

HAPPY FACES PRE-SCHOOL

POLICIES & PROCEDURES

Reviewed and updated September 2025

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OFSTED EY308187**

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Policy and procedures implementation and review policy

Alongside associated procedures, this policy was adopted by Happy Faces Pre School in October 2021.

Aim

We have one set of policies and procedures which are consistent across our early education and childcare provision and in line with the current EYFS requirements.

Objectives

We adhere to and implement operational policies and procedures by:

- ensuring that all members of staff, assistants, and students (hereon referred to collectively as staff), are aware of their role and responsibility in policy and procedure implementation
- ensuring that members of staff are aware of the content of the policies and procedures through:
 - induction
 - line management and staff meetings and training events
 - contributing feedback to procedure review
 - use of relevant publications
- Staff are aware of their duty to adhere to the operational policies and procedures and how they contribute to a consistent approach throughout the organisation.
- All policies and procedures are reviewed annually as a minimum and when there are any changes to the settings practice or legislation.

Legal references

Childcare Act (2006)

Education Act (2011)

Policies and procedures implementation and review

Implementation and review procedure

We have one set of policies and procedures which are consistent across our provision and in line with the current EYFS requirements.

- Policies and procedures are written and reviewed annually as a minimum or when there is a change in practice or legislation.
- Changes are only made to the policies and procedures by the trustees of Happy Faces Pre School in liaison with the setting manager where risk assessment has indicated that this is required.
- Policies and procedures are risk assessed and reviewed following any incident that is reportable under RIDDOR.
- Disciplinary action may be taken where individuals have disregarded policies and procedures.

Familiarisation and implementation

- It is the responsibility of every member of staff, assistant, volunteer and student (hereon referred to as staff for clarity), within the setting to adhere to and always implement the policies and procedures.
- The setting manager offers advice and support to staff regarding procedure implementation.
- An overview of policies and procedures is included in induction for individual members of staff, with specific emphasis given to safeguarding procedures.
- Members of staff must sign to say that they are aware of and will adhere to the current policies and procedures.
- Members of staff understand that they must refer to the procedures as they support all aspects of their work within the setting.
- Staff meetings and in-house training events are used as opportunities to focus on procedures as required, and to discuss their implementation.
- Where there is an outbreak of a communicable disease or infection, the relevant procedure is photocopied and displayed for parents' reference during the outbreak.
- Other procedures may be displayed where a situation arises, for example to highlight health and safety concerns such as closing the gate.
- Following implementation of a procedure, such as emergency evacuation or other health and safety procedures, the setting manager will conduct a review as follows:
 - did all members of staff follow the procedure?
 - is further training required on any aspect of implementation?
 - did the procedure fit the circumstance; does it need adapting or changing?

Parents

- Parents/carers know how to access a full set of policies and procedures.
- Parent/carer forums, such as the Annual General Meeting, are used as opportunities to explain and discuss the implementation of the policies and procedures.

Health and safety policy

Alongside associated procedures in “Health and safety”, this policy was adopted by Happy Faces Pre School in August 2021.

Our Designated Health and Safety Officer is Sharon Danch

Aim

Happy Faces Pre School is a suitable, clean and safe place for children to be cared for, where they can grow and learn. We meet all statutory requirements for health and safety and fulfil the criteria for meeting the Early Years Foundation Stage Safeguarding and Welfare Requirements.

Objectives

- We recognise that we have a corporate responsibility and duty of care towards those who work in and receive a service from our provision. Individual staff and service users at Happy Faces Pre School also have responsibility for ensuring their own safety as well as that of others. Adherence to policies and procedures and risk assessment is the key means through which this is achieved.
- Insurance is in place (including public liability) and an up-to-date certificate is always displayed.
- Risk assessment is carried out where it is helpful to do so, to ensure the safety of children, staff, parents, and visitors. Legislation requires all those individuals in the given workplace to be responsible for the health and safety of premises, equipment and working practices.
- Smoking and vaping are not allowed on the premises, both indoors and outdoors. If children use any public space that has been used for smoking or vaping, members of staff ensure that there is adequate ventilation to clear the atmosphere. Staff who smoke or vape before work and during their break make every effort to reduce the effects of odour and passive smoking for children and colleagues. The use of electronic cigarettes is not allowed on the premises.
- Staff must not be under the influence of alcohol or any other substance which may affect their ability to care for children. If staff are taking medication that they believe may impair them, they **must** seek further medical advice and only work directly with children if that advice is that the medication is unlikely to impair their ability to look after children. The setting manager must be informed.
- Alcohol must not be bought onto the premises for consumption.
- A risk assessment (Generic risk assessment) and access audit (Access audit form) are carried out for each area as required and the procedure is modified according to needs identified for the specific environment.
- Risk assessments are monitored and reviewed by those responsible for health and safety.

Legal references

Health and Safety at Work etc Act 1974

Health and Safety (Consultation with Employees) Regulations 1996

Management of Health and Safety at Work Regulations (1999)

Regulatory Reform (Fire Safety) Order 2005)

Electricity at Work Regulations (1989)

Regulation (EC) No 853/2004 of the European Parliament and of the Council on the hygiene of foodstuffs

Manual Handling Operations Regulations (1992) (Amended 2002)

Medicines Act (1968)

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) (Amendment)
Regulations 2012

Control of Substances Hazardous to Health (COSHH) Regulations 2004

Health and Safety (First Aid) Regulations 1981

Childcare Act 2006

Further guidance

Dynamic Risk Management in the Early Years (Alliance Publication)

Health and Safety Executive www.hse.gov.uk/risk

Food Standards Agency www.food.gov.uk

Ministry of Housing, Communities & Local Government www.communities.gov.uk

Health and safety procedures

Risk assessment

Risk assessment is carried out to ensure the safety of children, staff, parents, carers, and visitors.

Individuals in the workplace to be responsible for the health and safety of premises, equipment and working practices. We have a 'corporate responsibility' and 'duty of care' for those who work in and receive a service from our provision. Individuals also have responsibility for ensuring their own and others safety.

- Generic risk assessment form is completed for each area of work, and the areas of the building that are identified in these procedures
- Access audit form is completed to ensure inclusion and the health and safety of all visitors, staff, and children. The relevant procedure is modified if required to match the assessment.

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 and is updated when necessary.*

The law does not require that all risk be eliminated, but that 'reasonable precaution' is taken. This is 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.

Daily safety sweeps and checks indoors and outdoors

- Safety sweeps are conducted before children arrive when setting up for the day or closing in the evening. Sometimes a safety sweep will identify a risk that requires a formal risk assessment on a form. For example, if a window latch is stiff and a practitioner must stand on a chair to reach it to ensure it has closed properly.

Health and safety risk assessments

Health and safety risk assessments inform procedures. Staff and parents, and carers should be involved in reviewing risk assessments and procedures, as 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.

The setting manager undertakes training and ensures staff have adequate training in health and safety matters. The setting manager ensures that checks/work to premises are carried out and records are kept.

- Electricity safety by a qualified electrician.
- Fire precautions to check that all fire-fighting equipment and alarms are in working order.
- Deep clean is carried out in kitchen.

The setting manager ensures that staff members carry out risk assessments that include relevant aspects of fire safety, food safety, in each of the following areas of the premises:

- Entrance and exits.

- Outdoor areas.
- Passageways and connecting areas.
- Group rooms.
- Sleep areas.
- Kitchen.
- Staff room.
- Rooms used by others or for other purposes.

The setting manager ensures staff members carry out risk assessment for off-site activities, such as children's outings (including use of public transport), including:

- home visits
- other duties off-site such as attending meetings, banking etc

The setting manager ensures staff members carry out risk assessment for work practice including:

- changing babies, and the intimate care of young children and older children
- arrivals and departures
- children with allergies and special dietary needs or preferences
- serving food in group rooms
- cooking activities with children
- supervising outdoor play and indoor/outdoor climbing equipment
- settling young children to sleep
- assessment, use and storage of equipment for disabled children
- visitors bringing equipment or animals for children's learning experiences, for example fire engines
- following any incidents involving threats against staff or volunteers
- following any accident or incident involving staff or children

The setting manager liaises with Crime Prevention Officers as appropriate to ensure security arrangements for premises and personnel are appropriate.

Generic risk assessment form

Risk area:		Carried out by:		Date:
Risk identified	Who is at risk	Level of risk	Control measure and person/s responsible	Review

Access audit form

Checked Area	Evident		Comments/Action i.e. further risk assessment to be undertaken
Approach to the building	Yes	No	
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/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?			
Are all surface coverings, even and non-slip?			

Is there adequate lighting at the front and on the route to the building?			
Entrances	Yes	No	
Is there an entry phone and/or a doorbell and is 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 door swing?			
Are glazed doors marked for safety/visibility?			
Door close mechanism appropriately adjusted (to ensure they do not close too quickly)?			
Door control (handle/knob) at a suitable height/clearly located and easy to use?			
Information on 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 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	Yes	No	
Are all floor surfaces suitable?			
Are the acoustics of the building suitable for adults with hearing impairments?			
Are there colour and tonal contrast to help distinguish fixtures and fittings from surfaces, walls and floors?			
Is there a disabled WC facility no further than one floor away from the room being used?			
Handrails available at varying heights in the WC?			
Support rails available in relevant areas?			
Is the environment free from unnecessary noise?			
Audible, manual and mechanical alarm systems supplemented with visual and verbal warnings?			
Are all areas in the building wide enough for adults using mobility equipment to manoeuvre?			

Internal lobbies/doorways sufficient for manoeuvring?			
Fittings fixed without dangerous edges?			
Control of natural/artificial light to avoid glare/silhouettes and is lighting adequate?			
Clutter-free travel routes (coats, bags on floor)			
Door control (handle) suitable height/clearly located and easy to use?			

Health and safety procedures

Group rooms and corridors

- Significant changes such as structural alterations or extensions are reported to Ofsted.
- A risk assessment is done to ensure the security of the building during building work.
- Door handles are placed high or alternative safety measures are in place.
- Chairs are stacked safely and not too high.
- There are no trailing wires; all radiators are guarded.
- Windows are opened regularly to ensure flow of air.
- Floors are properly dried after mopping up spills.
- Children do not have unsupervised access to corridors.
- Floor covering on corridors is checked for signs of wear and tear.
- Staff hold the hand of toddlers and children who require assistance.
- Materials and equipment are not generally stored in corridors, but where this is the case, it does not block clear access or way out.
- Walkways are uncluttered and adequately lit.
- Corridors are checked to ensure that safety and security is maintained, especially in areas that are not often used, or where there is access to outdoors
- Socket safety inserts are not necessary, as there is no safety reason to do so, modern plug sockets are designed to remove risk of electrocution if something is poked into them. Socket covers (that cover the whole socket and switch) may be used, please note these are different to socket inserts.
- Any blinds fitted with cords are always secured by cleats. There are no dangling cords.

Health and safety procedures

Kitchen

General safety

- The stair gate to the kitchen is always kept closed.
- Children do not have unsupervised access to the kitchen.
- Staff do not normally take tea breaks in the kitchen unless there is no alternative, in which case, tea-breaks are not taken in the kitchen when food is being prepared.
- Wet spills are mopped immediately.
- Mechanical ventilation is used when cooking.
- A clearly marked and appropriately stocked First Aid box is kept in the Butterfly Room and in the nappy changing room.

Cleanliness and hygiene

Staff follow the recommended cleaning schedules in Safer Food Better Business (SFBB).

- Floors are washed down at least daily.
- All work surfaces are washed regularly with anti-bacterial agent.
- Inside of cupboards are cleaned monthly.
- Cupboard doors and handles are cleaned regularly.
- Fridge and freezer doors are wiped down regularly.
- Ovens/cooker tops are wiped down daily after use; ovens are fully cleaned monthly.
- If dishwashers break down, washing up done by hand.
- Where possible all crockery and cutlery are air dried.
- Plates and cups are only put away when fully dry.
- Tea towels, if used, are used once. They are laundered daily.
- Any cleaning cloths used for surfaces are washed/thrown away after use and replaced daily.
- There is a mop, bucket, broom, dustpan, and brush set aside for kitchen use only.
- Any repairs needed are recorded and reported to the manager.

Further guidance

Safer Food Better Business: Food safety management procedures and food hygiene regulations for small business: www.food.gov.uk/business-guidance/safer-food-better-business

Health and safety procedures

Children's bathrooms/changing areas

- Children at Happy Faces Pre School are provided with a peg for a bag (provided by parent/carer) to keep spare clothing and nappies/pants.
- Toddlers have low changing surfaces they can climb on to, or floor surface is used. Staff should not have to lift heavy toddlers on to waist high units.
- Changing mats are cleaned and disinfected in baby change areas.
- Disposable nappies/trainers are placed in nappy disposal units.
- Staff use single use gloves and aprons to change children and wash hands when leaving changing areas. Please note that gloves are not always required for a wet nappy if there is no risk of infection, however, gloves are always available for those staff who choose to wear them for a wet nappy. Gloves are always worn for a "soiled" nappy.
- Staff never turn their backs on or leave a child unattended whilst on a changing mat.
- Changing areas or stands are provided for older (disabled) children, if required.
- Changing mats are disinfected after each change.
- Anti-bacterial spray is not used where residue may have direct contact with skin.
- Anti-bacterial sprays used in nappy changing areas are not left within the reach of children.
- Natural or mechanical ventilation is used; chemical air fresheners are not used.
- All other surfaces are disinfected daily.

Children's toilets and wash basins

- Children's toilets are cleaned twice daily using disinfectant cleaning agent for the bowls (inside and out), seat and lid, and whenever visibly soiled.
- Toilet flush handles are disinfected daily.
- Toilets not in use are checked to ensure the U-bend does not dry out and are flushed every week. Taps not in use are run for several minutes every two to three days to prevent infections such as Legionella.
- There is a toilet brush available for children's toilets. This is stored in the cleaning cupboard, along with a separate cleaning cloth.
- Cubicle doors and handles are washed weekly.
- Children's hand basins are cleaned twice daily and whenever visibly soiled, inside, and out using disinfectant cleaning agent. Separate cloths are used to clean basins etc. and are not interchanged with those used for cleaning toilets. Colour coded cloths are used.
- Mirrors and tiled splash backs are washed daily.
- Paper towels are provided.

- Bins are provided for disposal of paper towels and are emptied daily.
- All bins are lined with plastic bags.
- Staff who clean toilets wear rubber gloves.
- Staff changing children wear gloves and aprons as appropriate.
- Wet or soiled clothing is put in a plastic bag for parents to collect.
- Floors in children's toilets are washed twice daily.
- Spills of body fluids are cleared and mopped using disinfectant.
- Mops are rinsed and wrung after use and stored upright, not stored head down in buckets.
- Mops used to clean toilets or body fluids from other areas are designated for that purpose only and kept separate from mops used for other areas. Colour coding helps keep them separate.
- Used water is discarded down the outside drain.

Health and safety procedures

Short trips, outings and excursions

Planning and preparation

- Outings have a purpose with specific learning and development outcomes.
- If staff are 'borrowed' from another area to maintain ratios on an outing they are fully briefed about the children they are accompanying.
- The excursion does not go ahead if concerns are raised about its viability at any point.
- Parents/carers are informed of an outing and staff check that consent forms on children's registration were signed.
- A minimum of two staff accompanies children on outings. There is a ratio of 1:2 for some disabled children and children up to 3 years. Older children have a ratio of 1:4, depending on the risk assessment.
- Children are specifically allocated to each member of staff/volunteer; they are responsible for supervising their designated children for the duration of the excursion.
- Parents/carers on outings are responsible for their own children only.
- Parents/carers who have undergone vetting as volunteers may be included in the ratio.
- A mobile phone belonging to the setting and small first aid kit is taken out.
- Staff make sure they have water, plastic cups, spare nappies/change of clothes and wet wipes for the children going out appropriate to the length of time they are out for.
- Sun cream is applied as needed and children are clothed appropriately
- Children wear one of our setting's t-shirts/sweatshirts.
- Staff have emergency contacts, medication and equipment needed for children.

Risk assessment

- Risk assessment if required, is completed prior to the outing and signed off by the setting manager and all staff taking part. Any existing risk assessments are reviewed/amended as required.
- Children with specific needs have a separate risk assessment if necessary.

Outing venue (larger outings)

- Venues used regularly are 'risk assessed' and an initial pre-visit is made to look at the health and safety aspects. If pre-visits cannot be made, risk assessment is achieved by calling the venue and asking for their risk assessment.

Transport

- If coach hire is required for an outing, only reputable companies are used.

- The setting manager ensures that seat belts are provided on the coach and that booster seats and child safety seats are used as appropriate to the age of the children.
- The maximum seating capacity of the coach or minibus is not exceeded.
- Contracted drivers are not counted in ratios.
- Public transport should always be ratio of 1-2 (unless agreed with the setting manager).

Where transport is provided by the setting

- Records are kept including insurance details and a list of named drivers.
- Drivers using their own transport should have adequate insurance cover.

Farm and zoo visits

Staff are aware of the risks posed by infections such as E.coli being contracted from animals. They are also aware of toxic substances used on farms that could be hazardous to health. Staff are vigilant of the natural dangers presented by a farm or zoo visit and conduct a risk assessment prior to the visit.

- The venue is contacted in advance of the visit to ensure no recent outbreaks of E.coli or other infections. If there has been an outbreak the visit will be reviewed and may be postponed.
- Hands are washed and dried thoroughly after touching an animal.
- Nothing is consumed whilst going round the farm. Food is eaten away from animals, after thoroughly washing hands.
- Children are prevented from putting their faces against animals or hands in their own mouths.
- If animal droppings are touched, hands are washed and dried immediately.
- Shoes are cleaned and hands washed thoroughly as soon as possible on departure.
- Staff or volunteers who are or may be pregnant, should avoid contact with pregnant ewes and may want to consult their own GP before the visit.
- Farmers have a responsibility to ensure that hand washing and drying facilities are available and are suitably located, that picnic areas are separate and clean, and that all other health and safety laws are fully observed.

For further guidance, refer to the insurance provider.

Larger outings checklist

There is an identified lead person for the outing.

