 as aspects of key decisions that affect their lives.

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;
- be able to represent themselves and others in key decision making processes.

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;
- adults respect children's rights and facilitate children's participation and representation in imaginative and child centred ways in all aspects of core services.



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.

- Our designated person (a member of staff) who co-ordinates child, young person and vulnerable adult protection issues is: [Gemma Carpenter](#). Deputy Safeguarding lead is [Katie Pender](#). The designated safeguarding lead is also responsible for liaising with local statutory children's services and with the Local Safeguarding Partnership
- When the setting is open but the designated person is not on site, a suitably trained room leader or qualified and nominated staff member 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: [Alexa Jolly and Amy Richardson](#)
- The designated person, the suitably trained room leader and the designated officer ensure they have relevant links with statutory and voluntary organisations with regard to safeguarding.
- The designated person [Gemma Carpenter](#) understands OSCB (Oxfordshire Safeguarding Children Board) safeguarding procedures, attends relevant OSCB training at least every two years and refreshes their knowledge of safeguarding at least annually.
- All Staff understand that safeguarding is their responsibility.

- 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, 2018) 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 OSCB 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 their responsibilities under the General Data Protection Regulations and the circumstances under which they may share information about you and your child with other agencies.
- We will be transparent about how we lawfully process data.
- 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 cameras and 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 Criminal record 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).
- From 31 August 2018, staff and volunteers in childcare settings that are not based on domestic premises are not required to notify their manager 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 childcare provision or have had certain Orders made in relation to the care of their children in accordance with the Childcare Disqualification and Childcare Regulations 2018, and Disqualification under the Childcare Act guidance effective from 31 August 2018.
- Staff receive regular supervision, which includes discussion of any safeguarding issues, and their performance and learning needs are reviewed regularly.
- In addition to induction and supervision, staff are provided with clear expectations in relation to their behaviour.
- 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. Staff do not use personal cameras or filming equipment to record images.
- Personal mobile phones are not used where children are present.
- 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 a 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 understand how to identify children who may be in need of early help, how to access services for them.
- We understand that we should refer a child who meets the s17 Children Act 1989 child in need definition to local authority children's social work services.
- We understand that we should refer any child who may be at risk of significant harm to local authority children's social work services.
- 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/or a 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 OSCB 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 are also aware that early years practitioners should follow local authority published safeguarding procedures to respond to FGM and other safeguarding issues, which involves contacting police if a crime of FGM has been or may be about to be committed.
- 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 may become aware of any of these factors affecting older children and young people who we may come into contact with.
- If we become concerned that a child may be a victim of modern slavery or human trafficking, we will refer to the National Referral Mechanism, as soon as possible and refer and/or seek advice to the local authority children's social work service and/or police.
- We will be alert to the threats children may face from outside their families, such as that posed by organised crime groups such as county lines and child sexual exploitation, online use and from within peer groups and the wider community.
- 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 and child in need concerns and follow the OSCB procedures, or when they come into force replacing the LSCB, we will follow the local procedures (LCSS) as published by the local safeguarding partners.
- Where such indicators are 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 or not they must follow escalation procedures.
- We refer concerns about children's welfare at home, or elsewhere 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 (or the local safeguarding partners when their published safeguarding arrangements take over from the LSCB).
- We respond to any disclosures sensitively and appropriately and take care not to influence the outcome either through the way we speak to children or by asking questions of children (although we may check out/clarify the details of what we think they have told us with them).

- 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 or neglect 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 in an age appropriate way, 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 question the child, although it is OK to ask questions 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 always within one working day.
- Where the Local Safeguarding Children Board or local safeguarding partners safeguarding procedures 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.

Managers' responsibilities

Managers/line managers notified of concerns under this policy are expected to:

- ensure that all staff and volunteers are familiar with the policy
- ensure that concerns raised are taken seriously;
- treat the matter in confidence, within the parameters of the case;
- where appropriate, investigate properly and make an objective assessment of the concern;
- keep the person raising the concern updated with progress, without breaching confidentiality;
- ensure that the action necessary to resolve a concern is taken;
- take appropriate steps to ensure that the employee's working environment and/or working relationship is/are not prejudiced by the fact of disclosure.

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 Pre-school Learning Alliance.

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 OSCB 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 normally discussed with parents to gain their view of events, unless it is felt that this may put the child or other person at risk, or may interfere with the course of a police investigation, or may unduly delay the referral, or unless it is otherwise unreasonable to seek consent. Advice will be sought from social care, or in some circumstances the police, where necessary.

- Parents are informed when we make a record of concerns in their child's file and 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 procedures 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 or where sexual abuse may have occurred.
- 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 consider seeking 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 and multi-agency working

- We work within the Local Safeguarding Children Board /Local Safeguarding Partners 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 and concerns about children's welfare, 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 kept.

Allegations against staff and personals in a position of trust

- We ensure that all parents know how to complain about the behaviour or actions of staff or volunteers within the setting, or working on the premises occupied by the setting, which may include an allegation of abuse.
- We differentiate between allegations, and concerns about the quality of care or practice and complaints and have a separate process for responding to complaints.

- We respond to any inappropriate behaviour displayed by members of staff, volunteer or any other person 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 will recognise and respond to allegations that a person who works with children has:
 - Behaved in a way that has harmed a child, or may have harmed a child
 - Possibly committed a criminal offence against or related to a child
 - Behaved towards a child or children in a way that indicates they may pose a risk of harm to children.
- We ensure that all staff, agency 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 DSL and Local Authority Designated Officer (LADO) as necessary to investigate and/or offer advice: [Jo Lloyd](#) – ESAT manager and Designated Officer (LADO). Email: LADO.SafeguardingChildren@Oxfordshire.gov.uk. Tel: Safeguarding Team: [01865 810603](tel:01865810603)

Updated October 2019

- 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. Where it is appropriate and practical and agreed with LADO, we will seek to offer an alternative to suspension for the duration of the investigation, if an alternative is available that will safeguard children and not place the affected staff or volunteer at risk.

- After a concern has been raised, the manager/line manager will decide how to respond in a reasonable and appropriate manner. Normally this will involve making internal enquires first, but it may be necessary to carry out an investigation.
- Whilst it is hoped that such disclosures will never be necessary, the setting management recognises that it may find itself in circumstances which are new to it. Each case will be treated on its own merits.

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. Training opportunities should also cover extra familial threats such as online risks, radicalisation and grooming, and how to identify and respond to families who may be in need or early help, and organisations safeguarding procedures.
- 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 practitioners 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. 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 (including online safety – See Guidance for Online Safety in Early Years for Practitioners document).
- 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/Local Safeguarding Partners and in line with the GDPR, Data Protection Act 2018, and Working Together 2018.

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.
- We will engage with any Child In Need Plan or Early Help Plan as agreed.

- 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)
- Children and Social Work Act 2017
- Safeguarding Vulnerable Groups Act (2006)
- Childcare Act (2006)
- Child Safeguarding Practice Review and Relevant Agency (England) Regulations 2018

Secondary Legislation

- Sexual Offences Act (2003)
- Criminal Justice and Court Services Act (2000)
- Equality Act (2010)
- General Data Protection Regulations (GDPR) (2018)
- Childcare (Disqualification) 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-DfE, 2018](#)
- [Working together to safeguard children - Statutory Framework](#)
- <https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>
- [What to do if you're worried a child is being abused: advice for practitioners - DfE, 2015](#)
- [Safeguarding children and young people and young vulnerable adults policy – Ofsted 2018](#)

- [Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers – DfE 2018](#)
- Disclosure and Barring Service: www.gov.uk/disclosure-barring-service-check
- Revised Prevent Duty Guidance for England and Wales (HMG, 2015)



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 into 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.
- In exceptional circumstances, we offer places to two and a half 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 two, 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 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 form 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 child's social worker as detailed in the care plan.

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)



1.4 Uncollected child

Policy Statement

In the event that a child is not collected by an authorised adult by their expected collection time, we put into practice agreed procedures. The child will receive a high standard of care in order to cause as little distress as possible.

We inform parents/carers of our procedures so that, if they are unavoidably delayed, they will be reassured that their children will be properly cared for.

Procedures

- Parents are asked to provide the following specific information when their child starts attending our setting, which is recorded on our Registration Form we will endeavour to get more than two emergency contacts where necessary:
 - Home address and telephone number - if the parents do not have a telephone, an alternative number must be given, perhaps a neighbour or close relative;
 - Place of work, address and telephone number (if applicable);
 - Mobile telephone number (if applicable);
 - Names, addresses, telephone numbers and signatures of adults who are authorised by the parents to collect their child from the setting, for example a childminder or grandparent;
 - Who has parental responsibility for the child; and
 - Information about any person who does not have legal access to the child.
- On occasions when parents are aware that they will not be at home or in their usual place of work, they inform us in writing of how they can be contacted.
- On occasions when parents, or the persons normally authorised to collect the child, are not able to collect the child, they provide us with written details of the name, address and telephone number of the person who will be collecting their child. We agree with parents how to verify the identity of the person who is to collect their child.

- Parents are informed that if they are not able to collect the child as planned, they must inform us so that we can begin to take back-up measures. Our contact telephone number is [01608 683168](tel:01608683168).
- If a child is not collected at their expected collection time, we follow the procedures below:
 - The child's file is checked for any information about changes to the normal collection routines;
 - If no information is available, parents/carers are contacted at home or at work;
 - If this is unsuccessful, the adults who are authorised by the parents to collect their child - and whose telephone numbers are recorded on the Registration Form - are contacted;
 - All reasonable attempts are made to contact the parents or nominated carers;
 - The child does not leave the premises with anyone other than those named on the Registration Form or in their file;
 - If no-one collects the child within 30 minutes of their expected collection time and there is no named contact who can be contacted to collect the child, we apply the procedures for uncollected children;
 - If we have any cause to believe the child has been abandoned we contact the local authority children's social care team: Tel: [0345 050 7666](tel:03450507666)
Email: mash-childrens@oxfordshire.gcsx.gov.uk
If the children's social care team is unavailable we will contact the local police;
 - After an additional 15 minutes if the child has not been collected, we will contact the above statutory agencies again;
 - The child stays at the setting in the care of two of our fully-vetted workers, one of whom will be our manager or deputy manager until the child is safely collected either by the parents or by a social care worker, or by another person specified by social care;
 - Social care will aim to find the parent or relative. If they are unable to do so, the child will become looked after by the local authority;
 - Under no circumstances will we go to look for the parent, nor leave the setting premises with the child;
 - We ensure that the child is not anxious and we do not discuss our concerns in front of them; and
 - A full written report of the incident is recorded in the child's file.
- Depending on circumstances, we reserve the right to charge parents for the additional hours worked.
- Members of staff do not:

- go off the premises to look for the parents/carers
 - leave the premises to take the child home, or to another carer
 - offer to take the child home with them to care for them in their own home until contact with the parent/carer is made
-
- Ofsted may be informed:
Tel: 0300 123 4666 Web: <https://contact.ofsted.gov.uk/contact-form>



1.5 Uncollected child – Actions

Actions for dealing with uncollected children

If a child is not collected at the end of a session, we follow the following procedures:

- The signing in/collection record is checked for any information about changes to the normal routines.
- If no information is available, parents/carers are contacted at home or work.
- If this is unsuccessful, the adults who are authorised by the parents to collect their child from the pre-school – and whose telephone numbers are recorded on the child's registration form – are contacted.
- All reasonable attempts are made to contact the parents/carers.
- The child stays at pre-school in the care of two fully vetted workers until the child is safely collected.
- If no-one collects the child within 30 minutes of their expected collection time and the premises are closing or staff are no longer able to care for the child, we apply the procedures set out in our child protection policy.
- A full written report of the incident is recorded in the child's file.
- **If a child is collected more than 10 minutes late (without notice) or late on a regular basis there will be a charge of £20 levied each time.**



1.6 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, practitioners are to alert 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. This includes contacting the main school insuring all their gates are checked.
- 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 chair or in the case that the chair is unreachable the vice chair and reports the incident. Our chair or vice chair comes to the provision immediately to carry out an investigation, with all staff present.

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/or 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 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 chair and reports the incident. Our chair comes to our premises immediately to carry out an investigation with staff members.
- 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 chair, carries out a full investigation, taking written statements from all our staff and volunteers who were present.
- Our manager, together with chair 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;
 - 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; and
 - 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 Chair. 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 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.



1.7 Online safety (inc. mobile phones, smart watches 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.

It is important that children and young people attending the setting receive consistent messages about the safe use of technology and can recognise and manage the risks posed in both the real and the virtual world.

Terms such as 'e-safety', 'online', 'communication technologies' and 'digital technologies' refer to fixed and mobile technologies that adults and children may encounter, now and in the future, which allow them access to content and communications that could raise issues or pose risks; the issues are:

- Content – being exposed to illegal, inappropriate or harmful material
- Contact – being subjected to harmful online interaction with other users
- Conduct – personal online behaviour that increases the likelihood of, or causes, harm

Procedures

- Our designated person manager responsible for co-ordinating action taken to protect children is:
[Gemma Carpenter](#)

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 online with a grown up;
 - be kind online;
 - keep information about me safely;
 - only press buttons on the internet to things I understand; and
 - 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](tel:08088005000) or www.nspcc.org.uk, or Childline on [0800 1111](tel:08001111) 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 our cupboard until the parent collects them at the end of the session.

Mobile Phones and other internet-enabled devices – staff & visitors

- Personal mobile phones are not used by our staff on the premises during working hours. They will be stored in our cupboard.
- In an emergency, personal mobile phones may be used in an area where there are no children present, with permission from the manager.
- 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. If a personal call needs to be made or taken they need to seek senior permission and do so away from the children.
- Parents/carers and visitors do not use their mobile phones on the premises. There is an exception if a visitor's company/organisation operates a policy that requires contact with their office periodically throughout the day phones still should be stored away from any areas that children access and setting phone number given to visitors so that they are still contactable. Visitors are advised of a private space where they can use their mobile.
- These rules also apply to the use of work-issued mobiles, and when visiting or supporting staff in other settings.

Cameras & 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.
- 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.

Smart Watches

- Watches have to be worn in 'flight mode' or Bluetooth is disconnected, this will ensure there is no internet connectivity to access notifications or Wi-Fi.
- Staff understand they may not use their watch to receive calls or check messages whilst in the playrooms as this creates distraction and potential dangers.
- Staff have to be vigilant of others checking their watches and remind them of the nursery policy and procedures of the safe wearing of a smart watch.
- Photographs can only be processed from a smart watch with a mobile device in close proximity.
- Staff should not use their smart watch to access photos or images whilst on nursery premises (indoors or outdoors) and whilst on local trips/outings.
- The nursery reserves the rights to request the removal of a smart watch if the safety of a child(ren) is at risk.

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, the Safeguarding Children and Child Protection policy, in relation to allegations against staff and/or responding to suspicions of abuse, is followed
- Staff are aware that grooming children and young people online is an offence in its own right and concerns about a colleague's or others' behaviour are reported (as above).

Strategies to minimise risk include:

- Check apps, websites and search results before using them with children.
- Children in Early Years should always be supervised when accessing the internet.
- Ensure safety modes and filters are applied - default settings tend not to ensure a high level of privacy or security. But remember you still need to supervise children closely.
- Role model safe behaviour and privacy awareness. Talk to children about safe use, for example ask permission before taking a child's picture even if parental consent has been given.
- Make use of home visits to inform your understanding of how technology is used within the home and the context of the child with regards to technology.
- Check privacy settings to make sure personal data is not being shared inadvertently or inappropriately.

Further Guidance

- NSPCC and CEOP *Keeping Children Safe Online* training: <http://www.nspcc.org.uk/what-you-can-do/get-expert-training/keeping-children-safe-online-course/>

Other useful Pre-School Learning Alliance Publications

- [Safeguarding Children \(2018\)](#)
- Employee Handbook (2019)
- [Checking privacy settings](#)



1.8 Attendance

Although attendance in the early years is not statutory, Great Tew Pre-School believe good attendance is essential for children's wellbeing and development, continuity and consistency are important contributors.

Regular and consistent attendance is paramount so that all children have a full access to the curriculum.

Great Tew Pre-School issues an Attendance and Child Absence Policy to all parents/carers. We monitor absence patterns and consider each child's and family's vulnerabilities; prolonged or unexplained absence triggers safeguarding procedures, including contacting emergency contacts, referral to children's social care and/or requesting a police welfare check where appropriate.

Children should be at pre-school by **9:00 am or 12:10 noon**, Parents are expected to inform the setting of any absences before their child's session begins. If contact has not been made by the parent, the setting has a duty of care and will ring the family to check in shortly after registration and find out why they are not in attendance and check when they will be back in.



1.9 Face Painting & Mehndi

Children are face painted only if parents/carers have given prior written consent. Verbal consent is fine at events where parents/carers are present.

- A child who does not want to have their face painted will not be made to continue.
- Children under two years of age are generally not fully face painted, however a nose and whiskers (or similar) is fine. Having an arm or hand painted with a flower, star or butterfly is also an option for very young children who may not sit still.
- Children with open sores, rashes or other skin conditions are not painted.
- Glitter based face paints are not used on children under two years of age.
- Members of staff painting children's faces wash their hands before doing so, cover any cuts or abrasions and ensure they have the equipment they need close to hand.
- Only products with ingredients compliant with FDA regulations for skin contact are used.
- Clean water is used to wash brushes and sponges between children. Ideally a sponge is used once only before being machine washed on a hot cycle.
- Staff face painting at an event ensure they have a comfortable chair or shoes if standing, to reduce the risk of back or neck strain. Face painting is an activity that can cause repetitive stress injuries; therefore, regular breaks are taken at events such as fetes.

Mehndi painting

- Staff never mehndi paint children under three years old using henna/henna-based products.
- Parental permission must be gained before staff mehndi paint children over the age of three years old.
- Children prone to allergies, anaemic or suffering from any illness that may compromise their immune system are never painted under any circumstances.
- Black henna is never used and only 100% natural red henna (diluted with water) is used on children
- Non-henna products are preferable to create mehndi patterns but if the setting operates in an area where mehndi is practiced by families and the criteria above is followed then henna may be used.



1.10 Incapacitated parent/carers

Incapacitated refers to a condition which renders a parent/carers unable to take responsibility for their child; this could be at the time of collecting their child from the setting or on arrival. Concerns may include:

- appearing drunk
- appearing under the influence of drugs
- demonstrating angry and threatening behaviour to the child, members of staff or others
- appearing erratic or manic

Informing

- If a member of staff is concerned that a parent/carers display any of the above characteristics, they inform the designated safeguarding lead as soon as possible.
- The designated safeguarding lead assesses the risk and decides if further intervention is required.
- If it is decided that no further action is required, a record of the incident is made on form 06.1b Safeguarding incident reporting form.
- If intervention is required, the designated safeguarding lead speaks to the parent/carers in an appropriate, confidential manner.
- The designated safeguarding lead will, in agreement with the parent/carers, use emergency contacts listed for the child to ask an alternative adult to collect the child.
- The emergency contact is informed of the situation by the designated safeguarding lead and of the setting's requirement to inform social care of their contact details.
- The designated Leads are informed of the situation as soon as possible and provide advice and assistance as appropriate.
- If there is no one suitable to collect the child social care are informed.
- If violence is threatened towards anybody, the police are called immediately.
- If the parent/carers takes the child from the setting while incapacitated the police are called immediately and a referral is made to social care.

Recording

- The designated safeguarding lead completes 06.1b Safeguarding incident reporting form and if social care were contacted 06.1c Confidential safeguarding incident report form is completed. If police were contacted 06.1c Confidential safeguarding incident report form should also be copied to the line manager and DSL trustees.
- Further updates/notes/conversations/ telephone calls are recorded.



1.11 Screen Time Policy

Great Tew Pre-School recognises that digital technology can support children's learning, communication and inclusion when it is used safely, intentionally and with an adult. However, screen use must not displace active play, sleep, conversation, creative experiences, outdoor learning or responsive relationships.

We therefore take a **precautionary** approach. Screens will be used only for a clear educational, communication, accessibility or safeguarding purpose. They will not be used routinely to occupy, reward, distract or manage children's behaviour.

This policy applies to all employees, agency workers, students, volunteers and visitors using televisions, computers, tablets, interactive displays.

Aims

This policy aims to:

- **Protect children's development and wellbeing** by keeping screen use limited and purposeful.
- **Support the EYFS** through active, play-based and relationship-centred learning.
- **Protect children online** from inappropriate content, contact and commercial material.
- **Safeguard personal information**, photographs, videos and observations.
- **Provide inclusive access** where technology supports a child's communication or identified needs.
- **Help families develop** healthy digital habits through consistent, non-judgemental guidance.

Screen time limits

Current Department for Education guidance advises avoiding screen time for children under two, except in exceptional shared circumstances, and limiting total screen time for children aged two to five to one hour per day, with less where possible. Because children may also use screens at home, this setting will normally remain well below those daily limits. [help-for-early-years-providers.education.gov.uk](https://www.gov.uk/government/publications/help-for-early-years-providers)

Age	Setting approach
2 to 5 years	Screen use will be occasional, purposeful, adult-led and kept to short periods. It will not normally exceed 15 minutes in one session .
All children	No passive viewing, unrestricted access, background television or extended sedentary use.

These are setting limits, not targets. Children will never be required to participate in a screen-based activity when a suitable non-screen alternative can be provided.

Appropriate use

Screens may be used when they provide a clear benefit, including:

- **Supporting a planned learning objective**, such as briefly viewing an animal, place or event that cannot be observed directly.
- **Extending real-world activity**, for example taking photographs of a construction project and discussing the process.
- **Communication and inclusion**, including approved augmentative and alternative communication systems.
- **Movement activities** where a short prompt encourages children to stand, dance or exercise rather than remain sedentary.

Technology will complement first-hand experiences rather than replace them.

Unacceptable use

Screens must not be used:

- **As a digital babysitter** or to fill gaps in the routine.
- **To reward or punish** children.
- **To calm distress routinely**, including during settling-in, transitions or nappy changing.
- **During meals or snacks**, or within one hour of a planned sleep period.
- **As background entertainment** while children play.
- **For fast-paced, violent, frightening, discriminatory or age-inappropriate content**.
- **For advertising-led material**, social media feeds, autoplay videos or content containing unregulated links.
- **Without active adult supervision and co-engagement**.
- **On a member of staff's personal device**.
- **To photograph or record children without the required authorisation and consent**.

Selecting content

Before showing or using digital content, a practitioner must check it in full and consider:

- **Purpose:** It has a specific learning, communication or inclusion objective.
- **Suitability:** Its language, pace, themes and images are appropriate for the children's ages and development.
- **Quality:** It encourages thinking, talking, movement, creativity or shared interaction.
- **Safety:** It contains no inappropriate links, advertising, in-app purchases, chat functions or unexpected content.
- **Accessibility:** It is suitable for children with sensory, communication or additional needs.
- **Alternatives:** The same objective cannot be achieved more effectively through conversation, books, objects, play or direct experience.

Autoplay must be disabled wherever possible. Staff must use approved websites, apps and services only.

Adult co-engagement

A practitioner will remain with children throughout screen use. The adult will:

- **Talk with children** about what they see and hear.
- **Use open questions**, descriptions and comments to develop language and understanding.
- **Connect the content** to real life, play or a follow-up activity.
- **Watch children's responses** and stop immediately if content causes distress, confusion or overstimulation.
- **Encourage movement** and participation rather than passive viewing.
- **End the session** promptly once its purpose has been met.

Children must not browse the internet, search video platforms or operate connected devices independently. Current DfE internet-safety guidance states that children should be closely supervised and should not access screens without adult co-engagement. [help-for-early-years-providers.education.gov.uk](https://www.gov.uk/help-for-early-years-providers)

Screen-free practice

The following will remain **screen-free**:

- Meals and snacks.
- Nappy changing, toileting and intimate care, except where an agreed communication aid is required.

- Sleeping and rest areas.
- Outdoor play, except for a brief planned use that directly supports exploration.
- Story time, except where technology is necessary for accessibility.
- Most free-play periods and adult-child interactions.

Devices used by practitioners for administration or observations should not interrupt responsive care. Staff must not repeatedly look at devices while supervising or interacting with children.

Children with SEND or communication needs

A child may need a screen-based communication, sensory or accessibility tool. In these circumstances:

- Use will be based on the child's **individual needs**, not convenience.
- The setting will consult parents or carers and, where relevant, the SENCO and other professionals.
- Any agreed arrangements will be included in the child's support plan.
- Use will be monitored for benefit, distress, dependency or unintended effects.
- The child will continue to receive direct interaction, physical play and non-screen experiences.

Reasonable adjustments may justify an exception to the setting's usual limits where this is necessary and in the child's best interests.

Online safety

The setting will use appropriate technical and organisational safeguards, including:

- **Secure, password-protected devices** and individual staff access where appropriate.
- **Filtering and security controls** proportionate to the setting's equipment and internet connection.
- **Disabled location services, Bluetooth, cameras and microphones** unless required for an approved purpose.
- **Restricted downloads and installations**, controlled by an authorised person.
- **Regular software and security updates.**
- **No unsupervised access** to internet-connected devices.
- **Immediate reporting** of pop-ups, harmful content, suspicious contact or security incidents.

Staff will teach simple, age-appropriate safety messages, such as asking a trusted adult before using a device and telling an adult when something on a screen causes worry.

Images, recordings and personal data

Photographs, videos and digital observations must be managed under the setting's safeguarding, privacy, data-protection and image-consent procedures.

- **Written consent** will be obtained and recorded before images are taken or used.
- Images will be captured only on **setting-authorised devices**.
- Personal devices must not be used to photograph, film or record children.
- Images will be stored securely, accessed only by authorised people and retained no longer than necessary.
- Children's full names will not be published with images unless there is a lawful, specifically authorised reason.
- Images will not be shared on websites, apps or social media outside the scope of recorded consent.
- Parents and visitors must not photograph or film other children without permission.
- Any accidental, inappropriate or unauthorised recording or disclosure must be reported immediately.

Parental consent does not remove the setting's responsibility to decide whether creating or sharing an image is safe and appropriate.

Staff use of devices

Personal phones and smart devices must be stored in the designated area and used only according to the setting's mobile-phone policy. Smartwatches must not be used to photograph, record, message or access personal applications while practitioners are working with children.

