|  |
| --- |
| HEADSTART PRE-SCHOOLAtShevington Vale Primary SchoolRunshaw AvenueAppley BridgeWN6 9JPadavies@shevingtonvale.wigan.sch.ukTel:07795 831958 |

*“Where young minds grow, independence is nurtured and inspired lives begin”*

**Headstart Pre-school LTD**

 **Well Child Policy and Procedures**

Including:

1. Supporting children with medial conditions at Headtsart
2. Medication storage and permission
3. Asthma
4. Record keeping
5. Physical Education/ activity and Headstart Environment
6. Controlling illness and infection control
7. Headlice
8. Tooth brushing
9. Vaccinations
10. First Aid
11. Needle Stick Injuries
12. Incidents/ accidents
13. Reporting to Riddor
14. Heatwaves and sun protection
15. Pets
16. Wellbeing
17. Bereavement
18. Healthy Eating
19. C02 monitors

Headstart Pre-School is committed to ensuring the health, emotional and physical wellbeing, of both children and staff.

At Headstart Pre-school LTD we feel that children only enjoy learning if they feel well enough to do so. In order to ensure a safe and healthy environment for all children to learn and develop we request that parents/ guardians take responsibility for informing a member of the Headstart team if their child has been unwell or had medication prior to their session, this is then logged in the medication file.

At our nursery, not only does every child matter but we also believe every person matters. Everyone must take responsibility for their own work-life balance and be aware of the role model they are setting for others. Headstart promotes a friendly, caring, family ethos where the staff all work as a team to support each other across all areas of nursery life.

Headstart aims to have all staff qualified in first aid at all times, we have also taken part in the ‘the well-being approach’ to support staff and children’s mental health.

**Health and Safety**

1. **Supporting Children with Medical Conditions at Headstart**

Headstart recognises that there are many common conditions affecting many children and young people, and welcomes all children with these conditions and others. Headstart believes that every child has a right to participate fully in the curriculum and life of the nursery, including all outdoor activities and trips. Headstart ensures that all staff in the setting have a good understanding of any conditions that a child may have, through relevant training and does not discriminate against any child who is affected by their condition. Headstart works with a child’s family to gather the relevant information about a child’s condition and shares information efficiently and effectively within the setting as appropriate.

In some circumstances a child may be given a Care Plan. The main purpose of a care plan is to identify the level of support that is needed at Headstart for an individual child. The care plan clarifies for staff, parents/carers and the child the help Headstart can provide and receive. These plans will be reviewed annually or more frequently at the request of parents/carers or Headstart, or as required A Care plan will include:

* Details of the child’s condition
* What constitutes an emergency
* What action to take in an emergency
* What not to do in the event of an emergency
* Who to contact in an emergency
* The role the staff can play
* Special requirements e.g. dietary needs, pre-activity precautions
* Any side effects of medicines
* Other

A copy will be given to parents/carers, practitioners and a copy will be retained in the medical needs file near to the white cabinet and the child’s individual application folder. A note will be logged on the single central register and all staff will be informed as appropriate.

See appendix 5 for more information on asthma and guidance on the use of emergency salbutamol inhalers in schools.

1. **Medication**

Headstrart Pre-School requires parents/ guardians to inform staff member if their child has taken medication prior to entering the setting. Children must be free of painkilling medication for 24 hours before returning to the setting.

Children whom have been prescribed antibiotics must only retune to the setting 24 hours after taking their first dose of medication.

Headstart Pre-school LTD will only give children medication if it has been prescribed (recommended) by a doctor, dentist, nurse or pharmacist. A medical form must be signed by parents/ guardians to consent prior to administration.

 If the management team have agreed to administer specific medicines (e.g. in the case of a child possibly having an allergic reaction, antihistamines can be stored on site and given by staff if a prior consent form / care plan has been written).

An emergency bottle of Calpol and Piriton (antihistamine) will be stored in the Headstart medicine cupboard, this will only be used with prior telephone consent from parents/ guardians in the case of emergencies agreed by the management.

See Appendix 1 : Medication form

See Appendix 2 : Care Plan

**Medication Storage**

Medication will always be stored as the label advises. The Headstart Pre-school LTD fridge may store medicine in the side door and/ or in the medication cabinet on top of the worktop. The fridge and cabinet are both lockable.

Children with individual care plans will have their inhalers etc stored within the cabinet at all times.

The first aid boxes and individual medications will be checked for expiry dates once per term (see signed log within first aid box).

**Medication Permission**

Upon a parent/ guardian asking for a member of Headstart Pre-school LTD to give their child any medication a full written medication form MUST be written and signed by the parent and the medication must be checked by a member of staff to ensure it is correct. Including: The child’s name, amount to be given, medication name, frequency of medication and date of issue.