- The outing has an educational purpose and has been agreed with the setting manager.
- Risk assessments if required, are completed/updated and shared with every staff, student/volunteer accompanying the children.
- Staff understand the potential risks when they are out with children and takes all reasonable measures to remove minimise risks.

- Bouncy castles and similar attractions are not accessed by children on an excursion.
- The designated lead is the last to leave the venue, or transport being used.
- The designated lead conducts a 'safety sweep' before during and after the outing.

Further guidance

Daily Register and Outings Record (Alliance Publication)

Preventing Accidents to Children on Farms (Health and Safety Executive 2013)

Health and safety procedures

Outdoors

- At Happy Faces Pre School all gates and fences are childproof, safe, and secure.
- Areas are checked daily to make sure animal droppings, litter, glass etc. is removed. Staff wear rubber gloves to do this.
- Bushes or overhanging trees are checked to ensure they do not bear poisonous berries.
- Stinging nettles and brambles are removed if they pose a risk to younger children.
- Safety mats are provided under climbing equipment, even when on grass.
- Wooden equipment is maintained safely, put away daily (except the mud kitchen and pirate ship) and not used if broken.
- Wooden equipment is sanded and varnished as required.
- Broken climbing equipment or outdoor toys are removed and reported to the setting manager.
- Children are always supervised within ratios outside.
- Children are suitably attired for the weather conditions and type of outdoor activities.
- Sun cream (if parents have given permission) is applied and hats are worn during the summer months.
- Outdoor play is avoided in extreme heat between noon and 3pm.
- Children who have no adequate means of sun protection, such as a hat, long sleeves and trousers or sun cream, will not be able to play outdoors in un-shaded areas.
- Children are supervised on climbing equipment, especially younger children.
- Water play is not left out but is cleared, cleaned and stored after each use.
- Receptacles are left upturned to prevent collection of rainwater, this is important in areas where there are vermin to prevent urine/faeces contaminating the water.
- Sightings of vermin are recorded and reported to the manager who reports to the Environmental Health's Pest Control Department.
- Outdoor areas that have flooded are not used until cleaned down and restored (we jet wash the safety surface). Grassed areas are not played on for at least one week after the floodwater has gone.
- If paddling pools are used, a risk assessment is conducted, and consideration given to the needs of disabled children or those less ambulant.

Drones

If there are concerns about a 'drone' being flown over the outdoor area, that may compromise children's safety or privacy, the setting manager will contact the police on 101.

- Children will be brought inside immediately.

- Parents/carers will be informed that a Drone has been spotted flying over the outdoor area and will be advised fully of the actions taken by the setting.
- The police will have their own procedures to follow and will act accordingly.
- If at any point following the incident, photographs taken by a drone emerge on social media that could identify the nursery or individual children, these are reported to the police.
- A record is completed in the Notifiable Incident Record unless there is reason to believe that the incident might have safeguarding implications, for example:
 - the drone has hovered specifically over the outdoor area for any length of time
 - there is a likelihood that images of the children have been recorded
 - is spotted on more than one occasion
 - if the police believe there is cause for concern

Where this is the case, “Safeguarding children, young people and vulnerable adults” procedures are followed.

Further guidance

Reportable Incident Record (Alliance Publication)

Health and safety procedures

Staff cloakrooms

- All areas at Happy Faces Pre School are kept tidy and always uncluttered.
- Doors to staff/visitor toilets and cloakrooms are kept always shut.
- Staff are provided with a secure area for storing personal belongings, including any medication they are taking.
- Toilet areas are not used for storage due to the risk of cross-contamination.
- Staff/visitor toilets are cleaned daily using disinfectant.
- Toilet flush handles are disinfected daily.
- There is a toilet brush provided per toilet and separate cleaning cloth.
- Toilets that are not in use are checked to ensure that the U-bend is not drying out and are flushed every week. Taps that are not in use are run for several minutes every two to three days to minimise the risk of infections such as legionella.
- Toilet doors and handles are washed weekly.
- Staff hand basins are cleaned daily using disinfectant. Separate cloths are used to clean basins etc. and are not interchanged with those used for cleaning toilets.
- Floors in staff toilets are washed daily.
- Mirrors and tiled splash backs are washed daily.
- Paper towels are provided for hand drying.
- Bins are provided for sanitary wear and cleared as per contract agreement.
- Bins are provided for disposal of paper towels and are cleared daily.
- All bins are lined with plastic bags.
- Members of staff who are cleaning toilets wear rubber gloves that are kept specifically for this purpose to prevent cross contamination.

Health and safety procedures

Maintenance and repairs

Any faulty equipment or building fault at Happy Faces Pre School 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.

Health and safety procedures

Laundry area – in kitchen

- Children do not have access to the laundry area.
- The laundry area is kept well ventilated.
- Detergents/detergent pods and cleaning materials are stored out of reach of children.
- Biological detergents are not used due to the risk of allergies.
- Buckets are provided to soak soiled bedding in suitable disinfectant solution.
- If children's clothes are soiled, they are bagged and sent home.
- Separate baskets are provided for dirty and clean laundry.
- Members of staff wash their hands after handling dirty laundry and laundry chemicals.
- Machines are switched off from the plug after use.

Health and safety procedures

Staff personal safety

General

- Members of staff at Happy Faces Pre School who are in the building early in the morning or late in the evening, ensure that doors and windows are locked.
- Where possible, the last two members of staff in the building leave together after dark and arrange to arrive together in the morning.
- Visitors are allowed access only with prior appointments and once identifications are verified.
- When taking cash to the bank, members of staff are aware of personal safety. The setting manager carries out a risk assessment and develops an agreed procedure appropriate to the setting, staff, and location.
- Staff make a note in the shared diary of meetings they are attending and when they are expected back.
- The setting managers liaises with local police for advice on any issues or concerns.

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 them away from the children to an area less open but will not shut the door behind them.
- If the person is standing, staff will remain standing.
- Staff will try to empathise, for example: 'I can see that you are feeling angry at this time'.
- Staff offer to discuss the issue of concern and show they recognise the concern.
- Staff will ensure that the language they use can be easily understood
- Staff will make it clear that they want to hear issues 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, avoiding expressions like 'calm down' or 'be reasonable'.
- If threats continue, members of staff will explain that the police will be called and emphasise the inappropriateness of such behaviour in front of the children.
- Procedure "Threats and abuse towards staff and volunteers" is implemented where staff feel threatened or intimidated.
- 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.
- Any situation involving threats to members of staff are reported to the line manager, following procedure "Threats and abuse towards staff and volunteers".

Copies of correspondence regarding the incident will be kept in the relevant child's file.

Health and safety procedures

Threats and abuse towards staff and volunteers

Happy Faces Pre School is responsible for protecting the health and safety of all staff and volunteers in its services and has a duty of care in relation to their physical and emotional well-being. We believe that violence, threatening behaviour and abuse against staff are unacceptable and will not be tolerated. Where such behaviour occurs, we will take all reasonable and appropriate action in support of our staff and volunteers.

- Staff and volunteers have a right to expect that their workplace is a safe environment, and that prompt and appropriate action will be taken on their behalf if they are subjected to abuse, threats, violence or harassment by parents, service users and other adults as they carry out their duties.
- The most common example of unreasonable behaviour is abusive or intimidating and aggressive language. If this occurs, the ultimate sanction, where informal action is not considered to be appropriate or has proved to be ineffective, is the withdrawal of permission to be on the premises.
- Where a person recklessly or intentionally applies unlawful force on another or puts another in fear of an immediate attack, it is an offence in law which constitutes an assault. We would normally expect the police to be contacted immediately.

There are three categories of assault, based on the severity of the injury to the victim.

1. Common Assault - involving the threat of immediate violence or causing minor injury (such as a graze, reddening of the skin or minor bruise).
2. Actual Bodily Harm - causing an injury which interferes with the health or comfort of the victim (such as multiple bruising, broken tooth or temporary sensory loss).
3. Grievous Bodily Harm - causing serious injury (such as a broken bone or an injury requiring lengthy treatment).

There is also an aggravated form of assault based upon the victim's race, religion, disability or sexual orientation and other protected characteristics as defined in the Equality Act 2010 which carries higher maximum penalties.

It is important to note that no physical attack or injury needs to have occurred for a common assault to have taken place. It is sufficient for a person to have been threatened with immediate violence and put in fear of a physical attack for an offence to have been committed.

Any staff member or volunteer who feels under threat or has been threatened, assaulted, or intimidated in the course of their work must report this immediately to their manager who will follow the setting manager's procedures and guidance for responding.

999 should always be used when the immediate attendance of a police officer is required. The police support the use of 999 in all cases where:

- there is danger to life

- there is a likelihood of violence
- an assault is, or is believed to be, in progress
- the offender is on the premises
- the offence has just occurred, and an early arrest is likely

If it is not possible to speak when making a 999 call because it alerts an offender, cough quietly or make a noise on the line, then follow the prompts to dial 55 (mobiles only) for a silent call. Police may be able to trace the call and attend the premises.

Harassment and intimidation – including sexual harassment

Staff may find themselves subject to a pattern of persistent unreasonable behaviour from individual parents or service users. This behaviour may not be abusive or overtly aggressive but could be perceived as intimidating and oppressive. In these circumstances staff may face a barrage of constant demands or criticisms on an almost daily basis, in a variety of formats for instance, email or telephone. They may not be particularly taxing or serious when viewed in isolation but can have a cumulative effect over a period of undermining their confidence, well-being, and health. In extreme cases, the behaviour of the parent/carer or other service user may constitute an offence under the Protection from Harassment Act 1997, whereby:

A person must not pursue a course of conduct

(a) which amounts to harassment of another, and

(b) which he knows or ought to know amounts to harassment of another.

If so, the police have powers to act against the offender. Such situations are rare but, when they do arise, they can have a damaging effect on staff and be very difficult to resolve. If the actions of a parent/carer appear to be heading in this direction, staff should speak to their manager who will take appropriate action to support. This may include the manager sending a letter to the aggressor, warning them that their behaviour is unacceptable and may result in further action being taken against them. All incidents must be recorded and reported to the trustees.

Banning parents/carers and other visitors from the premises

- Parents/carers and some other visitors normally have implied permission to be on the premises at certain times and for certain purposes, and they will not therefore be trespassers unless the implied permission is withdrawn.
- If a parent/carer or other person continues to behave unreasonably on the premises a letter will be sent to them from the trustees, withdrawing the implied permission for them to be there.
- Further breaches may lead to prosecution of the person concerned by the police, and they are treated as a trespasser.
- Full records are kept of each incident, in the Reportable Incident Record, including details of any person(s) who witnessed the behaviour of the trespasser(s), since evidence will need to be provided to the Court.

Dealing with an incident

- We would normally expect all cases of harassment, assault, and all but the most minor of other incidents, to be regarded as serious matters which should be reported to the setting manager and/or the police and followed up with due care and attention.
- A record of the incident must be made whether the police are involved or not.
- Whilst acknowledging that service users i.e. parents and families, may themselves be under severe stress, it is never acceptable for them to behave aggressively towards staff and volunteers. Individual circumstances along with the nature of the threat are considered before further action is taken.
- All parties involved should consider the needs, views, feelings and wishes of the victim at every stage. We will ensure sympathetic and practical help, support and counselling is available to the victim both at the time of the incident and subsequently.
- A range of support can be obtained:
 - from the setting manager, trustees and/or a staff colleague
 - from Victim Support on giving evidence in court
- In non-urgent cases, where the incident is not thought to be an emergency, but police involvement is required, all staff and volunteers are aware of the non-emergency police contact number for the area.
- 999 calls receive an immediate response. Unless agreed at the time, non-emergency calls are normally attended within 8 hours (24 hours at the latest).
- When they attend the setting or service, the police will take written statements from the victim (including a 'Victim Personal Statement') and obtain evidence to investigate the offence in the most appropriate and effective manner.
- The police will also consider any views expressed by the setting manager and trustees as to the action they would like to see taken. The manager should speak to the victim and be aware of his or her views before confirming with the police how they wish them to proceed.
- In some cases the victim may be asked by the police if he/she wishes to make a complaint or allegation against the alleged offender. It is important to ensure that the victim can discuss the matter with their line manager, a colleague or friend before deciding on their response. It is helpful for the victim to be assured that, if there is a need subsequently to give evidence in court, support can be provided if it is not already available from Victim Support.
- The decision regarding whether an individual is prosecuted is made by the police or Crown Prosecution Service (CPS) based on the evidence and with due regard to other factors.
- After the incident has been dealt with, a risk assessment is done to identify preventative measures that can be put in place to minimise or prevent the incident occurring again.

Harassment or intimidation of staff by parents/carers//visitors

- Through open communication between staff and parents/carers a culture of respect and tolerance should always be promoted. Should this communication and relationship break down due to a parent or parents/carers behaviour towards the staff member the setting manager should contact their line manager for advice and support. Where the staff member feels threatened or intimidated the aggressive and unacceptable behaviour should be addressed.
- Where the parent/carers behaviour merits it, the setting manager, with another member of staff present, should inform the parent/carer clearly but sensitively that staff feel unduly harassed or intimidated and are considering escalating the issue and making a complaint to the police if the behaviour does not desist or improve. The parent/carer should be left in no doubt about the gravity of the situation and that this will be followed up with a letter drafted by the setting manager but sent to their line manager for approval before being issued.
- The letter to the parent/carer should outline the zero-policy approach for any form of harassment, intimidation or abuse directed at staff.
- Staff must keep a record of incidents, including dates, times, locations, and witnesses, to support future action and meet reporting procedures as outlined in the “record keeping” policy.
- If the investigation concludes that the parents/carers expectations and demands are unreasonable, and that they are having a detrimental effect on staff, the findings can strengthen the setting manager’s position in further discussions with the parent/carer and subsequently, if necessary, with the police. See procedures above relating to banning parents/carers from the premises.
- If the investigation concludes that the parents/carers expectations and demands are reasonable and if the parent/carer feels unhappy with the staff member of the setting itself the setting manager and/or trustees might wish to consider advising the parent/carer to make a formal complaint. Information about how to complain is clearly displayed for parents/carers and service users.

Complaints relating to potential breaches of the EYFS Safeguarding and Welfare requirements will be managed according to the “Complaints procedure for parents and service users”.

Further guidance

Complaint Investigation Record (Alliance Publication)

Reportable Incident Record (Alliance Publication)

Health and safety procedures

Entrances and approach to Happy Faces Pre School's building

- Entrances and approaches are kept tidy and always uncluttered.
- All gates and external fences are childproof and safe
- Front doors are always kept locked and shut.
- Where possible, entry phones and 'spy holes' are used in the main door at a suitable height.
- The identity of a person not known to members of staff is checked before they enter the building.
- All staff and visitors to the setting sign in and out of the building.
- A member of staff is available to open and close the door and to greet arrivals, say goodbye to parents and to make sure that doors and gates are shut.
- Back doors are always kept locked and shut if they may lead to a public or unsupervised area, unless this breaches fire safety regulations or other expectations.
- Where building works or repairs mean that normal entrances/exits or approaches to the building are not in use, a risk assessment is conducted to maintain safety and security whilst the changes are in place.
- Building works or other changes to the premises which may affect the space available to children and the quality of childcare available to them, must be notified to Ofsted.

Health and Safety Procedures

Control of Substances Hazardous to Health (COSHH)

- Staff at Happy Faces Pre School implement the current guidelines of the Control of Substances Hazardous to Health (COSHH) Regulations.
- Personal protective equipment (PPE), such as rubber gloves, latex free/vinyl gloves, aprons etc., is available to all staff as needed and stocks are regularly replenished.
- Hazardous substances are stored safely away from the children.
- Chemicals used in the setting should be kept to the minimum to ensure health and hygiene is maintained.
- Risk assessment is done for all chemicals used in the setting.
- Environmental factors are considered when purchasing, using and disposing of chemicals.
- All members of staff are vigilant and use chemicals safely.
- Anti-bacterial soap/hand wash is not normally used, unless specifically advised during an infection outbreak, such as Pandemic flu or Coronavirus.
- Anti-bacterial cleaning agents are restricted to toilets, nappy changing areas and food preparation areas and are not used when children are nearby.
- Members of staff wear suitable rubber gloves when using cleaning chemicals.

Health and safety procedures

Manual handling

- All staff at Happy Faces Pre School comply with risk assessment and have a personal responsibility to ensure they do not lift objects likely to cause injury. Failure to do so may invalidate an insurance claim.
- Members of staff bring the setting manager's attention to any new risk, or situations where the control measures are not working.
- Risk assessments may need to be changed for some individuals, such as a pregnant woman, or staff with an existing or previous injury or impairment that may affect their capacity to lift or move items.
- Risk assessment is carried out of the environment in which the lifting is done. Features such as uneven floor surfaces, stairs, etc. add to the general risk and need to be taken into consideration.
- The setting manager ensures that they and their staff are trained to lift and move heavy objects and unstable loads correctly. Young children are also heavy and need to be lifted and carried carefully and correctly.

Guidelines:

- 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.
- 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.

Health and safety procedures

Festival (and other) decorations

General

- Basic safety precautions apply equally to decorations put up for any festival as well as to general decorations in the setting. Children are informed of dangers and safe behaviour, relative to their level of understanding.

Decorations

- Only fire-retardant decorations and fire-retardant artificial Christmas trees are used.
- Lit candles are never used.

Electrical equipment.

- Electrical equipment (a light, extension leads etc) must be electrically tested before use.
- If using tree lights, place the tree close to an electrical socket and avoid using extension leads. Always fully uncoil any wound extension lead to avoid overheating.
- Remember to unplug the lights at the end of the day.
- Electrical leads are arranged in such a way that they do not create a trip hazard.

Location

- Trees and decorations must never obstruct walkways or fire exits.
- Do not place decorations on or close to electrical equipment (e.g. computers); they are a fire hazard.
- Decorations must be clear of the ceiling fire detectors, sprinklers, and lights.

Children's areas

- Christmas trees and other free-standing decorations are placed where children cannot pull them over.
- Glass decorations are not used.