Setting devices may be used only for authorised professional purposes. Staff must not:

- Access personal social media or messaging services while supervising children.
- Download unapproved applications.
- Connect personal storage devices or accounts.
- Share passwords or leave devices unlocked.
- Record children secretly or for personal use.
- Communicate with children or families through unauthorised channels.

Partnership with parents and carers

Parents and carers will be informed about how and why screens are used in the setting. Practitioners will share healthy-screen guidance sensitively and without judging family circumstances.

Families will be encouraged to:

- Keep total screen time limited and balanced with sleep, active play and conversation.
- Avoid screens during meals and in the hour before bedtime.
- Watch or play together and talk about the content.
- Select slow-paced, age-appropriate material.
- Use parental controls and disable autoplay and in-app purchases.
- Model safe, balanced device use.

Government guidance recommends avoiding screen time for under-twos except shared interactive activities and aiming for no more than one hour daily for children aged two to five. beststartinlife.gov.uk

Responding to concerns and incidents

If a child accesses inappropriate content, receives unwanted contact or has personal information disclosed, the practitioner must:

1. **Stop access** without blaming or frightening the child.
2. **Reassure and listen** to the child using age-appropriate language.
3. **Preserve relevant evidence** without forwarding or unnecessarily viewing harmful material.
4. **Report immediately** to the designated safeguarding lead or setting manager.
5. **Follow safeguarding, data-breach and reporting procedures**, including external referrals where required.
6. **Inform parents or carers** unless doing so could place the child at greater risk or conflict with safeguarding advice.
7. **Review controls and practice** to reduce the likelihood of recurrence.

A concern about a staff member's use of technology, images or communication must be managed under the setting's allegations and safeguarding procedures.

Roles and responsibilities

Role	Responsibility
Registered person or	Approves the policy and provides suitable equipment, controls and

Role	Responsibility
governing body	training.
Manager	Implements the policy, authorises services and devices, and monitors compliance.
Designated safeguarding lead	Responds to online-safety concerns and coordinates safeguarding action.
SENCO	Advises on appropriate technology and reasonable adjustments for children with SEND.
Practitioners	Follow the policy, supervise use, model healthy habits and report concerns.
Parents and carers	Follow setting rules on photography and share relevant information about children's needs.

Training and monitoring

All practitioners will receive induction and periodic training covering:

- Healthy and developmentally appropriate screen use.
- Selection of suitable content.
- Online risks and safeguarding.
- Privacy, photography and secure data handling.
- Use of approved devices and applications.
- Reporting concerns, breaches and allegations.

The manager will periodically review devices, applications, filtering arrangements, consent records and observed practice. Screen use may be recorded where necessary to assess frequency, duration and purpose.

Related policies

This policy should be read alongside the setting's:

- Safeguarding and child-protection policy.
- Online-safety policy.
- Mobile-phone and camera policy.
- Data-protection and confidentiality policy.
- Photography and image-consent policy.
- Staff behaviour or code-of-conduct policy.
- SEND and inclusion policy.

- Behaviour-support policy.
- Sleep, food and physical-activity procedures.

Review

This policy will be reviewed **annually**, and sooner following:

- New statutory or government guidance.
- A safeguarding or data-protection incident.
- Introduction of a new device, platform or application.
- A significant change in the needs of children attending.
- Evidence that current controls are ineffective.



**OXFORDSHIRE
COUNTY COUNCIL**

2026/27 Early Years Child Protection and Safeguarding Policy for

Great Tew Pre-School Early Years Setting

Consistent with the Early Years Foundation Stage statutory framework for group and school-based providers, effective from 1 September 2026, and applicable during 2026/27.



N.B. This Oxfordshire template policy is a framework and should be adapted to fit the individual early years setting's context, governance arrangements and registration type.

Prior to being adopted, each section should be reviewed to ensure it is appropriate for the setting and consistent with Oxfordshire Safeguarding Children Partnership procedures. It is the responsibility of the provider, registered person, committee, trustees or governing body to make any setting-specific amendments.

This document is based on the Early Years Foundation Stage statutory framework for group and school-based providers, Working Together to Safeguard Children, Oxfordshire Safeguarding Children Partnership procedures, Oxfordshire County Council referral pathways and relevant legislation. If national or local guidance is updated during the 2026/27 period, it is the responsibility of the provider to review and amend this policy to ensure ongoing compliance.

Date agreed and ratified by provider/registered person/committee/trustees 31/08/2026
Review date 31/08/2027

In this policy:

- Setting refers to the early year's provider, including nursery, pre-school, maintained nursery class, reception class, out-of-school provision where applicable, or other group and school-based early years provision.
- Staff includes employees, volunteers, students, committee members, trustees, agency staff, bank staff, contractors and any adult working with or around children.

The policy will be reviewed and updated at least annually and will also be updated promptly in response to changes in national or local guidance, emerging safeguarding risks, learning from Child Safeguarding Practice Reviews and internal quality assurance activity.

Contact List:

Key Personnel / Local Contacts	Name / Service	Contact details
Designated Safeguarding Lead	DSL	Gemma Carpenter manager@greattewpreschool.com
Deputy DSL	DDSL	Katie Pender
Registered Person / Provider / Committee Chair / Safeguarding Trustee		Alexa Jolly -Registered Person, Chair Person- chair@greattewpreschool.com Amy Richardson – Vice Chair and Safeguarding trustee - vice@greattewpreschool.com
Oxfordshire Multi-Agency Safeguarding Hub	MASH	0345 050 7666 For immediate safeguarding concerns during office hours
Oxfordshire Emergency Duty Team (EDT)	Out of hours EDT	0800 833 408
Linked Locality Community Support Service (LCSS) worker	LCSS	Hannah Reynolds Locality Worker Locality Community Support Service North (LCSS North) Oxfordshire County Council 📱 Mobile: 07880 496106 ☎ LCSS: 0345 2412705/ LCSS@oxfordshire.gov.uk LCSS Opening Hours: 8.30am – 5pm (Mon – Thurs) 8.30am – 4pm (Fri)
Local Authority Designated Officers (LADOs) and Education Safeguarding Advisory Team (ESAT)	LADO Team Jo Lloyd Sandra Barratt Amie Pilcher	01865 810603 Lado.safeguardingchildren@oxfordshire.gov.uk ESAT.safeguardingchildren@oxfordshire.gov.uk
Oxfordshire Safeguarding Children Partnership	OSCP	oscp@oxfordshire.gov.uk Use OSCP procedures, thresholds, learning zone and local guidance

Our setting recognises its responsibility to safeguard and promote the welfare of all children in our care. This policy will be read, understood and followed alongside the EYFS safeguarding and welfare requirements, Oxfordshire Safeguarding Children Partnership procedures, Oxfordshire threshold of needs guidance, our safer recruitment arrangements, staff code of conduct, whistleblowing procedure, child absence procedure and other linked policies.

1. Introduction

It is essential that everyone working in an early years setting understands their safeguarding responsibilities. Everyone who comes into contact with children and families has a role to play in keeping children safe from abuse, neglect, exploitation and harm. Our setting is committed to creating a safe, vigilant and child-centred culture where children are listened to, respected and protected.

Our setting recognises that safeguarding and promoting the welfare of children is everyone's responsibility. Our setting adopts a child-centred approach and seeks to ensure that every decision made reflects the best interests of the child. Staff are expected to maintain professional curiosity, recognising that abuse, neglect, exploitation and harm rarely occur in isolation and that multiple vulnerabilities may present simultaneously.

Children's welfare is our paramount concern. The provider, registered person, committee, trustees or governing body will ensure that the setting safeguards and promotes the welfare of children and works with relevant agencies to identify, assess and support children who are likely to suffer, or are suffering, abuse, harm or neglect.

Our safeguarding policy is in keeping with national requirements and Oxfordshire local safeguarding arrangements. The setting will use Oxfordshire Safeguarding Children Partnership procedures, thresholds and guidance when deciding how to respond to concerns about a child.

Our setting recognises the importance of providing help and support as soon as concerns emerge and will work collaboratively with children, families, Oxfordshire Family Help and early help services, the Locality and Community Support Service, Children's Social Care and other agencies to ensure children receive the right help at the right time.

This policy applies to everyone working in or on behalf of the setting, including permanent, temporary and support staff, committee members, trustees, volunteers, students, agency staff, bank staff, contractors and external service or activity providers.

In line with Working Together to Safeguard Children, our setting places the child at the centre of all safeguarding practice. Safeguarding decisions will be informed by a clear understanding of the child's lived experience, their wishes and feelings, and the impact of harm on their day-to-day life. All staff will be expected to exercise professional curiosity and judgement and to act promptly where concerns are identified.

2. Legislation and Statutory Guidance

This policy is informed by, and has due regard to, the following statutory guidance, legislation and local procedures:

- Early Years Foundation Stage statutory framework for group and school-based providers,

effective from 1 September 2026.

- Working Together to Safeguard Children 2026.
- Children Act 1989 and Children Act 2004.
- Childcare Act 2006 and associated childcare regulations, including disqualification requirements where applicable.
- Safeguarding Vulnerable Groups Act 2006.
- Equality Act 2010.
- Data Protection Act 2018 and UK GDPR.
- Oxfordshire Safeguarding Children Partnership procedures, threshold of needs guidance, escalation arrangements and learning from local child safeguarding practice reviews.

This policy also reflects Oxfordshire County Council referral pathways, including MASH for immediate safeguarding concerns, the Emergency Duty Team out of hours and LCSS/early help routes for non-immediate concerns where additional support may be required.

3. Roles and Responsibilities

Our setting has a Designated Safeguarding Lead (DSL), also referred to as the lead practitioner for safeguarding, who takes lead responsibility for safeguarding children. The provider ensures that there is appropriate cover and that all staff know who to speak to if they have a concern about a child, an adult working in the setting, or safeguarding practice. The DSL provides leadership for safeguarding within our setting, including ensuring robust challenge, reflective discussion and professional oversight of safeguarding decisions, particularly where concerns are emerging, cumulative or complex.

Our setting will ensure there are robust arrangements in place to provide safeguarding leadership when the DSL is unavailable. Deputy safeguarding leads or nominated deputies have appropriate access to safeguarding records and systems to enable them to carry out their role effectively. The setting ensures secure arrangements are in place to share safeguarding information between members of the safeguarding team where necessary to protect children.

The registered person, provider, committee, trustees or governing body are collectively responsible for ensuring that safeguarding arrangements are effective, embedded in practice, understood by staff and reviewed regularly. They will ensure that policies and procedures meet EYFS requirements and are implemented consistently.

All staff understand the importance of professional curiosity and challenge in safeguarding practice and are expected to act promptly where there are concerns about a child's safety, welfare or protection.

The provider ensures that all staff, students, volunteers and adults working in the setting are suitable, appropriately checked, inducted, supervised and trained. Adults will not be left unsupervised with children or counted in ratios until all required suitability checks and risk-based decisions have been completed in line with statutory requirements.

The provider, registered person, committee, trustees or governing body will ensure safeguarding arrangements reflect emerging safeguarding risks, including extra-familial harm, absence-related vulnerability, online harms, technology-enabled abuse, exploitation and serious violence.

All staff, committee members, trustees, volunteers and external providers will be expected to identify children who may benefit from additional support, including Family Help, and to raise concerns promptly with the Designated Safeguarding Lead.

Our setting acknowledges the need to treat everyone equally, with fairness, dignity and respect. Any discriminatory behaviours are challenged, and children are supported to understand how to treat others with respect.

4. Supporting and Safeguarding Children

Our setting understands that safeguarding and promoting the welfare of children is defined in Working Together to Safeguard Children as:

- Providing help and support to meet the needs of children as soon as problems emerge.
- Protecting children from maltreatment, whether that is within or outside the home, including online.
- Preventing impairment of children's mental and physical health or development.
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
- Promoting the upbringing of children with their birth parents, or otherwise their family network through a kinship care arrangement, whenever possible and where this is in the best interests of the child.
- Taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children's Social Care National Framework.

Categories of abuse are understood by our setting as:

Physical abuse: a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional abuse: the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include verbal abuse, such as persistent criticism, belittling, or name-calling, as well as not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning or preventing the child from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual abuse: involves forcing or enticing a child to take part in sexual activities, not necessarily involving violence, whether or not the child is aware of what is happening. This may involve physical contact or non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males; women can also commit acts of sexual abuse, as can other children. Concerns about sexual abuse or harmful sexual behaviour must be responded to as safeguarding concerns.

Neglect: the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy, for example, as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate caregivers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Our staff are aware that safeguarding issues often overlap and can put children at risk of harm, including but not limited to, the categories of above. The following are understood as being potential indicators of risk:

- drug taking and/or alcohol misuse
- unexplainable and/or persistent absences from education
- serious violence, criminal exploitation (including that linked to county lines), radicalisation
- consensual and non-consensual making or sharing of nudes or semi nudes.

Staff use the EYFS statutory framework, Working Together to Safeguard Children, Oxfordshire Safeguarding Children Partnership procedures and Keeping Children Safe in Education to understand and respond to safeguarding concerns.

Our setting supports and safeguards all children by:

- providing a safe, welcoming and inclusive environment where children are listened to, respected and supported to develop secure relationships with trusted adults.
- ensuring staff are alert to signs of abuse, neglect, exploitation, harm, domestic abuse, fabricated or induced illness, online harm, radicalisation, child criminal exploitation, child sexual exploitation, female genital mutilation, forced marriage, honour-based abuse, trafficking, modern slavery and other safeguarding risks. This should be included in Generalist safeguarding. More information on types of abuse can be found here: [Safeguarding procedures, guidance and resources - Oxfordshire Safeguarding Children Partnership](#)
- ensuring that all staff complete online Prevent Awareness training (<http://www.elearning.prevent.homeoffice.gov.uk>) to support them in identifying radicalisation and understanding what steps they need to take to protect the staff, children and families in our setting. This training provides an introduction to the Prevent duty, the first objective of which is to tackle the ideological causes of terrorism and explains how it aims to safeguard vulnerable people from being radicalised to supporting terrorism or becoming terrorists themselves. Sharing information about Prevent should be treated in the same way as other safeguarding issues.
- following clear procedures when there are concerns about a child's safety or welfare, including timely recording, discussion with the DSL and referral to children's social care, the police or other agencies where required.
- following up unexplained, unexpected or prolonged child absences in a timely way, considering patterns and trends and contacting parents or carers. Where absence is prolonged, repeated, unexplained or forms part of a wider safeguarding picture, the DSL will consider the child's vulnerability, patterns of absence, family context and Oxfordshire thresholds, and will seek advice, contact LCSS/early help, make a referral to MASH or request police support where safeguarding concerns remain.

- using safe supervision, staffing, key person arrangements, risk assessment, safer eating practices, nappy changing, toileting and intimate hygiene procedures to promote children's health, safety, dignity and wellbeing.
- working in partnership with parents and carers unless doing so would place a child at increased risk of harm and sharing information appropriately when necessary to safeguard children.
- ensuring that safeguarding education is responsive to emerging local and national safeguarding risks and reflects the lived experiences of children.
- ensuring the setting implements and applies mobile phone, camera and device arrangements in accordance with EYFS requirements and the setting's own mobile phone, camera, online safety and acceptable use procedures.
- encouraging children to communicate their feelings and ensuring they are listened to by appropriate, trusted adults.
- recognising that mental health concerns, emotional wellbeing concerns, significant distress, changes in behaviour, eating or sleeping patterns, self-harming behaviours or other indicators of mental health need may be signs that a child has experienced, or may be at risk of, abuse, neglect, exploitation or other safeguarding concerns.
- ensuring children are supported to access appropriate help for their emotional wellbeing within the setting and through external services where appropriate.
- recognising that young carers may experience additional safeguarding vulnerabilities including emotional wellbeing concerns, reduced attendance, caring responsibilities and social isolation. Staff will be alert to these needs and will ensure that appropriate support is provided in partnership with families and other agencies.
- ensuring that children's voices, wishes and lived experiences are central to decision-making and that their views are sought, recorded and taken seriously, in line with Working Together to Safeguard Children.
- working with support services and agencies involved in safeguarding children, including Family Help and preventative services, in line with Working Together to Safeguard Children.
- recognising that Family Help is a shared responsibility across agencies and that early years settings play a key role in identifying emerging need, cumulative harm and vulnerability at an early stage.
- considering the role of family networks, kinship care and protective factors, alongside risks, when assessing need and planning support.
- recognising that regular attendance at the setting can be a protective factor and that unexplained, repeated or prolonged absence, repeated lateness, or disengagement may indicate safeguarding concerns, vulnerability or unmet need.
- considering intra familial harms and any necessary support for siblings.
- having behaviour and positive relationships procedures that focus on early support, prevention, co-regulation and de-escalation, particularly for vulnerable children. Any physical intervention will be a last resort and only used where necessary, proportionate and in line with the setting's procedures. Incidents will be recorded, parents or carers informed where appropriate, and practice reviewed to reduce future risk, alongside clear measures to prevent bullying, including prejudice-based or discriminatory behaviour.
- having clear procedures in place for addressing and minimising the risk of child-on-child abuse, including harmful sexual behaviours, sexual violence, and sexual harassment (which could take place on or off-line).
- recognising that children may experience harm beyond their family environment, including child criminal exploitation, child sexual exploitation, serious violence, county lines activity, harmful sexual behaviour, peer abuse and online abuse.

- recognising that serious violence, weapon carrying, threats of violence, peer conflict and criminal exploitation may present significant safeguarding risks and ensuring concerns are identified and responded to appropriately.
- alerting the Local Authority if the setting becomes aware that a child may be living in a private fostering arrangement.
- acknowledging that a child that is looked after (CWCF), in kinship care or has been previously looked after by the Local Authority potentially remains vulnerable and ensuring that all staff have the skills, knowledge and understanding to support these children.
- taking proportionate positive action to address disadvantage affecting children with protected characteristics or additional needs. This includes making reasonable adjustments for disabled children and supporting children with special educational needs or disabilities.
- identifying and supporting children, young people and their families who are impacted by parental imprisonment.
- recognising that children may experience bullying, discrimination or vulnerability related to identity, family circumstances or perceived difference. The setting will consider each child's individual circumstances, listen to their views, work in partnership with parents or carers wherever appropriate, take account of relevant professional advice and ensure safeguarding decisions are made in the child's best interests.
- challenging sexist, misogynistic, discriminatory and abusive behaviours and promoting a culture of respect, equality and safety.
- recognising that children can also abuse other children online, this can take the form of abusive, harassing, and misogynistic/misandrist messages, the non-consensual making or sharing of nudes or semi-nudes, especially around chat groups, and the sharing of abusive images and pornography to those who do not want to receive such content.
- recognising that children with medical needs or complex health needs may require additional safeguarding consideration. Staff will remain alert to indicators of abuse, neglect or exploitation and ensure that safeguarding and medical needs are considered together when assessing risk.
- being aware that where the setting uses another provider or commissioned service, it remains responsible for ensuring that safeguarding expectations are understood and that the arrangement meets the child's needs. The setting will seek appropriate safeguarding assurance before children access external provision or services.

Safeguarding babies, pre-verbal and non-mobile children

Our setting recognises that babies, pre-verbal children and non-mobile children are particularly vulnerable because they are highly dependent on adults, may be unable to communicate what has happened to them in words, and may show distress, discomfort or harm through changes in presentation, behaviour, feeding, sleep, crying, responsiveness or interactions with adults. Staff will be alert to signs of possible abuse, neglect, illness or unmet need in babies and very young children, including changes in feeding, sleeping, settling, responsiveness, weight, hygiene, clothing, skin condition, physical presentation, interaction with parents or carers, unexplained absence, repeated lateness, missed health appointments, domestic abuse, parental substance misuse, adult mental health concerns or unsafe home conditions.

Any bruise, mark, burn, bite, swelling, fracture, unexplained injury, unusual presentation or concerning explanation for an injury in a non-mobile baby or child will be treated as a safeguarding concern. Staff will record the concern accurately and factually, inform the DSL without delay and seek medical or safeguarding advice as appropriate. The DSL will consider Oxfordshire procedures and thresholds and will contact MASH, the child's social worker, health professionals or the police

where required. The DSL will consider if there is a requirement for urgent medical intervention. However, urgent medical attention should not be delayed if the DSL is not immediately available.

Staff will never shake, slap, hit, roughly handle, humiliate, frighten, restrain inappropriately, leave unattended or use unsafe settling practices with a baby or child. Babies will be held, moved, fed, changed, comforted and settled safely, gently and respectfully. Any concern about unsafe handling or inappropriate care by an adult will be reported immediately in line with this policy, the staff code of conduct, whistleblowing procedure and LADO procedures where relevant.

The setting will follow safer sleep arrangements for babies and young children. Babies and children are placed down to sleep safely, in line with EYFS requirements and current safer sleep guidance. Babies under six months will always have an adult with them in the same room for every sleep. Babies aged 12 months and under will only be placed to sleep in a cot. Children under two will be placed on their back in their own separate sleep space, on a firm, flat, waterproof mattress or surface, unless there is written medical advice that states otherwise.

Sleep spaces will be clear of toys, pillows, cot bumpers, wedges, straps, loose bedding, extra blankets or unnecessary items. Bedding will be lightweight and firmly tucked below shoulder height, or a well-fitted baby sleep bag will be used. Children's heads will remain uncovered, room temperature and clothing will be monitored to reduce the risk of overheating or chilling, and all sleeping children will be within sight and hearing of staff and checked frequently. Sleep checks, position, time and any concerns will be recorded in line with the setting's safer sleep procedure.

The setting will follow safer eating arrangements to protect babies and young children from choking, allergic reactions, neglect or unsafe practice. Babies will be supervised while feeding, bottles will not be propped, food will be appropriate for the child's age and stage of development, allergy and dietary information will be clear and accessible, and staff will know how to respond to choking or allergic reactions. Concerns about persistent hunger, poor growth, unsafe feeding, inappropriate food, bottle hygiene, dehydration or failure to follow medical or dietary advice will be recorded and escalated.

When recording concerns about babies and non-mobile children, staff should record what they have seen or heard, the child's presentation, the exact location, size, shape and colour of any mark or injury where this can be observed without causing distress, any explanation given by the parent or carer, actions taken, who was informed, and the rationale for decisions made. Body maps should be used where this is part of the setting's local procedure. Staff will not investigate or ask leading questions.

Where a baby or very young child is subject to a child protection plan, child in need plan, family help plan, has a social worker, has medical needs, is premature, has SEND, is looked after, or is known to be vulnerable, the setting will maintain strong oversight of attendance, care routines, parental engagement, health information, safeguarding records and multi-agency communication.

5. Procedures for Concerns, Record Keeping and Child Absences

Our setting recognises that any child may need additional support and that early identification, timely action and appropriate information sharing are essential to safeguarding and promoting welfare.

Our staff are alert to the potential need for additional support for a child who:

- is disabled or has certain health conditions and has specific additional needs
- has special educational needs (whether or not they have a statutory Education, Health and Care plan)

- has a mental health need
- is a young carer
- is pregnant and/or is a parent themselves
- has exhibited early signs of abusive, violent and/or harmful behaviours
- is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups or county lines
- is frequently missing or uncollected
- has experienced repeated exclusions from provision, reduced hours, suspension of attendance, or is at risk of losing access to early education or childcare
- is at risk of exploitation, modern slavery, trafficking, including criminal or sexual exploitation
- is at risk of being radicalised into terrorism
- has a parent or carer in custody, or is affected by parental offending
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse
- is misusing alcohol and other drugs themselves
- is at risk of honour or faith-based abuse such as Female Genital Mutilation or Forced Marriage
- is a privately fostered child.

All staff are aware of the processes for supporting children and families including criteria, referral route and associated legislation including:

- Community-based Family Help assessments:
- Family Help support/Targeted early help (Section 10 and 11 of the Children Act 2004)
- Children in Need including how this applies for disabled children (Section 17 of the Children Act 1989)
- Child protection- when there is reasonable cause to suspect a child is suffering or likely to suffer significant harm (Section 47 of the Children Act 1989)
- Care and supervision orders (Section 31 of the Children Act 1989)
- Duty to accommodate a child (Section 20 of the Children Act 1989)

If a member of staff has a concern about a child or if a child tells them they are being, or at risk of being, abused, exploited or neglected, they will appropriately respond by listening and offering reassurance. Staff will take account of the wishes and feelings of the child, but will not make any promises and will keep the child informed (age appropriate) of the action that will be taken.

Staff should make an accurate and factual record of any concern as soon as possible.

Detailing:

- A clear and comprehensive summary of the concern including the child's voice.
- Record of actions taken including consideration of any urgent medical attention.

Blank initial concern forms are kept by the Safeguarding notice board in the classroom.

Staff should make an accurate factual record as soon as possible including details of:

- dates and times of their observations
- dates and times of any discussions in which they were involved
- any injuries
- type of suspected abuse
- explanations given by the child/adult
- any actual words or phrases used by the child
- any questions the staff member asked (remembering not to ask any leading questions)
- what action was taken.

The records will be signed and dated (or equivalent on electronic based records) by the person completing the form. Once completed concern forms should be kept confidential and stored securely.

Prior to contacting either LCSS or the MASH speak to your Designated Safeguarding Lead in the first instance who will be able to offer advice and support

Using the Oxfordshire Threshold of Needs ([Threshold-of-needs.pdf](#)) the DSL will consider the options which include:

- managing any support for the child via the settings own support processes including contacting the child's social worker if they have one
- undertaking an early help assessment (Strengths and Needs),
- or
- If there are grounds to suspect a child is suffering, or is likely to suffer, significant harm the **DSL (or DDSL) will contact the Local Authority Children's Social Care via MASH immediately,**

When to contact LCSS

The DSL will call LCSS if they need, advice, support or guidance about Early Help including:

- Use of the Strengths & Needs or Team Around Family Meetings to support families at an early help level.
- Advice on what other agencies/voluntary sector services are available to support families in localities.

Before contacting LCSS, the DSL will:

- Refer to the [Threshold of Needs Matrix](#)
- Advice from LCSS should be obtained with the family's knowledge –please make use of the [Early help guide](#) to support conversations to explain what Early Help is and who LCSS are.

For immediate safeguarding concerns:

If the DSL is concerned that a child is at risk of or is suffering actual significant harm (see examples below) they will **call the MASH immediately: 0345 050 7666.**

Examples:

- Allegations/concerns that the child has been sexually/physically abused
- Concerns that the child is suffering from severe neglect or other severe health risks
- Concern that a child is living in or will be returned to a situation that may place him/her at immediate risk
- The child is frightened to return home
- The child has been abandoned or parent is absent

The DSL will share:

- the known facts
- any suspicions or allegations
- whether or not there has been any contact with the child's family.