Upon administration of any medication:

* The medication form will be checked by two members of staff.
* The medication will be checked by two members of staff; to ensure that both the medication name, the child’s name and dosage are correct (where appropriate).
* Both members of staff will remain present during the administration of the medication – directions from the medication form will be followed at all times.
* The form will be stored in the medication file. The form must be dated and signed by both staff members and again by the parent/ guardian upon collection of the child.

**Specific Medications**

In the event that a child starts Headstart Pre-school needs specific medication such as a child with diabetes a care plan will be devised and signed by parent/ guardians and Headstart Pre-school LTD. The setting will train at least two members of staff to administer required medication as appropriate, only trained staff will be able to administer this medication.

Care plans for individual children will be stored in the black file next to the medicine cabinet – these will be revised termly (or as appropriate) in line with the checking of the first aid box.

See appendix 3 : Ofsted guidelines on ‘giving medication to children in registered childcare

See appendix 4: Supporting pupils at school with medical conditions’

See Appendix 16 : staff training record – administration of medicines.

1. **Asthma**

## The Principles of our Asthma Policy

* Headstart Pre-school LTD recognises that asthma is an important condition affecting many children.
* Headstart ensures that children with asthma participate fully in all aspects of the Early Years Curriculum including physical Development activities.
* Headstart recognises that immediate access to reliever inhalers is vital – ensuring they are accessible at all times.
* Headstart keeps records of children with asthma and the medication they take (care plans).
* Headstart ensures the environment is favourable to children with asthma.
* Headstart ensures that other children have an awareness of asthma – knowing when children need to rest or take a break.
* Headstart ensures all staff who come into contact with children with asthma know what to do in the event of an asthma attack.
* Headstart will work in partnership with all interested parties including all staff, parents, doctors, nurses, and children to ensure the policy is implemented and maintained successfully at all times.
1. Headstart Pre-school LTD encourages children with asthma to achieve their potential in all aspects of the Early Years Curriculum by having a clear policy that is understood by staff, their employers and pupils. Bank staff and volunteers are also made aware of the policy. All staff whom come into contact with children with asthma are made aware of the correct procedures to follow.
2. A demonstration by the child’s parents MUST be given before the medication is used at the setting.

### Asthma medication

Parents MUST give a demonstration to staff members when a child requires new Asthma inhalers – the demonstration must be recorded step by step and staff must sign the document before administering the medication.

Immediate access to a reliever is vital. The reliever inhalers of younger children are kept in the classroom in the white medication cabinet (or taken out when leaving the building for trips).

All inhalers and spacers must be labelled with the child’s full name and dosage details provided by the doctor must be on the medication.

Parents are asked to give or decline consent for use of the emergency soluble reliever inhaler in the event that a child’s inhaler is: broken / not working properly or has not been returned to the setting. This inhaler is located in the school staff room in the green first aid bag (pinned to the notice board).

See Appendix 27: Children with Asthma.

**Brown Inhalers (preventers)** – are given to prevent an asthma attack and can be administered by Headstart staff when a full medication form is completed prior by parents/ guardians.

**Blue Inhalers (relievers)** – are given when a child feels that they may be having an attack (tight chest, wheezing, coughing, pain in chest area, struggling to breathe, unusually quiet). Prior consent for reliever inhalers is gained on the child’s care plan.

Parents are advised to have an annual review of medication and update children’s asthma care plans with the child’s GP. Children needing to use their reliever inhaler on a frequent basis will be advised to visit their GP for a renewal of their asthma plan/ medication.

See Appendix 5: Guidence on the use of emergency salbutamol inhalers in schools.

##### When a Child is Falling Behind due to Asthma

If a child is missing a lot of time from Headstart because of asthma or is tired in sessions because of disturbed sleep. The child’s key worker will initially talk to the parents to discuss if there is any further support that we can provide. If appropriate, the key worker will then talk to the Special Educational Needs Coordinator and/or the Wigan Early Years Team to gain further support. Headstart recognises that it is possible for children with asthma to have special education needs because of asthma.

##### Asthma Attacks

All staff who come into contact with children with asthma know what to do in the event of an asthma attack. (guidance from parents and care plans) Headstart follows the following procedure, which is clearly displayed on the classroom wall.

1. **Locate the child’s inhaler/ spacer and care plan.**
2. **Ensure that the reliever inhaler is taken immediately – follow guidance from care plans.**
3. **Stay clam and reassure the child, encourage slow and steady breaths.**
4. **Help the child to breathe by ensuring tight clothing is loosened.**
5. **Follow care plan note if this does not work - give 2 puffs of the inhaler every 2 minutes consecutively should the attack not subside (10 puffs max).**
6. **Phone 999 if a child has difficulty in speaking / does not respond to the inhaler / lips turn blue.**
7. **A member of Headstart staff will remain with the child until a parent/ guardian is present. Staff will endeavour to contact parents/ guardians at the earliest opportunity.**
8. **A child should always be taken to hospital in an ambulance. School staff should not take them in their car as the child’s condition may deteriorate.**

###### After the attack

All asthma attacks will be recorded in the setting medication/ incident file and signed by two staff members and the child’s parent/ guardians. Should the child be admitted to hospital a full written report will be made and Ofsted will be informed.