Health and safety procedures

Jewellery and hair accessories

Children, staff members, assistants, volunteers and students do not attend the setting wearing jewellery or fashion accessories that may pose a potential hazard to other children or themselves.

- Health and safety take precedence over respect for culture, religion or fashion.
- Members of staff do not wear jewellery or fashion accessories, such as belts or high heels, that may pose a danger to them or to young children. These include large rings with sharp edges, earrings – other than studs, chain necklaces, or bracelets with attachments that can be pulled off, or belts with large buckles.
- Parents/carers must ensure that any jewellery worn by children poses no risk, for example, earrings which may get pulled, bracelets which can get caught when climbing, or necklaces that may pose a risk of strangulation.
- Children may wear small, smooth stud earrings.
- Children, staff, and volunteers do not wear anything with sharp edges that could scratch children, or jewellery with small elements that could become detached and swallowed.
- Hair accessories that may come loose pose a choking hazard are removed before children sleep or rest.
- Parents/carers are requested not to send children wearing hair beads. If staff see beads that are coming loose, they will remove them.
- Hair accessories that may pose a choking hazard to other children should they become detached, should be removed if members of staff consider this to be a possibility.

Health and safety procedures

Animals and pets

- Views of parents/carers and children are considered when selecting a pet for the setting.
- Staff will be aware of any allergies or issues individual children may have with any animals/creatures.
- A risk assessment is conducted and considers any hygiene and safety risks posed by the animal or creature.
- We have fish at our setting. Suitable housing for the fish is provided and is regularly cleaned and maintained.
- The correct food is offered at the right times and staff are knowledgeable of the fish's welfare and dietary needs.
- Arrangements are made for weekend and holiday care for the fish.
- Children are taught how to look after the fish (and other living things) and are always supervised.
- Snakes and some other reptiles are not suitable pets for the setting due to infection risks.
- The manager will check with the trustees before introducing a new pet into the setting.

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 Government Banned Dogs list 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 setting 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 is reported to the relevant authority and safeguarding procedures are followed.

Further guidance

<https://www.gov.uk/control-dog-public/banned-dogs>

Health and safety procedures

Notifiable incident, non-child protection

Staff respond swiftly, appropriately and effectively in the case of an incident within the setting. Notifiable incidents in this procedure are those not involving child protection.

A 'notifiable' incident' could include:

- fire or suspected arson
- electric or Gas fault
- burst pipe, severe leak or flooding
- severe weather that has caused an incident or damage to property
- break-in with vandalism or theft
- staff, parent, carer or visitor mugged or assaulted on site or in vicinity on the way to or from the setting
- outbreak of a notifiable disease
- staff or parent threatened/assaulted on the premises by a parent or visitor
- accidents due to any other faults (that are reportable under RIDDOR)
- lost child
- any event or information that becomes known, that may have implications for the setting or the wider organisation in the future use

The designated health and safety officer or another named person: **Sharon Danch**

- has all emergency services numbers immediately to hand
- has a list of contacts for maintenance and repair
- ensure that members of staff know what to do in an emergency
- risk assess the situation and decides, with the trustees, if the premises are safe to receive children before any children arrive or to offer a limited service

Emergency evacuation

In most instances, children will not be evacuated from the premises unless there is an immediate risk or unless they are advised to do so by the emergency services.

- There is an emergency evacuation procedure in place which is unique to the setting and based upon risk assessment in line with others using the building.
- Emergency evacuation procedures are practised regularly and are reviewed according to risk assessment (as above).

- Staff evacuate children to a pre-designated area (as per the fire drill), unless advised by the emergency services that the designated area is not suitable at that time.
- Once evacuated, nobody enters the premises, until the emergency services say so.
- Members of staff will act upon the advice of the emergency services at all times.

Emergency evacuation procedure

- Diagrams showing call points and fire exits are in every room.
- Fire exits are illuminated above all external doors, except the main front door.
- Telephones are in the office and classroom.
- Person who sees fire breaks glass on nearest call point.
- When the alarm sounds; staff lead the children from the garden, the Butterfly room, the Ocean Room and hallway, to the nearest available fire exit. One member of staff checks the children's toilets. Nearest staff members to check the adult toilet opposite the office, store room, office, kitchen and staff room and leave by the nearest available fire exit.
- The disabled toilet, nappy changing area and cloakroom are checked by the nearest available member of staff.
- Register to be picked up from hallway by nearest member of staff.
- Administrator/manager brings their mobile phone in case we need to call the emergency services in the event of a real fire.
- Assemble on footpath by edge of garden going uphill.
- The manager calls the register and a head count is completed.
- A head count is also completed as the children/staff/students enter the building once it is cleared to do so.
- We aim to vacate the building within three minutes.
- If we are unable to return to our building, children will be taken to Royal Rise Primary School and parents will be informed of the circumstances, and how the children can be collected. Details of contact numbers for children, staff and students are kept in the register.

Emergency Closure

The circumstances under which the setting may be closed due to an incident include:

- The trustees make the decision to close – thereby withdrawing the service.
- A third party makes the decision to close for example:
 - the emergency services
- A parent/carer makes the decision for their child not to attend.
 - If a parent/carer makes the decision for their child not to attend due to a critical incident, the child's fees are due as normal.
 - Further consideration of individual incidences must be done in consultation with the trustees.

Recording and reporting

- On discovery of the notifiable incident, the member of staff reports to the appropriate emergency service, fire, police, ambulance, if those services are needed.
- The member of staff ensures that the setting manager and/or deputy are informed (if not on the premises at the time) and that the trustees are informed.
- The setting manager completes and sends an incident record to the trustees, who, according to the severity of the incident notifies Ofsted or RIDDOR.
- If the incident indicates that a crime may have been committed, all staff witness to the incident should make a written statement.
- Staff do not discuss the incident with the press.

RIDDOR reportable events include:

- Specified injuries at work, as detailed at www.hse.gov.uk/pubns/indg453.pdf
- Fatal accidents to staff, children and visitors (parents/carers).
- Accidents resulting in the incapacitation of staff for more than seven days.
- Injuries to members of the public, including parents/carers and children, where they are taken to hospital.
- Dangerous 'specified' occurrences, where no-one is injured but they could have been. (These are usually industrial incidents).

This may include:

- a member of staff injures back at work through lifting and is off for two weeks
- a parent/carer slips on a wet floor near the water tray and is taken to hospital
- a child falls from a climbing frame and is taken to hospital
- the ceiling collapses
- an outbreak of Legionella

The setting manager informs the trustees and completes an accident and/or incident record; witness statements are taken as previously detailed.

- If the incident is RIDDOR reportable, the setting manager telephones HSE Contact Centre on 0345 300 9923 or reports online at www.hse.gov.uk/riddor/report.htm
- RIDDOR Reportable events require reporting to RIDDOR within 15 days of the event occurring.

The local authority investigates all reported injuries, diseases or dangerous occurrences. They will decide if there has been a breach in health and safety regulations and will decide what measures will be taken.

The trustees review how the situation was managed, as above, to ensure that investigations were rigorous and that policies and procedures were followed.

If an insurance claim is likely:

- incidents such as fire, theft or flood are notified to the insurance provider immediately
- the setting does not admit liability
- if broken or faulty equipment is involved, it must not be repaired, destroyed or disposed of, in case it is needed during the investigation
- if communication from a solicitor is received on behalf of the injured party, this is sent directly to the insurance provider; the setting manager will then write to the solicitor to confirm that the letter has been passed on
- the incident is not discussed with any outside persons, or other parents/carers, no matter what questions they may ask about their own child's safety in relation to the incident, as it is regarded as confidential under the Data Protection Act.

Health and Safety Procedures

Emergency evacuation and lock-down

Lockdown

Most procedures for handling an emergency are focussed on an event happening in the building. However, in some situations you will be advised to stay put (lock-down) rather than evacuate. 'Lock-down' of a building/group of buildings is intended to secure and protect occupants in the proximity of an immediate threat. By controlling movement in an area, emergency services can contain and handle the situation more effectively.

- The setting manager at Happy Faces Pre School assesses the likelihood of an incident happening based on their location.
- The setting manager ensures that the emergency evacuation and lockdown procedures are included in staff training and induction.
- The setting manager will check their police website for advice and guidance.
- Local police contact numbers are clearly displayed for staff to refer to.
- Staff rehearse simple 'age appropriate' actions with the children such as staying low to the floor, keeping quiet and listening to instructions. Lock-down must be rehearsed and recorded termly.
- The setting manager is aware of the current terrorist alert level, as available at www.mi5.gov.uk/threat-levels.
- The setting manager follows any additional advice issued by the local authority.
- Emergency procedures are reviewed and added to if needed.
- Information is shared with parents/carers and all staff are aware of their role during 'lockdown'.
- A text/phone message is issued to parents/carers when lockdown is confirmed.

Suggested wording for parent/carer message

Due to an incident we have been advised by emergency services to secure the premises and stay put until we are given the 'all clear'. Please do not attempt to collect your child until it is safe to do so. We will let you know as soon as we are able to, when that is likely to be. In the meantime, we need to keep our telephone lines clear and would appreciate your cooperation in not calling unless it is vital that you speak to us.

Lock-down procedures

If an incident happens the setting manager acts quickly to assess the likelihood of immediate danger. In most cases the assumption will be that it is safer to stay put and go into 'lockdown' until the emergency services arrive. As soon as the emergency services arrive at the scene staff comply with their instructions.

During 'lock-down'

- Staff and children stay in their designated areas if it is safe to do so.
- Doors and windows are secured until further instruction is received.
- Curtains and blinds are closed where possible.

- Staff and children stay away from windows and doors.
- Children are encouraged to stay low and keep calm.
- Staff tune into a local TV or radio station for more information.
- Staff do NOT make non-essential calls on mobile phones or landlines.
- If the fire alarm is activated, staff and children remain in their designated area and await further instructions from emergency services, unless the fire is in their area. In which case, they will move to the next room/area, following usual fire procedures.

The door will not be opened once it has been secured until the manager is officially advised “all clear” or is certain it is emergency services at the door.

During lockdown staff do NOT:

- travel down long corridors
- assemble in large open areas
- call 999 again unless there is immediate concern for their safety, the safety of others, or they feel they have critical information that must be passed on

Following lockdown:

- Staff will cooperate with emergency services to assist in an orderly evacuation.
- Staff will ensure that they have the register and children’s details.
- Staff or children who have witnessed an incident will need to tell the police what they saw. The police may require other individuals to remain available for questioning.
- In the event of an incident, it is inevitable that parents will want to come to the setting and collect their children immediately. They will be discouraged from doing so, until the emergency services give the ‘all clear’. Staff will be always acting on the advice of the emergency services.

Recording and reporting

- The setting manager reports the lockdown to the trustees as soon as possible. In some situations, this may not be until after the event.
- A record is completed as soon as possible.

Further guidance

Members of the public should always remain alert to the danger of terrorism and report any suspicious activity to the police on 999 or the anti-terrorist hotline: 0800 789 321.

For non-emergency, call the police on 101.

Emergency evacuation

This emergency evacuation plan should be displayed clearly on the door of each room alongside a floor plan. In shared premises, the plan must be implemented alongside any other plans in place for the rest of the building.

1. The manager will walk into the room holding up an evacuation card. The fire alarm is not to be sounded.

2. The manager will gather, or ensure that staff for each group/room have the following with them:

- The visitor book.
- Signing in/out sheet.
- Register and lockdown board
- Nursery management software tablets (if applicable).
- Essential medication that is required by individual children.
- The setting's mobile phone.
- An emergency 'grab bag'.

NOTE no other personal items are to be retrieved/collected. Staff do not empty their personal drawers.

3. The manager identifies the safest evacuation route to be used, depending on whether there are visible signs of danger.

Evacuation of the building commences

4. As the building is evacuated the manager checks each area and closes doors on the way out. If safe to do so, electrical mains are switched off before leaving. The locations are detailed here:

Electrical mains are in the hallway and staff room.

5. All staff are responsible for all the children during evacuation and whilst at the assembly point.

6. Once the building is evacuated the manager checks with each room/group that all children/staff or visitors are accounted for by using the register and/or lockdown board that is in Butterfly room

EVACUATION OF CHILDREN WITH ADDITIONAL NEEDS

Children with additional needs must have a Personal Emergency Evacuation Plan. Staff must be aware of children who have plans in place and the support measures which to be followed to keep all children safe.

Children with additional needs may experience a sensory overload due to a change in routine and the noise of the fire alarm sounding. To support self-regulation and co-regulation, consider including comforting objects in your emergency bag that a child can hold whilst the evacuation is in process.

Fire safety policy

Alongside associated procedures in “Fire safety”, this policy was adopted Happy Faces Pre School in August 2021.

Designated Fire Marshalls are Sharon Danch & Leigh Chalk

Aim

Happy Faces Pre School is a suitable, clean, and safe place for children to be cared for, where they can grow and learn. We meet all statutory requirements about fire safety and fulfil the criteria for meeting the relevant Early Years Foundation Stage Safeguarding and Welfare Requirements.

Objectives

- We recognise that we have a corporate responsibility and a duty of care for those who work in and receive a service from our provision, but individual employees and service users also have a responsibility to ensure their own safety as well as that of others. Risk assessment is the key means through which this is achieved.
- A fire safety risk assessment is carried out by a competent person in accordance with the Regulatory Reform (Fire Safety) Order 2005.
- A Fire Log is completed and regularly updated.
- Necessary equipment is in place to promote fire safety.

Legal references

Regulatory Reform (Fire Safety) Order 2005)

Electricity at Work Regulations (1989)

Further guidance

Fire Safety Record (Alliance Publication)

[Fire Safety Risk Assessment: Educational Premises](#) (Gov.uk)

Fire safety procedures

Fire safety

The named fire marshals at Happy Faces Pre School have access to, or a copy of, the fire safety procedures specific to the building and ensure they align with these procedures. The setting manager/fire marshals makes reasonable adjustments as required to ensure the two documents do not contradict each other.

Fire safety risk assessment

A "Fire safety risk assessment form" is carried out in each area of the setting by a competent person, or a named fire marshal, using the five steps to fire safety risk assessment as follows:

1. Identify fire hazards

- Sources of ignition.
- Sources of fuel.
- Sources of oxygen (including oxygen tanks for disabled children).

2. Identify people at risk

- People in and around the premises.
- People especially at risk including very young babies, less ambulant disabled children or those using specialised equipment, such as splints, standing frames.

3. Evaluate, remove, reduce and protect from the risk

- Evaluate the risk of the fire occurring.
- Evaluate the risk to people from a fire starting on the premises.
- Remove and reduce the hazards that may cause a fire.
- Remove and reduce the risks to people from a fire.

4. Record, plan, inform, instruct, train

- Record significant findings and action taken.
- Prepare an emergency plan.
- Inform and instruct relevant people; inform and co-operate with others.
- Provide training.

5. Review

- Keep assessment under review and revise when necessary.

The fire safety risk assessment focuses on the following for each area:

- Electrical plugs, wires, sockets.

- Electrical items.
- Cookers.
- Matches.
- Flammable materials, including furniture, furnishings, paper etc.
- Flammable chemicals (which are also covered in COSHH).
- Means of escape.
- Any other, as identified.

Fire safety precautions include:

- All electrical equipment is checked by a qualified electrician annually.
- Any faulty electrical equipment is taken out of use and recorded as such or condemned (whichever is necessary).
- Sockets are covered. This is different to using plug sockets inserts, a socket cover, covers the whole socket, including the switch and is safe to use.
- Water and electrical items do not come into contact; staff do not touch electrical items with wet hands.
- All fire safety equipment is checked annually.
- If matches are used in the kitchen, they are kept in a drawer.
- Oxygen tanks.

Fire Drills

- Fire Drills (to include emergency evacuation procedures and lock down) are held at least termly.
- Drills are recorded, including:
 - date of drill
 - staff involved and numbers of children
 - how long it took to evacuate
 - any reason for a delay in achieving the target time and how this will be remedied

Fire precautions

- Fire exit signs are the green 'running man' signs and are in place and clearly visible.
- Fire exits by doors are those that show a green light at night.
- Fire doors are not locked during normal working hours.
- Fire evacuation notices are in every room; these are displayed in print large enough to read from a short distance. They say where the assembly point is.

- Fire alarms are in place and tested monthly, and where necessary supplemented with visual warnings. This is recorded.
- Smoke alarms are in place and tested monthly. This is recorded.
- A fire blanket is in place in the kitchen (and any other location where there is a cooker).
- Fire extinguishers are in place and are appropriate

Further guidance

Dynamic Risk Management (Alliance Publication)

Fire Safety Record (Alliance Publication)

Fire Safety Risk Assessment: Educational Premises (HMG 2006):

www.gov.uk/government/publications/fire-safety-risk-assessment-educational-premises

Fire safety risk assessment form Happy Faces Pre School

Risk Area		Carried out by		Date
Fire Hazards: Examples: Ignition; fuel; oxygen	Who is at risk People on premises and those most vulnerable	Level of risk of fire occurring and the risk to people	Control measure Remove and reduce hazards that may cause fire; Remove and reduce risks to people	Review Record, plan, inform, instruct, train and review

Before completing this form, please refer to the five steps in procedure “Fire safety”

Food safety and nutrition policy

Alongside associated procedures in “Food safety and nutrition”, this policy was adopted by Happy Faces Pre School in August 2021.

Aim

Happy Faces Pre School is a suitable, clean, and safe place for children to be cared for, where they can grow and learn. We meet all statutory requirements for food safety and fulfil the criteria for meeting the relevant Early Years Foundation Stage Safeguarding and Welfare requirements

Objectives

- We recognise that we have a corporate responsibility and duty of care for those who work in and receive a service from Happy Faces Pre School, but individual employees and service users also have responsibility for ensuring their own safety as well as that of others. Risk assessment is the key means through which this is achieved.
- Procedure “Kitchen” is followed for general hygiene and safety in food preparation areas.
- We provide nutritionally sound snacks (for parties) which promote health and reduce the risk of obesity and heart disease that may begin in childhood.
- We ensure that children are supervised at snack and lunch time 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 follow the main advice on dietary guidelines and the legal requirements for identifying food allergens when planning cooking activities based on the four food groups:
 - meat, fish, and protein alternatives
 - milk and dairy products
 - cereals and grains
- fresh fruit and vegetables
- Following dietary guidelines to promote health also means taking account of guidelines to reduce risk of disease caused by unhealthy eating.
- Parents/carers share information about their children’s particular dietary needs and allergies with staff when they enrol their children and on an on-going basis. This information is shared with all staff who are involved in the care of the child.
- **Happy Faces Pre School 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.**
- Foods provided by the setting for children have any allergenic ingredients identified.