In the absence of the DSL or DDSL, staff will refer directly to MASH or the child's social worker (if applicable) and the police (if appropriate) if there is a significant concern.

If there is not considered to be a risk of significant harm, the DSL will either actively monitor the situation, and/or consider the Early Help process through completion of the Strengths and Needs form with the family.

Safeguarding records, including chronologies, are kept for individual children, and are maintained separately from all other records relating to the child in the setting.

Records include:

- a clear and comprehensive summary of the concern
- details of how the concern was followed up and resolved
- a note of any action taken, decisions reached and the outcome

Staff will ensure that records distinguish between fact, observation, the child's wishes and feelings, information received from others and professional opinion. Where professional judgment has informed decision-making, the rationale for that judgment should be clearly recorded.

Staff will promptly report concerns to the DSL in accordance with the level of need identified. In the absence of the DSL or deputy, staff will contact Oxfordshire MASH on 0345 050 7666 where there is an immediate safeguarding concern, the Emergency Duty Team on 0800 833 408 out of hours, the child's social worker if applicable, and the police if a child is in immediate danger.

The setting will discuss concerns with the child's parents or carers unless doing so may place the child at increased risk of harm, compromise a safeguarding enquiry, or delay urgent protective action. Where parents or carers are not informed, the reason and decision-making rationale will be recorded.

Child absences

Good attendance promotes good outcomes for children. The setting promotes good attendance with parents and carers and follows up on absences in a timely manner.

Absences are monitored as part of our safeguarding arrangements. Parents and carers are expected to inform the setting if their child will be absent and provide a reason. If a child is absent without notification, staff will make timely contact with parents or carers. Where absence is prolonged, repeated, unexplained or forms part of a wider safeguarding picture, the DSL will consider the child's vulnerability, patterns of absence, family context and Oxfordshire thresholds, and will seek advice, contact LCSS/early help, make a referral to MASH or request police support where safeguarding concerns remain.

Following receipt of a safeguarding concern for a child, the DSL will:

- consider if immediate action is required, including referral to Oxfordshire MASH, contacting the police, seeking medical attention or contacting the Emergency Duty Team out of hours.
- ensure that decisions taken, the rationale for those decisions, actions agreed and outcomes achieved are clearly recorded in writing. This includes situations where concerns are monitored, stepped down, or closed, and where referrals are not made.
- ensure that records demonstrate timely action, professional curiosity, reflective decision-making and how the child's wishes, feelings and lived experience have informed safeguarding assessment, decision making and planning.
- provide a clear chronology of concerns and demonstrate how individual incidents have been considered within the context of any cumulative harm or emerging patterns of risk.

Records of concern are kept in locked filing cabinet (bottom drawer)

Safeguarding records are kept for individual children and are maintained separately from all other records relating to the child in the setting. Safeguarding records are kept in accordance with the Data Protection Act 2018 and UK GDPR.

Safeguarding records will be sufficiently detailed to support effective multi-agency working and enable professionals to understand the child's lived experience, identified risks, protective factors, actions taken, outcomes achieved and the rationale for safeguarding decisions.

Where a child moves to another setting or school, safeguarding records will be transferred securely and without unnecessary delay, in accordance with UK GDPR, data protection legislation and local safeguarding procedures. Where concerns are significant or complex, the DSL will seek to speak directly with the receiving DSL or safeguarding lead to support continuity of safeguarding arrangements. A record of the transfer will be retained.

When a child who is the subject of a Child Protection (CP) Plan leaves the setting, their information will be transferred to the new setting/school within 5 school days and that the child's Social Worker will be informed that the child has moved.

If it is unknown where the child is moving to, the DSL/manager will endeavour to find out, retain the records and speak to LCSS or MASH if there are concerns.

The manager, registered person or provider will be kept informed of safeguarding concerns by the DSL, if they are not the DSL, and all other staff will be informed on a need-to-know basis.

6. Child-on-Child Abuse, Behaviour and Early Years Safeguarding Concerns

All staff understand that children's behaviour is a form of communication. In early years provision, staff will respond to children's behaviour in a developmentally appropriate way, while remaining alert to signs that a child may be experiencing abuse, neglect, emotional distress, trauma, harmful interactions, exposure to inappropriate content, or other safeguarding concerns.

All staff are aware that babies and very young children including those with SEND or with language delay may be more likely to communicate concerns with behaviours rather than words.

Safeguarding children with Special Educational Needs and/or disabilities

All staff acknowledge that children with special educational needs and/or disabilities (SEND) can face additional safeguarding challenges as they may have an impaired capacity to resist or avoid abuse.

We recognise that additional barriers can exist when recognising abuse and neglect of children with SEND. We will ensure that children with SEND, specifically those with communication difficulties, will be supported to ensure that their voice is heard and acted upon. Staff are encouraged to be aware that children with SEND can be disproportionately impacted by safeguarding concerns such as bullying.

All staff will be encouraged to appropriately explore possible indicators of abuse such as behaviour/mood change or injuries and not to assume that they are related to the child's additional needs or disability and be aware that children with SEND may not always outwardly display indicators of abuse.

Child-on-child abuse can occur between children of any age and can take place in the setting, outside the setting, online and offline. It may be a one-off incident or a pattern of behaviour and should never be tolerated or dismissed.

Our setting understands that harmful sexual behaviour, sexual violence and sexual harassment are not acceptable, and we are committed to creating a culture where children feel safe and concerns are taken seriously.

Harmful sexual behaviours exist on a continuum and range from developmentally appropriate behaviour to problematic, abusive or violent behaviour. Responses are proportionate, child-centred and take account of the needs of both the victim and the alleged perpetrator, recognising that children displaying harmful behaviour may also be vulnerable.

When responding to concerns, our setting will:

- take all reports seriously, even where there is no physical evidence
- avoid victim-blaming and ensure children are supported appropriately
- consider the impact on the wider setting environment
- involve external agencies where required
- record decisions, actions taken and rationale clearly.

All staff understand that even if there are no reports this does not mean abuse, harassment or violence is not happening, it is possible that abuse is unreported. Our staff challenge inappropriate behaviours between children that are abusive in nature.

Concerns about harmful behaviour between children will be recorded, reviewed and responded to proportionately. Staff will consider the developmental stage of the children involved, supervision arrangements, unmet needs, SEND, previous concerns, online exposure, family context and whether external safeguarding advice or referral is required.

7. Online Safety, Mobile Phones, Cameras and Images

Our setting recognises that technology can be used to support learning and communication but can also create safeguarding risks. We have clear procedures for the safe use of mobile phones, cameras, tablets, wearable technology, setting devices, personal devices, images, videos, online platforms and communication with parents or carers.

All personal mobile phones are locked away in the classroom cupboard and only used away from the children, such as on staff lunchbreaks. We have an iPad which is used to take observational photos/videos which is shared on our learning platform with parents. Any watches such as Apple watches are turned onto to flight mode. Parents sign to give permission to take photographs for observations and for use to share on social media sites. The interactive whiteboard is used occasionally for educational games, stories and poems and the camera is always covered. All staff are aware of our IT Policy/Staff code of conduct.

The setting recognises the risk of camera-enabled wearable devices, including smart glasses, and is alert to the privacy, safeguarding and data protection implications for children, staff and visitors.

Filtering and monitoring

Where the setting provides internet access or uses connected devices, filtering and monitoring arrangements form part of safeguarding practice but cannot prevent all online

harm. Children are supported through staff vigilance, age-appropriate teaching, safe routines and clear procedures for technology use.

Staff are aware of emerging online harms including AI-generated content, manipulated imagery, deepfakes, online coercion, online exploitation, harmful online communities, misogynistic content, extremist content and technology enabled abuse.

The provider, registered person, committee, trustees or governing body are responsible for ensuring that appropriate online safety arrangements are in place and reviewed regularly, taking account of the age and needs of children and how technology is used within the setting.

When considering online safety arrangements, the setting will take account of children's age, development, vulnerabilities, access to devices, staff use of technology and any technology used for communication, learning, observation, assessment or administration.

The appropriateness of any filtering and monitoring systems is informed by our Prevent risk assessment.

The setting will ensure that technology arrangements are proportionate to the provision, reflect EYFS safeguarding and welfare requirements, and are set out in linked online safety, mobile phone, camera and acceptable use procedures.

Screen use in early years

The setting will have regard to current guidance on children's screen use in early years settings. [screen use guidance for early years settings](#).

Screens and digital devices will only be used where they have a clear, age-appropriate purpose that supports communication, learning, inclusion, safeguarding, observation or administration. Screen use will not replace adult interaction, active play, outdoor experiences, social communication, rest, sleep, routines or meaningful hands-on learning. Any screen use with children will be planned, supervised and proportionate to children's age, stage of development, SEND, communication needs, vulnerability and wellbeing. Staff will consider the length, purpose, quality and context of screen-based activity and will ensure that passive, prolonged or routine screen use is avoided. Screens will not be used as a regular distraction, substitute for supervision, replacement for interaction, or routine behaviour management strategy.

Staff will support parents and carers by sharing consistent messages about healthy screen use, including the importance of sleep, physical activity, face-to-face interaction, language development, play, emotional regulation and safe online habits. Concerns about excessive screen use, exposure to inappropriate content, online harm, developmental impact or safeguarding risks will be recorded and discussed with the DSL where appropriate.

Our setting understands that the breadth of issues classified within online safety is considerable and ever evolving, but can be categorised into four areas of risk:

- **Content:** being exposed to illegal, inappropriate or harmful content, for example: pornography, fake news, racism, misogyny, self-harm, suicide, anti-Semitism, radicalisation, extremism, misinformation, disinformation (including fake news) and conspiracy theories
- **Contact:** being subjected to harmful online interaction with other users or generative AI applications that simulate users for example peer to peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes

- **Conduct:** online behaviour that increases the likelihood of, or causes, harm, for example: making, sending and receiving explicit images, including consensual and non-consensual sharing of self-generated intimate images and/or videos, including those generated using AI, e.g. deepfakes, sharing other explicit images and online bullying
- **Commerce:** risks such as online gambling, inappropriate advertising, phishing and financial scams.

8. Health, Safety, Safer Eating, Toileting and Intimate Hygiene

Our setting promotes children's health, safety and wellbeing through effective supervision, risk assessment, hygiene procedures, safe premises, accident and incident recording, medication procedures, first aid arrangements, food safety, allergy management and clear emergency procedures.

Safer eating arrangements are in place to reduce the risk of choking, allergic reactions and food-related incidents. Staff are aware of children's dietary requirements, allergies and individual needs. Children are closely supervised while eating and staff understand how to respond to choking or allergic reactions.

Toileting, nappy changing and intimate hygiene will be carried out in ways that protect children's dignity, privacy and safety. Staff follow agreed procedures, remain alert to safeguarding concerns, record concerns appropriately and ensure that intimate care arrangements are proportionate, respectful and risk assessed where needed.

9. Concerns and Allegations about Adults Working in or Connected to the Setting

All staff understand the processes for managing any safeguarding concern, allegation or low-level concern about an adult working in or connected to the setting, including employees, volunteers, students, committee members, trustees, agency staff, contractors and visitors.

If anyone has a concern or allegation about an adult working in or connected to the setting, this will be reported immediately to the DSL, manager, provider or registered person. If the concern relates to the manager or registered person, it will be reported to the nominated committee chair, trustee, owner, local authority designated officer (LADO) or Ofsted as appropriate.

The harm threshold as defined in Working Together to Safeguard Children 2026 details the requirement to refer any concern or allegation about anyone working with children (whether paid or voluntary) who may have:

- behaved in a way that has harmed a child, or may have harmed a child
- possibly committed a criminal offence against or related to a child
- behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children
- behaved or may have behaved in a way that indicates they may not be suitable to work with children.

Any concern or allegation that may meet the harm threshold will be referred to Oxfordshire LADO **within one working day and before any further internal investigation takes place.**

The LADO is Jo Lloyd, contactable by phone on 01865 810603 or by email at lado.safeguardingchildren@oxfordshire.gov.uk. Other LADOs in the team include Amie Pilcher and Sandra Barrett.

A LADO Referral Form will be completed in full and forwarded to the LADO via email within one working day.

The provider will also notify Ofsted of significant events, allegations or concerns and will make a referral to the Disclosure and Barring Service if a person is dismissed or removed from working with children because they have harmed a child or placed a child at risk of harm.

There are two levels of allegation/concern:

- allegations that may meet the harms threshold (see paragraph above)
- allegation/concerns that do not meet the harms threshold – referred to in KCSIE guidance as ‘low level concerns’. These will be recorded and reviewed so that potential patterns of concern, inappropriate, problematic, or concerning behaviour can be identified.

If in doubt seek advice from the LADO.

A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a ‘nagging doubt’ - that an adult working in or on behalf of the setting may have acted in a way that is inconsistent with the staff code of conduct, including inappropriate conduct outside of work; and does not meet the allegations threshold or is otherwise not considered serious enough to consider a referral to the LADO. Such concerns will always be recorded and reviewed so that potential patterns of concerning, problematic or inappropriate behaviour can be identified.

If there are concerns that the owner/proprietor has acted in a way that meets the threshold for contacting the LADO, the person raising the concern should contact the LADO directly.

If the threshold for making a LADO referral has not been met, then the setting’s Whistleblowing Procedures should be followed.

If there is any doubt as to whether the information which has been shared about a member of staff as a low-level concern in fact meets the harm threshold, the DSL should consult with the LADO.

Where settings are not the employer of agency staff, they should ensure allegations are dealt with properly. In no circumstances should a setting decide to cease to use an agency staff member due to safeguarding concerns, without finding out the facts and liaising with the LADO to determine a suitable outcome.

In liaison with the LADO, the setting will determine how to proceed and if necessary, a referral will be made to the MASH and/or the police. The LADO team will assess the information provided and advise on next steps, in line with KCSIE part 4, and Oxfordshire County Council’s LADO local procedures.

The setting will inform Ofsted or the CMA with which a provider of Childcare on Domestic Premises is registered, of any significant event which is likely to affect the suitability of any person who is in regular contact with children on the premises where childcare is provided.

The setting will inform Ofsted, or the CMA of any allegations of harm or abuse by anyone living, working, or looking after children at the premises. This will happen whether the

allegations of harm or abuse are alleged to have been committed on the premises or elsewhere, for example, on a visit. The setting will also notify Ofsted/their CMA of the action they have taken in response to the allegations. Ofsted/the CMA will be notified as soon as is reasonably practicable, but in any event within 14 days of the allegations being made.

“Harm” is as defined by section 31(9) of the Children Act 1989 and means ill-treatment (including sexual abuse and forms of ill-treatment which are not physical), or impairment of physical or mental health, or impairment of physical, intellectual, emotional, social or behavioural development. It also includes, for example, impairment suffered from seeing or hearing the ill-treatment of another.

The setting will notify Ofsted of any change to the persons aged 16 years or older living or working on any domestic premises from which childcare is provided.

The setting is required to make a referral to the Disclosure and Barring Service if a member of staff is dismissed (or would have been, had they not left the setting first) because they have harmed a child or put a child at risk of harm.

The setting will also contact the LADO team for advice where they have concerns about an adult working or volunteering with children which does not meet the harms threshold as stated above.

10. Information Sharing

Our setting recognises that all matters relating to safeguarding are confidential.

All staff members have a professional responsibility to share information with other agencies to safeguard children. All staff will be given appropriate training to understand the purpose of information sharing to safeguard and promote children’s welfare.

Information sharing decisions will be timely, necessary and proportionate, taking account of the nature and level of risk to the child. Staff will not allow concerns about confidentiality or data protection to impact safeguarding action where a child may be at risk of abuse, neglect, exploitation or harm.

Our staff will not assume that another professional will share information or take action to safeguard a child. Where staff remain concerned that appropriate action has not been taken, they will continue to escalate concerns through the DSL and, where necessary, in accordance with Oxfordshire Safeguarding Children Partnership escalation and resolving professional concerns procedures.

[Information sharing advice for safeguarding practitioners - GOV.UK](#) This advice outlines the importance of sharing information about children, young people and their families in order to safeguard children. It should be read alongside the statutory guidance [Working together to safeguard children - GOV.UK](#).

11. Multi-Agency Working

Our setting recognises safeguarding as a shared, multi-agency responsibility and contributes actively, respectfully and constructively to Oxfordshire multi-agency decision-making, information sharing and coordinated plans to support children and families.

The setting will ensure that relevant staff participate in Oxfordshire multi-agency meetings where required, including child protection conferences, core groups, child in need meetings, Team Around

the Family meetings and other professional discussions. We will keep our contact details held by other agencies up to date e.g. with MASH and the Family Information Service.

The DSL will participate in Child Safeguarding Practice Reviews (CSPRs), other reviews and file audits as and when required to do so by the Oxfordshire Safeguarding Children's Partnership. The DSL will consult with relevant staff and ensure clear processes for gathering the evidence required for reviews and audits and will embed recommendations into practice and complete required actions within agreed timescales.

Where disagreements arise between professionals or agencies, these will be managed respectfully and escalated in line with Oxfordshire Safeguarding Children Partnership procedures. Our setting recognises the importance of constructive challenge to ensure that children receive the right help at the right time.

12. Safer Recruitment, Suitability and Ongoing Vigilance

Our setting follows safer recruitment procedures to check that adults are suitable to work with children. Recruitment arrangements include identity checks, employment history, qualifications, references, interview processes, DBS checks, barred list checks (where applicable), right to work checks, health declarations where required, and consideration of disqualification requirements. References will be obtained and scrutinised before appointment wherever possible. References should be from an appropriate source, such as the applicant's current or most recent employer, training provider or education provider, and should be authorised by a senior person. Open references or testimonials are not accepted as the sole source of assurance.

No individual will be allowed to begin working or volunteering at the setting until the setting have received the person's enhanced criminal records and barred list check and the provider is satisfied that all required checks, risk assessments and suitability decisions have been completed.

Any individual whose suitability has not been checked, including through a criminal records and barred list check, will not be allowed to have unsupervised contact with children being cared for.

An enhanced criminal records check with barred list check is obtained for every person aged 16 and over, including all volunteers who:

- Works directly with children, engaging in regulated activity.
- Lives on the premises on which the childcare is provided (unless there is no access to the part of the premises when and where children are cared for) and/or
- Works on the premises on which the childcare is provided (unless they do not work on the part of the premises where the childcare takes place, or do not work there at times when children are present).

All staff understand the requirement to disclose to the manager, registered person or provider any concern that may affect their suitability to work with children.

The provider, registered person, committee, trustees or governing body will seek assurance that safeguarding considerations are embedded throughout the staff and volunteer lifecycle, including recruitment, induction, regular supervision, development and departure from the setting.

Our setting is committed to developing a safe culture and taking all reasonable steps to recruit staff and volunteers who are suitable to work with children. The setting will maintain accurate recruitment, suitability and vetting records in line with EYFS requirements and the setting's safer recruitment procedures. These records will be monitored and reviewed by the provider, registered person, committee, trustees or governing body as appropriate.

The provider will ensure that recruitment decisions are made by people who understand safer recruitment expectations and the setting's safeguarding responsibilities. The Provider will ensure that there is at least one person involved in the whole recruitment process who has completed safer recruitment training.

Job adverts and job descriptions will explain about safeguarding. At least one written reference will be obtained in-line with the statutory requirements of the EYFS.

The setting will also provide references upon request in a timely manner which confirms the applicant's suitability to work with children and provide the facts (not opinions) of any substantiated safeguarding concerns/allegations that meet the harm threshold, in line with the requirements of the EYFS.

The Provider/Manager is committed to supporting the statutory guidance from the Department for Education on the application of the Childcare (Disqualification) Regulations 2009 and related obligations under the Childcare Act 2006 when appointing and continuing to employ staff or engage volunteers.

All staff and prospective staff will be asked to disclose any information which may affect their suitability to work with children including, but not limited to, arrests, charges, convictions, cautions, court orders, reprimands and warnings (whether received before or during their employment at the setting).

The setting will ensure that contractors, agency staff and external providers are aware of the setting's safeguarding policy and procedures and that these will be followed if an allegation or concern arises. The setting will require adults provided by external organisations to use the setting's procedures to report concerns.

The setting will seek assurance that adults provided by other organisations and working with children have been subject to appropriate safeguarding checks. If assurance is not obtained, permission to work with children or access setting premises may be refused. When we commission services from other organisations, we will ensure that compliance with our policies and procedures is a contractual requirement.

13. Training

All new staff, volunteers and students, receive safeguarding induction and training that enables them to understand signs of abuse, neglect and exploitation; how to respond to concerns; how to record and report concerns; child absence procedures; whistleblowing; allegations against adults; the settings code of conduct; online safety and expectations for mobile phones, cameras and technology use; safer recruitment expectations; and the setting's safeguarding policies and procedures. This information will be regularly updated.

The DSL or lead practitioner for safeguarding receives safeguarding training that meets Oxfordshire Safeguarding Children Partnership expectations and is refreshed in line with local guidance. The provider ensures the DSL has sufficient time, support and authority to carry out the role effectively. Deputy safeguarding leads (DDSL) receive appropriate training and are able to act in the DSL's absence.

Staff are expected to understand the signs and symptoms of abuse, neglect and exploitation and to respond appropriately. Safeguarding training promotes vigilance, professional curiosity and confidence to act.

The training is provided for all staff to a generalist level every 2 years by attending OSCP generalist training, in house, online, where possible, and safeguarding updates are shared with staff regularly.

Staff will be supported to put what they have learnt through safeguarding training into practice by talking about the attended training and reporting back to the team. They will also help in supporting others in the setting and be seen as a good role model to others. Safeguarding questions and scenarios will also be used in staff meetings.

The setting will maintain accurate and up-to-date records of staff induction, safeguarding training and safeguarding updates. The provider, registered person, committee members, trustees or governing body will receive appropriate safeguarding and child protection training or updates so they can provide effective oversight, challenge and assurance that safeguarding arrangements are effective. The setting ensures that staff provided by other agencies and third parties, including agency staff, contractors and external providers, have received appropriate safeguarding information and understand how to report concerns.

The DSL updates staff and volunteers on changes to safeguarding legislation, EYFS requirements, Oxfordshire procedures, KCSiE updates and any relevant learning from Oxfordshire and national child safeguarding practice reviews. These updates will include what the learning means for safeguarding practice in this setting.

The DSL will use a variety of mechanisms to provide safeguarding updates to staff, volunteers, students, committee members or trustees, including updates on online safety.

Staff are also provided with other training to support the ongoing welfare of children. *(Including training such as Paediatric First Aid, Oral Health, Restorative Practice, Attachment Theory, Key Person, Early Help Strengths and Needs, SEND, safer eating, safer sleep, anaphylaxis, difference between allergies and intolerances, toileting and intimate hygiene including privacy, safer sleep).*

14. Whistleblowing in a Safeguarding Context

Our setting's whistleblowing procedures will enable staff, volunteers and others to raise concerns about poor or unsafe practice, failures in safeguarding arrangements, or conduct that may place children at risk. The provider will ensure that all adults working in the setting will know how to raise concerns internally and externally and feel confident that genuine concerns will be taken seriously.

If staff identify a concern about poor or unsafe practice, or potential failures in the setting's safeguarding arrangements, this will be reported to the manager, registered person or provider. If the concern is about the manager, registered person or provider, staff will follow the setting's whistleblowing procedure and may contact Ofsted, Oxfordshire LADO or other relevant agencies as appropriate.

If staff are concerned with the action or inaction through internal reporting procedures, then staff will refer to the Whistleblowing procedures. If they would prefer to raise their concerns outside of the setting, then they are able to contact the NSPCC whistleblowing line on 0800 028 0285 or email help@nspcc.org.uk for national organisations, or Ofsted provides guidance on how to make complaints about a provider: [Complaints procedure - Ofsted - GOV.UK](#).

If staff believe that a child is being abused by individuals outside the setting, they will make a referral to The Local Authority Children's Social Care by calling the MASH on **0345 050 7666** (office hours) or **0800 833 408** (outside of office hours).

Further guidance can be accessed through: Child abuse concerns: guide for practitioners - GOV.UK (www.gov.uk) and through the NSPCC website [What is Child Abuse & How to Keep Your Child Protected | NSPCC](#).

15. Premises, Visitors and Site Security

All staff have a responsibility to ensure that the premises, outdoor spaces, entrances, exits and equipment are safe and appropriately supervised. Visitors will be monitored, signed in and out, and will not have unsupervised access to children unless suitability has been confirmed and this is part of agreed arrangements.

The visitor guidance/leaflet are kept by the front door and all visitors are expected to sign in and out even if they regularly visit the setting and are well known to staff. They will have our safeguarding procedures explained to them.

When working alongside other providers or organisations on the same site, we will ensure they are fully informed of and compliant with all safeguarding measures to protect children while on site.

The setting will not accept behaviour from any individual, parent, carer or visitor that threatens site security or causes children or adults to feel unsafe. Such behaviour will be treated as a serious concern and may result in a decision to refuse the person access to the setting premises.

Banned dog breeds and animals on premises

The setting will not provide registered childcare from any premises where a banned dog breed is kept or is otherwise present. Banned dog breeds are those to which section 1 of the Dangerous Dogs Act 1991 applies, including any prohibited type such as an XL Bully type. This applies to childcare premises, shared sites, domestic premises used for childcare where relevant, outdoor areas and any other part of the premises to which children may have access.

The provider, registered person or manager will ensure that arrangements for animals, pets, visits involving animals, shared premises and any domestic premises linked to childcare are risk assessed and managed so that children are protected from foreseeable harm. Any concern about a banned dog breed being present or kept on premises used for childcare will be escalated immediately to the provider or registered person, and registered childcare will not take place while the banned dog breed is present.

All staff will be made aware of the following guidance [Protective security and preparedness for education settings - GOV.UK](#) to ensure they are able to identify security vulnerabilities, suspicious activity and how to respond when there is an incident.

16. Quality Assurance and Safeguarding Culture

Our setting monitors the effectiveness of safeguarding arrangements through regular supervision, staff discussion, training records, child absence monitoring, accident and incident review, safeguarding record audits, safer recruitment checks, policy review, learning from Oxfordshire and national safeguarding reviews and feedback from children, families and staff.