Minor attacks should not interrupt a child’s involvement at Headstart. When they feel better, they can continue to join in with all activities.

#### Record Keeping

Within Heastarts application pack parents/ Guardians are asked if their child has any medical conditions (current or previous). A care plan will be devised as required.

Parents should inform Headstart staff at the earliest opportunity should medication change or medical requirements change.

Records of on-going or temporay medication will be recorded in the medication file/ care plan file and will be signed by both staff and parents as appropriate.

See appendix 2 for care plan form.

##### Early Years Curriculum – Physical Education

Taking part in sports is an essential part of the Early Years Curriculum. All children are encouraged to join in. All staff are aware of which children have asthma or other physical medical conditions and are mindful of this when children are taking part in physical activities. Adaptions may be made to suit all chidlren’s needs.

Children under five should have around 180 minutes of moderate exercise per day, Headstart staff will aim to encourage around 1.5 – 2 hours per day (during a 6.5 hour session).

‘Free play’ outdoors will be given to children around 3 hours per day on a rota. Physical games will be greatly encouraged at all times. Alongside this; dance, yoga and action songs will be encouraged indoors.

Headstart also promotes healthy eating at every opportunity. Parents are provided with a healthy lunch box letter upon starting the setting and children are offered healthy fruit snacks.

See Appendix for ‘Physical activity guidelines for early years’.

**Headstart Environment**

Headstart does all that it can to ensure the school environment is favourable to children with medical conditions. Leaving space for wheel chair access at all times. The environment is equipped for; rest and play both indoors and outdoors.

Headstart holds a non-smoking policy for staff (staff must not smoke whilst in uniform and must be ‘off site’).

A daily cleaning rota of the furniture and toys is completed by staff on an on-going basis.

Children at Headstart are encouraged to eat a healthy balanced diet with fruit, vegetables and protein to support their immune system. Headstart offers support for a ‘healthy lunch box’ and school meals fall in line with national standards.

Parents/ Guardians are advised that they must not send any ‘nut’ products onto the site including peanut butter.

1. **Controlling Illness and infection control**

All parents/ guardians are asked to consent to abide by Headstart’s well child policy upon application to the setting. Children must not attend the setting if un-well. Headsart may seek advice from Public Health England as appropriate when illness arises.

In case of a child becoming unwell whilst within the setting including: Sickness/ diarrhoea or severe bleeding, at the first episode the member of staff dealing with the situation must:

* Wear protective disposable gloves and apron.
* Firstly, deal with the child to make sure that the child feels safe and remains calm and is responsive. Follow further first aid procedures as necessary according to each individual case.
* Remaining staff must be alerted to make sure that no other children access the contaminated area/ toys/ objects.
* The child must be changed straight away and left in the care of a member of staff. Clothing must be bagged carefully and sent home for washing.
* The parent/ guardian of the sick child must be contacted and asked to collect the child, the child remains with a member of staff away from others until the parent/ guardian arrives. In the event that the parent/ guardian account be contacted all other emergency contacts will be called until someone responds.
* The sick child’s temperature will be checked to ensure that they have no fever. If temperature is too high all known techniques will be used to cool child down i.e. tepid sponging, fewer clothes, cool drinks etc. until parent/ guardian arrives.
* The contaminated area must be thoroughly cleaned with anti-bacterial solutions and all wipes must be disposed of appropriately in the clinical waste bin.

In the event of a pandemic the specific risk assessment at that time will override any statements within this policy.

See Appendix 7 : Infection Control Audit Tool

See Appendix 8 : Guidance on infection control in schools and other childcare settings – Public Health Agency

See Appendix 9 : Guidance on Infection Control in Schools and other Childcare Settings.

See Appendix 21: Guidance for food business operators and local authorities E. coli 0157 Control of cross contamination.

**Sickness and/ or diarrhoea**

Any child that has had sickness or diarrhoea they will not be allowed to attend the Pre-school until at least 48 hours after the last occurrence, and the child is eating normally and feeling generally well again. Should the child have 1 episode of sickness or diarrhoea within the setting they will be sent home immediately.

Parents are asked to keep their children at home if they have any infection, and to inform the Pre-school as to the nature of the infection so that the Pre-school can alert other parents as appropriate, and make careful observations of any child who seems unwell.

Headstart Pre-school LTD has full insurance cover for both public and employer’s liability and details are clearly displayed on the wall next to the fire extinguisher on the exit door.