- Care is taken to ensure that children with food allergies and intolerances do not have contact with food products that they are allergic to.
- We notify Ofsted of any food poisoning affecting two or more children in our care as soon as possible and at least within 14 days.
- Risk assessments are conducted for each individual child who has a food allergy or specific dietary requirement.
- If a child chokes at mealtime and intervention is given. We record details of the incident and ensure that parents/carers are informed.

Legal references

Regulation (EC) 852/2004 of the European Parliament and of the Council on the hygiene of foodstuffs.

Food Information Regulations 2014

The Childcare Act 2006

Further guidance

[*Safer Food Better Business for Caterers* \(Food Standards Agency\)](#)

[Paediatric Allergy Action Plans - BSACI](#)

[Food allergy - NHS](#)

[Anaphylaxis - NHS](#)

[Help for early years providers : Food safety](#)

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

[Allergy action plan](#)

Food safety and nutrition procedures

Food preparation, storage and purchase

General

- All staff have up to date certificated training on food safety.
- The setting manager is responsible for ensuring that the requirements in Safer Food Better Business are implemented.
- All staff responsible for preparing food have undertaken the Food Allergy Online Training CPD module available at <http://allergytraining.food.gov.uk/>.
- The setting manager is responsible for overseeing the work of all food handlers to ensure hygiene and allergy procedures are complied with.
- The setting manager has responsibility for conducting risk assessment based on the 'Hazard Analysis and Critical Control Point' method set out in Safer Food Better Business.
- Staff carry out and record daily opening/closing checks, four weekly reviews and dated records of deep cleaning.
- The setting manager maintains an Allergies and Illnesses list with:
 - a list of all children with known food allergies, intolerances or dietary needs (and illnesses such as asthma) 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 clearly displayed for all staff in the Ocean Room, kitchen and office, and the risk assessment shared with all staff.
- a copy of the Food Allergy Online Training CPD certificate for each member of staff is kept in the staff member's personal file.
- The setting manager is responsible for informing the trustees who then reports to Ofsted any food poisoning affecting two or more children looked after on the premises. Notification must be made as soon as possible and within 14 days of the incident.

Purchasing and storing food

- Food is purchased from reputable suppliers.
- Pre-packed food (any food or ingredient that is made by one business and sold by another such as a retailer or caterer) is checked for allergen ingredients and this information is communicated to parents. For example, a meat pie bought at a supermarket or a tin of baked beans or the ingredients for a recipe prepared on site.
- If food that is not pre-packed (described as 'loose food'), such as sandwiches bought from a bakery is served, then allergen information will have been provided by the retailer, this information must then be shared in the same way with parents.

- Parents/carers 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.
- Bulk buy is avoided where food may go out of date before use.
- All opened dried food stuffs are stored in airtight containers.
- Dried packaged food is not decanted from packaging into large bins or containers as this prevents monitoring of sell by/use by dates and allergen information.
- Food is regularly checked for sell by/use by dates and any expired items are discarded.
- Bottles and jars are cleaned before returning to the cupboards.
- Items are not stored on the floor; floors are kept clear so they can be easily swept.
- Dairy produce is to be used by the use/sell by date. Soft fruit and easily perishable vegetables are kept in the fridge at 1- 5 Celsius.
- Fridge thermometer should be in place. Recommended temperatures for fridge 37 degrees Fahrenheit (3 degrees Celsius). Temperatures must be checked and recorded daily to ensure correct temperatures are being maintained.
- Fruit and vegetables stored in the fridge are washed thoroughly before refrigeration to reduce risk of pests and E.coli contamination.
- Staff's own food or drink should be kept in separate designated area of the fridge; where possible, a fridge should be kept in the staff room to avoid mix ups.
- Items in fridge must be regularly checked to ensure they are not past use by dates.

Preparation of food

- Food handlers must check the content of food/packets to ensure they do not contain allergens.
- Food allergens must be identified and displayed for parents.
- Food handlers wash hands and cover any cuts or abrasions before handling food.
- Separate boards and knives are used for chopping food, usually colour coded.
- Raw and cooked foods are prepared separately.
- All vegetables and fruit are washed before preparing.
- Food left out is covered, for example when cooling down.
- Potatoes and vegetables are peeled when needed, not in advance and left in water.
- Food cooked and prepared with children with specific dietary needs is cooked in separate pans and served separately.
- A separate toaster is kept and used for children with a wheat or gluten allergy.
- Food prepared with children with dietary needs and preferences is clearly labelled and every effort is made to prevent cross-contamination.

- Raw eggs are not to be given in any form, such as mousse or mayonnaise.

Serving food

- Staff risk assess the likelihood of children with dietary restrictions accessing the food of other children and must take appropriate action to prevent this from happening, for example:
 - check the list of children's dietary requirements displayed in the food preparation area
 - other methods as agreed by the setting manager
- Children with allergies/food preferences are not made to feel 'singled out' by the methods used to manage their allergy/food preference.
- Food served to children with identified allergies is checked by the staff member to ensure that the snack/cooking activity (and its ingredients) does not contain any of the allergens for that child.
- The staff remain present throughout the child's snack & lunch time.
- Food is taken from the kitchen to the rooms on a trolley, not carried across rooms.
- Tables are cleaned before and after, with soapy water or a suitable non-bleach product.
- Members of staff serving food wash their hands and cover any cuts with a blue plaster and wear white gloves.

E.coli prevention

Staff who are preparing and handling food, especially food that is not pre-prepared for consumption e.g. fruit and vegetables grown on the premises, must be aware of the potential spread of E.coli and must clean and store food in accordance with the E.coli 0157 guidance, available at:

www.food.gov.uk/business-industry/guidancenotes/hygguid/ecoliguide#.U7FCVGIOWdl

Further guidance

Safer Food Better Business www.food.gov.uk/business-guidance/safer-food-better-business-sfbb

Campylobacter (Food Standards Agency) www.food.gov.uk/news-updates/campaigns/campylobacter/fsw-2014

Food allergy/anaphylaxis guidance

<https://www.bsaci.org/wp-content/uploads/2020/02/BSACIAllergyActionPlan2018NoAAI2981-2.pdf>

<https://www.nhs.uk/conditions/anaphylaxis/>

<https://www.nhs.uk/conditions/food-allergy/>

[Early Years Foundation Stage nutrition guidance](#)

[Common allergens.pdf](#)

[Allergen checklist for food businesses | Food Standards Agency](#)

Food safety and nutrition procedures

Food for play and cooking activities

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 at all, 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.
- 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.
- Cornflour 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

- 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.

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.

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.

Food safety and nutrition procedures

Packed lunches

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.

Food safety and nutrition procedures

Meeting dietary requirements

Snack times are an important part of the day at Happy Faces Pre School. Eating represents a social time for children and adults and helps children to learn about healthy eating. We ask parents/carers to provide nutritious food, which meets the children's individual dietary needs and preferences.

- Staff discuss and record children's dietary needs, allergies and any ethnic or cultural food preferences with their parents/carers. A child's special dietary requirements are recorded on registration to the setting and information is shared with all staff. **This continues as an ongoing dialogue with all parents throughout their time at Happy Faces Pre School.**
- If a child has a known food allergy, procedure "Allergies and food intolerance" is followed.
- Up-to-date information about individual children's dietary needs is displayed so that all staff and volunteers are fully informed.
- Staff ensure that children receive only food and drink that is consistent with their dietary needs and cultural or ethnic preferences, as well as their parent/carer's wishes.
- Staff aim to include food diets from children's cultural backgrounds, providing children with familiar foods and introducing them to new ones.
- Through on-going discussion with parents/carers and research reading by staff, staff obtain information about the dietary rules of the religious groups to which children and their parents belong, and of vegetarians and vegans, as well as about food allergies. Staff take account of this information when providing food and drink.
- All staff show sensitivity in providing for children's diets, allergies and cultural or ethnic food preferences. A child's diet or allergy is never used as a label for the child, they are not made to feel 'singled out' because of their diet, allergy or cultural/ethnic food preferences.
- Fresh drinking water is available throughout the day. Staff inform children how to obtain the drinking water and that they can ask for water at any time during the day.
- Snack times are organised as social occasions.

Fussy/faddy eating

- Children who are showing signs of 'strong food preferences, or aversions to food' are not forced to eat anything they do not want to.
- Staff recognise the signs that a child has had enough and remove uneaten food without comment.
- Children are not made to stay at the table after others have left if they refuse to eat certain items of food.
- Staff work in partnership with parents/carers to support them with children who are showing signs of 'food preference or aversion' and sign post them to further advice, for example, How to Manage Simple

Faddy Eating in Toddlers (Infant & Toddler Forum) <https://infantandtoddlerforum.org/health-and-childcare-professionals/factsheets/>

Health policy

Alongside associated procedures in “Health”, this policy was adopted by Happy Faces Pre School in August 2021.

Aim

Happy Faces Pre School is a suitable, clean, and safe place for children to be cared for, where they can grow and learn. They meet all statutory requirements for promoting health and hygiene and fulfil the criteria for meeting the relevant Early Years Foundation Stage Safeguarding and Welfare requirements.

Objectives

We promote health through:

- ensuring emergency and first aid treatment is given where necessary
- ensuring that medicine necessary to maintain health is given correctly and in accordance with legal requirements
- identifying allergies and preventing contact with the allergenic substance
- Having ongoing discussions with parents/carers to develop allergy action plans for managing individual children’s known allergies and intolerances.
- Ensuring that all staff are aware of the symptoms and treatments for allergies and anaphylaxis and that children can develop these at any time.
- Ensuring that all staff know the difference between allergies and intolerances.
- identifying food ingredients that contain recognised allergens and displaying this information for parents/carers
- identifying and promoting health through taking necessary steps to prevent the spread of infection and taking appropriate action when children are ill
- Ensuring that food is prepared for children in a way that prevents choking.
- Ensuring that young children are sat safely in a suitable low sized chair when eating.
- Ensuring that children are always in sight and hearing of a staff member, who is a paediatric first aider, whilst eating and the staff member is sat facing the children.
- Recording all choking incidents that requires intervention.
- promoting healthy lifestyle choices through diet and exercise
- supporting parents right to choose complementary therapies
- recognising the benefits of baby and child massage, by parents or staff carrying out massage under conditions that maintain the personal safety of children
- pandemic flu planning or illness outbreak management as per DfE and World Health Organisation (WHO) guidance

Legal references

[Medicines Act \(1968\)](#)

[Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 \(RIDDOR\)](#)

[Control of Substances Hazardous to Health \(COSHH\) Regulations \(2002\)](#)

[Health and Safety \(First Aid\) Regulations 1981](#)

[Food Information Regulations 2014](#)

[Early Years Foundation Stage 2025](#)

Further guidance

[Accident Record](#) (Alliance Publication)

[Allergy action plan](#)

Health procedures

Accidents and emergency treatment

Person responsible for checking and stocking first aid box: Alison Bacon

The setting provides care for children and promotes health by ensuring emergency and first aid treatment is given as required. There are also procedures for managing food allergies in section “Food safety and nutrition” and “Health”.

- Parents/carers’ consent to emergency medical treatment consent on registration.
- At least one person who has a current paediatric first aid (PFA) certificate **must** always be on the premises and available when children are on the premises and must accompany children on outings, who regularly update their training. We consider the number of children, staff, staff breaks and the layout of our setting to ensure that a paediatric first aider is always available and can respond to emergencies. We ensure that the training provider who delivers PFA training to our staff are competent.
- Students and trainees that have PFA training may be included in ratios at the level below their level of study if we are satisfied that they are competent and responsible.
- First Aid certificates are renewed at least every three years. In line with the EYFS, all staff who obtained a level 2 and/or level 3 qualification since 30 June 2016 must obtain a PFA qualification within three months of starting work in order to be counted in ratios.
- All members of staff know the location of First Aid boxes, the contents of which are in line with HSC recommendations.
- Vinyl single use gloves are also kept near to and in the box. A thermometer is kept in the office.
- There is a named person in the setting who is responsible for checking and replenishing the First Aid Box contents.
- Singular use ice packs are kept with the first aid kits.
- For minor injuries and accidents, First Aid treatment is given by a qualified first aider; the event is recorded in the setting’s Accident Record book or digital recording system. Parents/carers may have a photocopy of the accident form on request.
- In the event of minor injuries or accidents, parents/carers are normally informed when they collect their child, unless the child is unduly upset or members of staff have any concerns about the injury. In which case they will contact the parent for clarification of what they would like to do, i.e. collect the child or take them home and seek further advice from NHS 111.

Serious accidents or injuries

- An ambulance is called for children requiring emergency treatment.

- First aid is given until the ambulance arrives on scene. If at any point it is suspected that the child has died, “Death of a child on site” procedure is implemented and the police are called immediately.
- The registration form is taken to the hospital with the child.
- Parents/carers are contacted and informed of what has happened and where their child is being taken to.
- If the parents/carers do not arrive at the setting before the ambulance sets off for the hospital, a member of staff accompanies the child and remains with them until the parent/carer arrives.
- The setting manager arranges for a taxi to take the child and carer to hospital for further checks for minor injuries, if deemed to be necessary.

Recording and reporting

- In the event of a serious accident, injury, or serious illness, the setting manager notifies the trustees using “Confidential safeguarding incident report form,” or other agreed reporting format, as soon as possible.
- If required, a RIDDOR form is completed; one copy is sent to the parent/carer, one for the child’s file and one for the local authority Health and Safety Officer.
- The trustees are notified by the setting manager of any serious accident or injury to, or serious illness of, or the death of, any child whilst in their care in order to be able to notify Ofsted and any advice given will be acted upon. Notification to Ofsted is made as soon as is reasonably practicable and always within 14 days of the incident occurring. The designated person will, after consultation with the trustees, inform local child protection agencies of these events

Further guidance

[Accident Record](#) (Alliance Publication)

Choosing a first aid training provider <https://www.hse.gov.uk/pubns/geis3.htm>

Health procedures

Administration of medicine

The setting manager/deputy manager are responsible for administering medication to the children; ensuring consent forms are completed, medicines stored correctly, and records kept.

Administering medicines during the child's session will only be done if necessary.

If a child has not been given a prescription medicine before it is advised that parents keep them at home for 48 hours to ensure no adverse effect, and to give it time to take effect. The setting manager must check the insurance policy document to be clear about what conditions must be reported to the insurance provider.

Consent for administering medication

- Only a person with parental responsibility (PR), or a foster carer may give consent. A childminder, grandparent, parent/carer's partner who does not have PR, cannot give consent.
- When bringing in medicine, the parent informs the staff member on the door. The setting manager is also informed.

The person on the door receives the child's medication and asks the setting manager or deputy manager to complete the Medication Record as consent to administer the medicine. Staff are made aware of this procedure during their induction and reminded at staff meetings.

- The manager or deputy manager who receives the medication, check it is in date and prescribed specifically for the current condition. It must be in the original container (not decanted into a separate bottle). It must be labelled with the child's name and original pharmacist's label if prescribed.
- Medication dispensed by a hospital pharmacy will not have the child's details on the label but should have a dispensing label. Staff must check with parents/carers and record the circumstance of the events and hospital instructions as relayed to them by the parents/carers.
- Members of staff ask the setting manager or deputy manager to complete the Medication Record with the parent to provide consent stating the following information. No medication is given without these details:
 - full name of child and date of birth
 - name of medication and strength
 - who prescribed it
 - dosage to be given
 - how the medication should be stored and expiry date
 - a note of any side effects that may be expected
 - signature and printed name of parent/carer and date

Storage of medicines

All medicines are stored safely. Refrigerated medication is stored on a marked shelf in the fridge.

Medicines are stored in a separate medicine box which is kept on top of the fridge in the kitchen. Refrigerated medication is stored on a marked shelf in the fridge in the kitchen. Staff are informed of this procedure during induction and reminded at staff meetings.

- The setting manager/deputy manager are responsible for ensuring medicine is handed back at the end of the day to the parent/carer.
- For some conditions, medication for an individual child may be kept at the setting. "Healthcare plan form" must be completed. The setting manager/deputy manager check that it is in date and return any out-of-date medication to the parent/carer.
- Parents/carers do not access where medication is stored, to reduce the possibility of a mix-up with medication for another child, or staff not knowing there has been a change.

Record of administering medicines

A record of medicines administered is kept in the setting manager's office.

The Medication Record book is kept in the filing cabinet in the office. The setting manager will show staff how to complete the Record book during their induction and reminded periodically thereafter.

The Medication Record book records:

- name of child
- name and strength of medication
- the date and time of dose
- dose given and method
- signed by two members of staff
- verified by parent/carer signature at the end of the day

A witness signs the Medication Record book to verify that they have witnessed medication being given correctly according to the procedures here.

- No child may self-administer. If children are capable of understanding when they need medication, e.g. for asthma, they are encouraged to tell their key person what they need. This does not replace staff vigilance in knowing and responding.
- The medication records are monitored to look at the frequency of medication being given. 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.

Children with long term medical conditions requiring ongoing medication

- Risk assessment is carried out for children that require ongoing medication. This is the responsibility of the setting manager and key person. Other medical or social care personnel may be involved in the risk assessment.
- Parents/carers contribute to risk assessment. They are shown around the setting, understand routines and activities and discuss any risk factor for their child.
- For some medical conditions, key staff will require basic training to understand it and know how medication is administered. Training needs is part of the risk assessment.
- Risk assessment includes any activity that may give cause for concern regarding an individual child's health needs.
- Risk assessment also includes arrangements for medicines on outings; advice from the child's GP's is sought if necessary, where there are concerns.
- "Health care plan form" is completed fully with the parent/carer; outlining the key person's role and what information is shared with other staff who care for the child.
- The plan is reviewed every six months (more if needed). This includes reviewing the medication, for example, changes to the medication or the dosage, any side effects noted etc.