The provider will take prompt action to address any weakness in safeguarding practice and will ensure that safeguarding remains central to leadership, supervision, staff conduct, curriculum, routines and daily practice.

All staff will ensure the content of the curriculum includes personal, social and emotional aspects of learning. They will use all opportunities to teach children about how they can keep themselves and others well and safe from harm, in an age-appropriate way.

There is a culture of high aspirations for children where safeguarding and welfare has been an issue. Staff will understand their development needs, promote educational outcomes, progress and attainment, and identify the challenges that children in this group might face. Additional support and

adjustments will be made to best support these children. Where a child has a Social Worker, staff will work closely with the Social Worker to ensure the child makes progress and reaches their full potential. Oxfordshire's Virtual School also has a role to play in promoting the educational achievements of children in kinship care. [The Role of the Virtual School](#).

The provider, registered person, manager, committee, trustees or governing body will ensure that action is taken without delay to remedy any deficiencies or weaknesses identified in safeguarding arrangements.

Related safeguarding policies

This safeguarding and child protection policy should be read in conjunction with the policies as listed below:

- Behaviour Management, linked to the Use of Physical Intervention
- Online Safety and social media
- Use of mobile phones and cameras (including wearable technology)
- Anti-Bullying
- Data Protection and Information Sharing
- Image Use
- Personal and Intimate Care
- Health and Safety
- Attendance Policy –which includes expectations for reporting child absences and the actions that will be taken if a child is absent without notification or for a prolonged period of time.
- Risk Assessments (e.g. trips, Use of technology)
- First Aid and Accidents
- Administering Medicines
- Staff Behaviour Policy/ Code of conduct for staff
- Acceptable Use of Technology
- Children's screen use policy or procedure
- Code of conduct for parents/carers/visitors
- Safer Recruitment
- Whistleblowing
- Complaints
- Food Hygiene
- Emergency Evacuation and lockdown
- Missing child
- Uncollected child
- Visitor policy
- Animal/pet policy, including banned dog breeds and animal visits

17. Policy Review

This policy will be reviewed every academic year or in accordance with statutory guidance updates. All other linked policies will be reviewed in line with their policy review cycle.

The provider will ensure that this policy is shared with staff, volunteers, students, committee members or trustees, and parents or carers as appropriate. Staff will confirm that they have read and understood the policy and associated procedures.

The DSL will ensure that staff members, including volunteers and sessional workers are made aware of any amendments to policies and procedures.

Date approved by Provider/Management team: 31st August 2026

Date reviewed by Provider/Management team: 31st August 2027

SAFEGUARDING AND WELFARE REQUIREMENT: SUITABLE PEOPLE

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



2.1 Employment

Policy Statement

We meet the Safeguarding and Welfare Requirements of the Early Years Foundation Stage, ensuring that our staff and volunteers are appropriately qualified, and we carry out checks for criminal and other records through the Disclosure and Barring Service (DBS) in accordance with statutory requirements.

Procedures

Vetting and Staff selection

- We work towards offering equality of opportunity by using non-discriminatory procedures for staff recruitment and selection.
- All our staff have job descriptions, which set out their roles and responsibilities.
- All staff must have sufficient command of English to keep records, liaise with agencies, understand safety instructions, and summon emergency help when needed.
- We welcome applications from all sections of the community. Applicants will be considered on the basis of their suitability for the post, regardless of disability, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation, sex, age, marriage or civil partnership. Applicants will not be placed at a disadvantage by our imposing conditions or requirements that are not justifiable.
- We follow the requirements of the Early Years Foundation Stage and Ofsted guidance on checking the suitability of all staff and volunteers who will have unsupervised access to children. This includes obtaining references and ensuring they have a satisfactory enhanced criminal records check with barred list(s) check through the DBS. This is in accordance with requirements under the Safeguarding Vulnerable Groups Act (2006) and the Protection of Freedoms Act (2012) for the vetting and barring scheme.
- Where an individual is subscribed to the DBS Update Service we carry out a status check of their DBS certificate, after checking their identity and viewing their original enhanced DBS certificate to ensure that it does not reveal any information that would affect their suitability for the post.

- We keep all records relating to the employment of our staff and volunteers; in particular those demonstrating that suitability checks have been done, including the date of issue, name, type of DBS check and unique reference number from the DBS certificate, along with details of our suitability decision.
- We require that all our staff and volunteers keep their DBS check up-to-date by subscribing to the DBS Update Service throughout the duration of their employment with us.
- Our staff are expected to disclose any convictions, cautions, court orders, reprimands and warnings which may affect their suitability to work with children – whether received before, or at any time during, their employment with us.
- We obtain consent from our staff and volunteers to carry out on-going status checks of the Update Service to establish that their DBS certificate is up-to-date for the duration of their employment with us.
- Where we become aware of any relevant information which may lead to the disqualification of an employee, we will take appropriate action to ensure the safety of children. In the event of disqualification, that person's employment with us will be terminated.

Notifying Ofsted of changes

We inform Ofsted of any changes to our Registered Person (trustees of our provision) and our manager.

Training and Staff development

- Our manager holds the BA Hons in Early child study - level 6, early years professional status (EYP) and Deputy/Room Leaders hold the CACHE Level 3 Diploma for the Children and Young People's Workforce or an equivalent qualification and our other staff members hold the CACHE Level 2 Certificate for the Children and Young People's Workforce or an equivalent or higher qualification.
- From 1 September 2025, we ensure all staff counted in ratios meet the DfE's Early Years Qualification Requirements and Standards (2025). This includes those recognised through the Experience-Based Route (EBR) for Level 3 staff, who must satisfy the DfE criteria before being included in ratios.
- All practitioners complete safeguarding training that meets Annex C of the EYFS 2025 and renew it at least every two years, with annual updates via staff meetings or online refreshers
- We provide regular in-service training to all our staff - whether paid staff or volunteers - through the Pre-school Learning Alliance and external agencies.

- Our budget allocates resources to training.
- We provide our staff with induction training in the first week of their employment. This induction includes our Health and Safety Policy and Safeguarding Children and Child Protection Policy. Other policies and procedures are introduced within an induction plan.
- We support the work of our staff by holding regular supervision meetings and appraisals.
- We are committed to recruiting, appointing and employing staff in accordance with all relevant legislation and best practice.

Staff taking medication / other substances

- If a member of staff is taking medication which may affect their ability to care for children, we ensure that they seek further medical advice. Our staff will only work directly with the children if medical advice confirms that the medication is unlikely to impair their ability to look after children properly.
- Staff medication on the premises will be stored securely and kept out of reach of the children at all times.
- If we have reason to believe that a member of our staff is under the influence of alcohol or any other substance that may affect their ability to care for children, they will not be allowed to work directly with the children and further action will be taken.
- Smoking, vaping, or use of e-cigarettes is not permitted anywhere on the premises when children are present or about to be present.

Managing staff absences and contingency plans for emergencies

- Our staff take their holiday breaks when the setting is closed. Where a staff member may need to take time off for any reason other than sick leave or training, this is agreed with our manager with sufficient notice.
- Where our staff are unwell and take sick leave in accordance with their contract of employment, we organise cover to ensure ratios are maintained.
- Sick leave is monitored and action is taken where necessary, in accordance with the individual's contract of employment.
- We have contingency plans to cover staff absences, as follows:

In the unlikely event that Manager, Deputy Manager, Senior Practitioner and Room Leader are all absent from pre-school due to illness or personal emergency, parents will be notified immediately by the Chair or Vice Chair that the setting will be forced to close until one returns or sufficient arrangements have been made with existing qualified staff for cover or Simply Education (supply agency), vetted level 3.

In the case that the Pre-School Assistant is absent, pre-school will remain open with the manager Gemma Carpenter providing numbers are within ratios and support staff are in place.

Other useful Pre-School Learning Alliance publications

- [A120 New Employee Handbook](#) (Alliance Publication)
- [A128 Recruiting Early Years Staff](#) (Alliance Publication)
- [A129 People Management in the Early Years](#) (Alliance Publication)



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.

Procedures

- 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, may be considered to be counted in the ratios if our manager deems them to be suitably qualified and experienced.
- We take out employers' liability insurance and public liability insurance, which covers both students and voluntary helpers.
- 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.
- Suitable students on long term placements and volunteers (aged 17 or over) and staff working as apprentices in early education (aged 16 or over) may be included in the ratios at the level below their level of study, if the provider is satisfied that they are competent and responsible and if they hold a valid and current PFA qualification.



2.3 Recruitment Checks

Obtaining References

As part of our commitment to safer recruitment we will always obtain references from applicants for roles in our setting. Robust recruitment checks are essential to ensuring that unsuitable persons cannot have contact with children through employment with us.

Obtaining references is an essential element of our recruitment process. We will always obtain a reference prior to employment commencing in line with the requirements of the EYFS 2025 paragraphs 3.20-3.21 as follows:

- Our application process requires candidates to supply us with the contact details of a suitable referee from:
 - Their current or most recent employer, training provider or early years education and care setting
 - A senior person within the organisation who is authorised to provide a reference.
- If the applicant is not currently employed, or is not currently working with children we will:
 - Obtain verification of the applicants most recent relevant employment if they are not currently employed
 - Obtain a reference from the applicants most recent relevant employer from the last time they worked with children
- If the applicant has never worked with children we will obtain a reference from their current employer, training provider or education setting.
- We do not accept references from the following
 - Family members
 - A generic reference i.e. 'to whom it may concern'.

Once a reference is received

- A reference received electronically will be verified for authenticity.
- We will compare the information on the original application form against relevant information given in the reference, for example, checking that dates align, and roles and responsibilities listed are consistent. Where this is not the case, we will take up any discrepancies with the applicant.
- If information is incomplete or we feel it is insufficient for us to make an informed decision about the applicant's suitability, we will contact the referee for clarification.

- Before an offer of employment is made, we will ensure any concerns are resolved satisfactorily.
- In line with best practice, we will seek to gain explanations for any gaps in employment.

Giving references

We provide factual, timely references for former staff.



2.4 Staff Deployment

Members of staff, including assistants, bank staff and students (where eligible to be counted in ratios) at Great Tew Pre-School are deployed to meet the care and learning needs of children and to always ensure their safety and well-being.

- Two members of staff are on the premises before children are admitted in the morning and the end of the day; one of which should be the manager or deputy.
- Only those staff aged 17 or over are included in ratios. Staff working as apprentices (aged 16 or over) may be included in the ratios if the setting manager is satisfied that they are competent and responsible. Except in the cases of apprentices, only those aged 17 and over may be included in the ratios and only if the setting manager is satisfied, they are suitable, (staff under 17 should be supervised at all times).
- At least one Paediatric First Aider must always be on site when children are present, and at least one Paediatric First Aider must be present and within sight and sound of children at mealtimes. Consideration will be given around staff breaks, lunchtimes and absences from the setting so that Great Tew Pre-School is compliant with paediatric first aid requirements.
- A list of Paediatric First Aid qualified staff is displayed in the setting and available to parents on request.
- The setting manager deploys staff to give adequate supervision of indoor and outdoor areas, ensuring that children are always within sight or hearing of staff. Whilst eating, children must be within sight and hearing of a member of staff and where possible the staff member will be sat facing children when eating.
- All staff are deployed according to the needs of the setting and the children attending.
- In open plan provision, staff are positioned in areas of the room and outdoors to supervise children and to support their learning.
- Staff are responsible for ensuring that equipment in their area is used appropriately and that the area is tidy at the end of the session.
- Staff plan their focus on activities.
- Staff inform colleagues if they must leave the room for any reason.
- There are two members of staff outside in the garden when it is being used, one of whom supervises climbing equipment that has been put out.
- The setting manager may direct other members of staff to join those outside, if the numbers of children warrant additional staff.

- Staff always focus their attention on the children whilst having a wider awareness of what is happening around them.
- Staff do not spend working time in social conversation with colleagues.
- Staff allow time for colleagues to engage in 'sustained shared interaction' with children and do not interrupt activities led by colleagues.
- Sufficient staff are available at story times to engage children.
- Key persons spend time with key groups daily; these times are not for focussed activities but for promoting shared times and friendship.

Staff children

- Where members of staff have their own children with them at the setting, the age of the child must fall within the stipulated ages of the setting's Ofsted registration.
- Where members of staff are likely to be working directly with their own children, this is subject to discussion before commencement with the setting manager.
- Where it is agreed that a member of staff's child attends the setting, it is subject to the following:
 - the child is treated by the parent and all staff as any other child would be
 - the child will not be in the parent/carers key group of children
 - the key person and parent will work towards helping the child to make a comfortable separation from the parent to allow the parent to fully undertake their role as a staff member of the setting
 - the key person will take responsibility for the child's needs throughout the day, unless the child is sick or severely distressed
 - time and space are made for the parent to breastfeed during the day, if that is their chosen method of feeding
 - the situation is reviewed as required, to ensure that the needs of the child are being met, and that the parent/carer can fulfil their role as a member of staff
 - If it is the setting manager's child, then their line manager ensures the criteria above is met



2.5 Deployment of volunteers & parent/carers helpers

Policy Statement

We take the safety and welfare of our children and staff seriously. This ensures staff behave in an appropriate manner to act as a role model for and to protect all children in our care. Within this policy we will also ensure that any changes to staff behaviours or ways of working are closely monitored, discussed, and supported to ensure all children are safeguarded throughout their time here

Volunteers and parent/carers helpers are always under the supervision of a permanent member of staff. They are not included in staff ratios, or as the two members of staff needed on the premises before children are admitted in the morning or at the end of the day. *(This can be removed for sessional settings, who operate with 2 or 3 members of staff where the volunteer helper enables the session to run, while the play leader in charge finds cover staff.)*

- The setting manager ensures that volunteers and parent/carers helpers are deployed to assist permanent staff.
- Volunteers and parent helpers assist staff in ensuring that the equipment in their designated area is used appropriately and that it is left tidy at the end of the session.
- Volunteers and parent/carers helpers give additional support for busy areas or to track or observe children.
- Volunteers and parent/carers helpers inform colleagues where they are going if they leave the room at any time.
- Volunteers and parent/carers helpers do not have unsupervised access to children; they do not take them into a separate room for an activity or toileting and do not take them off premises.
- Volunteers and parent/carers helpers are deployed in addition to two members of staff in the garden/outdoor area when in use.
- The setting manager can direct volunteers and parent/carers helpers to join those outside if the numbers of children warrant additional numbers of staff available.
- Volunteers and parent/carers helpers always focus their attention to children.
- Volunteers and parent/carers helpers do not spend time in social conversation with colleagues while they are with children.

- Volunteers and parent/carer helpers allow time for colleagues to engage in 'sustained shared interaction' with children and do not interrupt activities led by colleagues.
- Sufficient volunteers and parent/carer helpers are available to support staff at story and other circle times.



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 up to six months. 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 first 12 weeks induction forms part of the probationary period.
- Following induction, we continue to support our staff to deliver high quality performance through [regular training updates](#), supervision and appraisal of their work.

Other useful Pre-School Learning Alliance Publications

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

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 always a first aid box accessible with appropriate contents 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 can 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 will be present at any one time where there are children present. Newly qualified staff who achieved an early year's qualification at level 2 or 3 on or after 30 June 2016 are also required 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 undertake due diligence when choosing first aid training to 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:

- Triangular bandages (ideally at least one should be sterile) x 4.
- Sterile dressings:
 - Small x 3;
 - Medium x 3;
 - Large x 3;
 - Sterile swabs
- 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.

- Digital thermometer.
- Hydrogel burn dressing/burn soothe
- Whistle
- Emergency foil blankets
- Resuscitation shield
- Ear Thermometer, spare caps and spare AA batteries
- Forehead temp strip
- Roll hypo allergenic tape
- Finger bandage/ applicator
- Pair of safety scissors
- Sterile wipes
- Tick Twister
- Pulse Oximeter
- SAM Splint
- Emergency Disposable bag
- Clingfilm
- 2 pairs of disposable plastic (PVC or vinyl) gloves.
- 1 plastic disposable apron.
- Masks
- Plastic Glasses
- Wipes
- Single pack Ice packs- koolpak

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

- A supply of ice packs are kept in the freezer.
- LifeVac - LifeVac is currently the only airway clearance device registered & regulated by the UK MHRA **for use on anyone and by anyone when first aid has failed after all basic life support choking rescue protocols have been followed.** Each LifeVac Travel Kit comes with 4 masks (paediatric to large adult) and one training mask which can be used by staff for training. All staff will undergo training to use the **Lifevac and understand it is only to be used as a last resort, and where basic life support choking rescue protocols have been followed first and have failed.**

Information about who has completed first aid training and the location of the first aid box is provided to all our staff and volunteers. A list of staff and volunteers who have current PFA certificates is displayed in the setting/made available to parents.

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 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 on our Family online platform 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)

Statutory Framework

- Early Years Statutory Framework 2025

Further guidance

- First Aid at Work: Your questions answered (HSE Revised 2015)
- Basic Advice on First Aid at Work (HSE Revised 2012)

- Guidance on First Aid for Schools (DfE Revised 2014)
- Lifevac: [The Oliver Steeper Foundation | Charity Registration Number 1207047](#)

Other useful Pre-school Learning Alliance publications

- First Aid Management Record (2016)
- Medication Administration Record (2017)



3.3 Supervision

Policy Statement

Each child must be assigned a key person (also a safeguarding and welfare requirement). Providers must inform parents and/or carers of the name of the key person, and explain their role, when a child starts attending a setting. The key person must help ensure that every child's learning and care is tailored to meet their individual needs. The key person must seek to engage and support parents and/or carers in guiding their child's development at home. They should also help families engage with more specialist support if appropriate.

A quality learning experience for children requires a quality workforce. A well-qualified, skilled staff strongly increases the potential of any individual setting to deliver the best possible outcomes for children.

Purpose of supervision

- Discuss and review staff members work load.
- Monitor progress and review the direction of their work.
- Identify any gaps in training need and skills in order to enhance professional development.
- Celebrate work achievements.
- A place to be challenged supportively and constructively.
- Issues related to work addressed.
- Emotional well-being/work-life balance; a place for personal development.
- Mutually agreed and acceptable boundaries.
- A place to offload.

Practitioner can expect from supervision

- A place where guidance is received.
- To be challenged; a place to address actions to follow up.
- That notes and records of the sessions are made and stored appropriately.
- An assessment of training needs.
- Support is offered.

- That the supervisor has an understanding of the practitioners work and workload.
- Acknowledgment and praise received.
- Work is discussed and targets agreed.
- Discuss any issues – particularly concerning children’s development or well-being.
- Identify solutions to address issues as they arise.
- Receive coaching to improve their personal effectiveness.
- A place where personal things (not work related) can be discussed; but this is optional.
- A place to offload.

Procedure

- Supervision meetings usually last approximately one hour.
- Supervision should take place in a private and uninterrupted space.
- If meetings have to be cancelled for any reason they should be rescheduled as soon as possible.
- Notice and relevant paperwork will be given to the employee prior to supervision meetings.
- Both parties should bring relevant paperwork to the meetings.
- It is the supervisor’s responsibility to record the meeting and provide a copy for the practitioner and file appropriately.
- Both parties should sign the agreed paperwork.
- A date for the next meeting should always be arranged before the end of the supervision.
- Supervisors and supervised are jointly responsible for ensuring that the discussions and meetings occur regularly and are given priority. All reasons for deferring or cancelling planned supervision sessions or non-attendance at group supervision sessions will be recorded.

Confidentiality

- Confidentiality will be maintained in accordance with the confidentiality policy.

Strategy Guidance

- Early Years Workforce Strategy - DfE



3.4 Staff Code Conduct

Policy Statement

We take the safety and welfare of our children and staff seriously. This ensures staff behave in an appropriate manner to act as a role model for and to protect all children in our care. Within this policy we will also ensure that any changes to staff behaviours or ways of working are closely monitored, discussed, and supported to ensure all children are safeguarded throughout their time here

Expected staff behaviour

- Put our children first. The safety, welfare and ongoing development of children is the most important part of their role.
- Behave as a positive role model for the children in their care by remaining professional at all times and demonstrating caring attitudes to all.
- Work as part of the wider team, cohesively and openly.
- Be flexible, dependable and punctual. To be honest and trustworthy in word and deed. Be hard working and willing, motivated, and happy. To use your initiative.
- Be welcoming and professional at all times.
- Ensure your knowledge and expertise is up to date and relevant.
- Contribute to and promote an environment that is free from discrimination, bullying and harassment.
- Promote equal opportunities within the nursery regardless of age, gender, race, religion, culture or background.
- Be aware of their requirements under the Statutory Framework for the EYFS and the nursery policies and procedures designed to keep children safe from harm whilst teaching children and supporting their early development.
- React appropriately to any safeguarding concerns quickly and concisely in accordance with relevant procedures and training received.

- Comply with our health and safety policy and understand your shared responsibility for health and safety.
- Not share any confidential information relating to the children, nursery or families using the nursery.
- Maintain the public image of the nursery and do nothing that will put the setting into disrepute.
- Ensure that parental relationships are professional and external social relationships are kept professional. If a relationship exists prior to the child starting at the setting, discussions with management will be held to ensure the relationship remains professional.
- Adhere to the online safety policy.
- Report to management immediately any changes in their personal life that may impact on the ability to continue the role. These may include (but are not limited to) changes in police record, medication or any social service involvement with their own children.
- Ensure all personal belongings including mobile phones and medication are kept locked in your locker at all times.

Monitoring staff behaviour

Within the setting we:

- Conduct regular peer observations using all staff and management, during which we observe interactions between staff and children.
- Have regular supervisions with all staff in which ongoing suitability is monitored and recorded.
- Have a Whistleblowing policy that enables team members to discuss confidentially any concerns about their colleagues.
- Operate staff suitability checks and clauses in staff contracts to ensure any changes in their suitability to work with children are reported immediately to management.
- Ensure all new staff members are deemed suitable with the appropriate checks as detailed in the Safer recruitment of staff policy.

Some behaviours that may cause concern and will be investigated further include:

- Change in moods.
- Sudden change in religious beliefs and/or cultural beliefs (which may indicate radicalisation)
- Changes in the way they act towards the children or the other members of the team (becoming more friendly and close, isolation, avoidance, agitation etc.)
- Sudden outbursts

- Becoming withdrawn
- Secretive behaviours
- Missing shifts, calling in sick more often, coming in late
- Standards in work slipping.
- Extreme changes in appearance.

Procedure

If we have a concern about changes in staff behaviour within the setting, an immediate meeting will be called with the individual and a member of management to ascertain how the person is feeling. We will aim to support the staff wherever possible and will put support mechanisms in place where appropriate.

Ultimately, we wish to ensure all staff are able to continue to work with the children as long as they are suitable to do so, but if any behaviours cause concern regarding the safety or welfare of the children then the Safeguarding children and child protection policy will be followed. In the case of allegations against a staff member, the Local Authority Designated officer (LADO) will be contacted.

Confidentiality:

- All conversations, observations and notes on the staff member will be logged and kept confidential.
- Confidentiality will be maintained in accordance with the confidentiality policy.

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. We are committed to the key person approach which benefits the child, the parents, the staff and the setting. It encourages secure relationships which support children to thrive, give parents confidence and make the setting a happy 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 our staff. We also want parents to have confidence in both their children's well-being and their role as active partners with our setting. We aim to make our 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 child must have a key person. These procedures set out a model for developing a key person approach that promotes effective and positive relationships for children.

Procedures

- We allocate a key person before the child starts.
- All key persons complete safeguarding training that meets Annex C of the EYFS (2025) to ensure they can identify, record and report concerns promptly.
- The key person is responsible for:
 - Providing an induction for the family and for settling the child into our setting;
 - 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;

- Offering unconditional regard for the child and being non-judgemental;
 - Working with the parents to plan and deliver a personalised plan for the child's well-being, care and learning.
 - Acting as the key contact for the parents;
 - 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;
 - Having links with other carers involved with the child and co-ordinating the sharing of appropriate information about the child's development with those carers;
 - Encouraging positive relationships between children in her/his key group, spending time with them as a group each day.
- Where practicable, the key person and parents share the progress-check summary with the child's health visitor to support the integrated review required at age two.
 - Key persons work closely with the Special Educational Needs Coordinator (SENCO) and follow the SEND Code of Practice (2015, updated 2025) where additional needs are identified.
 - 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 adults and children.

Settling in

- Before a child starts to attend our 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.
- 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 and the manager 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 first session, gradually taking time away from their child; increasing this time 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 re- settle 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. This is to be reviewed after two weeks if still required. Review is on the basis of the suitability and sustainability within the setting if extension is required as well as the needs and development of the individual child
- 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 us 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.

Other useful Pre-School Learning Alliance Publications

- Statutory Framework for the Early Years Foundation Stage (DfE, 2025) Working Together to Safeguard Children (2023)
- Being a Key Person in an Early Years Setting (2015)
- Creating a Learning Environment in the Home (2015)

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

Staff including childminder assistance, taking on the role of key person must have supervision meetings in line with this procedure

4.2 Key person supervision

Structure

- Supervision for staff with key-person responsibilities will take place at least every 6 weeks or half-termly, and more frequently where a child's welfare requires it.
- Key persons are supervised by the setting manager or deputy.
- Supervision meetings are held in a confidential space suitable for the task.
- Key persons should prepare for supervision by having the relevant information to hand.

Content

The child focused element of supervision meetings must include discussion about:

- the development and well-being of the supervisee's key children and offer staff opportunity to raise concerns in relation to any child attending. *Safeguarding concerns must always be reported to the designated safeguarding lead immediately and not delayed until a scheduled supervision meeting*
- reflection on the journey a child is making and potential well-being or safeguarding concerns for the children they have key responsibility for
- promoting the interests of children.
- coaching to improve professional effectiveness based on a review of observed practice/teaching
- reviewing plans and agreements from previous supervisions including any identified learning needs for the member of staff
- During supervision staff can discuss any concerns they have about inappropriate behaviour displayed by colleagues but must never delay until a scheduled supervision to raise concerns.
- Staff are reminded of the need to disclose any convictions, cautions, court orders, reprimands and warnings which may affect their suitability to work with children that have occurred during their employment. New information is referred immediately to the designated officer/line manager/childminder agency.