All staff and children have filled out a full medication declaration upon admittance to the setting. Headstart Pre-School LTD work closely with those whom need extra medical support.

Staff have completed a full paediatric first aid course and their skills are updated every 3 years as appropriate.

(See appendix 7 for information for infection control)

**Minimising the risk of infection spreading**

The incident/ accident files for both home and the setting are stored in the lockable manger’s cupboard in the Headstart classroom.

Headstart Pre School LTD has the following guidelines to minimise the risk of infection spreading which follow public health England guidelines:

* A child must be free of a fever (38 degrees or above) for 24 hours before returning to the setting.
* If a child has painkilling medicine or paracetamol (or alike) they must only retune to the setting 24 hours from their last dose of medication.
* A child must be free of diarrhoea/ vomiting for 48 hours before returning to their setting.
* If a child has chicken pox they must be fully scabbed over and dry underneath before returning to the setting.
* If a child has a common cold, they must stay away from the setting until the symptoms have ceased.
* If a child has a sore throat they must be free of symptoms for 24 hours before returning to the setting.
* If a child has a liquid drainage from their ears, eyes or nose (thick, green or puss like drainage) the child must be clear of symptoms for 24 hours before returning to the setting.
* If a child has any unexplained rash or skin infections including: boils, ringworm, impetigo, thrush, hand foot and mouth they must consult their doctor before returning to the setting.
* If a child is taking antibiotics they must not return to the setting until 24 hours after their first dose.

Headstart will always follow guidance from The Health Protection Agency with regards to isolation periods. These guidelines are posted on the office wall for all staff to see.

**Infection control / cleaning policy**

It is a priory of Headstart Pre-School LTD to ensure that the environment and equipment is clean and usable at all times. Designated sinks for handwashing, food preparation and toy washing are located around the classroom and are labelled for their purpose. The colour coded cleaning system supports staff in ensuring that appropriate sinks, cloths, mops and chopping boards are used. Information about cleaning products is also displayed on the coding system. The coding system is displayed around the classroom and is adhered to by all staff and cleaners within the setting to help avoid cross contamination.

See Appendix 22 – cleaning colour coded system

See appendix 9: Public Health England ‘Guidance on infection control in schools and other childcare settings.

See Appendix 18: Information on Norovirus

See Appendix 19: Information on meningitis

**Staff illness**

At Headstart, staff and students who are affected by flu like illness’ should stay off work/ school until they have recovered and have not had a fever for at least 24 hours. We also advise staff who have been affected by diarrhoea and vomiting to stay off work/ school until at least 48 hours after they last had diarrhoea and vomiting.

**Procedure for illness in the setting**

If a child falls sick or ill in any way, or complains of pain, aches or sores whilst in the care of Headstart Pre-school LTD the following actions will be taken:

* If a child is complaining of aches and pains the staff will offer the child a drink of water and talk to them to see how serious the problem is. The staff member will then take the child into a quiet corner for five minutes to see if the problem can be dealt with on site.
* If the child is still uncomfortable after a period of approximately 10 minutes, their parent/guardian will be telephoned and alerted of the problem.
* If the child is not collected the staff will do all they can to make the child comfortable until the parent/guardian arrives or until it is time to go home.
* If a child does not communicate that they feel ill or unwell but a member of Headstart Pre-school staff feels that they look/ seem to be unwell by their body language and complexion etc they will inform another member of Headstart Pre-school staff, who will then both check the child for any visible concerns i.e. rashes, fever, spots, shaking, drowsiness. Appropriate action will be taken whether it be monitoring of the child, a telephone call to parents/ guardians or direct telephone to the emergency services for external medical advice.
1. **Head lice**

Headstart will send reminders to parents to check their child’s hair regularly. Headstart request that parents inform us as soon as possible if they have found head lice in their child’s hair. Once informed Headstart will advise parents/ guardians of necessary treatments.

1. **Tooth Brushing**

Headstart is part of a tooth brushing scheme which encourages all pre-school children to brush their teeth once per day whilst at the setting. During tooth brushing staff ensure that surfaces and tooth brushes are clean/ cleaned and children used the directed amount of fluoride tooth paste.

See Appendix 20 : Looking after your babies teeth

See Appendix 22: Daily supervised brushing in early years and nursery settings.

1. **Vaccinations**

Headstart asks all parents/ guardians for children’s current immunisation schedule upon application to the setting. Headstart encourages and supports immunisations for all children and staff.

Headstart Pre-school parents/ guardians are encouraged to engage in the school/nursery based immunisation programme for their children to receive the flu vaccination within the nursery.

(see appendix 10 for information about the flu vaccination)

1. **First Aid**

\*During a pandemic the current risk assessment will override any information laid out in this section.