Managing medicines on trips and outings

- Children are accompanied by their key person, or other staff member who is fully informed about their needs and medication.
- Medication is taken in a plastic box labelled with the child's name, name of medication, copy of the consent form and a card or electronic device to record administration, with details as above.
- The card is later stapled to the Medication 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 as above.

Staff taking medication

Staff taking medication must inform their manager. The medication must be stored in a secure area away from the children. The manager must be made aware of any contra-indications for the medicine so that they can risk assess and take appropriate action as required.

Further guidance

Medication Administration Record (Alliance Publication)

Health procedures

Health care plan

Please note that this form must be used alongside the individual child's registration form which contains emergency parent/carer contact and other personal details

Name of Child	
Date of Birth	
Child's address	
Contact information for family or main carers	
1. Name	
Relationship to child	
Contact numbers	
2. Name	
Relationship to child	
Contact numbers	
Medical diagnosis, condition or allergy	
Clinic or Hospital contact	
Name	
Phone no.	
GP/Doctor	
Name	
Phone No.	

Describe medical needs and give details of symptoms

Risk assessment completed?

If no, please state why?

If yes please include details here

Date completed:

Daily care requirements e.g. before meals/going outdoors

Describe what constitutes an emergency for the child and what actions are to be taken if this occurs

Name/s of staff responsible for an emergency situation with this child

Parent/carer and person completing this form must sign below to indicate that the information in this plan is accurate and the parent/carer agrees for any relevant procedures to be carried out

Parent's name	Signature	Date
Key person's name	Signature	Date
Setting Manager's name	Signature	Date

For children requiring lifesaving or invasive medication and/or care, for example, rectal diazepam, adrenaline injectors, Epipens, Anapens, JextPens, maintaining breathing apparatus, changing colostomy or feeding tubes, approval must be received 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:			

Review completed (at least every six months)

Parent's name	Signature	Date
Key person's name	Signature	Date
Setting manager's name	Signature	Date

Copies circulated to:

Parents

Child's personal records (with registration form)

GP/Consultant – if required

Health procedures

Life-saving medication and invasive treatments

Life-saving medication and invasive treatments may include adrenaline injections (Epipens) for anaphylactic shock reactions (caused by allergies to nuts, eggs etc) or invasive treatment such as rectal administration of Diazepam (for epilepsy).

- The staff member responsible for the intimate care of children who require life-saving medication or invasive treatment will undertake their duties in a professional manner having due regard to the procedures listed above.
- The child's welfare is paramount, and their experience of intimate and personal care should be positive. Every child is treated as an individual and care is given gently and sensitively; no child should be attended to in a way that causes distress or pain.
- All staff, overseen by the setting manager, will work in close partnership with parents/carers and other professionals to share information and provide continuity of care.
- Children with complex and/or long-term health conditions have a health care plan in place which considers the principles and best practice guidance given here.
- All staff have appropriate training for administration of treatment and are aware of infection control best practice, for example, using personal protective equipment (PPE).
- All staff speak directly to the child, explaining what they are doing as appropriate to the child's age and level of comprehension.
- Children's privacy is considered and balanced with safeguarding and support needs when changing clothing, nappies and toileting.

Record keeping

For a child who requires invasive treatment the following must be in place from the outset:

- 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 parents/carers allowing members of staff to administer medication
- 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
- a healthcare plan

Copies of all letters relating to these children must be sent to the insurance provider for appraisal. Confirmation will then be issued in writing confirming that the insurance has been extended. A record is made in the medication record book of the intimate/invasive treatment each time it is given.

Physiotherapy

- Children who require physiotherapy whilst attending the setting should have this carried out by a trained physiotherapist.

- If it is agreed in the health care plan that the key person should undertake part of the physiotherapy regime then the required technique must be demonstrated by the physiotherapist personally; written guidance must also be given and reviewed regularly. The physiotherapist should observe the practitioner applying the technique in the first instance.

Safeguarding/child protection

- Practitioners recognise that children with SEND are particularly vulnerable to all types of abuse, therefore the safeguarding procedures are followed rigorously.
- If a practitioner has any concerns about physical changes noted during a procedure, for example unexplained marks or bruising then the concerns are discussed with the designated safeguarding lead and the relevant procedure is followed.

Treatments such as inhalers or Epi-pens must be immediately accessible in an emergency.

Health procedures

Allergies and food intolerance

Before a child starts at Happy Faces Pre School, parents/carers are asked if their child has any known allergies or food intolerance. This information is recorded on the registration form. On going discussions must take place with parents/carers and where appropriate health professionals to develop allergy action plans for managing any known allergies and food intolerances. This information must be kept up to date on a child's registration form and shared with all staff.

- All staff at Happy Faces Pre School must be aware of the symptoms and treatments for allergies and anaphylaxis and the difference between allergies and food intolerances
- If a child has an allergy or food intolerance, "Generic risk assessment form" is completed with the following information:
 - the risk identified – the allergen (i.e. the substance, material or living creature the child is allergic to such as nuts, eggs, bee stings, cats etc.)
 - the level of risk, taking into consideration the likelihood of the child coming into contact with the allergen
 - control measures, such as prevention from contact with the allergen
 - review measures
- "Health care plan form" must be completed with:
 - the nature of the reaction e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc.
 - managing allergic reactions, medication used and method (e.g. Epipen)
- The child's name is added to the Allergies and Illnesses list.
- A copy of the risk assessment and health care plan is kept with the child's registration form and is shared with all staff.
- Parents/carers show staff how to administer medication in the event of an allergic reaction.
- Generally, no nuts or nut products are used within the setting.
- Parents/carers are made aware, so that no nut or nut products are accidentally brought in.
- Any foods containing food allergens are identified on children's menus.

Oral Medication

- Oral medication must be prescribed and have manufacturer's instructions written on them.
- Staff must be provided with clear written instructions for administering such medication.

- All risk assessment procedures are adhered to for the correct storage and administration of the medication.
- The setting must have the parents/carers' prior written consent. Consent is kept in the Medication Record book.

For other life-saving medication and invasive treatments please refer to "Administration of medicine".

Health procedures

Poorly children

- If a child appears unwell during the day at Happy Faces Pre School, for example has a raised temperature, sickness, diarrhoea* and/or pains, particularly in the head or stomach then the setting manager calls the parents/carers and asks them to collect the child or send a known carer to collect on their behalf.
- 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.
- A child's temperature is taken and checked regularly, using Fever Scans or other means i.e. ear thermometer.
- In an emergency an ambulance is called, and the parents/carers are informed.
- Parents/carers are advised to seek medical advice before returning them to the setting; the setting can refuse admittance to children who have a raised temperature, sickness and diarrhoea or a contagious infection or disease.
- Where children have been prescribed antibiotics for an infectious illness or complaint, parents/carers are asked to keep them at home for 48 hours.
- After diarrhoea or vomiting, parents/carers are asked to keep children home for 48 hours following the last episode.
- Some activities such as sand and water play, and self-serve snack will be suspended for the duration of any outbreak.
- The setting has information about excludable diseases and exclusion times.
- The setting manager notifies the trustees if there is an outbreak of an infection (affects more than 3-4 children) and keeps a record of the numbers and duration of each event.
- The setting manager has a list of notifiable diseases and contacts the UK Health Security Agency (UKHSA) and Ofsted in the event of an outbreak.

Notifiable diseases and infection control

If practitioners suspect a child who falls ill whilst in their care is suffering from a serious disease that may have been contracted in the United Kingdom or abroad, immediate medical assessment is required. The service manager or deputy will call 111 and inform parents/carers.

Preventative measures are taken to reduce the risk of an outbreak returning. When an individual shows signs of an infectious illness, they are advised not to attend the service. If a child is already at the setting, they will be made comfortable in a space away from the other children to rest until they are able to be

collected. The importance of thorough handwashing will be reiterated, and the practitioners will promote the 'catch it, bin it, kill it' approach with children and young people.

In the case of an outbreak of a notifiable disease which has been confirmed by a medical professional, the setting manager will seek further advice from the UKHSA, if not already contacted by them.

The setting manager has a list of notifiable diseases and contacts the UK Health Security Agency(UKHSA), Ofsted, or the childminder agency in the event of an outbreak.

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.

Infection control for bodily fluids – transmissible viruses

- 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. These include single use vinyl gloves and aprons are worn when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Protective rubber gloves are used for cleaning/sluicing clothing after changing.
- Soiled clothing is bagged and placed outside the building for parents/carers to collect.
- Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and designated area mops; cloths used are disposed of with clinical waste.
- Tables, other furniture or toys/resources affected by blood, urine, faeces or vomit are removed where possible and cleaned using disinfectant. For larger items such as furniture, these must be cleaned immediately with disinfectant.

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

Public Health England advises that children and staff should be encouraged to catch sneezes with a tissue, bin the tissue and wash their hands.

Nits and head lice

- Nits and head lice are not an excludable condition; although in exceptional cases parents may be asked to keep the child away from the setting until the infestation has cleared.
- On identifying cases of head lice, all parents are informed and asked to treat their child and all the family, using current recommended treatments methods if they are found.

*Diarrhoea is defined as 3 or more liquid or semi-liquid stools in a 24-hour period.

(www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases#diarrhoea-and-vomiting-gastroenteritis)

****Paracetamol based medicines (e.g. Calpol)**

The use of paracetamol-based medicine may not be agreed in all cases. A setting cannot take bottles of non-prescription medicine from parents to hold on a 'just in case' basis, unless there is an immediate reason for doing so. Settings do not normally keep such medicine on the premises as they are not allowed to 'prescribe'. However, given the risks to very young babies of high temperatures, insurers may allow minor infringement of the regulations as the risk of not administering may be greater. Ofsted is normally in agreement with this. In all cases, parents of children under two years must sign to say they agree to the setting administering paracetamol-based medicine in the case of high temperature on the basis that they are on their way to collect. Such medicine should never be used to reduce temperature so that a child can stay in the care of the setting for a normal day. The use of emergency medicine does not apply to children over 2 years old. A child over two who is not well, and has a temperature, must be kept cool and the parents asked to collect straight away.

Whilst the brand name Calpol is referenced, there are other products which are paracetamol or Ibuprofen based pain and fever relief such as Nurofen for children over 3 months.

Further guidance

[Medication Administration Record](#) (Alliance Publication)

Guidance on infection control in schools and other childcare settings (Public Health Agency)

https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools_poster.pdf

[High temperature \(fever\) in children - NHS \(www.nhs.uk\)](https://www.nhs.uk)

Health procedures

Infection control

Good practice infection control is paramount in Happy Faces 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.

Further guidance

[Good Practice in Early Years Infection Control](#) (Alliance Publication)

Health procedures

Oral health

Happy Faces Pre School provides care for children and promotes health through promoting oral health and hygiene, encouraging healthy eating, healthy snacks and tooth brushing.

- Fresh drinking water is always available and easily accessible.
- Sugary drinks are not served.
- Only water and milk are served with morning and afternoon snacks.
- We ask parents to supply their children with healthy nutritious snacks with no added sugar.
- Parents are discouraged from sending in confectionary as a snack or treat.
- Staff follow the Infant & Toddler Forum's Ten Steps for Healthy Toddlers.

In practice, promoting good oral health includes:

- Talking to children about the effects of eating too many sweet things
- Promoting regular toothbrushing – twice a day for 2 minutes using a fluoride toothpaste
- Encouraging children to visit the dentist regularly (twice a year is recommended)
- Encouraging parents to promote good oral health at home
- Oral hygiene activities are included in planning at least every three months.
- The setting co-ordinates with local oral health and ensure procedures are reviewed regularly, additional guidance from the local team may be added to this procedure.

Pacifiers/dummies

- Parents/carers are *advised* to stop using dummies/pacifiers once their child is 12 months old.
- Dummies that are damaged are disposed of and parents/carers are told that this has happened.

Further guidance

Infant & Toddler Forum: Ten Steps for Healthy Toddlers www.infantandtoddlerforum.org/toddlers-to-preschool/healthy-eating/ten-steps-for-healthy-toddlers/

Promoting inclusion, equality and valuing diversity policy

Alongside associated procedures in “Promoting inclusion, equality and diversity”, this policy was adopted by Happy Faces Pre School in August 2021.

All early years providers must consider and meet relevant employer and service provider duties as set out in the Equality Act (2010). Those in receipt of funding must eliminate discrimination including indirect, direct discrimination, discrimination and harassment based on association and perception and discrimination for reason relating to a disability or by failing to make a reasonable adjustment to any provision, criterion, or practice. This duty is anticipatory. Settings must advance equality of opportunity and foster good relations with individuals and groups with protected characteristics namely disability, race (ethnicity), religion and belief, sexual orientation, sex (gender), gender reassignment, age, pregnancy and maternity, marriage, and civil partnership.

Aim

Happy Faces Pre School actively promotes inclusion, equality of opportunity and the valuing of diversity.

Objectives

We support the definition of inclusion as stated by the Early Childhood Forum:

‘Inclusion is the process of identifying, understanding and breaking down the barriers to participation and belonging.’

We interpret this as consisting of several tasks and processes in relation not only to children but also to parents and visitors in the setting. These tasks and processes include awareness and knowledge of relevant barriers to inclusion for those with a protected characteristic namely:

- disability
- gender reassignment
- pregnancy and maternity
- race
- religion or belief
- sexual orientation
- sex (gender)
- age
- marriage or civil partnership (in relation to employment)

This includes unlawful behaviour towards people with protected characteristics. Unlawful behaviour being direct discrimination, indirect discrimination, associative discrimination, discrimination by perception, harassment, and victimisation (in addition, we are aware of the inequality that users facing socio-economic disadvantaged may also encounter). We will not tolerate behaviour from an adult which demonstrates

dislike and prejudice towards groups and individuals living outside the UK (xenophobia). This also applies to the same behaviour towards specific groups of people and individuals who are British Citizens residing in the UK.

We promote understanding of discrimination - through training and staff development - the causes and effects of discrimination on both adults and children and the long-term impact of discrimination; the need to protect children from discrimination and ensure that early years practice is both accessible and inclusive; the need for relevant support to allow children to develop into confident adults with a strong positive self-identity.

- Developing practice that includes:
 - Developing an environment which reflects the 'kaleidoscope' of factors that can provide settings with a myriad of influences and ideas for exploring and celebrating difference.
 - Ensuring that barriers to inclusion are identified and removed or minimised wherever possible; for example, we complete an "Access audit form".
 - Understanding, supporting and promoting the importance of identity for all children and recognising that this comprises multiple facets which are shaped by a 'kaleidoscope' of factors including British values, 'race' ethnicity and culture, gender, difference of ability, social class, language, religion and belief, and family form and lifestyle, which combine uniquely in the identity of each individual; for example, we welcome and promote bi/multi-lingualism and the use of alternative communication formats such as sign language, and we promote gender equality while at the same time recognising the differences in play preferences and developmental timetables of girls and boys.
 - Recognising that this 'kaleidoscope' also reflects negative images which may be internalised and negatively affect the development of self-concept, self-esteem, and confidence.
 - Promoting a welcoming atmosphere that genuinely appreciate British values, different cultural and personal perspectives, without stereotyping and prejudicing cultures and traditions on raising children, by always involving parents.
 - Promoting community cohesion and creating an environment that pre-empts acts of discrimination so that they do not arise.
 - Recruitment of staff to reflect cultural and language diversity, staff with disability, and staff of both genders.
 - Addressing discrimination as it occurs from children in a sensitive, age-appropriate manner to ensure that everyone involved understands the situation and are offered reassurance and support to achieve resolution.
 - Challenging discriminatory behaviour from parents, staff or outside agencies or individuals that affect the well-being of children and the early years community.
 - Creating an ethos within which staff work confidently within a culturally complex environment; learning when to change or adapt practice in the setting and having the confidence to challenge practice (including parental) that is not in the child's best interest, seeking support and intervention from agencies where appropriate.

- Ensuring that practitioners work closely with the Special Educational Needs Coordinator (SENCO) to make sure that the additional needs of all children are identified and met.
- We are aware of anti-discriminatory legislation and able to use it to shape the service and support parents and children against discrimination in the local community, for example, against asylum seekers, the Travelling community and same sex parents.
- We regularly monitor and review our practice including long-term preventative measures to ensure equality such as auditing of provision, formulating an equality plan, applying impact measurements and positive actions. In addition, short term measures such as recognition and assessment of children's additional support needs (e.g. impairment, home language, family hardship, specific family beliefs and practices), day-to-day activities, provision of suitable support and resources, activity programme and curriculum, assessment, recognition of special educational needs and developing inclusive relationships.

Legal references

General Data Protection Regulation 2018

Children and Families Act 2014 Part 3

Special Educational Needs and Disability Code of Practice 2015

Disability Equality Duty 2011

Equality Act 2010

Prevent Strategy 2015

Further guidance

Guide to the Equality Act and Good Practice (Alliance Publication)

Promoting inclusion, equality and valuing diversity

Happy Faces Pre School actively promote inclusion, equality of opportunity and value diversity. All early years providers have legal obligations under the Equality Act 2010. Those in receipt of public funding also have public equality duties to eliminate discrimination, promote equality, foster good relations with individuals and groups with protected characteristics namely disability, race (ethnicity), religion and belief, sexual orientation, sex (gender), gender reassignment, age, pregnancy and maternity, marriage and civil partnership. Settings also have obligations under the Prevent Duty (2015 updated 2023) which highlights the need to foster equality and prevent children from being drawn into harm and radicalisation.

Promoting identity, positive self-concept and self-esteem for all children through treating each child as an individual and with equal concern, ensuring each child's developmental and emotional needs are recognised and met.