Recording

- Key person supervision discussions are recorded and retained by the supervisor and a copy provided to the key person.
- The key person and supervisor must sign and date the minutes of supervision within 4-6 weeks of it happening and disagreements over recorded content must be minuted.
- Each member of staff has a supervision file that is always stored securely, and supervision records are subject to UK GDPR and Data Protection Act 2018.
- Supervision discussions identify training needs that are added to the setting's professional-development plan, ensuring staff meet EYFS 2025 Section 3.34 requirements on qualifications, training, support and skills.
- Concerns raised during supervision about an individual child's welfare may result in safeguarding concerns not previously recognised as such, these are recorded on 06.1b Safeguarding incident reporting form and placed on the child's file. The reasons why the concerns have not previously been considered are explored.
- Additional safeguarding or welfare decisions made in relation to a child during supervision are recorded on the individual case file. The supervisor (if not the designated safeguarding lead) should ensure the recording is made and the designated safeguarding lead is notified.

Checking continuing suitability

- Supervisors check with staff if there is any new information pertaining to their suitability to work with children. This only needs to be recorded on the supervision meeting record.
- Where staff are on zero hours contracts or are employed as and when needed, their line manager completes the staff suitability self-declaration form quarterly, and/or at the beginning of every new period of work.
- Regarding the use of agency staff/support workers/self-employed persons there is an expectation that as part of the agreement with agencies they have sought information regarding their employee's suitability to work with children. Line managers must review this regularly.
- The position for students on placement is the same as that for agency staff

Exceptional Circumstances

Where exceptional circumstances prevent staff from conducting supervision as outlined in this procedure, the line manager is informed in writing, a copy placed on the supervision file and the appropriate actions agreed to ensure that the setting meets its obligations within the EYFS.

Other useful Pre-School Learning Alliance Publications

- Statutory Framework for the Early Years Foundation Stage: With non-statutory supporting documentation (2020)
- Being a Key Person in an Early Years Setting (2015)
- Creating a Learning Environment in the Home (2015)
- [Recruiting Early Years Staff](#) (Alliance Publication)
- [People Management in the Early Years](#) (Alliance Publication)



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

- Children aged two years: 1 adult : 5 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 (aged 17 or over) and apprentices (aged 16 or over), where we deem them to be suitably qualified and experienced.
- A minimum of two staff/adults are on duty at any one time; one of whom is either our manager, deputy, senior practitioner or room leader.

- 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.

Strategy Guidance

- Early Years Workforce Strategy – DfE

Other useful Pre-School Learning Alliance Publications

- The New Early Years Employee Handbook (2019)
- Recruiting Early Years Staff (2016)
- People Management in the Early Years (2016)



5.2 Grievance Policy and Procedure

Policy Statement

Great Tew Pre-School is committed to an open and honest method of working. In the first instance staff should try to resolve grievances in an informal way, via a discussion with their manager. Only if the grievance is deemed sufficiently serious, or if informal measures have not resolved the matter satisfactorily, should formal action be taken. Employees should then raise any difficulties arising, (or experienced by employees as a result of actions or omissions by the organisation), with their manager.

Procedures

Step 1: Inform the Employer

- The employee should inform the employer of his or her grievance.
- The manager should deal with all grievances raised, whether or not the grievance is presented in writing. However, employees need to be aware that if the statutory procedure applies, they will not subsequently be able to take the case to an employment tribunal unless they have first raised a grievance in writing and waited a further one calendar month before presenting the tribunal claim.
- Where the issue relates to the conduct of the manager or another colleague, and the employee feels unable to approach them directly, the chair of the nursery should be notified directly. Where the issue relates to the manager the deputy manager should be notified.

Step 2: Meeting and Decision

- On receiving a formal grievance, a manager should invite the employee, in writing, to a meeting within five working days and inform them that they have the right to be accompanied. It is good practice to agree a time and place for the meeting with the employee. If the person to accompany the employee cannot attend on a proposed date, the employee can suggest another date so long as it is reasonable and is not more than five working days after the date originally proposed by the employer. This five-day time limit may be extended by mutual agreement.

- The employee should be allowed to explain their complaint and say how they think it should be settled. If the employer reaches a point in the meeting where they are not sure how to deal with the grievance or feel that further investigation is necessary, the meeting should be adjourned to get advice or make further investigation. The employer should give the grievance careful consideration before responding.
- The employer should respond in writing to the employee's grievance within five working days and should let the employee know that they can appeal against the employer's decision if they are not satisfied with it. If it is not possible to respond within five working days, the employee should be given an explanation for the delay and told when a response can be expected.

Step 3: Appeals

- If an employee informs the employer that they are unhappy with the decision after a grievance meeting, the employer should arrange an appeal. It should be noted that the appeal stage is part of the statutory procedure and if the employee pursues an employment tribunal claim, the tribunal may reduce any award of compensation if the employee did not exercise the right of appeal. As far as is reasonably practicable, the appeal should be with a more senior manager or committee member than the one who dealt with the original grievance. In small organisations, even if there is no more senior manager/committee member available, another manager should (if possible) hear the appeal. If that is not an option, the person overseeing the case should act as impartially as possible. At the same time as inviting the employee to attend the appeal, the employer should remind them of their right to be accompanied at the appeal meeting.
- As with the first meeting, the employer should write to the employee with a decision on their grievance within five working days. They should also tell the employee if the appeal meeting is the final stage of the grievance procedure.

Step 4: Keeping Records

- It is important, and in the interests of both employer and employee, to keep written records during the grievance process. Records should include:
 - The nature of the grievance raised;
 - A copy of the written grievance;
 - The employer's response;
 - Action taken;
 - Reasons for action taken;
 - Whether there was an appeal and, if so, the outcome; and

- Subsequent developments.
- Records should be treated as confidential, stored securely, and treated in accordance with the UK GDPR and Data Protection Act 2018, which gives individuals the right to request and have access to certain personal data.
- Copies of meeting records should be given to the employee, including any formal minutes that may have been taken. In certain circumstances (for example to protect a witness) the employer might withhold some information.

Summary: Under the statutory procedure, employees must

- Step 1 - Inform the employer of their grievance in writing.
- Step 2 - Be invited by the employer to a meeting to discuss the grievance where the right to be accompanied will apply and be notified in writing of the decision. The employee must take all reasonable steps to attend the meeting.
- Step 3 - Be given the right to an appeal meeting if they feel the grievance has not been satisfactorily resolved and be notified of the final decision.

Further Guidance

- Can be found at www.legislation.gov.uk, or www.hse.gov.uk, or other government websites.



5.3 Absence Policy

Introduction

Most staff will have some absence due to ill health and this is to be expected in any organisation. The majority of sickness absence is unpredictable and though it may cause operational problems has to be dealt with on a day to day basis. The Absence Policy details the nursery's approach to this. However, when there is persistent or long term sickness appropriate action will be taken to ensure the effective provision of education at the nursery. In such cases, refer to Section 5, the procedures for managing excessive or persistent absence.

The fundamental principle of this policy is that the needs of the nursery are balanced with the interests and circumstances of each individual employee. Staff will be treated fairly and with dignity and the principle aim is, where possible, to seek an effective return to work.

Sickness Absence

Reporting Procedure

- A member of staff who is absent sick should report the absence as early as possible but in any case before 8.00 am on the day of the absence.
- The absence, unless physically impossible, should be reported in person and not through a third party.
- Unless it is clear at the outset that the sickness absence will last for a considerable time e.g., Chicken Pox, the reporting procedures should apply on each day of absence.
- Absence relating to mental-health conditions will be managed with the same sensitivity and support as physical illness, including referral to occupational-health or well-being services where appropriate.

Certification Procedures

- For any long or unexpected absence a self-certification form/ Absence and Sickness Return to Work form should be completed on return to work.
- For absences of longer than four days a medical certificate is required (note: absence over weekends or holiday is included in calculation of continued sickness absence).

- The pre-school may, in exceptional circumstances, require a medical certificate for any absence. If this is the case the pre-school would pay any charges incurred.

Time off for Medical Appointments

- It is expected that appointments for doctors, dentist etc., should, where possible, be arranged in an employee's own time or at the beginning or end of the working day.
- Time off will normally be granted provided adequate notice has been given. If there are a large number of appointments over a period of time consideration may need to be given for time to be made up. Appointment cards will be requested.
- If the employee is unable to change their appointment to an afternoon appointment, time off for antenatal classes will be given, again, an appointment card will be requested.

Return to Work

- Staff are expected to keep the nursery informed as to the progress of any sickness absence and should inform the school every day and prior to return, of the date of the return.
- If the absent has been long or unexpected, on return to work, the member of staff will have a Return to Work Meeting with their manager in order to be kept up to date with developments at work and fill out a self-certification form/Absence and Sickness Return to Work Form. This meeting is likely to take place on the day of return but could be arranged for another time.
- Return-to-work meetings and regular supervision include discussion of staff well-being to identify any support or reasonable adjustments needed.
- Any member of staff who has continual periods of intermittent or consistent absences in an academic year may be asked to meet with their manager to discuss absences.
- The pre-school may ask a member of staff to give their consent to access medical reports. Any such requirement will be subject to the Access to Medical Reports Act 1988.

Procedures for Managing Excessive or Persistent Absence

- Each case will be different but the following points among others may be considered when determining any appropriate action:
 - The need for medical opinion;
 - The nature of the illness;
 - The likelihood of recurring or other similar problems arising;
 - The length of sickness absence or the pattern of absence;

- The impact of absence on other staff and effective curriculum delivery;
 - The professional levels & standard of work affected by absence;
 - Any steps already taken to address the issue;
 - Consistency of approach;
 - The relevant provisions of the Disability Discrimination Act 1995 ; and
 - The need for a Disciplinary Procedure.
- If there is evidence that the reasons for absence are not genuine then the matter will be fully investigated and depending on the outcome dealt with as misconduct under the school's disciplinary procedure.

Informal Stage

- A member of staff who has been identified as having a level of, or frequency of, absence which gives cause for concern should be invited to a counselling interview with the Manager.
- The purpose of the meeting will be to:
 - Explain concern at the current absence level;
 - Explore the reasons for it; and
 - Agree strategies to resolve any problems which might improve attendance and identify areas of support and assistance.
- At this stage the interview is as informal as possible with the emphasis on counselling and support. The employee may choose to have a friend or colleague present. In this instance the Manager may also be accompanied.
- At the conclusion of the interview the Manager should summarise the main points discussed including:
 - Concern about the level of absence;
 - The action points that have been agreed including assistance and support; and
 - That the situation will be reviewed.
- A record of the meeting and the agreed outcome will be kept indicating the employee's responses. A copy should be given to the employee.
- If a member of staff has had a long period of absence (two months) subsequent to the commencement, or during consideration of, formal competency or during procedures the case will go straight to Stage 2 of these procedures.
- If during absence due to illness a member of staff declines to attend this interview without due course or participate at any further stage during this process, it may be necessary to proceed

straight to Stage 3 of these procedures. This may also apply if, when asked, an employee declines to give permission to access medical reports.

First Stage

- A member of staff who has failed to show a reasonable improvement in attendance, or whose attendance has deteriorated following some initial improvement, will be required to attend a formal interview. The Manager will seek appropriate advice at this stage if necessary.
- Notification of the meeting should be in writing giving the date, time, place and reason for the meeting. The purpose will be to:
 - Explore why the absence level continues to cause concern and the reasons for it;
 - Offer any further help or guidance;
 - Establish a review period; and
 - Seek permission to access medical reports through the LEA's (Local Education Authority) medical advisors.
- If, after medical advice, in consultation with the member of staff, it is apparent that a medical condition may be chronic and will continue to effect attendance, then consideration may need to be given to move to Stage 3. In such instances a supportive approach should be agreed and consideration given to alternative work or any reasonable adjustment in the workplace.
- A record of the interview will be kept including the employee's response and any agreed areas of support and assistance.
- The Manager will again stress the points made at the previous stage and the need for continuous monitoring. This period will vary according to circumstances and will be agreed at a review meeting. In addition, the Manager may issue a warning as part of this procedure that unless there is an ongoing significant improvement in attendance at work their job could be at risk subject to employment protection rights.
- A letter confirming the above warning and a record of the meeting should be sent to the employee.
- If the employee's record is significantly improved at this stage the Manager will write to the member of staff to recognise this and that the improvements should be maintained.

Second Stage

- An employee who has not shown sufficient improvement following the Stage 1 interview or a member of staff who is absent due to formal competency procedures may be required to attend a formal hearing before the Head.

- Notification of the meeting will be in writing giving the time, date and place of the meeting, the reason and status of the meeting and a reminder of the employee's rights of representation. At least seven days' notice will be provided. The purpose of the hearing will be to:
 - Explore why the absence level continues to be of concern;
 - Explain continued concern at that absence level and the impact on the nursery; and
 - Explore other options such as ill health retirement, redeployment, stepping down etc
- Referral to another doctor may be sought at this time.
- Dependent on the outcome of the hearing the Manager may formally warn the employee that the absence level is unsatisfactory and that a failure to improve may result in termination of employment.

Third Stage

- An employee who has not shown sufficient improvement following Stage 2 will be required to attend a formal hearing before a panel of three, the Chair, the Manager and the Administrator. At least one of which should have attended the Safer Recruitment training.
- Prior to this stage being reached, it is expected that other options will have been discussed with the member of staff and/or their representative to resolve the matter.
- The employee will be informed in writing of the date, time and place of the hearing, the reason for the meeting and the right to have representation. At least seven days' notice will be provided.
- The hearing will consider evidence of the absence level, action previously taken, personal circumstances, medical advice and prognosis and any implications of the Disability Discrimination Act and Human Rights Act.
- The Manager/Chair will present the case and the employee and/or their representative will be able to present their case.
- The procedure for the conduct of the hearing will be the same as that for a disciplinary hearing and it is important to stress that should a dismissal result it will be due to ill health or some other substantial reason not for a disciplinary reason.
- If after considering the evidence and all the circumstances surrounding the case the Panel determine that termination of employment is in the pre-school's best interest then the employee will be informed of this (and any rights of notice if appropriate).
- The employee will also receive a written record of the hearing. At this point a letter of termination will be issued. An employee will still have the right to take their case to an Employment Tribunal. If the panel decides, after considering the evidence, not to terminate

employment at this stage, the situation will continue to be appropriately reviewed over a reasonable time period. At the end of this period a panel will be reconvened to reconsider the whole case.

Time Keeping

- All staff are expected to keep to agreed times of work.
- Late arrivals or leaving early may be agreed in exceptional circumstances. Should a pattern of later arrivals etc., without authorisation occur then disciplinary action may be taken.

Annual Leave

- Staff may not take annual leave during pre-school term time unless there are exceptional arrangements agreed with the Manager.
- Paid time off will normally be given subject to the exigencies of the pre-school in the following situation:
 - Jury Service; or
 - Other public duties.
- The power to determine when paid or unpaid leave of absence for public duties remains with the Manager/Chair as well as the decision of the reasonableness and timeliness of the request and the amount of time requested.
- Reasonableness guidelines are as follows:
 - Magisterial duties – 26 sessions (1 session equals ½ day) of which 6 sessions, in the case of teachers, shall be in school closure periods; or
 - Special Leave.
- The Manager/Chair may approve paid special leave in certain circumstances. The following is a list of examples but each case will be judged on its merits. A combination of paid/unpaid leave may be appropriate in some instances:
 - Death of Spouse/Partner Up to 5 days with pay;
 - Death of close family member Up to 5 days;
 - Funeral of other family member/friend Up to 1 day with pay;
 - Serious/terminal illness as requested by arrangement;
 - House Fire 1 day;
 - House Burglary 1 day;

- Sudden illness of child Up to 2 days per year with pay;
- Moving house 1 day with pay;
- Interviews (other) By arrangement; and
- A sympathetic approach will be adopted wherever possible or appropriate.



5.4 Whistle Blowing Policy and Procedure

The whistle blowing procedure aims to help and protect both staff and children. By following the procedure you are acting to:

Prevent a problem getting worse;

Safeguard children and young people, and;

Reduce the potential risks to others.

The earlier you raise a concern, the easier and sooner it is possible for the setting to take action.

Introduction

- Great Tew Pre-School is committed to the highest possible standards and recognises that its staff, students and volunteers are often the first to realise that there may be something wrong within the setting. However, they may not express their concerns because they feel that speaking up would be disloyal to their colleagues or they may fear harassment or victimisation. In these circumstances, it may be easier to ignore the concern rather than report what may just be a suspicion of malpractice.
- The Public Interest Disclosure Act 2013 protects workers who raise concerns from victimisation or harassment. In accordance with that Act and its commitment to the highest standards of service delivery, the setting actively encourages its workers with concerns about any aspect of the setting's practice or any adult's, volunteer's or student's conduct to come forward and voice those concerns, in confidence, within the setting rather than overlooking a problem.

Objective

- The aim of this policy and associated procedures is to establish an internal procedure that will encourage and enable staff, students and volunteers to raise concerns about any aspect of the setting's practice, (which do not meet the criteria for being dealt with as a complaint, grievance or allegation), in confidence and without fear of reprisals, to ensure that the setting continues to work within best practice and safeguard children and young people.

Scope

- Concerns that should be raised via the Whistle Blowing Policy may be in relation to the actions/behaviours of other staff, students or volunteers, or about something that is perceived as:
 - Unlawful;
 - Failing to comply with the setting's policy and procedures;
 - Poor practice; and
 - Improper conduct.

Principles

- This policy is based on the following fundamental principles:
 - All staff, students and volunteers have the right to raise concerns about perceived unacceptable practice or behaviour;
 - The responsibility for expressing concerns about unacceptable practice or behaviour rests with all staff, students and volunteers;
 - The setting will not tolerate harassment or victimisation and will take action to protect workers when they raise a concern in good faith;
 - The setting will do its best to protect a whistle blower's identity when he/she raises a concern and does not want his/her name to be disclosed. However, if the concern raised needs to be addressed through another procedure, e.g. disciplinary procedure, the worker may be required to provide a signed statement as part of the evidence;
 - In some circumstances the setting may have to disclose the identity of the worker without his/her consent, although this will be discussed with the worker first;
 - Appropriate advice and support will be made available to staff, students and volunteers who raise concerns;
 - Those who raise concerns will be kept informed of the progress and outcome of any investigation; and
 - The setting will not tolerate malicious allegations, this may be considered as a disciplinary offence.

Procedures

- Procedures for reporting and investigating 'whistle blowing' concerns have been developed to ensure that:
 - Staff, students and volunteers can raise concerns (no matter how small they may appear) internally as a matter of course, and receive feedback on any action taken;
 - Concerns are taken seriously and dealt with quickly and appropriately;
 - Staff and volunteers are reassured that they will be protected from reprisals or victimisation for whistle blowing in good faith;
 - Staff and volunteers can take the matter further if they are dissatisfied with the setting response and seek external advice and guidance;
 - Issues raised are addressed via other procedures and policies as appropriate, e.g. safeguarding policy, allegations against an adult working in a setting, grievance, disciplinary, health and safety; and
 - Appropriate records are maintained for monitoring purposes.

Raising a Concern

- Staff, students and volunteers should raise concerns with the manager or management committee. Concerns should be raised in writing and include:
 - reference to the fact that it is a whistle blowing disclosure;
 - the background and history of the concerns;
 - names, dates and places (where possible); and
 - the reasons why the individual is concerned about the situation.
- Staff who feel unable to put concerns in writing, can telephone or meet either the manager or a member of the management committee.
- Staff may also contact the NSPCC Whistleblowing Advice Line on 0800 028 0285 or email help@nspcc.org.uk for independent advice.

Who should you contact?

- You should contact one of the following people in confidence: [Gemma Carpenter](#), [Alexa Jolly](#) or [Amy Richardson](#).

Investigation

- The action taken will depend on the nature of the concern. All matters raised, **with the exception of allegations of abuse against a staff member**, or unlawful activity, will be investigated internally.
- The appropriate person/s will investigate the concerns thoroughly, ensuring that a written response can be provided within ten working days where possible and no later than 20 working days.
- The response should include details of how the matter was investigated, conclusions drawn from the investigation, and whom to contact should the staff member be unhappy with the response and wish to raise the matter.
- If the investigation cannot be completed within the timescale above, the staff member should receive a response that indicates:
 - progress to date;
 - how the matter is being dealt with; and
 - how long it will take to provide a final response.
- In order to protect individuals, initial enquiries (usually involving a meeting with the individual raising the concern), will be made to decide whether an investigation is appropriate and, if so, what form it should take. Concerns or allegations that raise issues that fall within the scope of other policies/procedures, will be addressed under those procedures.
- Some concerns may be resolved at this initial stage simply, by agreed action or an explanation regarding the concern, without the need for further investigation.
- If you do not feel that the complaint has been dealt with effectively or you still have concerns, you have a right to refer your concerns to Ofsted.

Allegations of abuse against adults who work or volunteer in the setting

- If an allegation is made against a staff member or volunteer, the following action will be taken:
 - The setting will ensure the immediate safety of the children;
 - The setting will not investigate and immediately contact the Oxfordshire County Council MASH team;
 - The setting will notify Ofsted of a significant incident;

- If the MASH decides that there is a child protection concern, external/internal agencies (e.g. police) will be informed and the setting will act upon the advice given to ensure that any investigation is not jeopardised;
- It may be necessary for the employer to suspend the alleged perpetrator. Suspension is a neutral act to allow a thorough and fair investigation; and
- If it is agreed that there is not a child protection concern, the setting will investigate further and feedback the outcome of the investigation to the MASH and Ofsted.

Useful contacts

Local and Community Support Services (LCSS) [0345 241 2703](tel:0345 241 2703)

Local Authority Designated officer (LADO) Jo Lloyd [01865 810603](tel:01865 810603)

Ofsted [0300 123 1231](tel:0300 123 1231)



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, 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. In the absence of the key person, my assistants 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) 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 (over 37.7 degrees). 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 This is to prevent febrile convulsion and where a parent or named person is on their way to collect the child.

- If a child has a raised temperature, top clothing may be removed to make them more comfortable, but children are not undressed or sponged down to cool their temperature. A high temperature should never be ignored, but it is a natural response to infection;
- 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; and
 - The signature of the parent, their printed name and the date
- The administration of medicine is either uploaded onto our online Famly platform or recorded accurately in our medication record book each time it is given and is signed by the person administering the medication. 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. Famly and 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; and
 - Parent's signature (at the end of the day).

- We either use the medical form on our Famly app or 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 records 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-when- required basis. Key persons check that any medication held in the setting, is in date and return any out-of-date medication back to the parent.

All medication is stored in a locked box in the fridge or in a plastic box in the locked cupboard within the classroom, clearly labelled. All staff are made aware of each child's medical records and how /when medicines should be administered.

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 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 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 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.
- Children's privacy is considered and balanced with safeguarding and support when changing clothing, nappies and toileting.

Managing medicines on trips and outing

- 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)

Other useful Pre-School Learning Alliance Publications

- Medication Administration Record (2017)
- [Guidance on infection control in schools](#) and other childcare settings (Public Health Agency)
- [High Temperature \(fever\) in children](#) - NHS

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. We follow EYFS 2025 paras 3.44–3.47 on promoting children’s health, preventing infection and acting appropriately when children are ill.

Unwell children upon arrival

- On arrival, it is vital that parents/carers inform a member of staff if they notice their child may be showing signs of being unwell. It is the responsibility of the parents / carers to ensure their child does not attend the service if they are not fit to; this is a precautionary measure to prevent other children or staff from becoming ill. If a child is brought into the service with a non-prescription medication to treat a temporary illness or appears to show signs of being unwell, the setting manager will use their discretion to decide whether a child is fit to remain in the service.
- Children’s privacy and dignity are maintained when managing illness, toileting or changing clothes.

Procedure for children who are sick or infectious

- If children appear unwell during the day – for example, if they have a temperature (over 37.7 degrees), 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 (over 37.7 degrees), they are kept cool, by removing top clothing and sponging their heads with cool water, but kept away from draughts.

- The child's temperature is taken using an in ear thermometer, kept in the first aid bag.
- 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 sickness/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 cross-contamination 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 [UK Health Security Agency/Office for Health Improvement & Disparities](#) 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 the UK Health Security Agency (UKHSA).
- When we become aware, or are formally informed of the notifiable disease, our manager informs Ofsted and contacts UKHSA, and acts 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. Transmittable viruses are spread through bodily fluids. Hygiene measures are put in place to protect all staff and children/young people. 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;
 - Bag soiled clothing for parents to take home for cleaning;

- 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; and
- 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.

Handwashing

Handwashing is a crucial infection control measure which reduces the spread of illness. Adults, children and young people should regularly wash their hands, and increase this where there is an infection outbreak.

This should be carried out by all:

- After outside breaks;
- Before meals and snack times;
- Before preparation of snack and meals;
- After using the toilet;
- After nappy or clothing changes;
- After the removal of personal protective equipment (PPE), including gloves;
- After blowing noses;

Before and after administering medication;

The [UKHSA](#) advises that children and staff should be encouraged to catch sneezes with a tissue, bin the tissue and wash their hands.

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; and
- 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; and
 - 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 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/me] 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. 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; and
 - Copies of all letters relating to these children must first be sent to the Pre-school Learning Alliance Insurance Department for appraisal. Written confirmation that the insurance has been extended will be issued by return.
- We ensure our insurance provider confirms cover for children with allergies requiring emergency medication in line with EYFS 2025 para 3.45
- If we are unsure about any aspect, we contact the Early Years Alliance Insurance Department on Tel: 020 7697 2595 or email insurance@eyalliance.org.uk

Infection control

Good practice infection control is paramount in Great Tew Pre School. Young children's immune systems are still developing, and they are therefore more susceptible to illness.

Prevention

- Minimise contact with individuals who are unwell by ensuring that those who have symptoms of an infectious illness do not attend settings and stay at home for the recommended exclusion time (see below UKHSA link).
- Always clean hands thoroughly, and more often than usual where there is an infection outbreak.
- Ensure good respiratory hygiene amongst children and staff by promoting 'catch it, bin it, kill it' approach.

- Where necessary, for instance, where there is an infection outbreak, wear appropriate PPE.

Response to an infection outbreak

- Manage confirmed cases of a contagious illness by following the guidance from the UK Health Security Agency (UKHSA)

Informing others

Early years providers have a duty to inform Ofsted of any serious accidents, illnesses or injuries as follows:

- 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.