Headstart will endeavour to ensure that when ever possible all members of staff on duty will be Paediatric First Aid trained. A fully stocked First Aid Box is available and stored above the medicine cabinet by the exit door. This is checked and re-stocked termly (written in the diary). All Parents/ Guardians must consent to first aid in their child application pack – sensitivity will be given around religious beliefs.

(See appendix 11 for ‘Paediatric First Aid’ booklet for more information)

**Cuts & Burns**

Cuts or open sores, whether on adults or children, will be covered up with sticking plaster or other dressing if prior permission has been given within the child’s application pack. (See First Aid Procedure in Appendix 4).

A burn is caused by dry heat – by an iron or fire, for example. A scald is caused by something wet, such as hot water or steam. Burns can be very painful and may cause:

* red or peeling skin
* [blisters](https://www.nhs.uk/conditions/blisters/)
* swelling
* white or charred skin

## Treating burns and scalds

To treat a burn, follow the [first aid](https://www.nhs.uk/conditions/first-aid/) advice below:

* **immediately get the person away from the heat source** to stop the burning
* **cool the burn** with cool or lukewarm running water for 20 minutes – do not use ice, iced water, or any creams or greasy substances like butter
* **remove any clothing or jewellery** that's near the burnt area of skin, including babies' nappies, but do not move anything that's stuck to the skin
* **make sure the person keeps warm** by using a blanket, for example, but take care not to rub it against the burnt area
* **cover the burn** by placing a layer of cling film over it – a clean plastic bag could also be used for burns on your hand
* **use painkillers** such as [paracetamol](https://www.nhs.uk/conditions/paracetamol/) or [ibuprofen](https://www.nhs.uk/medicines/ibuprofen-for-adults/) to treat any pain
* **if the face or eyes are burnt, sit up as much as possible**, rather than lying down – this helps to reduce swelling
* **if it's an**[**acid or chemical burn**](https://www.nhs.uk/conditions/acid-and-chemical-burns/)**, dial 999**, carefully try to remove the chemical and any contaminated clothing, and rinse the affected area using as much clean water as possible.

For more information see: <https://www.nhs.uk/conditions/burns-and-scalds/>

1. **Needle stick Injury**

Injuries from needles used in medical procedures are sometimes called needle-stick or sharps injuries. Sharps can include other medical supplies, such as syringes, scalpels and lancets, and glass from broken equipment. Once someone has used a needle, viruses in their blood, such as [hepatitis B](https://www.nhs.uk/conditions/hepatitis-b/), [hepatitis C](https://www.nhs.uk/conditions/hepatitis-c/) or [HIV](https://www.nhs.uk/conditions/hiv-and-aids/), may contaminate it. This includes needles used to inject illegal drugs. Blood can also contaminate sharps.

If you pierce or puncture your skin with a used needle, follow this first aid advice immediately:

* encourage the wound to bleed, ideally by holding it under running water
* wash the wound using running water and plenty of soap
* do not scrub the wound while you're washing it
* do not suck the wound
* dry the wound and cover it with a waterproof plaster or dressing

You should also seek urgent medical advice as you may need treatment to reduce the risk of getting an infection:

* contact your employer's Occupational Health service if you injure yourself at work
* otherwise call your GP, NHS 111 or go to the nearest [accident and emergency (A&E) department](https://www.nhs.uk/servicedirectories/Pages/ServiceSearch.aspx?ServiceType=AandE)

More information can be found at: https://www.nhs.uk/common-health-questions/accidents-first-aid-and-treatments/what-should-i-do-if-i-injure-myself-with-a-used-needle/

1. **Incidents and Accidents**

If an accident or incident occurs that requires medical attention, a member of staff will deal with each incident/ accident accordingly and will fill out a full accident/ incident form that will be signed by the Child’s parent/ guardian as the child leaves the setting. Where deemed appropriate a member of the management team may telephone a parent/ guardian to explain the incident / accident and ask them what they would like us to do (e.g. in the event of a serious bang to the head).

In the case where accident forms cannot be sent home – an email will be sent to parents/ guardians and a copy will be printed for the Headstart file.

In cases where a head injury or an open wound bite has occurred parents/ guardians will also be given additional information sheets to accompany their child’s accident form to inform them of any on-going sign/ symptoms to look out for.

See Appendix : 13 Information on Animal and human bites

See Appendix 14 : Information on Head injuries

**In the event of a minor incident/ accident**

In the event of a minor incident/ accident e.g. A small graze, a staff member will clean the affected area appropriately and will inform the parent/ guardian on collection. A written accident form will be completed and signed upon collection.