- Promoting inclusive practice to ensure every child is welcomed and valued.
- Discussing aspects of family/child identity with parents/carers when settling in a new child.
- Maintaining a positive non-judgemental attitude and use of language with children to talk about topics such as family composition/background, eye and skin colour, hair texture, sex, gender, physical attributes and languages spoken (including signing).
- Becoming knowledgeable about different cultures, and individual subjective perceptions of these and being able to reflect them imaginatively and creatively in the setting to create pride, interest and positive self-identity.
- Discussing similarities and differences positively without bias and judgement.
- Celebrating festivals, holy days and special days authentically through involving parents, staff or the wider community to provide a positive experience for all.
- Providing books with positive images of children and families from all backgrounds and abilities. Avoiding caricatures or cartoon-like depictions and ensuring individual differences are portrayed with sensitive accuracy. The central characters in individual stories should provide a positive, broad representation of diversity e.g. disability, ethnicity, sex and gender, age and social backgrounds. Individual storylines should contain a range of situations which are easily identifiable by children such as those that include disabled children/adults, different ethnic groups, mixed heritage families, gender diversity, single sex/same and different sex families, multi-generational households and cultural diversity.
- Providing visual materials, such as posters and pictures that provide non-stereotypical images of people, places and cultures and roles that are within children's range of experience. This includes photographs taken by staff of the local and wider community, of parents/carers and families and local events.
- Using textiles, prints, sculptures or carvings from diverse cultures in displays.
- Providing artefacts from a range of cultures, particularly for use in all areas of the setting, not just in the home corner.

- Ensuring toys, learning materials and resources reflect diversity and provide relevant materials for exploring aspects of difference, such as skin tone paints and pens.
- Developing a range of activities through which children can explore aspects of their identity, explore similarities, differences and develop empathy including:
 - self-portraits, photograph albums and displays showing a range of families
 - books about 'me' or my family
 - persona doll stories which sympathetically and authentically represent diversity
 - food activities, such as tasting and cooking, creating real menu additions
 - activities about real celebrations such as new babies, weddings, cultural and religious events
 - use of textiles and secular artefacts in the room, and to handle and explore, that demonstrate valuing of the cultures from which they come
 - creating textiles such as tie dying, batik and creative use of textiles
 - provide mirrors at different heights for babies and other non-ambulant children
 - developing a music area with a variety of musical instruments for babies and children to use to create a range of music
 - creating an art and mark making area with a variety of materials from other countries such as wood blocks for printing, Chinese calligraphy brushes etc
 - home corner play which encourages all children to equally participate and provides domestic articles from diverse cultures
 - 'dressing up' materials which promote non-gendered roles and enable children to explore different gender identities/gender neutrality
 - providing dolls that sensitively and accurately portray difference such as disability and ethnicity
 - use of a variety of music to play to children of different genres and cultural styles with a variety of musical instruments for children to access
 - a language and literacy area with a variety of books, some with dual language texts and signs, involving parents in the translation where possible
 - tapes/Cds with stories read in English and other languages
 - examples of writing in other scripts from everyday sources such as papers and magazines, packaging etc. children's names written on cards in English as well as in their home language script where appropriate
 - labels for children's paintings or other work are made with their name in English and home language script (parents can help with this)
 - conversations with young children which explore unfamiliar objects and subjects to help foster an understanding of diversity and identity such as spectacles or hearing aids, religious and cultural practices
- Record keeping that refers to children's emerging bilingual skills or their use of sign language as achievements in positive terms.

- Record keeping that refers to children's differing abilities and identities in positive terms.
- Records that show the relevant involvement of all children, especially children with special educational needs and disabilities, those using English as an additional language and those who are 'more abled' in the planning of their care and education.

Fostering positive attitudes and challenging discrimination.

- Young children are learning how to grow up in a diverse world and develop appropriate attitudes. This can be difficult, and they may make mistakes and pick up inappropriate attitudes or just get the 'wrong idea' that may underlie attitudes of 'pre-prejudice' towards specific individuals/groups. Where children make remarks or behave in a discriminatory or prejudice way or make inappropriate comments that arise from not knowing facts, staff should explain why these actions are not acceptable and provide appropriate information and intervention to reinforce children's understanding and learning.
- Where children make overtly prejudice or discriminatory remarks they are dealt with as above, and the issue is raised with the parents/carers.
- When children wish to explore aspects of their identity such as ethnicity or gender, they should be listened to in an understanding and non-judgemental way.
- Parents/carers are expected to abide by the policy for inclusion, diversity and equality and to support their child in the aims of the setting.

Implementing an equality strategy to foster a 'can do' approach

- Every provider should have an equality strategy in place outlining their vision on equality alongside a timetabled list of actions summarising how they build equality into the provision and how this is monitored and evaluated.
- An equality check and access audit are completed to ensure that there are no barriers to inclusion of any child, families and visitors to the setting.
- Early years providers in receipt of nursery education funding are covered by the public sector equality duty. These bodies must have regard of the need to eliminate discrimination, promote equality of opportunity, foster good relations between disabled and non-disabled persons, and publish information to show their compliance with the duty.

Promoting dynamic and balanced mixed gender, culturally, socially, and linguistically diverse staff teams who work constructively together in providing for diverse communities.

- It is recognised that members of staff in diverse teams bring a range of views and opinions to the setting regarding a range of issues to do with the job. It is important that a range of views and perspectives are shared and respected in staff meetings and that decisions are made on which way of looking at the situation will result in the best outcomes for the child.
- Staff views are sought where these offer individuals, social and/or cultural insight, although staff should not be put in an uncomfortable position of being an 'expert' or 'ambassador'.

- Staff respect similarities and differences between each other and users such as ability, disability, religious and personal beliefs, sex, sexual orientation, gender reassignment etc. Staff do not discriminate or harass individuals on the grounds of these or encourage any other member of staff to do so; evidence of such will be dealt with by management immediately.
- Members of staff make the best use of different perspectives in the team to find solutions to difficult problems that arise in socially/culturally complex situations.
- Members of staff support each other to highlight similarities and respect differences.
- Members of staff of both sexes carry out all tasks according to their job description; there are no jobs that are designated men's or women's jobs.
- Staff are sensitive to the fact that male workers are under-represented in the early years workforce so may be more likely to experience inequality and discrimination.
- Staff should be aware that male workers may be more vulnerable to allegations. Therefore, work practices should be developed to minimise this. These practices are valuable for all staff.
- Where staff may feel threatened, or under attack, from discriminatory behaviour, staff and managers follow procedure "Threats and abuse towards staff and volunteers".
- There is an ethos wherein staff, parents/carers and children are free to express themselves and speak their own languages in ways that enhance the culture of the setting.

Ensuring that barriers to equality and inclusion are identified and removed or minimised wherever possible.

- Barriers may include:
 - lack of understanding - where the language spoken at the setting is not that which is spoken at a child's home
 - perceived barriers – affordability where parents/carers are not aware of financial support available or assume that a service is not available to them. Perceived barriers may also be physical barriers for those children or parents with a disability or additional needs where they assume, they will not be able to access the service
 - physical barriers – where there are environmental features which stop a disabled child or disabled parent accessing the setting such as stairs
 - negative attitudes – stereotypes and prejudices or commitment by staff and managers to the time and energy required to identify and remove barriers to accessibility
 - unconscious and conscious bias of staff towards some families such as those from other backgrounds, disabled parents/carers, same sex parents/carers and families with specific religious beliefs
 - gendered views of staff which limit children's aspirations and choices

- misconceptions such as disabled children should not attend settings during a pandemic due to heightened risk
- lack of effective Information Communication Technology (ICT) in the homes of families who are vulnerable or at risk and therefore unable to keep in close contact with the childcare provider
- Staff are aware of the different barriers to inclusion and equality and consider the wider implications for children and their families.

Supporting children to become considerate adults

- Children's social and emotional development is shaped by early experiences and relationships and incorporates elements of equality and British and Universal values. The EYFS supports children's earliest skills in an age appropriate way to become social citizens, namely 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; risk taking behaviours, rules and boundaries; not to hurt/upset other people with words and actions; consequences of hurtful/discriminatory behaviour and regulating behaviour.

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 Early Years Foundation Stage and are further clarified here based on *Fundamental British values in the Early Years*

(<https://foundationyears.org.uk/wp-content/uploads/2017/08/Fundamental-British-Values-in-the-Early-Years-2017.pdf>)

Democracy: making decisions together

- For self-confidence and self-awareness (PSED), practitioners encourage children to see the bigger picture, children know their views count, value each other's views and values and talk about feelings e.g. when they do or do not need help.
- Supporting the decisions children make and providing activities that involve turn-taking, sharing and collaboration. Children are given opportunities to develop enquiring minds, where questions are valued and prejudice attitudes less likely.

Rule of law: understanding rules matter (PSED)

- Practitioners ensure children understand their and others' behaviour and consequence.
- Practitioners collaborate with children to create rules and codes of behaviour, e.g. rules about tidying up and ensure all children understand that rules apply to everyone.

Individual liberty: freedom for all (PSED & UW)

- 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, exploring facets of their own identity, talking about their experiences and learning. Practitioners encourage a range of experiences, allow children to explore the language of feelings and responsibility, reflect on differences and understand we are free to have different opinions, for example in a small group discuss what they feel about transferring into Reception Class.

Mutual respect and tolerance: treat others as you want to be treated (PSED & UW)

- Staff 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, others and among families, faiths, communities, cultures and traditions.
- Staff encourage and explain the importance of tolerant behaviours such as sharing and respecting other's opinions.
- Staff 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/racial stereotyping.

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/carers) that are not in line with the fundamental values of democracy, rule of law, individual liberty, mutual respect and tolerance for those with different faiths and beliefs

Safeguarding children, young people and vulnerable adults policy

Alongside associated procedures in “Safeguarding children, young people and vulnerable adults”, this policy was adopted by Happy Faces Pre School in August 2021 and updated September 2025.

Our Designated Safeguarding Lead is Sharon Danch

Our Deputy Designated Lead is Leigh Chalk

Our manager is Sharon Danch

Our Safeguarding Committee Member is Sue Woodcraft

What to do if you have a welfare concern in Happy Faces Pre School

Why are you concerned?

For example

- Something a child has said, for example, an allegation of harm.
- Child's appearance; may include frequent or unexplained marks/bruises and/or dress.
- Behaviour change(s)
- Witnessed concerning, harmful or inappropriate behaviour.

Act immediately and record your concerns. If urgent, speak to a DSL first.

Follow the settings procedure.

- Reassure the child.
- Clarify concerns, using open questions if necessary (**TED**: Tell, Explain, Describe)
- Record facts and not opinions and use child's own words,
- Sign and date your record
- Seek support for yourself if required from DSL

Inform the Designated Safeguarding Lead(s) (Sharon Danch & Leigh Chalk)

- If a child is at risk of immediate harm and/or is unsafe to go home, make an urgent [Request for Support to the Front Door Service via the portal](#) or call the Police on 999.
- If no immediate risk of harm, provide internal support and/or refer to other agencies in line with [Kent Safeguarding Support Level Guidance and KSCMP procedures](#), as appropriate. This may include signposting to community services and/or early help open access, a non-urgent call to the Police via 101, reporting allegations against staff to the LADO, or make a Request for Support via the [Front Door Service Portal](#).
- If the setting believes a child may be in need of support but are unclear whether to refer, a [no-named consultation](#) can be sought from the Front Door Service via **03000 411 111**
- If support is required out of working hours, the setting will contact the Out of Hours Service via **03000 41 91 91**.

If you are unhappy with the response:

Staff:

- Follow setting whistleblowing procedures
- Follow Kent [safeguarding partnership escalation](#) procedures.

Children and Parents:

- Follow settings complaints procedures

Record decision making and action taken in the child's child protection file.

Monitor

Be clear about:

- What you are monitoring. For example, behaviour trends, appearance.
- How long you will monitor.
- Where, how and to whom you will feedback and how you will record.

Review and request further support if necessary.

At all stages, the child's circumstances will be kept under review.
The DSL/staff will request further support if required to ensure the **child's safety is paramount**.

Child Focused Approach to Safeguarding

'All children deserve the care and support they need to have the best start in life. Children learn and develop at a faster rate from birth to five years old than at any other time in their lives, so their experiences in early years have a major impact on their future life chances. A secure, safe, and happy childhood is important in its own right. Good parenting and high-quality early learning provide the foundation children need to fulfil their potential.'

'Children learn best when they are healthy, safe, secure, when their individual needs are met, and when they have positive relationships with the adults caring for them.'

Early Years Foundation Stage ([EYFS](#))

Introduction

- Happy Faces Pre School will provide a high-quality, welcoming, safe, and stimulating environment where children can enjoy learning and grow in confidence. Happy Faces Pre School will provide age-appropriate educational opportunities to enable early years children to develop positive relationships, self-regulation, social and emotional understanding, communication, language and understanding to help them understand how to keep themselves safe, and the importance of being kind to others.
- We recognise that as an early years education provider, we play an essential role in helping children to understand and identify the parameters of what is appropriate child and adult behaviour; what is 'safe'; to recognise when they and others close to them are not safe; and how to speak to trusted adults who can support them when they are concerned. Children at Happy Faces Pre School will be listened to and heard and their concerns will be taken seriously and acted upon as appropriate.
- Happy Faces Pre School recognise that a one size fits all approach may not be appropriate for all children, and a more personalised or contextualised approach for more vulnerable children, victims of abuse and some SEND children might be needed.
- The committee of Happy Faces Pre School believes that all those directly involved with our setting have an essential role to play in making it safe and secure. Our setting aims to create the safest environment within which every child can achieve their full potential. All children (defined in law and in this policy as those up to the age of 18) have a right to be heard and to have their wishes and feelings taken into account and all children regardless of age, sex (gender), ability, culture, race, language, religion or sexual identity or orientation, have equal rights to protection.
- Happy Faces Pre School recognises our statutory responsibility to safeguard and promote the welfare of all children. Safeguarding and promoting the welfare of children is **everybody's** responsibility and everyone has a role to play. All members of our community (staff, volunteers, trustees, parents/carers, wider family networks, and children) have an important role in safeguarding children and all have an essential role to play in making our community safe and secure.
- Staff working with children at Happy Faces Pre School will maintain an attitude of 'it could happen here' where safeguarding is concerned. When concerned about the welfare of a child, staff will always act in the best interests of the child and if any member of our community has a safeguarding concern about any child or adult, they should act and act immediately.
- As part of the safeguarding ethos of the setting we are committed to:
 - Maintaining children's welfare as our paramount concern.
 - Developing a child centred environment and fostering an open and positive organisational culture in which children feel safe, secure, valued, and respected, confident to talk openly and are sure of being listened to.
 - Developing appropriate and positive relationships between children and the adults that care for them, including working with both parents (where possible/appropriate) to ensure the welfare of all children, including, where necessary, the need to refer to other agencies when safeguarding concerns arise.

- Using age-appropriate learning opportunities to help early years children understand and identify the parameters of what is appropriate child and adult behaviour; what is 'safe', to recognise when they and others close to them are not safe, and how to seek advice and support if they are concerned.
 - Ensuring all staff have regular and appropriate training (including induction) to enable them to recognise the signs and symptoms of abuse and ensure they are aware of our procedures and reporting mechanisms.
 - Monitoring children who have been identified as "in need", including the need for protection and implementing specific interventions and taking action for those who may be at risk of harm.
 - Keeping confidential child protection records, which are stored securely and shared appropriately, including with other professionals.
 - Developing effective and supportive liaison with other agencies to ensure children are safeguarded where concerns arise.
- The procedures contained in this policy apply to all staff, including trustees, temporary or third-party agency staff and volunteers. This policy applies where there are any child protection concerns regarding children who attend the settings but may also apply to other children connected to the setting, for example, siblings or students on student/work placements (under 18s).
 - Happy Faces Pre School adheres to the Kent Safeguarding Children Multi-Agency Partnership (KSCMP) safeguarding children's procedures. The full KSCMP procedures document and additional guidance relating to specific safeguarding issues can be found on the KSCMP website: www.kscmp.org.uk

Policy context

- This policy is implemented in accordance with our compliance with the statutory guidance as issued by the Department for Education, Early Years and Foundation Stage (EYFS), specifically listed in section 3: the safeguarding and welfare requirements.
- This policy has been developed in accordance with the principles established by the Children Acts 1989 and 2004 and related guidance. This includes but is not limited to:
 - Keeping Children Safe in Education (KCSIE)
 - Working Together to Safeguard Children (WTSC)
 - Ofsted: Education Inspection Framework
 - Framework for the Assessment of Children in Need and their Families 2000
 - [Kent and Medway Safeguarding Children Procedures](#)
 - Early Years and Foundation Stage Framework (EYFS)
 - The Education Act 2002
 - The Human Rights Act 1998
 - The Equality Act 2010 (including the Public Sector Equality Duty)
- Happy Faces Pre School will follow local or national guidance in response to any emergencies. We will amend this policy and our procedures as necessary but regardless of the action required, our safeguarding principles will always remain the same and the welfare of the child is paramount.
- This policy will be evaluated at least annually, and will be revised as necessary, so that it reflects the current safeguarding issues and challenges, including lessons learnt. The policy will also be updated after any national or local changes, major local or national safeguarding incidents and/or learning, and/or any modifications to our own procedures.
- All staff (including temporary staff and volunteers) will be provided with a copy of this policy and [Part One and/or Annex A](#) of KCSIE as appropriate.
- Parents/carers can obtain a copy of the Child Protection Policy and other related policies on request. Additionally, our policies can be viewed via our website: <https://info82223.wixsite.com/happyfaces>

- The Designated Safeguarding Lead (DSL) and manager (Sharon Danch) will ensure the [Committee](#) receive regular reporting on safeguarding activity and systems. They will not receive details of individual children's situations or identifying features of families as part of their oversight responsibility.