In some circumstances this may include a confirmed case of a Notifiable Disease in their setting, if it meets the criteria defined by Ofsted above. Please note that it is not the responsibility of the setting to diagnose a notifiable disease. This can only be done by a clinician (GP or Doctor). If a child is displaying symptoms that indicate they may be suffering from a notifiable disease, parents must be advised to seek a medical diagnosis, which will then be 'notified' to the relevant body. Once a diagnosis is confirmed, the setting may be contacted by the UKHSA or may wish to contact them for further advice. Where a child is hospitalised due to infectious illness, Ofsted is informed within 14 days.

Other useful Pre-School Learning Alliance publications

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



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 record

- is kept and recorded on Famly plat form ;
- 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

- Any accident involving a child is now reported on our online platform Famly, this means that parents get an immediate alert, we also record any actions taken.
- 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; 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.
- 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 Local Authority (LA):
 - 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 suffers from a reportable occupational disease or illness as specified by the LA;
- 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; and
- Information for reporting incidents to the Local Authority is provided in the Pre-school Learning Alliance's Accident Record publication. Any dangerous occurrence is recorded in our incident book (see below).

Death of a child on-site

Identifying

- If it is suspected that a child has died at the setting, emergency resuscitation will be given to the child by a qualified First Aider until the ambulance arrives;
- Only a medical practitioner can confirm a child has died.

Informing

- The designated safeguarding lead ensures emergency services have been contacted, ambulance and police;
- The parents/carers are contacted and asked to come to the setting immediately, informing them that there has been an incident involving their child and that an ambulance has been called, asking them to come straight to the setting or hospital as appropriate;
- The designated safeguarding lead calls the designated officer/line manager [and informs them of what has happened];
- The trustees are contacted and a Confidential safeguarding incident report form prepared by the designated safeguarding lead;

- A member of staff is delegated to phone all parents/carers to collect their children. The reason given must be agreed by the designated officer and the information given should be the same to each parent/carer;
- The decision on how long the setting will remain closed will be based on police advice;
- Ofsted are informed of the incident by the nominated person and a RIDDOR report is made;
- Staff will not discuss the death of a child with the press;

Responding

- The trustees will decide how the death is investigated within the organisation after taking advice from relevant agencies;
- The owners/trustees/directors will coordinate support for staff and children to ensure their mental health and well-being.

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 risk assess[es] this situation and decide[s] 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 Local Authority 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; and
 - 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)
- The Health and Safety (Enforcing Authority) Regulations 1998

Further Guidance

- Early Years Inspection Handbook (Ofsted 2024)
- RIDDOR Guidance and Reporting Form: www.hse.gov.uk/riddor
- [Choosing a first aid training provider](#)

Other useful Pre-School Learning Alliance publications

- Accident Book (2017)
- CIF Summary Record (2016)
- Reportable Incident Record (2015)

SAFEGUARDING AND WELFARE REQUIREMENT: HEALTH

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.

Children's privacy is maintained during nappy changing and toileting, whilst balanced with safeguarding considerations. Nappy changing times are key times in the day for being close and promoting security as well as for communication, exploration, and learning.

We follow EYFS 2025 para 3.75 ensuring children's privacy and dignity are respected and that appropriate supervision is maintained.

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

- Only DBS checked practitioners are authorised to change the children's nappies.
- 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.
- Our key persons undertake changing children in their key groups; back up key persons change them if the key person is absent.
- All children are changed within sight of other staff whilst maintaining their dignity and privacy at all times.

- Mobile phones or personal devices are never used in or near changing areas.
- Our changing area is warm, with a safe area to lay children and no bright lights shining down in their eyes. There are pictures and other objects of interest to take the child's attention.
- Each child has their own changing bags on their named pegs 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. The changing mat and area is clean with antibacterial spray before and after each child is changed.
- All our staff are familiar with our hygiene procedures and carry these out when changing nappies
- 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'
- Soiled nappies are disposed of responsibly in a sanitised bin and collected regularly
- We have a duty of care towards our 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.



6.5 Food and drink

Policy statement

We regard snack and mealtimes 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 varied resources and materials from the Pre-school Learning Alliance and the Community Dental Services. At snack and mealtimes, we aim to provide nutritious food, which meets the children's individual dietary needs. All children will be given fruit or vegetables at snack to have alongside milk or water, all drinks will be offered in an open topped cup at snack time. The children will then be offered a tooth friendly savoury snack such as a bread stick, plain rice cake or cracker, cheese or oatcake. Children are also welcomed to bring in a water bottle, which they can access freely and be topped up when needed with fresh drinking water, we do try to encourage open top drinking as a preference. At each meal/snack time, a named person is responsible for checking that the food provided meets all requirements for each child.

Procedures

As a setting we have previously passed the Healthy Smiles Accreditation course and follow these procedures to promote **healthy eating** and **oral care** 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 show sensitivity 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 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 order to protect children with food allergies, we discourage children from sharing and swapping their food with one another.
- For children who drink milk, we provide semi-skimmed pasteurised milk and oat milk for children with dairy allergies

Packed lunches

- Children can choose to bring packed lunches, we:
 - Inform parents of our **healthy eating** expectations; Put up displays and send regular up to date information via email on **healthy eating**, for example links from the Community Dental Services and healthy lunchbox examples;
 - Encourage parents to provide **tooth friendly** sandwiches with a healthy filling, fruit, vegetables and milk-based deserts, such as yoghurt or crème fraîche. We discourage sweet drinks and can provide children with water;
 - Discourage packed lunch contents that consist largely of crisps, processed foods, sweet drinks and sweet products such as chocolate, cakes or biscuits. We reserve the right to return this food to the parent as a last resort; and
 - 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.

Lunches

- Children can either bring packed lunch or order a hot dinner through us, the cost is £2.90 and are provided by the OCC, cooked and prepared at Enstone school and then transported over to us. New menus will be issued each term.
- The meals will be delivered directly to the classroom at lunchtime. The lunches provided are designed to offer your children tasty and exciting foods, as well as being **healthy**, fresh and

nutritious. Fresh vegetables are served with all meals as well as unlimited access to the salad bar.

- Menus are clearly displayed so that parents and staff know what is being provided.
- Where children have packed lunches, staff promote healthy eating, ensuring that parents/carers are given advice and information about what is appropriate content for a child's lunch box. Parents/carers are also advised to take measures to ensure children's lunch box contents remain cool i.e. ice packs, as the setting may not have facilities for refrigerated storage.
- We ensure that children are supervised at mealtimes and that children are within sight and hearing of a member of staff at all times and where possible staff are sat facing children when eating to ensure they are eating in a way that prevents choking and so they can prevent food sharing and be aware of any unexpected allergic reactions.
- We take into account every child's individual development needs and work in partnership with parents/carers to help children to move on to the next stage with regard to weaning as per the guidance listed below.
- The setting ensures that all staff are aware of the symptoms and treatments for allergies and anaphylaxis and the differences between allergies and intolerances which may develop at any time.

Celebration Guidelines

- At Great Tew Pre-School we recognise that a birthday is a very special time for young children, and we want to ensure it is celebrated in an enjoyable, healthy and tooth friendly way. We do this by all singing 'happy birthday' to the birthday child whilst they wear the birthday hat.
- We ask parent/carers not to bring in any cake or unhealthy treats to celebrate birthdays. Healthy, tooth friendly treats are welcomed, such as fresh fruit that children do not often have, for example strawberries, blueberries, or kiwi fruit. Non -food items are also permitted, for example temporary tattoos, stickers, or small stationary items.
- For any celebrations where we provide food or food-based activities in between meals such as Christmas, Pancake Day, Easter, Chinese New Year etc. we will ensure that the food and drink will be tooth friendly i.e. fresh fruit/vegetables and savoury items, with milk or water to drink.
- At occasional events such as picnics, fun days and prizes that support healthy, tooth friendly choices.

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 for Caterers](#) (Food Standards Agency)
- [Paediatric Allergy Action Plans - BSACI](#)
- [Food allergy - NHS](#)
- [Anaphylaxis - NHS](#)
- [Weaning - Start for Life - NHS](#)
- [Help for early years providers : Food safety](#)
- [Early Years Foundation Stage Nutrition Guidance \(2025\)](#)
- [Allergy action plan](#)

Other useful publications

Pre-school Learning Alliance

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

Community Dental Services

- [Family Fun & Information - Community Dental Services](#)



6.6 Food hygiene

Policy Statement

We serve food for children on the following basis:

- Snacks;
- Packed lunches;
- OCC lunches.

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

Procedures

- 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). 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;
 - 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 handwashing and for washing-up;

- All surfaces are clean and non-porous;
- Parents are requested not to bring food that contains (or may contain) nuts. Staff check packets to make sure they do not contain nuts or nut products;
- All utensils, crockery etc. are clean and stored appropriately; and
- Waste food is disposed of daily.
- Cleaning materials and other dangerous materials are stored out of children's reach.
- Children do not have unsupervised access to the kitchen.
- 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.
- Staff maintain a Food Allergy & Dietary Needs folder with:
 - a list of all children with known food allergies, intolerances or dietary needs updated at least once a term (the personal/medical details about the allergy or dietary needs remain in the child's file along with a copy of the risk assessment). This is displayed for all staff and the risk assessment shared;
 - a record of food menus along with any allergens

Reporting of food poisoning

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.

- 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.
- 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

- Regulation (EC) 853/2004 of the European Parliament and of the Council on the Hygiene of Foodstuffs

Further Guidance

- [Safer Food Better Business](#) (Food Standards Agency 2011)
- [Campylobacter](#) (Food Standards Agency)
- [Food allergy/anaphylaxis](#) guidance
- Early Years Foundation Stage Nutrition Guidance
- [Common Allergens](#)



6.7 Basic kitchen opening and closing checks

This form is for early years settings providing snacks and/or packed lunches only. Settings providing full meals should use *Safer Food Better Business* opening and closing checks.

Enter a tick ✓ and initial if satisfactory. Enter X and initial if not satisfactory and make a note below. Add action taken and if problem is resolved, sign and date.

TO BE COMPLETED ON OPENING & CLOSING

Opening checks date:

--	--	--	--	--

Personal hygiene:

- Hands washed.
- Clean apron.
- Hair tied back.

Fridge/freezer:

- Working properly.
- Temperature checked – record temps.
- Separate containers for shared fridge.

Appliances working:

- Cooker (when in use).
- Microwave.
- Kettle.

Cloths clean:

- Dish.
- Surface.
- T-towels.

Children's food allergies checked (see list).

Food fresh and in-date.

Packed lunches checked and used within 4 hours of preparation.

No physical or chemical or pest contamination of stored food.

Record food temperature after cooking.

Closing checks date:

Unused food put away correctly.

Leftover food and past sell-by-date food discarded.

Crockery and utensils washed up and put away dry.

Dirty cloths removed for washing and replaced.

Work surface clean and disinfected.

Floors clean.

Report any problem(s) here

--

Action taken

--

Further guidance

- Safer Food Better Business (Food Standards Agency 2011)

SAFEGUARDING AND WELFARE REQUIREMENT: HEALTH

This form must be used alongside the individual child's registration form which contains emergency parental contact and other personal details.



6.8 Individual Health Plan

Date completed: _____ Review date: _____

Child's details:

Full name: _____ Date of birth: _____

Address: _____

Allergies: _____

Medical condition/diagnosis _____

Medical needs and symptoms: _____

Daily care requirements: _____

Medication details (inc. expiry date/disposal) _____

Storage of medication: _____

Procedure for administering medication: _____

Names of staff trained to carry out health plan procedures and administer medication: _____

Other information: _____

Date risk assessment completed: _____

Risk assessment details: _____

Describe what constitutes an emergency for the child, what procedures will be taken if this occurs and the names of staff responsible for an emergency situation with the child:

Child's main carer(s)

1. Name: _____ Relationship to child: _____

Contact number(s): _____

2. Name: _____ Relationship to child: _____

Contact number(s): _____

General Practitioner's details:

Name: _____ Contact number: _____

Address: _____

Clinic of Hospital details (if app):

Name: _____ Contact number: _____

Address: _____

Declaration

I have read the information in this health plan and have found it to be accurate. I agree for the recorded procedures to be carried out:

Name of parent: _____ Date: _____

Signature: _____

Name of key person: _____ Date: _____

Signature: _____

Name of manager: _____ Date: _____

Signature: _____

Date: _____

For children requiring life saving or invasive medication and/or care, for example, rectal diazepam, adrenaline injectors, Epipens, Anapens, JextPens, maintaining breathing apparatus, changing colostomy or feeding tubes, you must receive approval from the child's GP/consultant, as follows:

I have read the information in this Individual Health Plan and have found it to be accurate.

Name of GP/consultant: _____ Date: _____

Signature: _____

To be reviewed at least every six months, or as and when needed.

Copied to parents and child's personal file (with registration form)



6.9 Menopause Policy

Policy statement

Menopause is the time during an individual's life when menstruation periods permanently stop and an individual experiences hormonal changes. It is defined as occurring when the individual has experienced no periods for 12 consecutive months and no other biological or psychological cause can be identified. However, menopausal symptoms can begin months or years before periods stop and this stage is known as the perimenopause. According to the NHS website¹ symptoms last around four years after an individual's last period, although some can experience them for much longer.

The purpose of this policy is to provide details of how the nursery will support our staff who may be experiencing issues as a result of symptoms of the menopause. We aim to create a culture that encourages discussions to take place about any matters associated with the menopause and to create supportive working environment.

Basis

The aims of this policy are to:

- Foster an environment in which colleagues can openly and comfortably instigate conversations or engage in discussions about menopause
- Ensure everyone understands what menopause is, can confidently approach the subject and are clear on our policy and practices
- Educate and inform staff about the potential symptoms of menopause and how they can support individuals experiencing these symptoms at work
- Ensure that those who are experiencing menopause symptoms feel confident to discuss them and ask for any support and reasonable adjustments so they can continue to be successful in their roles
- Reduce absenteeism due to menopausal symptoms
- Assure individuals that as a responsible employer, we are committed to supporting their needs during menopause.

¹ <https://www.nhs.uk/conditions/menopause/>

Employee responsibilities

All employees should contribute to a respectful working environment and be willing to support colleagues who may be experiencing the menopause. It is important that employees talk openly with their manager if they need support with menopausal symptoms. All employees are responsible for:

- Taking personal responsibility to look after their health
- Being open and honest in conversations with managers
- Contributing to a respectful and productive working environment
- Being willing to help and support their colleagues
- Understanding any necessary adjustments their colleagues are receiving as a result of their menopausal symptoms.

During any discussions, your manager will consider your individual situation and evaluate if any adjustments can be made. Your individual needs will be addressed sensitively and confidentiality will be maintained.

Employer responsibilities

Managers are responsible for:

- Ensuring that no one experiences less favourable treatment as a result of the menopause
- Ensuring that any conversations are kept strictly confidential
- Putting in place any required support and/or adjustments where reasonably possible
- Recording any agreements made
- Holding regular reviews with employees regarding support required, including follow up meetings to review adjustments that have been made
- Seeking additional advice from occupational health where necessary
- Agreeing with the employee if other colleagues should be informed about any adjustments that have been agreed (even if the reason is not disclosed).

When responding to an employee experiencing difficulties caused by menopause, managers will maintain an open-door policy so that employees feel comfortable in approaching them. They will support staff to talk openly about their current situation and will not make presumptions about how it is affecting them.

We understand that employees may feel uncomfortable discussing personal information with their manager. If this is the case, they are encouraged to discuss their situation with another senior member of staff.

Workplace adjustments

As with any longstanding health-related condition, sympathetic and appropriate support from the nursery is crucial to provide employees with the support that they need. Above all, it is important to listen to individuals and respond sympathetically to any requests for adjustments at work.

There are numerous symptoms of the menopause that can affect an individual both physically and mentally. The menopause affects individuals in different ways and symptoms can start during the perimenopause and last for many years.

Some of the more common symptoms include:

- Hot flushes
- Difficulty sleeping
- Fatigue
- Headaches
- Low mood or anxiety
- Problems with memory or concentration
- Anxiety
- Heavy and/or painful periods
- Panic attacks.

The following options are available to any employee who may be experiencing menopausal symptoms, depending on the needs of the individual and the business needs of the nursery.

Flexible working

We recognise that flexibility may be of significant benefit to someone who is experiencing menopausal symptoms. The Special considerations for employees policy describes ways in which the nursery may be willing to consider temporary changes to working arrangements, such as more frequent breaks or a change to start and finish times. If an employee does not wish to temporarily change their working arrangements, then this should be discussed with the manager and any agreed changes will be regularly reviewed with the member of staff.

Temperature control

We strive to achieve a comfortable working temperature for employees. We will allow flexibility within the dress code where reasonable. We will also consider any other appropriate adjustments, for example changing an employee's work location including to nearer a window, providing blinds on windows, ensuring there is always the opportunity to access toilet facilities or providing cooling aids such as a desk fan.

Sickness absence

If an employee is unwell due to menopausal symptoms, the nursery will provide them with all reasonable support during this period. It is important that employees feel that they are able to be open with their line managers about the reasons for any absences and feel supported by them. We would also encourage employees to discuss any relevant concerns with their GP and confirm to the nursery any relevant advice that the GP has provided.

Available support

Employees are encouraged to inform their manager at an early stage if they are experiencing menopausal symptoms that could affect their work to ensure that symptoms are treated as an ongoing health issue rather than as individual instances of ill health.

Early notification will also help managers to determine the most appropriate course of action to support an employee's individual needs. Employees who do not wish to discuss the issue with their direct line manager may find it helpful to have an initial discussion with a trusted colleague or another manager instead.

Employees and managers may find external sources of help and support useful including the following:

Information about the menopause, menopausal symptoms and treatment options

(<https://www.menopausematters.co.uk/>)

Support for women experiencing premature menopause or premature ovarian insufficiency

(<https://www.daisynetwork.org/>)

Information about events where strangers gather to eat cake, drink tea and discuss the menopause

(<https://www.menopausecafe.net/>)



6.10 Nutrition Guidance

Policy Statement

From September 2025 we will take the EYFS guidance into account and will follow it unless there is good reason not to.

Procedures

- We will ensure that all children:
 - Get the right amount of nutrients and energy they need while they are growing rapidly, which is especially important for children who might not have access to healthy food at home. This can help prevent children from becoming overweight or obese;
 - Develop positive eating habits early on. Children's early experiences with food can shape future eating habits. This can impact children's long-term health including maintaining a healthy weight, and good oral health.
- The early years are a crucial time to reduce health inequalities and set the foundations for a lifetime of good health.

A healthy plate

- Encourage children to eat a balanced diet containing a wide variety of foods.
- Plan meals and snacks that include a variety of food and drinks.
- Have children eat together, this encourages them to try foods that they might not try at home

Legal Framework

- [Early Years Foundation Stage Nutrition Guidance 2025](#)

Further Guidance

- [The Requirements for School Food Regulations 2014](#)
- [Safer Food Better Business for Caterers](#) (Food Standards Agency)
- [Paediatric Allergy Action Plans - BSACI](#)
- [Food allergy - NHS](#)

- [Anaphylaxis - NHS](#)
- [Weaning - Start for Life - NHS](#)
- [Help for early years providers : Food safety](#)
- [Early Years Foundation Stage Nutrition Guidance \(2025\)](#)
- [Allergy action plan](#)



6.11 Food for play and cooking activities

Policy Statement

We serve food for children on the following basis:

- Snacks;
- Packed lunches.

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

Procedures

Some parents/carers and staff may have strong views about food being used for play. It is important to be sensitive to these issues. For example, children who are Muslim, Jewish, Rastafarian, or vegetarian, should not be given any food to play with that contains animal products (Gelatine). Parents/carers' views should be sought on this. In some cases, it is not appropriate to use food for play, particularly in times of austerity.

- Food for play may include dough, corn flour, pasta, rice, food colourings/flavourings;
- Jelly (including jelly cubes) is not used for play;
- Food for play is risk assessed against the 14 allergens referred and is included in the written risk assessment undertaken for children with specific allergies;
- Staff are constantly alert to the potential hazards of food play, in particular choking hazards and signs of previously undetected allergies;
- Pulses are not recommended as they can be poisonous when raw or may choke.
- The use of raw vegetables for printing is discouraged;
- Dried food that is used for play should be kept away from food used for cooking;
- Foods that are cooked and used for play, such as dough, have a limited shelf life;
- Cornflour is always mixed with water before given for play;
- Cornflower and cooked pasta are discarded after an activity; high risk of bacteria forming;
- Utensils used for play food are washed thoroughly after use;

Children's cooking activities

- All cooking or play activities using food are risk-assessed for choking, allergy and hygiene hazards, and recorded as part of the setting's HACCP process.
- Before undertaking any cooking activity with children, members of staff should check for allergies and intolerances by checking children's records;
- Children are taught basic hygiene skills such as the need to wash hands thoroughly before handling food, and again after going to the toilet, blowing their nose or coughing;
- The area to be used for cooking is cleaned; a plastic tablecloth is advised;
- Children should wear aprons that are used just for cooking;
- Utensils provided are for children to use only when cooking, including chopping/rolling boards, bowls, wooden spoons, jugs, and are stored in the kitchen;
- Members of staff encourage children to handle food in a hygienic manner;
- Food ready for cooking or cooling is not left uncovered;
- Cooked food to go home is put in a paper food bag and refrigerated until home time;
- Food play activities are suspended during outbreaks of illness.

Playdough and raw (uncooked flour)

All flour including cornflour is raw until the point it is heated or cooked. Raw flour poses a risk of E. coli to young children and current advice is that it should not be used for play, or for uncooked playdough recipes.

- Only playdough that has been cooked or made with precooked flour should be used;
- Only cornflour that has been cooked or made with precooked flour should be used.

If a child or member of staff is allergic to any of the ingredients they must be replaced, and a safe alternative used.

Staff have up to date information about children's allergies or concerns about a potential allergy and these are clearly displayed.

If a younger child is likely to put the playdough/cornflour in their mouth, a safe alternative is provided.

If a child is likely to eat the playdough due to persistent sensory seeking behaviours the activity will be replaced with a safe alternative.

Children are always supervised when playing with playdough or cornflour.

Children and staff wash their hands before and after the activity.

Other activities with flour

Uncooked flour should not be used for activities where children are exploring through touch or taste, or there is a likelihood they will put their fingers in their mouths.

Baking: You can do baking activities where flour is used and then the food is cooked. You must ensure that the activity is risk assessed, and children do not eat the uncooked flour or the mixture.

Legal Framework

- Regulation (EC) 853/2004 of the European Parliament and of the Council on the Hygiene of Foodstuffs

Further Guidance

- Safer Food Better Business (Food Standards Agency 2011)



6.12 Sleep & Rest Time

Policy Statement

Sleep and rest times are key times in the day for being close and promoting security. Younger children will need to sleep but older children do not usually need to. No child is made to sleep.

Children over 2yrs old

- Children sleep on a firm, flat sleep surface and have their own personalised lightweight bedding.
- Children have a clear sleep space, no toys, pillows, bumpers, wedges, straps or extra blankets to ensure their heads remain uncovered.
- Children have a suitable place or basket to store clothes, shoes and a special toy, book or comforter for sleep. This is labelled with a photo so they can identify their basket (if used).
- Nappies are changed and heavier clothing removed.
- Hair accessories that may come lose or detach are removed before sleep/rest time.
- A separate area is made quiet, perhaps with soft music playing and curtains drawn.
- Children are settled by their key person and comforted to sleep. Key persons may gently stroke or pat children.
- If children fall asleep in-situ it may be necessary to move or wake them to make sure they are comfortable, they are not left to sleep in a buggy or bouncy chair.
- Sleeping children are regularly checked at least every ten minutes and are within sight and/or hearing of staff

Young children

- Young children sleep on a firm, flat sleep surface and have their own personalised lightweight bedding.
- Young children have a clear sleep space, no toys, pillows, bumpers, wedges, straps or extra blankets to ensure their heads remain uncovered.
- Young children each have a place to put their clothes and shoes in, and in which they keep any special toy, book, or comforter that they need for sleep.
- Nappies are changed and heavier clothing is removed.

- Hair accessories with parts that may come lose or detached and pose a choking hazard are removed before sleep/rest time.
- A separate area of the room is made as quiet as possible, perhaps with some soft music playing and curtains drawn.
- Young children are settled by their key person. They are soothed to sleep. Key persons may stroke or very gently pat children.
- Sleeping children are always supervised within sight and/or hearing of staff.
- A safe room temperature (EYFS cites 16-20°C for babies).

Further guidance

[Safer Sleep for Babies](http://www.lullabytrust.org.uk/safer-sleep-advice) (Lullaby Trust) www.lullabytrust.org.uk/safer-sleep-advice



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. We have appointed two members of staff as behaviour coordinator ([Gemma Carpenter](#) and Amy Silman) to oversee and advise on the team's responses to challenging behaviour.

This policy aligns with the EYFS 2025 requirement that providers must implement behaviour policies which support children's personal, social and emotional development (PSED) and help them to learn self-regulation.

Procedures

- In order to support children's positive behaviour in an appropriate way we will:
 - Attend relevant training to help understand and guide appropriate models of behaviour;
 - Implement the setting's supporting positive behaviour procedures including the stepped approach;
 - Have the necessary skills to support other staff with behaviour issues and to access expert advice, if necessary; and
 - Ensure all staff complete the Promoting Positive Behaviour programme, on Educare (<http://pre-school.educare.co.uk/Login.aspx>).

Stepped approach

Step 1

- We will ensure that EYFS guidance relating to 'supporting positive behaviour' 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, the behaviour coordinator and 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 the behaviour coordinator will suggest 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.

- Where behaviour gives rise to a safeguarding concern, staff follow the Safeguarding and Child Protection Policy immediately.

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 behaviour coordinator and SENCO will invite the parents to a meeting to discuss external referral and next steps for supporting the child in the setting.
- When considering persistent or escalated behaviour, the SENCO will consider whether the behaviour may relate to underlying SEND, sensory, communication or mental health needs, and whether reasonable adjustments or early help are required.
- 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 and Children and Child Protection Policy (1.2). It may also be agreed that the child should be referred for an Education, Health and Care assessment. (See Supporting Children with SEN policy 9.2).
- Advice provided by external agencies should be incorporated into the child's action plan and regular multi-disciplinary 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 or 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.

- High Scope's Conflict Resolution process provides this type of approach but equally any other similar method would be suitable. Periodically the effectiveness of the approach will be checked.