**In the event of a moderate incident/ accident**

In the event of a moderate incident/ accident e.g. deep cut, bang to the head staff will perform the relevant first aid needed such as: ice cold compress, clean the wound with sterile saline medical wipes. In the case of a moderate incident/ accident a staff member will contact the child’s emergency contact to inform them of the incident/ accident and will advise collection of the child if appropriate(if child has become unwell, change in behaviour as a result to the accident) and perhaps advise to seek further medical attention. Upon return if Headstart staff feel that the Injury has not been cared for appropriately a referral to social services may be made. (see safeguarding policy).

An accident form will be completed and signed upon collection of the child.

**In the event of a major incident/ accident**

In the event of a major incident/ accident a member of the management team will deal with the accident/ incident appropriately, ensuring all other children are safe, making a judgment if a specific area/ toy/ piece of equipment needs to be removed or closed off immediately. They will call for external help and if appropriate will request someone to call 999. Staff will locate the child’s emergency medical form from the back of the child’s application pack (located in the office cupboard). If the child has an individual care plan this information will also be located in the black file next to the medical cabinet. The child’s emergency contacts will be telephoned to inform them. A member of staff will accompany a child to hospital if need be until their parent/ guardian arrives.

Upon Arrival back at the setting they will fill out a full accident report form and forward it to OFSTED within 14 days, as well as recording the incident/ accident file which will be signed by the parent/ guardian.

(See Appendix 9 for ‘Head injuries’ information leaflet)

(See Appendix 9 for ‘Human and Animal Bites’ information leaflet)

See Appendix 9 for ‘The Recovery Position’ information leaflet)
All major incidents/ accidents will be recorded and reported in accordance with the requirements of the Reporting of Injuries Diseases and Dangerous Occurrence Regulations 1995 (RIDDOR)

**Accidents at home/ out of the setting**

If a child comes to Headstart Pre-school with a visible mark including; bumps, scratches, bruises, burns, scars etc a member of Headstart staff should record what has been seen and ask a parent how this has happened (if the parent doesn’t offer any explanation themselves). This must be done before the child is left in Headstart’s care.

In the event that a child shows or talks about an accident/ incident that has happened outside of the setting once they have been left by their parent/ guardian a member of staff should record what is said by the child in the **home** accident/ incident record file. This will then be discussed with the parent/ guardian when collecting from the setting(or via telephone if deemed necessary). The form will be signed by staff and parents/ guardians. In extreme cases Headstart Pre-school may contact the Safeguarding Team for further advice or guidance (see safeguarding policy).

All staff are required to be aware of the above statements. It is the responsibility of the management team to ensure the existence of the incident/ accident file, the training of the staff and the carrying out of regulations are updated regularly and promptly.

1. **Reporting to Riddor**

Reporting To RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995). General Nursery Guidance o General GEMS guidance is that any child who goes directly from Nursery to hospital and receives medical treatment for an injury is reported to RIDDOR. [U.K. Guidance] o Nursery Manager / Senior First Aider (or member of staff with 3 day at Work First Aid Course) needs to assess whether the accident needs to be reported. [U.K. Guidance] o If the accident/incident is not clear whether to report, it is better to register a report with RIDDOR. GEMS Education First Aid Policy JUNE 2016 o Copies of this documentation to be kept with the accident form. o A list of all reportable accidents to be maintained for Governance purposes. [U.K. Guidance]

1. **Heatwaves**

In the event of a heatwave, Headstart will follow the guidelines of Public Health England. A heat wave occurs when the daily maximum temperature of more than five consecutive days exceeds the average maximum temperature by 5 °C.

**Sun cream**

Too much exposure to ultraviolet (UV) radiation from the sun causes sunburn, skin damage and increases the risk of skin cancer. Sun exposure in the first 15 years of life contribute significantly to the lifetime risk of skin cancer.

We want all staff and children to enjoy the sun safely. We will work with staff, parents, and carers to achieve this through:

Education

* All children will be involved in a discussion, appropriate for their age and understanding, at the start of summer about sun protection and the risks.
* All staff will be educated in the importance of sun protection and the risks involved in not protecting both themselves and others.
* Parents and carers will be informed about our policy

Sun safety will be promoted through working with parents, staff, and the wider community to improve our understanding and provision to avoid the harmful effects of too much exposure to UV. Staff should always act as a positive role model and set a good example by seeking shade whenever possible, wearing appropriate clothing, and applying sunscreen.

**Protection**

* The nursery garden has shade provided with outdoor shelter and large trees.
* Children will be encouraged to use the shaded areas during playtimes when appropriate clothing.
* The children will be encouraged to wear clothes that provide good sun protection including clothing that covers the shoulders and hats that shade the face and neck.
* Parents/carers will be duly informed of the importance to provide the nursery with the appropriate clothing/headwear.
* Staff should wear hats when appropriate to act as a good role models and to also demonstrate drinking plenty of water.
* Children are encouraged to increase their water intake in hot weather and are encouraged to do so in outdoor areas also.