This policy is one of a series of our integrated safeguarding portfolio and should be read and actioned in conjunction with the policies as listed below:

- Missing child
- Uncollected child
- Prime Times: arrivals and departures.
- Promoting positive behaviour
- Complaints procedure for parents and service users
- Confidentiality, recording and sharing information
- Children's records and data protection
- Emergency evacuation and lockdown
- Fire safety
- Accidents and emergency treatment
- Administration of medicine
- Allergies and food intolerance
- Infection control
- Health and safety
- Prime Times: intimate care and nappy changing
- Risk assessments
- Safe and healthy eating
- Safer recruitment
- Sleep and rest policies
- Social media
- Staff behaviour policy/code of conduct, including Acceptable Use of Technology Policies (AUP)
- Ratios and lone working expectations, in line with EYFS
- Visitors policy
- Whistleblowing

Supporting Guidance (to be read and followed alongside this document)

- [What to do if you are worried a child is being abused](#)
- [Keeping Children Safe in Education](#) (KCSIE)
- [Education Inspection Framework](#) (EIF) and '[Early years inspection handbook](#)' Ofsted
- [Guidance for Safer Working Practice for Adults who Work with Children and Young People in Education Settings](#) - Safer Recruitment Consortium
- [Safeguarding children and protecting professionals in early years settings: online safety considerations](#) UK Council for Internet Safety (UKCIS)

- These documents can be found in the staff room.

Definition of safeguarding

- In line with 'Working Together to Safeguard Children', safeguarding and promoting the welfare of children is defined for the purposes of this policy 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, whenever possible and where this is in the best interests of the child(ren).
 - taking action to enable all children to have the best outcomes.

- Safeguarding “***is everyone’s responsibility***” and everyone who comes into contact with children and families has a role to play. Everyone should consider wider environmental factors in a child’s life that may be a threat to their safety and/or welfare.
- Child protection is part of safeguarding and promoting the welfare of all children and is defined as activity that is undertaken to protect specific children who are suspected to be suffering, or likely to suffer, significant harm. This includes harm that occurs inside or outside the home, including online.
- Our setting acknowledges that safeguarding includes a wide range of specific issues including (but not limited to):
 - Abuse and neglect
 - Bullying, including cyberbullying
 - Child-on-child abuse
 - Children with family members in prison
 - Children who are absent or missing from education
 - Child missing from home or care
 - Child Sexual Exploitation (CSE)
 - Child Criminal Exploitation (CCE)
 - Contextual safeguarding (risks outside the family home)
 - County lines and gangs
 - Domestic abuse
 - Drugs and alcohol misuse
 - Fabricated or induced illness
 - Faith abuse
 - Gender based abuse and violence against women and girls
 - Hate
 - Homelessness
 - Human trafficking and modern slavery
 - Mental health
 - Nude or semi-nude image sharing, aka youth produced/involved sexual imagery or “Sexting”
 - Online safety
 - Preventing radicalisation and extremism
 - Private fostering
 - Relationship abuse
 - Serious violence
 - Sexual violence and sexual harassment
 - So-called ‘honour-based’ abuse, including Female Genital Mutilation (FGM) and forced marriage
 - ‘Upskirting’
- Annex B of [‘Keeping Children Safe in Education’](#) (KCSIE) contains important additional information about specific forms of abuse and safeguarding issues. Staff at the setting who work directly with children will read part one and annex B of KCSIE.
- If staff have any concerns about a child’s welfare, they should act on them immediately. They should follow this policy and speak to the Designated Safeguarding Lead (or deputy)

Safer Organisational Culture

- As part of our approach to safeguarding, we will create and embed an organisational culture of openness, trust and transparency in which our values and expected behaviour as set out in our staff code of conduct are constantly lived, monitored and reinforced by all staff, and any concerns are dealt with promptly and appropriately.
- Our setting will ensure processes, training and support is in place for staff to promote continuous vigilance, maintain an environment that deters and prevents abuse and challenges inappropriate behaviour.
- All members of staff are required to work within our clear guidelines on safer working practice as outlined in our staff code of conduct.

- Staff will be made aware of our behaviour management, physical intervention and health and safety policies. Staff will manage behaviour effectively to ensure a good and safe educational environment and will have a clear understanding of the needs of all children. Any physical interventions, use of reasonable force, safer eating approaches and use of first aid will be in line with our agreed policy and procedures, and national guidance.
- All staff will be made aware of the professional risks associated with the use of social media and electronic communication (such as email, mobile phones, texting, social networking). Staff will adhere to relevant policies including staff code of conduct policy, staff acceptable use policies (AUPs) and social networking policy.
- All staff and volunteers should feel able to raise any concerns about poor or unsafe practice and potential failures in our safeguarding regime. The management team at Happy Faces Pre School will take all concerns or allegations received seriously.
- All members of staff are made aware of our Whistleblowing procedure which is to be used to raise concerns about poor or unsafe practice.
 - It is a disciplinary offence not to report concerns about the conduct of a colleague that could place a child at risk, however where a staff member feels unable to raise an issue or feels that their genuine concerns are not being addressed, other channels are open to them.
 - Staff can access the NSPCC whistleblowing helpline if they do not feel able to raise concerns regarding child protection failures internally. Staff can call 0800 028 0285 (8:00 AM to 8:00 PM Monday to Friday) or email help@nspcc.org.uk.
 - [Ofsted](#) provides guidance on how to make complaints about a childcare provider.
 - General guidance on whistleblowing can be found via [Whistleblowing for employees](#).
- Staff are encouraged and should feel confident to self-refer to the DSL and/or management team, if they have found themselves in a situation which could be misinterpreted, might appear compromising to others, and/or on reflection they believe they have behaved in such a way that they consider falls below the expected professional standards. This includes where concerns may be felt to be deliberately invented or malicious; such allegations are extremely rare and as such all concerns should be reported and recorded.
- Happy Faces Pre School has a legal duty to refer to the Disclosure and Barring Service (DBS) anyone who has harmed, or poses a risk of harm, to a child, or if there is reason to believe the member of staff has committed one of a number of listed offences, and who has been removed from working (paid or unpaid) in regulated activity or would have been removed had they not left. The DBS will consider whether to bar the person.
 - If these circumstances arise in relation to a member of staff at our setting, a referral will be made as soon as possible after the resignation or removal of the individual in accordance with advice from the [LADO](#).
- As a registered childcare provider, Happy Faces Pre School has a duty to inform Ofsted of any allegations of [significant events](#). This includes but is not limited to serious harm or abuse by any person living, working, or looking after children at the premises (whether the allegations relate to harm or abuse committed on the premises or elsewhere). We will also notify Ofsted of the action taken in respect of the event. Notifications will be made as soon as is reasonably practicable, but at the latest within 14 days of the allegations being made and we are aware that to not do so would be an offence.

Key Responsibilities

Leadership & Management

- The manager/registered person has a strategic responsibility for our safeguarding arrangements and will comply with their duties under legislation. The manager/registered person will have regard to the EYFS guidance and will ensure our policies, procedures and training are effective and comply with the law at all times.

- The management committee will facilitate a whole setting approach to safeguarding which involves everyone. They will ensure that safeguarding and child protection are at the forefront and underpin all relevant aspects of process and policy development, so that all systems, processes, and policies operate with the best interests of the child at their heart. The management committee will ensure that our child protection and safeguarding policies and procedures are understood and followed by all staff.
- The management committee will ensure that the Designated Safeguarding Lead is supported in their role and is provided with sufficient time so they can provide appropriate support to staff and children regarding any safeguarding and welfare concerns.
- The management committee are aware of their obligations under the Human Rights Act 1998, the Equality Act 2010, (including the Public Sector Equality Duty), and the local multi-agency safeguarding arrangements set out by the Kent Safeguarding Children Multi-Agency Partnership ([KSCMP](#)).
 - This includes but is not limited to safeguarding all members of our community (for example, staff, children, parents/carers, and other family members) identified with protected characteristics within the Equality Act: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation.
 - For further information about our approaches to equality, diversity, and inclusion, please access our policies.

Designated Safeguarding Lead (DSL)

- The EYFS states; *'a practitioner must be designated to take lead responsibility for safeguarding children in every setting'*.
- Sharon Danch, Manager is appointed as the Designated Safeguarding Lead (DSL) for our setting.
- The setting has also appointed a Deputy DSL who will have delegated responsibilities and act in the DSL's absence.
 - Leigh Chalk, Deputy Manager & SENCo
- The DSL will attend appropriate and specific training in line with annex C of the EYFS to provide them with the knowledge and skills required to carry out their role. Deputy DSLs will be trained to the same standard as the DSL.
- In line with annex C of EYFS, the DSLs training will be renewed at least every two years. In addition, their knowledge and skills will be regularly updated through a variety of methods to maintain their skills and knowledge, keep up to date with any changes to national or local safeguarding practice/procedures, or as a result of any safeguarding concerns that occur in the setting.
- The DSL has overall responsibility for the day-to-day oversight of safeguarding and child protection systems (including online safety) in the setting. Whilst the activities of the DSL may be delegated to the deputies, the ultimate lead responsibility for safeguarding and child protection remains with the DSL and this responsibility will not be delegated.
- It is the role of the DSL to:
 - provide support, advice and guidance to all staff on an ongoing basis, and on any specific safeguarding issue as required.
 - Maintain a confidential recording system for safeguarding and child protection concerns.
 - Coordinate safeguarding action for individual children.
 - When supporting children with a social worker or looked after children, the DSL should have the details of the child's social worker in the authority that looks after the child.
 - Liaise with other agencies and professionals in line with EYFS and WTSC, including local statutory children's services agencies, and the Local [Kent Safeguarding Partners](#).
 - Ensure that locally established procedures as put in place by the three safeguarding partners as part of the Kent Safeguarding Children Multi-Agency Partnership (KSCMP) procedures, including referrals, are followed, as necessary.

- Represent, or ensure the setting is appropriately represented at multi-agency safeguarding meetings (including child protection conferences).
- Managing and monitoring the setting's role in any multi-agency plan for a child.
- Being available during setting hours for staff to discuss any safeguarding concerns and ensuring adequate and appropriate DSL cover arrangements in response to any closures and out of hours and/or out of term activities.
- Taking lead responsibility for online safety, including understanding the filtering and monitoring systems and processes in place.
- Ensuring all staff access appropriate safeguarding training and relevant updates in line with the recommendations within EYFS.
- Liaise with the management committee to inform them of any safeguarding issues, especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations.

Members of staff

- The welfare requirement of the EYFS requires providers *'to take all necessary steps to keep children safe and well'* and accordingly, everyone involved in the care of young children has a role to play in their protection.
- Our staff are in a unique position to observe any changes in a child's behaviour or appearance, may be able to identify concerns early, provide help and support for children, promote children's welfare and prevent concerns from escalating.
- All members of staff have a responsibility to:
 - provide a safe environment in which children can learn.
 - be alert to any issues of concern in a child's life at home or elsewhere.
 - be aware of the indicators of abuse, neglect and exploitation so that they can identify cases of children who may need help or protection.
 - know what to do if a child tells them that they are being abused, neglected, or exploited and understand the impact this can have upon a child.
 - be prepared to identify children who may benefit from early help, including understanding the early help process and their role in it.
 - understand our settings safeguarding policies and systems.
 - undertake and engage in regular and appropriate training on a regular basis.
 - be aware of the local process of making referrals to children's social care and statutory assessment under the Children Act 1989.
 - know how to maintain an appropriate level of confidentiality.
 - ensure that adequate supervision of children is implemented in line with our policy expectations, including that whilst children are eating, they must be within sight and hearing of an adult.
 - reassure children who report concerns that they are being taken seriously and that they will be supported and kept safe.
- Staff at Happy Faces Pre School recognise that children may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as being abusive or harmful. This should not prevent staff from having professional curiosity and speaking to a DSL if they have any concerns about a child.
- Staff at Happy Faces Pre School will determine how best to build trusted relationships with children and parents/carers which facilitate appropriate professional communication in line with existing and relevant policies, for example, our behaviour policies.

Children

- Children have a right to:
 - Feel safe, be listened to, and have their wishes and feelings taken into account.
 - Confidently report any worries, knowing their concerns will be treated seriously, and they can safely express their views and give feedback.
 - Receive help from a trusted adult.

- Learn how to keep themselves safe, including online.

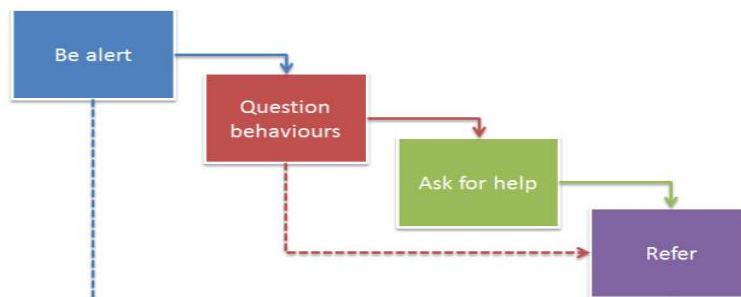
Parents and carers

- Parents/carers have a responsibility to:
 - Understand and adhere to any relevant setting policies and procedures.
 - Talk to their children about safeguarding issues and support the setting in their safeguarding approaches.
 - Identify behaviours which could indicate that their child is at risk of harm including online.
 - Seek help and support from the setting or other agencies.

Child Protection Procedures

Recognising indicators of abuse, harm, neglect and exploitation

- Staff will maintain an attitude of 'it could happen here' where safeguarding is concerned. When concerned about the welfare of a child, staff will always act in the best interests of the child.
- All staff are made aware of the definitions and indicators of abuse, harm, neglect and exploitation as identified by 'Working Together to Safeguard Children' and 'Keeping Children Safe in Education'. This is outlined locally within the [Kent Support Levels Guidance](#).
- Happy Faces Pre School recognise that when assessing whether a child may be suffering actual or potential harm there are four categories of abuse (for more in-depth information, see appendix 1):
 - Physical abuse
 - Sexual abuse
 - Emotional abuse
 - Neglect
- By understanding the indicators of abuse, neglect, harm and exploitation we can respond to problems as early as possible and provide the right support and services for the child and their family.
- All members of staff are expected to be aware of and follow the ['What to do if you are worried a child is being abused'](#) guidance if they are concerned about a child:



['What to do if you are worried a child is being abused'](#)

- Happy Faces Pre School recognises that concerns may arise in many different contexts and can vary greatly in terms of their nature and seriousness. The indicators of child abuse, neglect, harm and exploitation can vary from child to child. Children develop and mature at different rates, so what appears to be worrying behaviour for a younger child might be normal for an older child. It is important to recognise that indicators of abuse, neglect, harm and exploitation do not automatically mean a child is being harmed, however all concerns should be taken seriously and will be explored by the DSL on a case-by-case basis.
- Happy Faces Pre School recognises abuse, neglect, harm and exploitation and other safeguarding issues are rarely standalone events and cannot always be covered by one definition or one label alone.

In many cases, multiple issues will overlap with one another, therefore staff will always be vigilant and always raise concerns with a DSL.

- Parental behaviours can indicate child abuse, neglect, harm and exploitation; staff will be alert to parent-child interactions or concerning parental behaviours; this could include parents who are under the influence of drugs or alcohol or if there is a sudden change in their mental health.
- Children may report abuse, neglect, harm and exploitation happening to themselves, other children, or their family members. All reports made by children to staff will be taken seriously and will be responded to in line with this policy.
- Safeguarding incidents and/or behaviours can be associated with factors and risks outside the setting. Children can be at risk of abuse, neglect, harm and exploitation in situations outside their families; extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms including (but not limited to) sexual exploitation, criminal exploitation, sexual abuse, serious youth violence and county lines.
- Happy Faces Pre School recognises that technology can be a significant component in many safeguarding and wellbeing issues; children are at risk of abuse, neglect, harm and exploitation online from people they know (including other children) and from people they do not know; in many cases, abuse will take place concurrently via online channels and in daily life.
- Happy Faces Pre School recognises that some children have additional or complex needs and may require access to intensive or specialist services to support them.
- In all cases, if staff are unsure of what action to take, they will always speak to the DSL (or deputy).

Responding to child protection concerns

- If staff are concerned about the safety or welfare of a child, they are expected to:
 - listen carefully to the child, reflecting back the concern.
 - be non-judgmental.
 - avoid using any leading questions; only prompting the child where necessary, with open questions to clarify information. For example, who, what, where, when or Tell, Explain, Describe (TED).
 - not promise confidentiality as concerns will have to be shared further, for example, with the DSL and potentially Integrated Children's Services.
 - be clear about boundaries and how the report will be progressed.
 - record the concern using the facts, for example, words the child uses or recording the location of any marks using a body map, in line with our record keeping requirements.
 - inform the DSL (or deputy), as soon as practically possible.
- All staff are made aware that early information sharing is vital for the effective identification, assessment, and allocation of appropriate service provision, whether this is when problems first emerge, or where a child is already known to other agencies. Staff will not assume a colleague, or another professional will act and share information that might be critical in keeping children safe.
- In Kent, Early Help and Preventative Services and Children's Social Work Services are part of [Integrated Children's Services](#) (ICS) and are accessed via the 'Front Door Service'/[Kent Children's Services Portal](#).
- 'Early help' is defined in 'Working together to safeguard children' as support for children of all ages that improves a family's resilience and outcomes or reduces the chance of a problem getting worse. It is not an individual service, but a system of support delivered by local authorities and their partners, including education providers, working together and taking collective responsibility to provide the right provision in their area.
 - If early help support is appropriate, the DSL (or a deputy) will lead on exploring internal resources available and liaising with other universal or additional services available via local agencies.