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 and behaviour coordinator 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' in accordance with the 2025 DfE guidance 'The Use of Reasonable Force in Schools and EY Settings (updated 2024)'
- Any use of reasonable force is recorded on a specific incident form, reviewed by the DSL, and retained as part of the safeguarding record.
- 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

- SEND Code of Practice: 0–25 Years (DfE, updated 2025)
- <https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>
- What to expect in the Early Years Foundation Stage: a guide for parents - DfE, 2021

Other useful Pre-School Learning Alliance Publications

- Behaviour Matters (2016)
- CIF Summary Record (2016)
- SEND code of practice: a mini-guide - Alliance, 2019

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

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.
- We display the names of all staff holding current Paediatric First Aid certificates in a location visible to parents, as required by EYFS 2025 para 3.48.
- Our member of staff responsible for health and safety is: [Gemma Carpenter](#)
- She is competent to carry out these responsibilities.
- She has undertaken health and safety training and regularly updates her knowledge and understanding.
- For employers: We display the necessary health and safety poster on our walls visible to employees (including volunteers) and parents on arrival.

Insurance cover

- We have public liability insurance and employers' liability insurance. The certificate for public liability insurance is displayed in: [Pre-School Entrance](#).

Procedures

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 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.

- 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.
- 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.
- 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.
- We operate a strict no-smoking, vaping or e-cigarette policy in line with EYFS 2025 para 3.59.
- We make children aware of health and safety issues through discussions, planned activities and routines.
- We allow children to take planned risks, which have been assessed, to allow them to learn how to overcome them throughout their lives.

Windows

- Low level windows are made from materials that prevent accidental breakage or We ensure that they are made safe.
- We ensure that windows are protected from accidental breakage or vandalism from people outside the building.
- Our windows above the ground floor are secured so that children cannot climb through them.
- We ensure that any blind cords are secured safely and do not pose a strangulation risk for young children.

Doors

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

Floors and walkways

- 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.
- Walkways and stairs are left clear and uncluttered.
- A member of staff supervises when outside the classroom so no access to stairs is available.

Electrical/gas equipment

- We ensure that all electrical/gas equipment conforms to safety requirements and is checked regularly.
- Our boiler/electrical switch gear/meter cupboard is not accessible to the children.
- Fires, heaters, wires and leads are properly guarded, and We teach the children not to touch them.
- We check storage heaters daily to make sure they are not covered.
- There are sufficient sockets in our setting to prevent overloading.
- We switch electrical devices off from the plug after use.
- We ensure that the temperature of hot water is controlled to prevent scalds.
- Lighting and ventilation is adequate in all areas of our setting, including storage areas.
- Portable appliance testing (PAT) is carried out annually.

Storage

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

Outdoor area

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

Hygiene

- We seek information from the UK Health Security Agency (UKHSA) 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 play room, kitchen, rest area, toilets and nappy changing areas. Children do not have unsupervised access to the kitchen.
- 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 disposal facilities for nappies.
- 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

- 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.
- We keep a full inventory of all items in the setting for audit and insurance purposes.
- The layout of Our play equipment allows adults and children to move safely and freely between activities.
- All Our equipment is regularly checked for cleanliness and safety, and any dangerous items are repaired or discarded.
- We make safe and separate from general use any areas that are unsafe because of repair is needed.
- All Our materials, including paint and glue, are non-toxic.
- We ensure that sand is clean and suitable for children's play.
- Physical play is constantly supervised.
- We teach children to handle and store tools safely.
- We check children who are sleeping at regular intervals of at least every ten minutes. This is recorded with the times checked and the initials of the person undertaking the check.
- If children fall asleep in-situ, it may be necessary to move or wake them to make sure they are comfortable.
- Children learn about health, safety and personal hygiene through the activities We provide and the routines We follow.

- 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

- Our staff do not wear jewellery or fashion accessories, such as belts or high heels, that may pose a danger to themselves or children.
- 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.
- We ensure that hair accessories are removed before children sleep or rest.
- We follow safe sleep practice as outlined in Policy 6.12 and the Lullaby Trust 2024 guidance

Safety of adults

- We ensure that adults are provided with guidance about the safe storage, movement, lifting and erection of large pieces of equipment.
- We provide safe equipment for adults to use when they need to reach up to store equipment or to change light bulbs.
- We ensure that all warning signs are clear and in appropriate languages.
- We ensure that adults do not remain in the building on their own.
- 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.

Manual Handling

We ensure that staff:

- Do not lift heavy objects alone. Seek help from a colleague.
- Bend from the knees rather than the back.
- Do not lift very heavy objects, even with others, that are beyond your strength.
- Use trolleys for heavy items that must be carried or moved on a regular basis.
- Items should not be lifted onto, or from, storage areas above head height.
- Do not stand on objects, other than proper height steps, to reach high objects and never try to over-reach.
- Push rather than pull heavy objects.

- Do not carry heavy objects up or down stairs; or carry large objects that may block your view of the stairs.
- Do not hold babies by standing and resting them on your hips.
- Please note this is not an exhaustive list.
- Managers are responsible for carrying out risk assessment for manual handling operations, which includes lifting/carrying children and lifting/carrying furniture or equipment.

Control of substances hazardous to health

- Our staff implement the current guidelines of the *Control of Substances Hazardous to Health Regulations (COSHH)*.
- We keep a record of all substances that may be hazardous to health - such as cleaning chemicals, or gardening chemicals if used and where they are stored.
- Hazardous substances are stored safely away from the children.
- 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.
- We keep all cleaning chemicals in their original containers.
- 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 sprays are not used when children are nearby.
- Environmental factors are taken into account when purchasing, using and disposing of chemicals.
- All members of staff are vigilant and use chemicals safely.
- Members of staff wear protective gloves when using cleaning chemicals.

Legal framework

- Health and Safety at Work Act (1974) (as amended)
- Management of Health and Safety at Work Regulations (1999)
- Electricity at Work Regulations (1989)
- Control of Substances Hazardous to Health Regulations (COSHH) (2002, as amended 2023)

- Manual Handling Operations Regulations (1992 (As Amended 2004))
- Health and Safety (Display Screen Equipment) Regulations (1992)
- UKHSA Health protection in education and childcare settings (2024)

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)



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

- 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.
- Whenever children are on the premises at least two adults are present.
- 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 – 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.
- There are entry phones and 'spy holes' in the main door at a suitable height.
- Minimal petty cash is kept on the premises.

Other useful Pre-school Learning Alliance publications

- Managing Risk (2009)



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.
- 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.
- 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.

- 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.
- Outings are recorded in an outings 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.
- 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 (2018)
- Dynamic Risk Management (2017)
- [Daily Register and Outings Record](#) (Alliance Publication)
- [Introducing Forest School in the Early Years](#) (Alliance Publication)
- [Preventing Accidents to Children on Farms](#) (Health and Safety Executive 2013)

SAFEGUARDING AND WELFARE REQUIREMENT: SUAFETY AND SUITABILITY OF PREMISES, ENVIROMENT AND EQUIPMENT

Providers must ensure that they take all reasonable steps to ensure staff and children in their care are not exposed to risks and must be able to demonstrate how they are managing risks



8.4 Risk assessment

Policy statement

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 by assessing and minimising the hazards and risks to enable the children to thrive in a healthy and safe environment.

Risk Assessment means:

Taking note of aspects of your workplace and activities that could cause harm, either to yourself or to others, and deciding what needs to be done to prevent that harm, making sure this is adhered to.

The law does not require that all risk is eliminated, but that 'reasonable precaution' is taken. This is particularly important when balancing the need for children to be able to take appropriate risks through physically challenging play. Children need the opportunity to work out what is not safe and what they should do when faced with a risk.

Health and safety risk assessments inform procedures. Staff and parents should be involved in reviewing risk assessments and procedures – they are the ones with first-hand knowledge as to whether the control measures are effective – and they can give an informed view to help update procedures accordingly.

This policy is based on the five steps below:

- Identification of a risk: Where is it and what is it?
- Who is at risk: Childcare staff, children, parents, cooks, cleaners etc?
- Assessment as to whether the level of a risk is high, medium, low. This takes into account both 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.

Procedures

- Our manager undertake training and ensure our staff and volunteers have adequate training in health and safety matters.
- Our risk assessment process covers adults and children and includes:
 - determining where it is helpful to make some written risk assessments in relation to specific issues, to inform staff practice, and to demonstrate how we are managing risks if asked by parents and/or carers and inspectors;
 - checking for and noting hazards and risks indoors and outside, in relation to our premises and activities;
 - assessing the level of risk and who might be affected;
 - deciding which areas need attention; and
 - developing an action plan that specifies the action required, the time-scales 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, as well as those that are checked on a weekly and termly basis when a full risk assessment is carried out.
- Our manager works alongside the school to ensure that checks, such as electricity and gas safety checks, and any necessary work to the setting premises are carried out annually and records are kept.
- Our manager ensures that staff members carry out risk assessments that include relevant aspects of fire safety, food in each of the following areas of the premises:
 - Entrance and exits;
 - Outdoor areas;
 - Off-site venues used regularly;
 - Passageways, stairways and connecting areas;
 - Group rooms;
 - Sleep areas;
 - Main kitchen;

- Staff/parent/carers room;
- Rooms used by others or for other purposes;
- Our manager ensures that staff members carry out risk assessments for work practice including:
 - changing children;
 - preparation and serving of food/drink for children;
 - children with allergies;
 - cooking activities with children;
 - supervising outdoor play and indoor/outdoor climbing equipment;
 - assessment, use and storage of equipment for disabled children;
 - the use and storage of substances which may be hazardous to health, such as cleaning chemicals;
 - visitors to the setting who are bring equipment or animals as part of children's learning experiences; and
 - following any incidents involving threats against staff or volunteers.
- Our manager ensures that staff members carry out risk assessments for off-site activities if required, including:
 - children's outings (including use of public transport);
 - forest school;
 - home visits; and;
 - other off-site duties such as attending meetings, banking etc.
- We take precautions to reduce the risks of exposure to Legionella (Legionnaires disease). Our manager ensure that we are familiar with the HSE guidance and risk assess accordingly/have seen the risk assessment relevant to the premises from the landlord.

Legal framework

- Management of Health and Safety at Work Regulations (1999)

Further guidance

- Five Steps to Risk Assessment (HSE 2011)
- Legionnaires' Disease – A Brief Guide for Dutyholders (HSE 2012)
www.hse.gov.uk/pubns/indg458.pdf

Other useful Pre-school Learning Alliance publications

- Dynamic Risk Management (2017)

SAFEGUARDING AND WELFARE REQUIREMENT: SUAFETY AND SUITABILITY OF PREMISES, ENVIROMENT AND EQUIPMENT

Providers must take reasonable steps to ensure the safety of children, staff and others on the premises in the case of fire or any other emergency, and must have an emergency evacuation procedure.



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. The school also keep records of drills and checks. Downloadable Fire Safety Log Books are widely available free of charge on line. We ensure our policy is in line with the procedures specific to our building, making reasonable adjustments as required.

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 in Premises Providing Early Years Provision (HMG 2023).
 - Our fire safety risk assessment focuses on the following for each area of the setting:
 - Electrical plugs, wires and sockets.
 - Electrical items.
 - Gas 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 EN 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;
 - include arrangements for children with SEND or mobility needs where necessary
 - explained to new members of staff, volunteers and parents; and
 - practised regularly, at least once every six weeks.
- Records are kept of fire drills and of the servicing of fire safety equipment.

Emergency evacuation procedure

Every setting is different and the evacuation procedure will be suitable for each setting. It must cover procedures for practice drills including:

- How children are familiar with the sound of the fire alarm.
- How the children, staff and parents know where the fire exits are.
- How children are led from the building to the assembly point.
- How children will be accounted for and who by.
- How long it takes to get the children out safely.
- Who calls the emergency services, and when, in the event of a real fire.
- How parents are contacted.

Fire drills

We hold fire drills half-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.
- A record of all children, staff and visitors present is taken outdoors to the assembly point during drills.

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)

SAFEGUARDING AND WELFARE REQUIREMENT: SUAFETY AND SUITABILITY OF PREMISES, ENVIRONMENT AND EQUIPMENT

Providers must keep premises and equipment clean, and be aware of, and comply with, requirements of health and safety legislation (including hygiene requirements).



8.6 Animals in the setting

Policy statement

Children learn about the natural world, its animals and other living creatures, as part of the Learning and Development Requirements of the Early Years Foundation Stage. This may include contact with animals, or other living creatures, either in the setting or on visits. We aim to ensure that this is in accordance with sensible hygiene and safety controls.

Procedures

Animals in the setting as pets

- We take account of the views of parents and children when selecting an animal or creature to keep as a pet in the setting, as well as any allergies or issues that individual children may have any animals or creatures.
- We carry out a risk assessment with a knowledgeable person accounting for any hygiene or safety risks posed by the animal or creature.
- We provide suitable housing for the animal or creature and ensure this is cleaned out regularly and is kept safely.
- Our staff are knowledgeable of the pet's welfare and dietary needs and ensure that the correct food is offered, at the right times.
- We make arrangements for weekend and holiday care for the animal or creature.
- We register with the local vet and take out appropriate pet care health insurance.
- We make sure all vaccinations and other regular health measures, such as de-worming, are up-to-date and recorded.
- We teach children the correct handling and care of the animal or creature and supervise them at all times.
- We ensure that children wash their hands after handling the animal or creature and do not have contact with animal soil or soiled bedding.
- We wear disposable gloves when cleaning housing or handling soiled bedding.

Animals brought in by visitors

- The owner of the animal/creature maintains responsibility for it in the setting.
- The owner carries out a risk assessment detailing how the animal/creature is to be handled and how any safety or hygiene issues will be addressed.
- No dogs on the UK Government Banned Dogs List (Dangerous Dogs (Designated Types) (England and Wales) Order 2023 are to be brought on site at any time. All other dogs brought on site by parents/carers during arrival and departure times must be on a lead and under control. The manager reserves the right to request that a dog is not brought on site, if the animal is out of control, or likely to pose a risk.
- If staff are concerned that a family owns a dog which is on the 'banned dog' list, it is treated as a safeguarding concern and it is reported to the relevant authority and safeguarding procedures are followed.

Visits to farms

- Before a visit to a farm, we carry out a risk assessment - this may take account of safety factors listed in the farm's own risk assessment, which should be viewed.
- We contact the venue in advance of the visit to ensure that there has been no recent outbreak of E.coli or other infections. If there has been an outbreak, we will review the visit and may decide to postpone it.
- We follow our outings procedure.
- Children wash and dry their hands thoroughly after contact with animals.
- Outdoor footwear worn to visit farms is cleaned of mud and debris as soon as possible on departure and should not be worn indoors.
- We advise staff and volunteers who are, or may be, pregnant to avoid contact with ewes and to consult their GP before the visit.
- We follow the UKHSA 'Farm Visits and Animal Contact Guidance' (2024) to minimise infection risk.

Legal framework

- The Management of Health and Safety at Work Regulations (2006)

Further guidance

- Health and Safety Regulation A Short Guide (HSE 2003)
- <https://www.gov.uk/control-dog-public/banned-dogs>

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.

Smoking (which includes vaping, and use of e-cigarettes) are prohibited anywhere on or near the premises whenever children are present or are about to be present. This no-smoking zone extends to the entrance gate and immediate outdoor areas.

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.
- Staff who smoke or use e-cigarettes during their scheduled breaks go to the nearest public car park or 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)

8.8 Health & Safety Risk Assessment



Risk area:

Carried out by:

Date:

Risk identified:	Who is at risk: <i>People on premises and those most vulnerable.</i>	Level of risk: <i>Of hazard occurring and risk to people.</i>	Control measure and person(s) responsible: <i>Remove and reduce hazards. Remove and reduce risk to people.</i>	Review: <i>Record, plan, inform, instruct, train and review.</i>
-------------------------	--	---	--	--

GREAT TEW PRE-SCHOOL

Carried out by:

Date:

Review:

*Record, plan, inform,
instruct, train and
review.*

[illegible]

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



8.10 Staff personal safety including home visits

Policy statement

This setting believes that the health and safety of all staff is of paramount importance and that all staff have the right to work in a safe environment. We support safe working both on and off the premises, acknowledging the needs and diversity of children and their family.

Procedures

General

- All staff in the building early in the morning, or late in the evening, ensure doors and windows are locked.
- Where possible, at least the first two members of staff to arrive in the building arrive together, and the last two members of staff in the building leave together.
- Visitors are generally only allowed access with prior appointments and only admitted once their identity has been verified.
- Minimal petty cash is kept on the premises.
- When taking cash to the bank, members of staff are aware of personal safety. Managers carry out a risk assessment and develop an agreed procedure appropriate to the setting, staff and location.
- Members of staff make a note in the diary of meetings they are attending, who they are meeting and when they are expected back.
- Managers have good liaison with local police and ask for advice on safe practice where there are issues or concerns.

Home visits

Where staff members conduct home visits, this is done at the manager's discretion and the following health and safety considerations apply:

- Prior to a home visit the key person and manager undertake a risk assessment that is specific to the visit being undertaken.

- Members of staff normally do home visits in pairs – usually the manager/deputy manager with the key person.
- Each home visit is recorded on the online Family platform with the name and address of the family being visited, prior to the visit taking place.
- Staff alert an agreed contact person in the setting when they are leaving to do the home visit and advise on their expected time of return.
- If there is any reason for staff to feel concerned about entering premises, they do not do so, for example, if a parent appears drunk.
- Members of staff carry a mobile phone when going out on a home visit.
- Staff identify an emergency word/phrase, which is made known to all staff in the setting, so that if they feel extremely threatened or in danger on a home visit they can covertly alert other members of staff via a telephone call to the situation. Use of the agreed word/phrase will initiate an immediate 999 call to be made.
- If staff do not return from the home visit at the designated time, the contact person attempts to phone them and continues to do so until they make contact.
- If no contact is made after a reasonable amount of time has passed, the contact person rings the police.

Dealing with agitated parents/carers or other visitors in the setting

- If a parent/carer or visitor appears to be angry, mentally agitated or possibly hostile, two members of staff will lead the parent away from the children to a less open area, but will not shut the door behind them.
- If the person is standing, staff will remain standing.
- Members of staff will try to empathise and ensure that the language they use can be easily understood.
- Staff will speak in low, even tones, below the voice level of the parent.
- Members of staff will make it clear that they want to listen and seek solutions.
- If the person makes threats and continues to be angry, members of staff make it clear that they will be unable to discuss the issue until the person stops shouting or being abusive, while avoiding potentially inflammatory expressions such as ‘calm down’ or ‘be reasonable’.
- If threats or abuse continues, members of staff will explain that the police will be called and emphasise the inappropriateness of such behaviour in front of children.
- If the event involves a child’s parent or carer, it is recorded in the child’s file together with any decisions made with the parents/carers to rectify the situation.

- Copies of correspondence regarding the incident will be kept in the relevant child's file.
- After the event, details are recorded in the child's personal file together with any decisions made with the parents to rectify the situation and any correspondence regarding the incident.

Further guidance

- [Complaint Investigation Record](#) (Alliance Publication)
- [Reportable Incident Record](#) (Alliance Publication)

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.



8.11 Maintenance and Repairs

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

Any faulty equipment or building fault is recorded, including:

- Date fault noted;
- Item or area faulty;
- Nature of the fault and priority;
- Is a risk assessment required?;
- Who the fault reported to for action;
- Action taken and when;
- If no action taken by the agreed date, when and by whom the omission is followed up;
- Date action completed.

Any area that is unsafe because repair is needed, such as a broken window, should be made safe and separated off from general use.

- Any broken or unsafe item is taken out of use and labelled 'out of use';
- Any specialist equipment (e.g. corner seat for a disabled child) which is broken or unsafe should be returned to the manufacturer or relevant professional;
- Any item that is beyond repair is condemned. This action is recorded as the action taken and the item is removed from the setting's inventory;
- Condemning items is done in agreement with the setting manager. Condemned items are then disposed of appropriately and not stored indefinitely on site;
- Where maintenance and repairs involve a change of access to the building whilst repairs are taking place, then a risk assessment is conducted to ensure the safety and security of the building is maintained.

Other useful Pre-school Learning Alliance publications

- Managing Risk (2009)

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.

8.12 Forest Schools

Policy statement

Great Tew Pre-School Pre is committed to providing high-quality outdoor learning experiences through Forest School. Forest School supports children's holistic development through regular child-led sessions in a natural outdoor environment.

Our Forest School sessions are delivered by Lizzie Bourne, a self-employed Level 3 qualified Forest School Leader, and take place in the Wild Garden within the School boundaries.

We aim to provide a safe, inclusive, and stimulating outdoor environment where children can explore, take supported risks, and develop confidence, resilience, and independence.

Aims

Forest School aims to:

- Promote self-esteem and confidence through child-led learning
- Develop physical skills through climbing, balancing, digging and den building
- Encourage curiosity and a love of the natural environment
- Support social skills, teamwork and communication
- Provide opportunities for appropriate risk-taking in a safe environment
- Promote wellbeing and emotional resilience

Statutory Framework

This policy operates in accordance with:

- The Early Years Foundation Stage (EYFS) Statutory Framework
- Health and Safety at Work Act 1974
- Management of Health and Safety at Work Regulations 1999
- Equality Act 2010

- Children Act 1989 and 2004
- Working Together to Safeguard Children (latest version)

This policy should be read in conjunction with:

- Safeguarding and Child Protection Policy
- Health and Safety Policy
- Risk Assessment Policy
- Equal Opportunities Policy
- Behaviour Policy
- Personal Care Policy
- Confidentiality Policy

Staffing and Responsibilities

Forest School Leader

- Holds a Level 3 Forest School qualification
- Holds Paediatric and Forest School First Aid certification
- Holds an enhanced DBS check
- Holds £5 million public liability insurance
- Plans and delivers sessions in line with Forest School principles
- Carries out and reviews risk assessments
- Ensures emergency procedures are understood

Pre-school staff:

- Remain responsible for the children at all times
- Maintain required adult-to-child ratios
- Support children's learning and wellbeing
- Follow safeguarding and health and safety procedures
- Undertake observations in line with EYFS

Volunteers:

- Must hold appropriate DBS checks
- Follow staff instructions at all times
- Adhere to safeguarding and confidentiality procedures
- Must not administer first aid unless qualified and authorised

Staffing Ratios

In line with EYFS requirements:

- Age 2–3 years: 1:5
- Age 3–4 years: 1:8

At Forest School, ratios are reduced to:

- 2-year-olds: 1:3
- 3 years and over: 1:5

A minimum of three adults must always be present on site.

At least one adult must be Forest School trained.

Health and Safety

Health and safety is paramount during Forest School sessions. We will:

- Carry out regular written risk assessments
- Maintain high adult-to-child ratios
- Carry a fully stocked first aid kit
- Ensure staff are Paediatric First Aid trained
- Carry a mobile phone for emergencies
- Follow the Emergency Action Plan
- Monitor weather conditions and adapt sessions accordingly

Risk assessments and emergency procedures are available upon request.

Safeguarding

Safeguarding during Forest School follows the setting's Safeguarding Policy.

- All staff hold appropriate DBS checks
- Staff attend regular safeguarding training
- Concerns or disclosures are reported to the Designated Safeguarding Lead
- Children have the right to feel safe and secure

Equal Opportunities and Inclusion

Forest School is inclusive and accessible to all children.

- No discrimination will occur on the grounds of gender, age, race, religion, disability, background or SEND
- Reasonable adjustments will be made where possible
- Activities may be adapted to support children with medical, physical, or behavioural needs
- Additional adult support will be provided where required

Forest School is child-led. Children are encouraged to follow their interests while respecting others and the natural environment.

Medical Information and Emergency Procedures

Forest School sessions are treated as outings. We will:

- Share relevant medical information on a need-to-know basis
- Carry emergency contact details
- Carry a mobile phone
- Ensure only trained staff administer first aid
- Inform parents of any incidents

Adults must not remove ticks or splinters. These must be reported to parents.

Hygiene Procedures

Toileting

- Children will use the toilet before sessions
- DBS-checked adults will accompany children if required
- Wet wipes will be available
- Accidents will be managed in line with the Personal Care Policy

Handwashing

- Soap and water will be used whenever possible
- Disposable paper towels will be used and disposed of appropriately

Food and Cooking

- Food hygiene regulations will be followed
- Children will wash hands before eating

- Drinking water will be provided

Confidentiality

- All staff and volunteers must adhere to the Confidentiality Policy.
- Observations remain confidential and stored securely within the setting.

Photographs and Videos

- Written parental consent will be obtained
- Only pre-school cameras may be used
- Volunteers may only use cameras under supervision
- Mobile phones are for emergency use only

Clothing and Equipment

Parents are required to provide:

- Old clothes covering arms and legs
- Suitable footwear (trainers or wellies with thick socks)
- Waterproof jacket and trousers or all-in-one suit
- Weather-appropriate hat
- Full change of clothes (kept at pre-school)

Monitoring and Review

- This policy will be:
- Reviewed annually
- Reviewed following any incident
- Updated in line with statutory guidance changes

Legal framework

- Health and Safety at Work Act (1974) (as amended)
- Management of Health and Safety at Work Regulations (1999)
- Electricity at Work Regulations (1989)

- Control of Substances Hazardous to Health Regulations (COSHH) (2002, as amended 2023)
- Manual Handling Operations Regulations (1992 (As Amended 2004))
- Health and Safety (Display Screen Equipment) Regulations (1992)
- UKHSA Health protection in education and childcare settings (2024)

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)



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;
 - Race;
 - Disability;
 - Sexual orientation; and
 - 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 my volunteers to enable them to develop anti-discriminatory 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 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)

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

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: Amy Silman
- The SENCO works closely with other colleagues and has responsibility for the day-to-day 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.
- 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 in-service training for parents 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 2025)
- Working Together to Safeguard Children (DfE 2023)
- SEND Review: Right support, right place, right time
- A celebratory approach to working with children with SEND - Pen Green, 2021
- What to expect in the Early Years Foundation Stage: a guide for parents - DfE, 2021
- Special educational needs and disability code of practice: 0 to 25 years - DfE, 2015
- Early years: guide to the SEND Code of Practice (0-25 years, DfE 2025)

Other useful Pre-school Learning Alliance publications

- Guide to the Equality Act and Good Practice (2015)
- SEND Code of Practice (0-25 years, DfE 2025)
- SEND code of practice: a mini-guide - Alliance, 2019

9.3 Social Wellbeing Audit

Please include comments and actions for each question answered 'No'.