Sunscreen

* Parents should apply sun cream to their child at home. We recommend a high factor sun cream which is long lasting.

See Appendix 15: Looking after children and those in early years settings during heatwaves: Guidance for teachers and professionals.

1. **Pets**

All parents/ guardians must list allergies within their child’s application pack. If there is a child within the setting whom has allergies relating to pets the management team will make all member of staff aware. A new pet will only be introduced to the setting if no children are allergic.

In the event that a child shows an allergic reaction from a pet whilst at the setting Headstart holds emergency antihistamine which a member of management must agree to administer in the event that a parent/ guardian cannot be contacted.

Please see ‘Pets’ Risk assessment Appendix:

1. **Child Mental Health and Wellbeing**

Well-being relates to our basic needs such as: physical needs, the need for affection, warmth, the need for safety , the need for recognition and affirmation and the need to feel confident and capable to try at something and to experience success.

Emotional wellbeing includes being happy and confident. Social wellbeing allows children to make good relationships with their peers and adults in their lives. As part of our ongoing observation, assessment and planning cycle, the staff will monitor their key children’s well-being, involvement and will plan activities to support them in these areas. This will then be shared with the children’s parent/ guardian and staff will try to give advice and suggestions on how the parent could further support their child at home if they are struggling.

Therefore, Headstart Practitioners should identify factors that may pose a risk to a child’s social and emotional wellbeing as part of the on-going assessment for their development such as: a child being withdrawn, unresponsive, showing signs of a behavioural problem and delayed speech or poor communication and language skills.

Practitioners understand children’s emotional health needs and have the time and skills to develop nurturing relationships with their peers and adults in their day to day life.

Staff members have attended mindfulness training and at Headstart we incorporate various mindfulness activities for the children to participate in every day e.g. Relaxing music, breathing exercises and yoga.

Headstart staff have also accessed Physiological First Aid training (PFA) which has:

* Prepared staff to help people during emergencies
* Prepared staff to deliver Physiological first aid
* Prepared staff to notice signs of distress
* Prepared staff on how to listen and understand people’s worries and concerns.
* Prepared staff to understand links to wider community organisations to support the individual / family.

By delivering physiological First Aid staff aim to: support a child or young person effectively, so that they grow to become more resilient.

See Appendix 17: Specialist perinatal and parent-infant mental health services.

See Appendix 23: Psychological first aid for supporting children and young people in emergency and crisis situations.

1. **Bereavement**

We are passionate about providing an ethos, environment and curriculum that can provide support during difficult times, including time of death or dying.

We recognise that within our setting there may be some recently bereaved children who are struggling with their own situation – or sometimes the entire setting community is impacted by the death of a member of staff or a child.

In the event of a death, Headstart would seek advice from Wigan’s Safeguarding Partnership, whom can provide a bereavement support lead. A referral can be made with consent, to the dedicated bereavement support email address – bereavementsupport@wigan.gov.uk .

Headstart recognises the impact a bereavement by suicide may have on a child / young person, be that of a member of the family or setting community. We also understand the risk of suicide is greater in peer groups of someone who has died by suicide.

Papyrus UK can offer support and advice to young people thinking of suicide or anyone who may be worried about someone who is.

Headstart recognises:

* That grief may not always be apparent to the onlooker, but its invisibility makes it no less real.
* That differing religions/cultures view death and bereavement from different perspectives and all viewpoints should be taken into consideration and given equal value.
* That the death of a child has huge repercussions beyond the immediate teaching / care team of that child and every effort should be taken to inform and deal sensitively with the far-reaching contacts.

Section 19 of the Children and Families Act 2014 [[1]](#footnote-1)makes clear that local authorities, in carrying out their functions under the Act in relation to disabled children and young people and those with special educational needs (SEN) must have regard to:

* the views, wishes and feelings of the child or young person, and the child’s parents / guardians,
* the importance of the child or young person, and the child’s parents / guardians, participating as fully as possible in decisions, and being provided with the information and support necessary to enable participation in those decisions,
* the need to support the child or young person, and the child’s parents / guardians, in order to facilitate the development of the child or young person and to help them achieve that best possible educational and other outcomes, preparing them effectively for adulthood.
* Headstart Pre-School LTDwill place the emotion and well-being of the child(ren) / young person centrally to their needs and support.

Links and communication with a Wigan bereavement support lead practitioner will be made if required.

See Appendix 12 : Paryrus information

# **The role of the setting manager**

The manager is often the first person to become aware of the death of a child or a member of staff within the setting and will therefore hold several key responsibilities such as:

* Acting quickly to establish the facts and communicate effectively to the setting community as previously described to avoid rumour and speculation as well as alleviating complexities and unnecessary trauma to the bereaved family.