GREAT TEW PRE-SCHOOL

Audit Area

Has the setting planned and implemented a behaviour strategy?

Does the setting have a named and suitably skilled behaviour coordinator as per the EYFS safeguarding and welfare requirements?

Is Leuven's assessment scale for children's well-being and involvement used in the setting?

Are the dynamics of the setting managed to ensure a balanced intake of children? (For example, age, needs and sex of children)

If used, are approved methods of rewards and sanctions used consistently by all staff?

Do all staff understand and apply the same approved methods for intervening in minor incidents of unwanted behaviour? (For example, conflict resolution approach)

Yes	No	Comments	Actions to be taken

Audit Area

Are all staff trained to understand:

- Methods for initial intervention, identification and analysis of unwanted behaviours
- Methods for adapting/changing behaviours
- Appropriate reward and sanctions methods
- Alternative communication systems
- Safeguarding
- Inclusion
- Emotional literacy
- Risk assessment

Yes	No	Comments	Action to be taken

Audit Area

Do all staff understand and use an approved method for identifying and analysing unwanted behaviours? (For example, antecedent, behaviour and consequence chart)

Do the policy and procedures on behaviour incorporate related EYFS requirements?

Are policy and procedures relating to 'management' of behaviour reviewed and updated annually?

Do children have regular access to an outdoor environment?

Are all areas of the indoor and outdoor play environments uncluttered and defined?

Is there sufficient space for children to move around freely in all areas of the play environment?

Do children have access to quiet areas?

Is there control of natural/artificial light in play areas?

Yes	No	Comments	Action to be taken

Audit Area**Yes****No****Comments****Action to be taken**

Can the temperature of the play environment be controlled?

Is the internal play environment free from unnecessary noise?

Are there sufficient general resources for children of all ages and abilities?

Are unfavourable acoustics in the play area managed to prevent noise distortion? (for example,. introduction of soft furnishings, canopies etc)

Are supplementary methods of communication used in the setting? (For example, signing)

Are pictorial symbols used to improve children's understanding of the daily timetable? (For example, picture exchange communication)

Are known trigger points for conflict in the setting managed?

Name of behaviour coordinator person completing the audit:**Date:****Name and signature of manager overseeing the audit:****Date:****Review date:**

9.4 Access Audit



Key

A: Annual check; M: Monthly check; W: Weekly check; D: Daily check; H: Hourly check. GREAT TEW PRE-SCHOOL

Approach to the building

Key Yes No Comment/Action

Are there disabled parking facilities?

--	--	--	--

Are kerbs lowered?

--	--	--	--

Is the entrance gate wide enough for wheelchair users?

--	--	--	--

Are there orientation landmarks for visual impairment?

--	--	--	--

Is the route clearly signed?

--	--	--	--

Are support rails or resting platforms provided on inclines?

--	--	--	--

Are all surface coverings even and non-slip?

--	--	--	--

Are pathways clear of obstructions?

--	--	--	--

Are all areas adequately lit?

--	--	--	--

Do steps and handrails accompany ramps?

--	--	--	--

Are steps suitable and highlighted for differentiation?

--	--	--	--

Are resting platforms available and highlighted?

--	--	--	--

Is there adequate lighting at the front and along the route to the building?

--	--	--	--

Entrances

Key Yes No Comment/Action

Is there an entry phone and/or a doorbell and are they at a reasonable height for wheelchair users?

--	--	--	--

Is there a level or flush threshold?

--	--	--	--

Are doors easy to open and doorways wide enough for all users to pass through and clear the door swing?

--	--	--	--

Are glazed doors marked for safety/visibility?

--	--	--	--

Are door closer mechanisms appropriately adjusted (so as not to close too quickly)?

--	--	--	--

Are door controls (handles/knobs) at a suitable height, clearly located and easy to use?

--	--	--	--

Is the information on the welcome board in a range of formats and at an appropriate height to suit varying needs?

Is the entrance signposted and easy to find?

Is the route to the destination clearly marked?

If applicable, is the doormat in a good condition and flush with the floor?

If an induction loop is fitted, is it working?

Can people either side of the door be seen?

Are surfaces non-slip?

Is lighting adequate?

Inside the building

Key Yes No Comment/Action

Are all floor surfaces suitable?

Are the acoustics of the building suitable for children/adults with hearing impairments?

Are there colour and tonal contrasts to help distinguish fixtures and fittings from surfaces, walls and floors?

Is there a disabled WC facility?

Is there a handrail in one of the children's WCs?

Are support rails available in relevant areas?

Is the environment free from unnecessary noise?

Are audible, manual and mechanical alarm systems supplemented with visual and verbal warnings?

Are all areas in the building wide enough for adults and children using mobility equipment to manoeuvre?

Are fittings fixed without dangerous edges?

Are travel routes clutter free (e.g. from shoes and buggies)?

Is there control of natural/artificial light to avoid glare/silhouettes and is lighting adequate?

Are door closer mechanisms appropriately adjusted
(so as not to close too quickly)?

Are door controls (handles/knobs) at a suitable
height, clearly located and easy to use?

Completed by (name): _____ **Date:** _____

Date of next audit: _____



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

9.5 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 EYFS 2025 Statutory Framework and are further clarified below, based on the *Fundamental British Values in the Early Years* guidance :

- *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 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)



10.1 Privacy Notice

Great Tew Pre-School's Privacy Notice

Great Tew Pre-School, The Green, Great Tew, Chipping Norton OX7 4DB

Telephone: 01608 683168

Email: admin@greattewpreschool.com

Data Protection Officer: [Gemma Carpenter](#)

Introduction

- We are 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, 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, phone numbers, emergency contact details, and family details
- This information will be collected from you directly in the registration form.

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 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 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

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

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).
- We follow the DfE 2025 Retention Schedule for Early Years Records (2025 edition)

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 continue 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.

SAFEGUARDING AND WELFARE REQUIREMENT: INFORMATION AND RECORDS

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 Waiting list & 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.
- Great Tew Pre-School is for young children, the youngest being 2 years and the oldest being 4 years.
- A child must attend a minimum of 3 sessions.
There are 2 sessions per Pre-School day 8:40am to 12:10pm and 12:10pm to 3:10pm.
- Our main intake for the year is September. The allocation of sessions will be processed in March for following September.
- We arrange our waiting list by when the application is received. In addition, our policy may consider the following:
 - the age of the child
 - the length of time on the waiting list;
 - the vicinity of the home to the setting;
 - whether any siblings already attend the setting or school
 - the capacity of the setting to meet the individual needs of the child.
 - a child wanting a full time place will usually have preference over one requiring part time only.

- We offer funded places for in accordance with the Code of Practice for Oxfordshire County Council any local conditions in place at the time. For more [information](#). For 2 year olds we offer up to 18hrs for working parents, for 3 - 4 year olds we offer the universal entitlement of 15 hours and for those eligible for the extended 30 hours our setting currently offers 18 hours.
- 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 sex/ gender reassignment/identity, 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 are flexible about session 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.

Children with SEND

- The manager must seek to determine an accurate assessment of a child's needs at registration. If the child's needs cannot be met from within the setting's core budget, then an application for SEN inclusion funding must be made immediately.
- Children with identified SEND must be offered a place when one becomes available as with any other child. However, the start date for children with more complex SEND will be determined by the preparations made to ensure the child's safety, well-being and accessibility in the setting. If a child's needs determine that adjustments need to be made, the manager must outline a realistic timeframe for completion, detailing the nature of adjustments e.g. risk assessment, staff training, health care plan and all other adjustments required. The child's safety at all times is paramount.
- At the time of registration, the manager must check to see if a child's family is in receipt of Disability Living Allowance, if so, the manager must ask for evidence to enable them to claim the Disability Access Fund directly from the local authority. If the family is eligible but not in receipt

of the allowance, the setting manager will support the family in their application. More information can be found [here](#).

- Preparation for admitting a child with SEND must be made in a reasonable amount of time and any delay in the child starting is scrutinised by the setting manager to avoid discrimination and negative impact on the child and family. During the preparation period the family and relevant agencies and the local authority must be regularly updated on the progress of the preparations.

Safeguarding/child protection

If information is provided by the parents/carers that a child who is starting at the setting is currently, or was involved with social care, the designated safeguarding lead will contact the agency to seek further clarification.

Where a child has an open social care case, the DSL liaises with the allocated social worker prior to start date.

Parents/carers are advised on how to access the setting's policies and procedures.

Further guidance

Early Years Entitlements: September 2024 early education and childcare entitlements expansion – Local authority system guidance [September 2024 early education and childcare entitlements expansion](#)

SAFEGUARDING AND WELFARE REQUIREMENT: INFORMATION AND RECORDS

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 Parental involvement

Policy statement

We believe that children benefit most from early years education and care when parents and settings work together in partnership.

Our aim is to support parents as their children's first and most important educators by involving them in their children's education and in the full life of our setting. We also aim to support parents in their own continuing education and personal development.

Some parents are less well represented in early years settings; these include fathers, parents who live apart from their children, but who still play a part in their lives, as well as working parents. In carrying out the following procedures, we will ensure that all parents are included.

When we refer to 'parents', we mean both mothers and fathers; these include both natural or birth parents, as well as step-parents and parents who do not live with their children, but have contact with them and play a part in their lives. 'Parents' also includes same sex parents, as well as foster parents.

The Children Act (1989) defines *parental responsibility* as '*all the rights, duties, powers, responsibilities and authority which by law a parent of a child has in relation to the child and his property*'. (For a full explanation of who has parental responsibility, refer to the Pre-school Learning Alliance publication *Safeguarding Children*.)

Procedures

- Parents are made to feel welcome in our setting; they are greeted appropriately, there is adult seating and provision for refreshment.
- We have a means to ensure all parents are included - that may mean that we have different strategies for involving fathers, or parents who work or live apart from their children.
- We make every effort to accommodate parents who have a disability or impairment.
- We consult with all parents to find out what works best for them.
- We ensure on-going dialogue with parents to improve our knowledge of the needs of their children and to support their families.

- We inform all parents about how the setting is run and its policies, through access to written information, including our Safeguarding *Children and Child Protection* policy and our responsibilities under the Prevent Duty, and through regular informal communication. We check to ensure parents understand the information that is given to them.
- Information about a child and his or her family is kept confidential within our setting. We provide you with a privacy notice that details how and why we process your personal information. The exception to this is where there is cause to believe that a child may be suffering, or is likely to suffer, significant harm, or where there are concerns regarding child's development that need to be shared with another agency. We will seek parental permission unless there are reasons not to in order to protect the safety of the child. Reference is made to our Information Sharing Policy on seeking consent for disclosure.
- We seek specific parental consent to administer medication, take a child for emergency treatment, take a child on an outing and take photographs for the purposes of record keeping.
- The expectations that we make on parents are made clear at the point of registration.
- We make clear our expectation that parents will participate in settling their child at the commencement of a place according to an agreed plan.
- We seek parents' views regarding changes in the delivery of our service.
- Parents are actively encouraged to participate in decision making processes according to the structure in place within our setting.
- We encourage parents to become involved in the social and cultural life of the setting and actively contribute to it.
- As far as possible our service is provided in a flexible way to meet the needs of parents without compromising the needs of children.
- We provide sufficient opportunity for parents to share necessary information with staff and this is recorded and stored to protect confidentiality.
- Our key persons meet regularly with parents to discuss their child's progress and to share concerns if they arise.
- Where applicable, our key persons work with parents to carry out an agreed plan to support special educational needs.
- Where applicable, our key persons work with parents to carry out any agreed tasks where a Protection Plan is in place for a child.
- We involve parents in the shared record keeping about their children - either formally or informally – and ensure parents have access to their children's written developmental records.

- We provide opportunities for parents to contribute their own skills, knowledge and interests to the activities of the setting.
- We support families to be involved in activities that promote their own learning and well-being; informing parents about relevant conferences, workshops and training.
- We consult with parents about the times of meetings to avoid excluding anyone.
- We provide information about opportunities to be involved in the setting in ways that are accessible to parents with basic skills needs, or those for whom English is an additional language; making every effort to provide an interpreter for parents who speak a language other than English and to provide translated written materials.
- We hold meetings in venues that are accessible and appropriate for all.
- We welcome the contributions of parents, in whatever form these may take.
- We inform all parents of the systems for registering queries, complaints or suggestions and we check to ensure these are understood. All parents have access to our written complaints procedure.
- We provide opportunities for parents to learn about the curriculum offered in the setting and about young children's learning, in the setting and at home. There are opportunities for parents to take active roles in supporting their child's learning in the setting: informally through helping out or taking part in activities with their child, or through structured projects engaging parents and staff in learning about children's learning.

- We ask parents to ensure that their children are up on time. Any parents picking up their children more than 10 minutes late will be charged a pick up fee of £20 on each occasion.

In compliance with the Safeguarding and Welfare Requirements, the following documentation is also in place at our setting:

- Admissions Policy.
- Complaints procedure.
- Record of complaints.
- Developmental records of children.

SAFEGUARDING AND WELFARE REQUIREMENT: INFORMATION AND RECORDS

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.



10.4 Children's records

Policy statement

We have record keeping systems in place that meet legal requirements; the means we use to store and share that information takes place within the framework of the UK GDPR and Data Protection Act 2018 (as amended 2023) 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.
- These are collated online on 'Family' and can be accessed, and contributed to, by our staff and the child's parents.

Personal records

These may include the following (as applicable):

- Personal details – including the child's registration form and any consent forms additional emergency contact numbers should be provided.
- Contractual matters – including a copy of the signed parent contract, the child's days and times of attendance, a record of the child's fees, any fee reminders or records of disputes about fees.

- Child's development, health and well-being – including a summary only of the child's EYFS profile report, a record of discussions about every day matters about the child's development health and well-being with the 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 – including a copy of the child's 2 Year Old Progress Check (as applicable), all 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, and which our manager/designated person 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 restricted to those authorised to see them and make entries in them, this being our manager, deputy or designated person for child protection, the child's key person, or other staff as authorised by our manager.
- We may be required to hand children's personal files to Ofsted as part of an inspection or investigation 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 anyone else to look at.
- 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 three years after they have left the setting; except records that relate to an 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.

Archiving children's files

- When a child leaves our setting, we remove all paper documents from the child's personal file and place them in a robust envelope, with the child's name and date of birth on the front and the date they left.
- We seal this 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.
- Supply staff as well as 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

- UK GDPR and Data Protection Act 2018 (as amended 2023)
- Human Rights Act (1998)

Further guidance

- [Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers](#) (Updated May 2024)
- [Business management mini-guide](#) (Alliance publication)

SAFEGUARDING AND WELFARE REQUIREMENT: INFORMATION AND RECORDS

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 Provider records

Policy statement

We keep records and documentation for the purpose of maintaining our business. These include:

- Records pertaining to our registration.
- Landlord/lease documents and other contractual documentation pertaining to amenities, services and goods.
- Financial records pertaining to income and expenditure.
- Risk assessments.
- Employment records of our staff including their name, home address and telephone number.
- Names, addresses and telephone numbers of anyone else who is regularly in unsupervised contact with the children.

We consider our records as confidential based on the sensitivity of information, such as with employment records. These confidential records are maintained with regard to the framework of the General Data Protection Regulations (2018), further details are given in our Privacy Notice 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 Information Sharing Policy.

Procedures

- All records are the responsibility of our management team who ensure they are kept securely.
- All our records are kept in an orderly way in files and filing is kept up-to-date.
- Our financial records are kept up-to-date for audit purposes.
- We maintain health and safety records; these include risk assessments, details of checks or inspections and guidance etc.
- Our Ofsted registration certificate is displayed.
- Our Public Liability insurance certificate is displayed.

- All our employment and staff records are kept securely and confidentially.

We notify Ofsted of any:

- change in the address of our premises;
- change to our premises which may affect the space available to us or the quality of childcare we provide;
- change to the person managing our provision
- change to the designated person of our provision
- significant event which is likely to affect our suitability to look after children within 14 days; or
- other event as detailed in the *Statutory Framework for the Early Years Foundation Stage* (DfE 2025 Statutory Framework).

Legal framework

- UK GDPR and Data Protection Act 2018 (as amended 2023)
- Human Rights Act 1998

SAFEGUARDING AND WELFARE REQUIREMENT: INFORMATION AND RECORDS

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 Transfer of records to school

Policy statement

We recognise that children sometimes move to another early years setting before they go on to school, although many will leave to enter reception class.

We prepare children for these transitions and involve parents and the receiving setting or school in this process. We prepare records about a child's development and learning in the Early Years Foundation Stage in our setting; in order to enable smooth transitions, we share appropriate information with the receiving setting or school at transfer.

Confidential records are shared where there have been child protection concerns according to the process required by our Local Safeguarding Children Board.

The procedure guides this process and determines what information we can and cannot share with a receiving school or setting. Prior to transferring information, we will establish the lawful basis for doing so (see our Privacy Notice).

Procedures

Transfer of development records for a child moving to another early years setting or school

- Using the *Early Years Outcomes* (DfE 2025 Statutory Framework) guidance and our assessment of children's development and learning, the key person will prepare a summary of achievements in the seven areas of learning and development.
- The record refers to:
 - any additional language spoken by the child and his or her progress in both languages;
 - any additional needs that have been identified or addressed by our setting;
 - any special needs or disability, whether a CAF was raised in respect of special needs or disability, whether there is an Education, Health and Care Plan, and the name of the lead professional.

- The record contains a summary by the key person and a summary of the parent's view of the child.
- The document may be accompanied by other evidence, such as photos or drawings that the child has made.
- When a child transfers to a school, most local authorities provide an assessment summary format or a transition record, which we will follow as applicable.
- If there have been any welfare or protection concerns, we place a star on the front of the assessment record.

Transfer of confidential information

- The receiving school or setting will need to have a record of any safeguarding or child protection concerns that were raised in our setting and what was done about them.
- We will make a summary of the concerns to send to the receiving setting or school, along with the date of the last professional meeting or case conference. Some Local Safeguarding Children Boards will stipulate the forms to be used and provide these for us to use.
- Where a CAF has been raised in respect of any welfare concerns, we will pass the name and contact details of the lead professional on to the receiving setting or school.
- Where there has been a s47 investigation regarding a child protection concern, we will pass the name and contact details of the child's social worker on to the receiving setting or school – regardless of the outcome of the investigation.
- We post or take the information to the school or setting, ensuring it is addressed to the setting or school's designated person for child protection and marked as 'confidential'.
- We do not pass any other documentation from the child's personal file to the receiving setting or school.

Development & Learning Records

- The key person prepares a summary of achievements in the prime and specific areas of learning and development
- This record refers to any additional languages spoken by the child and their progress in all languages.
- The record also refers to any additional needs that have been identified or addressed by the setting and any action plans.
- The record also refers to any special needs or disability and whether early help referrals, or child in need (CIN) referrals or child protection (CP) referrals, were raised in respect of special

educational needs or disability, whether there is an Action Plan (or other relevant plan, such as CIN or CP, or early help) and gives the name of the lead professional.

- The summary shared with schools should also include whether the child is in receipt of, or eligible for EYPP (Early Years Pupil Premium) or other additional funding.
- The record contains a summary by the key person and a summary of the parent/carers' view of the child.
- The document may be accompanied by other evidence such as photos or drawings that the child has made.
- The setting will use the local authority's assessment summary format or transition record, where these are provided.
- Whichever format of assessment summary is used; it should be completed and shared with the parent/carer prior to transfer.

Legal framework

- General Data Protection Regulations (GDPR) (2018)
- Freedom of Information Act (2000)
- Human Rights Act (1998)
- Children Act (1989)

Further guidance

- What to do if you're worried a child is being abused: Advice for practitioners (HM Government 2023)
- Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (HMG 2024 version)

SAFEGUARDING AND WELFARE REQUIREMENT: INFORMATION AND RECORDS

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

‘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)

Policy statement

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 UK GDPR and Data Protection Act 2018 (as amended 2023 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 and Privacy Notice) - 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 and Privacy Notice).
- Information is kept in a manual file, or electronically. Our staff may also 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.
- 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.
- 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 setting leader 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 one month for the file to be made ready. We may extend this by a further two months where requests are complex or numerous. If this is the case, we will inform you within one month of receipt of the request and explain why the extension is necessary.
- A fee may be charged for repeated requests, or where a request requires excessive administration to fulfil.
- Our manager informs the Chair and legal advice may be sought before sharing a file
- Our manager goes through the file with the Chair 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 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 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 held for a legitimate reason and must be accurate (see our Privacy Notice). 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](tel:03031231113).

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 and Child Protection.

Legal framework

- UK GDPR and Data Protection Act 2018 (as amended 2023)
- Human Rights Act (1998)

Further guidance

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

SAFEGUARDING AND WELFARE REQUIREMENT: INFORMATION AND RECORDS

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 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 record and share information about children and their families (data subjects) in line with the six principles of the General Data Protection Regulations (GDPR) (2018) which are further explained in our Privacy Notice that is given to parents at the point of registration. The six principles state that personal data must be:

1. Processed fairly, lawfully and in a transparent manner in relation to the data subject.
2. Collected for specified, explicit and legitimate purposes and not further processed for other purposes incompatible with those purposes.
3. Adequate, relevant and limited to what is necessary in relation to the purposes for which data is processed.
4. Accurate and where necessary, kept up to date.
5. Kept in a form that permits identification of data subjects for no longer than is necessary for the purposes for which the data is processed.

6. Processed in a way that ensures appropriate security of the persona data including protection against accidental loss, destruction or damage, using appropriate technical or organisational measures

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.

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 GDPR principles as listed above and the seven golden rules for sharing information in the Information sharing Advice for practitioners providing safeguarding services to children, young people, parents and carers. We also follow the guidance on information sharing from the Local Safeguarding Children Board.

1. *Remember that the General Data Protection Regulations 2018 and human rights law are not barriers to justified information sharing as per the Children Act 1989, 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 consent, unless it is unsafe or if I have a legal obligation to do so. A Privacy Notice is given to parents at the point of registration to explain this further.*

In our setting we ensure parents:

- Receive a copy of our Privacy Notice and 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 external agencies, for example, with regard to any special needs the child may have or transition to school.
- 3. *Seek advice from other practitioners 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 manager routinely seeks advice and support from the Committee Chair about possible significant harm.
 - Our Safeguarding Children and Child Protection 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. *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. When you are sharing or*

requesting personal information from someone, be certain of the basis upon which you are doing so. Where you 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 there is a legal obligation.
- Our guidelines for consent are part of this procedure.
- Our manager is conversant with this and 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 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 and Child Protection 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 and Child Protection Policy and Children's Records 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 you decide 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, as well as the kinds of circumstances when we may not seek their consent, or may override their refusal to give consent. We 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 child may 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 interest for us to share information?
 - If the decision is to share, are we sharing the right information in the right way?
 - Have we properly recorded our decision?
- Consent must be freely given and *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 as detailed in the Privacy Notice.
- 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 service or it has been explained and agreed at the outset.
- Consent can be withdrawn at any time.
- 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 our paramount commitment, which is to the safety and well-being of the child. Please also see our Safeguarding Children and Child Protection Policy.

Legal framework

- UK GDPR and Data Protection Act 2018 (as amended 2023). The lawful bases for sharing are UK GDPR Article 6(1)(c), 6(1)(e), 9(2)(b) and 9(2)(g) as applicable.
- Human Rights Act (1998)

Further guidance

- [Working Together to Safeguard Children](#) (DfE 2023)
- [Information Sharing: Advice for Practitioners Providing Safeguarding Services to Children, Young People, Parents and Carers](#) (HMG 2024)
- [What to do if you're Worried a Child is Being Abused](#) (HMG 2015)
- [Mental Capacity Act 2005 Code of Practice](#) (Office of the Public Guardian 2007)

SAFEGUARDING AND WELFARE REQUIREMENT: INFORMATION AND RECORDS

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.



10.9 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. We will never share your data with any organisation to use for their own purposes. This policy links to 9.2 Supporting Children with SEND and 10.8 Information Sharing.

Procedures

- We work in partnership, or in tandem, with local and national agencies to promote the well-being of children.
- We have procedures in place for the sharing of information about children and families with other agencies. These are set out in our Privacy Notice, 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 our setting 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 setting and do not have access to any other child(ren) 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 our understanding 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.

SAFEGUARDING AND WELFARE REQUIREMENT: INFORMATION AND RECORDS

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



10.10 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 and serious attention to any concerns about the running of the setting. We anticipate that most concerns will be resolved quickly, by an informal approach with the appropriate member of staff. If this does not achieve the desired result, we have a set of procedures for dealing with concerns. We aim 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 Investigation 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 our manager first of all.
- Most complaints should be resolved amicably and informally at this stage.
- We record the issue, and how it was resolved, in the child's file.

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 Investigation Record; the form may be completed our manager and signed by the parent.

- Our setting stores all information relating to written complaints from parents in the child's personal file. However, if the complaint involves a detailed investigation, our manager may wish to store all information relating to the investigation in a separate file designated for this complaint.
- 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 Investigation 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. The parent may have a friend or partner present if they prefer and our manager should have the support of the management team.
- 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 Investigation 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. S/he 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/he gives.

Stage 5

- When the mediator has concluded her/his investigations, a final meeting between the parent and our manager and chair 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 Partnership (LSP) or local safeguarding partners and the Information Commissioner's Office

- 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 Welfare Requirements of the Early Years Foundation Stage are adhered to.
- Parents can complain to Ofsted by telephone or in writing at:
Ofsted National Business Unit, Piccadilly Gate, Store Street, Manchester M1 2WD
Tel: [0300 123 1231](tel:03001231231)
- These details are displayed on our setting's notice board.
- If a child appears to be at risk, we follow the procedures of the Local Safeguarding Children Board or local safeguarding partners.
- In these cases, both the parent and our setting are informed and our manager work with Ofsted or the Local Safeguarding Children Board or local safeguarding partners to ensure a proper investigation of the complaint, followed by appropriate action.
- The Information Commissioner's Office (ICO) can be contacted if you have made a complaint about the way your data is being handled and remain dissatisfied after raising your concern with us. For further information about how we handle your data, please refer to the Privacy Notice given to you when you registered your child at our setting. The ICO can be contacted at Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF or ico.org.uk

Records

- A record of complaints in relation to our setting, or the children or the adults working in our setting, is kept 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 Investigation Record, which is available for parents and Ofsted inspectors to view on request.

Other useful Pre-school Learning Alliance publications

- Complaint Investigation Record (2015)