It is our policy that no information regarding the death will be shared using social media by staff, until all the facts have been established and all family members, friends and colleagues have been informed. Respect and empathy are key to ensuring the bereaved do not face unnecessary trauma and Headstart Pre-School LTDwill make every effort to handle the event and communication of this in a sensitive and efficient manner.

* liaising with outside agencies, the Local Authority and keeping the setting owner / voluntary management informed.
* be first point of contact for family / child concerned.
* Responding to media enquiries and acting as spokesperson for the setting.
* A clear communication process should be identified, taking lead from the family and asking who they may wish to communicate with at the setting.
* Children who may be particularly vulnerable, such as friends of the deceased, room group of a staff member, or those who may have witnessed the event, should be identified and informed in a way most appropriate for them. This may be individually or as a peer group by a person known to them.
* Staff may need support in relation to the news and may feel that they are not the most appropriate person to share the news to children. All staff should be reminded of the support available to them and an informal mutual support forum, for example the staffroom at the end of the day, can provide staff the opportunity to share feelings and reactions.
* Any member of staff affected by the death will be offered ongoing support as appropriate and will be a priority for the setting. It is only to be expected that many members of staff will be emotionally affected and would benefit from the provision of a calm environment in which to meet with other colleagues and spend some time in reflective mode. Additionally, those staff who may be particularly vulnerable or known to be alone that night will be offered support. This could include the exchange of phone details in order to provide a point of contact for the member of staff.
* Headstart Pre-School LTDwill be sensitive of any arrangements which may have been already discussed for a child or person who died from a progressive illness or on end of life care.
* A letter to all of the settings families affected should be distributed at the earliest opportunity and wherever possible, the wording of this communication should be shared in advance with the bereaved family for their input.
* In consultation with the family, arrangements for the funeral attendance may be clarified, with the consideration of full or partial setting closure in some circumstances.
* The family and children should be asked for their views in how best to mark the death in an appropriate way for that setting which is relevant to the deceased and be considerate of the nature of the death. Special care should be taken to avoid sensationalising the death in order to safeguard the setting community and avoiding contagion.
* In a leading and supporting role, the wellbeing of a senior staff member is important and there may be times when this role will need to be handed over to others. Senior staff can seek support from EPS, colleagues and CAMHS as well as other national organisations.

# **Children who are bereaved**

Headstart Pre-School LTD recognises that the impact of bereavement follows a child throughout their life so information should be recorded and shared with relevant people, particularly at transition points. Headstart Pre-School will endeavour to be aware of any ongoing bereavement issues for new pupils / students. To this end it is important to have effective communication with feeder schools / settings.

A more common experience for practitioners / staff is that of a child experiencing the death of a parent or sibling. Whole setting activities will not normally be appropriate in this situation, but the needs of that individual will still be given careful consideration.

Support can be offered and undertaken with Early Help and lead by the setting, with consent of the family.

A child’s understanding of death and loss varies depending on age and developmental stage – action will be taken as appropriate.

# **Supporting children with additional learning needs**

Children with learning difficulties are no different to all other children and young people, in having their grief recognised, hearing the truth and being given opportunities to express their feelings and emotions, but may need extra help with their understanding and ways to express feelings.

Support for each child should be dependent on their needs and suitable resources utilised for communication to be honest and understood, finding creative ways to communicate when words are sometimes not appropriate.

See Appendix: 23 Psychological First Aid (PFA) for supporting children and young people in emergency and crisis situations.

1. **Healthy Eating**

Headtsart Pre-School promotes healthy eating at every opportunity. Healthy lunch box information is shared with parents upon admission to the setting and additional reminders and information is shared through each academic year.

Headstart provides healthy, balanced snacks for children, snacks usually consist of fruit or vegetables, we also encourage children to drink water and milk. One milk carton is provided per day, per child.

Headstart does not provide hot lunches – however children can access these from the school kitchen – nutritional information for these can be accessed by visiting the school office.

For further information regarding support for healthy eating see:

Appendix 25: Example menus for early years settings in England.

Appendix 26: Eat Better Start Better, Voluntary Food and Drink Guidelines for Early Years Settings in England – A Practical Guide

1. **C02 Monitors**

C02 monitor has been placed in the Headstart classroom to inform staff members how much C02 is in the air and if more ventilation is required.

Windows on both sides of the room will be kept open at all times and the blue exit door will provide extra ventilation when needed.

Staff will check the monitors regularly and will report to the manager should they feel further action needs to be taken.

Should you wish to have this policy translated into another language or in an alternative form of communication please discuss this with Alison Davies Manager) who will ensure your request can be dealt with.

***I have read and understood the above policy. I am aware that the management team are available to offer further advice regarding the content if needed.***

|  |  |  |  |
| --- | --- | --- | --- |
| **PRINT NAME** | **ROLE** | **DATE** | **SIGNATURE** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. [↑](#footnote-ref-1)