- Where Intensive Support Early Help (provided by ICS, outlined in the [KSCMP support levels guidance](#)) is considered to be appropriate, the DSL (or deputy) will make a 'request for support' via the [Kent Children's Services Portal](#).
- Staff, including the DSL, may be required to work with other agencies and professionals in an early help assessment.
- The DSL will keep all Early Help cases under constant review and consideration will be given to escalating concerns and/or seeking advice from the Front Door Service if the situation does not appear to be improving or is getting worse.
- Where a child is suffering, or is likely to suffer from harm, or is in immediate danger (for example, under section 17 or 47 of the Children Act), intensive or specialist support is required and a 'request for support' will be made immediately to Kent [Integrated Children's Services](#) (via the [portal](#)) and/or the police, in line with the [Kent Support Level Guidance and KSCMP procedures](#).
 - Our setting recognises that in situations where there are immediate child protection concerns for a child as identified in line with Support Level Guidance, it is NOT to investigate as a single agency, but to act in line with KSCMP guidance which may involve multi-agency decision making.
 - If they believe a child may be in need of support but are unclear whether a Request for Support should be submitted, the DSL may seek [advice or guidance](#) from a social worker via the Front Door Service before deciding next steps.
- The DSL, or a deputy DSL in the absence of the DSL will have overall responsibility for making referrals. However, all staff are made aware of the local process for making referrals to Integrated Children's Services and for statutory assessments under the Children Act 1989, especially section 17 (children in need) and section 47 (a child suffering, or likely to suffer, significant harm) that may follow a referral, along with the role they might be expected to play in such assessments.
- If staff have any concerns about a child's welfare, they are expected to act on them immediately. If staff are unsure if something is a safeguarding issue, they will speak to the DSL (or deputy). If in exceptional circumstances, a DSL is not available, this should not delay appropriate action being taken by staff.
 - Staff will speak to a member of the management team, request a consultation with a social worker from the Front Door Service, or make a request for support to the Front Door Service themselves; for contact information, see flowchart on page [x](#).
 - In these circumstances, any action taken by staff will be shared with a DSL as soon as is possible.
- In the event of a request for support to the Front Door Service being necessary, parents/carers will be informed and consent to this will be sought by the DSL in line with guidance provided by KSCMP and ICS. Parents/carers will always be informed in the case of a request for support being submitted by the setting unless there is a valid reason not to do so, for example, if informing them may put a child at risk of harm or could undermine a criminal investigation.
- If, after a request for support or any other planned external intervention, a child's situation does not appear to be improving, or concerns regarding receiving a decision or the decisions made, staff or the DSL will re-refer (if appropriate) and/or DSLs will follow the [Kent Escalation and Professional Challenge Policy](#) to ensure their concerns have been addressed and, most importantly, that the child's situation improves.
- DSLs and staff will be mindful of the need for the setting to ensure any activity or support implemented to support children and/or families is recorded. Support provided by the setting where families are struggling will be overseen and reviewed by the DSL on a regular basis to ensure activity does not obscure potential safeguarding concerns from the wider professional network.

Child Protection Records: Recording Concerns & Transferring Files

- All safeguarding concerns, discussions, decisions, and reasons for those decisions, will be recorded in writing on the setting safeguarding incident/concern form and passed without delay to the DSL.

- Our records will include a clear and comprehensive summary of any concerns, details of how concerns were followed up and resolved, a note of any action taken or not taken, how any decisions were reached and any outcomes.
- Incident/Welfare concern forms are kept in the staff room.
- If there is an immediate safeguarding concern the member of staff will consult with a DSL before completing the form as reporting urgent concerns takes priority
- Records will be completed as soon as possible after the incident/event, using the child's words and will be signed and dated by the member of staff. Child protection records will record facts and not personal opinions. A body map will be completed if visible marks or injuries to a child have been observed.
- If members of staff are in any doubt about recording requirements, they will discuss their concerns with the DSL.
- Confidential information and records about staff and children will always be held securely and will only be accessible and available to those who have a right or professional need to see them.
- Child protection records will be kept for individual children and will be maintained separately from all other records relating to the child in the setting. Child protection records are kept and shared in accordance with our responsibilities under the Data Protection Legislation and, where relevant, the Freedom of Information Act 2000.
- Happy Faces Pre School has an appropriately trained Data Protection Officer (DPO) as required by the UK General Data Protection Regulations (UK GDPR) to ensure that our setting is compliant with all matters relating to confidentiality and information sharing requirements.
- All child protection records will be transferred in accordance with data protection legislation to the child's subsequent setting or school, under confidential and separate cover as soon as possible. Child protection files will be transferred securely to the new DSL, separately to the child's main file, and a confirmation of receipt will be obtained. This should be within 5 days for an in-year transfer or within the first 5 days of the start of a new term.
- In addition to the child protection file, the DSL will also consider if it would be appropriate to share any information with the DSL at the new setting or school in advance of a child leaving, for example, information that would allow the new setting or school to continue to provide support.
- Where the setting receives child protection files from another setting, the DSL will ensure key staff such as the Special Educational Needs Co-Ordinator (SENCO) will be made aware of relevant information as required.
- Where a child joins the setting and no child protection files are received, the DSL will proactively seek to confirm from the previous setting whether any child protection exists for the child, and if so, if the files have been sent.

Multi-agency working

- Happy Faces Pre School recognises the pivotal role we have to play in multi-agency safeguarding arrangements and is committed to its responsibility to work within the [KSCMP](#) multi-agency safeguarding arrangements as identified within 'Working Together to Safeguard Children'.
- The manager and DSL will work to establish strong and co-operative local relationships with professionals in other agencies, including the safeguarding partners in line with local and national guidance. Some examples of multi-agency relationships may include, but are not exhaustive are, social workers and other professionals involved in strategy meetings and child protection conferences, early help workers, specialist services/support, equality and inclusion professionals, other schools/settings where children attend more than one setting/provision, health professionals such as paediatricians, health visitors and speech and language therapists and police.

Confidentiality and information sharing

- Happy Faces Pre School recognises our duty and powers to hold, use and share relevant information with appropriate agencies in matters relating to child protection at the earliest opportunity as per statutory guidance outlined within EYFS, KCSIE and WTSC.

- Happy Faces Pre School has an appropriately trained Data Protection Officer (DPO) as required by the UK General Data Protection Regulations (UK GDPR) to ensure that our setting is compliant with all matters relating to confidentiality and information sharing requirements.
- All staff are made aware of the need to protect the privacy of the children in their care, as well the legal requirements that exist to ensure that information relating to the child is handled in a way that ensures both confidentiality and safeguarding.
 - Happy Faces Pre School will ensure staff are aware of our confidentiality policy and will ensure there is an area where staff may talk to parents and/or carers confidentially.
 - All staff are aware they cannot promise a child that they will not tell anyone about a report of any form of abuse, as this may not be in the best interests of the child.
- Staff will have due regard to the relevant data protection principles, which allow them to share and withhold personal information.
 - The Data Protection Act 2018 and UK GDPR do not prevent the sharing of information for the purposes of keeping children safe. Staff have a professional responsibility to be proactive in sharing information as early as possible to help identify, assess, and respond to risks or concerns about the safety and welfare of children; this may include sharing information with the DSL and with other agencies as appropriate. Fears about sharing information must not be allowed to stand in the way of the need to safeguard and promote the welfare and protect the safety of children.
 - KCSIE, the [Information Commissioner's Office](#) (ICO) and DfE '[Information sharing advice for safeguarding practitioners](#)' guidance provides further details regarding information sharing principles and expectations.
- The manager and DSL will only disclose relevant safeguarding information about a child with staff on a 'need to know' basis.

Complaints

- All members of our community should feel able to raise or report any concerns about children's safety or potential failures in our safeguarding regime. The management team at Happy Faces Pre School will take all concerns and whistleblowing reports seriously, and all complaints will be considered and responded to in line with the relevant and appropriate process.
- The setting has a complaints procedure available to parents, members of staff and visitors who wish to report concerns or complaints. This can be found in our policies.
- Staff can also access the NSPCC whistleblowing helpline if they do not feel able to raise concerns regarding child protection failures internally.
 - Staff can call 0800 028 0285 (8:00 AM to 8:00 PM Monday to Friday) or email help@nspcc.org.uk.
- Any complaints that constitute an allegation against a member of staff or volunteer will be dealt with in line with section 8 of this policy.

Specific Safeguarding Issues

- Happy Faces Pre School is aware of a range of specific safeguarding issues and situations that can put children at greater risk of harm. Whilst some of these issues may be more likely to involve older children, early years children may still be at risk of harm, or concerns may be identified where there are risks for children's family members or siblings, and/or young staff members, including for example, children on work placements/experience.
- Where staff are unsure how to respond to specific safeguarding issues, they should follow the processes as identified in the "Child Protection Procedures" part of this policy and speak with the DSL or a deputy.

Bruising in non-mobile children

- Bruising in babies, infants or children with complex needs that are not mobile (meaning a child who is unable to move independently through rolling, crawling, cruising, or bottom shuffling) is unusual and should always be explored.
- If our setting is concerned about actual or suspected bruising on a non-mobile child, we will respond in line with the ['Kent and Medway Protocol for the Management of Actual or Suspected Bruising in Infants and Children who are not Independently Mobile'](#) procedures (2.2.8 of the KSCMP procedures). In summary, these procedures state:
 - If a child appears seriously ill or injured, emergency treatment should be sought through an emergency department (ED) and the Kent ICS should be notified of the concern and the child's location.
 - In all other cases:
 - Staff must inform the DSL immediately and describe and document accurately on a body map, the size, shape, colour, and position of the mark/s on the head and/or body.
 - Any explanation of the history of the injury or comments by the parents/carers will be documented accurately (verbatim) in the child's record, along with the body map.
 - If there is a concern about parental response to the injury, no explanation, or an explanation that is inadequate, unlikely or does not rule out abuse or neglect, an immediate referral will be made to Kent ICS, who have responsibility for arranging further multi-agency assessments.
 - If there are concerns regarding the immediate safety of the child or staff, the police will be called.
 - If the setting is in any doubt as to how to respond to bruising on a non-mobile child, advice will be sought from the Front Door Service.

Child-on-child abuse

- All members of staff at Happy Faces Pre School recognise that children can abuse other children; this is known as child-on-child abuse, and that it can happen both inside and outside of the setting and online.
- Happy Faces Pre School recognises that child-on-child abuse can take many forms, including but not limited to:
 - Bullying, including cyberbullying, prejudice-based and discriminatory bullying
 - Abuse in intimate personal relationships between children
 - Physical abuse which can include hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm
 - Sexual violence and sexual harassment
 - Consensual and non-consensual sharing of nudes and semi-nude images and/or videos (also known as 'sexting' or youth produced sexual imagery)
 - Causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party
 - Upskirting (which is a criminal offence), which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm
 - Initiation/hazing type violence and rituals
- Any allegations of child-on-child abuse will be recorded, investigated, and dealt with in line with this child protection policy.
- Happy Faces Pre School adopts a zero-tolerance approach to child-on-child abuse. We believe that abuse is abuse and it will never be tolerated or dismissed as "just banter", "just having a laugh", "part of growing up" or "boys being boys"; this can lead to a culture of unacceptable behaviours and can create an unsafe environment for children and a culture that normalises abuse, which can prevent children from coming forward to report it. All allegations of child-on-child abuse will be reported to the DSL and will be recorded, investigated, and dealt with accordingly.

- All staff have a role to play in challenging inappropriate behaviours between children. Staff recognise that some child-on-child abuse issues may be affected by gender, age, ability, and culture of those involved. For example, for gender-based abuse, girls are more likely to be victims and boys more likely to be perpetrators.
- In order to minimise the risk of child-on-child abuse, Happy Faces Pre School will:
 - implement a robust anti-bullying policy
 - provide an age/ability appropriate curriculum
- The DSL (or deputy) is likely to have a complete safeguarding picture and will be the most appropriate person to advise on the initial response.
 - The DSL will make an immediate risk and needs assessment which will be considered on a case-by-case basis which explores how best to support and protect any victims and alleged perpetrators, and any other children involved/impacted, in line with the relevant local/national guidance and support, for example [KSCMP](#) procedures.
 - The risk and needs assessment will be recorded and kept under review and will consider the victim (especially their protection and support), the alleged perpetrator, and all other children, students, and staff and any actions that are required to protect them.
 - Any concerns involving an online element (for example the taking and/or sharing of nude or semi-nude images) will take place in accordance with relevant local/national guidance and advice.
- Reports of harmful sexual behaviour will initially be managed internally by the setting DSL, and where necessary, will be referred to [Integrated Children's Services](#) (Early Help and/or Children's Social Work Service) via the Children's Portal and/or the police.
- Alleged victims, alleged perpetrators and any other child affected by child-on-child abuse will be supported by:
 - taking reports seriously,
 - listening carefully,
 - avoiding victim blaming,
 - providing appropriate pastoral support,
 - working with parents/carers,
 - reviewing educational approaches,
 - following procedures as identified in other policies, for example, the setting's anti-bullying, behaviour and child protection policy,
 - and where necessary and appropriate, informing the police and/or ICS.
- If at any stage the DSL is unsure if a request for support is appropriate, advice may be sought from the Front Door Service.

Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE)

- Happy Faces Pre School recognises that both Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE) are forms of abuse that occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into taking part in sexual or criminal activity, in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator and/or through violence or the threat of violence. CSE and CCE can affect children, both male and female and can include children who have been moved (commonly referred to as trafficking) for the purpose of exploitation.
- If staff are concerned that a child within the setting or our wider community may be at risk of CSE or CCE, immediate action should be taken by speaking to the DSL or a deputy. If the DSL is unsure on how to proceed, advice will be sought from the Front Door.

So-called Honour Based Abuse (HBA)

- So-called 'honour'-based abuse (HBA) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Staff will report any concerns about HBA to the DSL (or a deputy). If there is an immediate threat, the police will be contacted.
- All staff will speak to the DSL (or deputy) if they have any concerns about forced marriage. Staff can also contact the Forced Marriage Unit if they need advice or information: 020 7008 0151 or fm@fcdo.gov.uk

Preventing radicalisation

- Education settings, including early years providers, are often in a unique position, through interacting with children on a regular basis, to be able to identify concerning behaviour changes that may indicate they are susceptible to radicalisation.
- Happy Faces Pre School is aware of our duty under section 26 of the Counter-Terrorism and Security Act 2015 (the CTSA 2015), to have "due regard to the need to prevent people from being drawn into terrorism", also known as the Prevent duty and the [specific obligations](#) placed upon us as an education provider regarding risk assessments, working in partnership, staff training, and IT policies.
- Happy Faces Pre School will ensure that all staff receive appropriate training to enable them to help them prevent learners from being radicalised into terrorism.
 - Staff training will be delivered at the earliest opportunity to ensure staff are adequately equipped for their role. This training will enable staff to be alert to any changes in children's behaviour which could indicate that they may need help or protection and ensure they are aware of what action to take in response, including the internal Prevent referral arrangements. Staff will undertake training annually: <https://www.gov.uk/guidance/prevent-duty-training>
 - The Designated Safeguarding Leads (DSLs) will receive more in-depth training which is updated at least every two years to enable them to support other staff on Prevent matters and provide updates on relevant issues.
- Staff will report any concerns regarding radicalisation to the DSL (or a deputy), who is aware of the [local Kent Prevent procedures](#) to follow. If there is an immediate threat, the police will be contacted via 999.

Domestic abuse

- Happy Faces Pre School recognises that:
 - domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents.
 - domestic abuse can include, but is not limited to, psychological (including coercive control), physical, sexual, economic, or emotional abuse.
 - children can be victims of domestic abuse if they see, hear, or experience the effects of abuse at home and/or suffer domestic abuse in their own intimate relationships (teenage relationship abuse).
 - Anyone can be a victim of domestic abuse, regardless of sexual identity/orientation, age, ethnicity, socio-economic status, sexuality or background, and domestic abuse can take place inside or outside of the home.
 - domestic abuse can take place within different types of relationships, including ex-partners and family members.
 - there is always a potential for domestic abuse to take place when parents/families separate, or for existing domestic abuse to persist or escalate post separation.
 - domestic abuse can have a detrimental and long-term impact on children's health, well-being, development, and ability to learn.
 - domestic abuse concerns will not be looked at in isolation and our response will be considered as part of a holistic approach which takes into account children's lived experiences.
 - it is important not to use victim blaming language and to adopt a trauma informed approach when responding to concerns relating to domestic abuse.

- If staff are concerned that a child may be at risk of seeing, hearing, or experiencing the effects of domestic abuse, immediate action should be taken by speaking to the DSL or a deputy.

Modern Slavery

- Modern slavery encompasses human trafficking and slavery, servitude and forced or compulsory labour. Exploitation can take many forms, including sexual exploitation, forced labour, slavery, servitude, forced criminality and the removal of organs. Further information on the signs that someone may be a victim of modern slavery, the support available to victims and how to refer them to the NRM is available in the Statutory Guidance: [Modern slavery: how to identify and support victims](#).
- If there are concerns that any member of the community is a victim or involved with modern slavery, concerns should be shared with a DSL or deputy and will be responded to in line with this policy.

Supporting Children Potentially at Greater Risk of Harm

- Whilst **all** children should be protected, Happy Faces Pre School acknowledge that some groups of children are potentially at greater risk of harm. This can include the following groups:

Safeguarding children with Special Educational Needs or Disabilities (SEND)

- Happy Faces Pre School acknowledges that children with special educational needs or disabilities (SEND) or certain health conditions can face additional safeguarding challenges and barriers for recognising abuse, neglect or exploitation.
- Happy Faces Pre School recognises that children with SEND may face additional communication barriers and experience difficulties in managing or reporting abuse or challenges. Children with SEND will be supported to communicate and ensure that their voice is heard and acted upon.
- All members of staff are encouraged to appropriately explore potential indicators of abuse, neglect or exploitation such as behaviour, mood changes or injuries and not to assume that they are related to the child's disability.
- Staff will be mindful that children with SEND or certain medical conditions, may be disproportionately impacted by safeguarding concerns and/or behaviours, without outwardly showing any signs.
- To address these additional challenges, our setting will always consider providing extra support and attention for children with SEND. The DSL will work closely with the SENCO (Leigh Chalk) to plan support as required.

Children requiring mental health support

- Happy Faces Pre School has an important role to play in supporting the mental health and wellbeing of our children. Mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.
- Staff are aware that children's experiences, for example where children have suffered abuse and neglect, or other potentially traumatic Adverse Childhood Experiences (ACEs), can impact on their mental health, behaviour, and education.
- Staff are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one. Age/ability

appropriate education will be provided to children to help promote positive health, wellbeing, and resilience.

- If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken by speaking to the DSL or a deputy.

Children who are absent for prolonged periods of time

- Attendance can be strongly associated with specific safeguarding issues. Although it is not mandatory for early years children to attend a setting, it is important for settings to be aware of where children are, if not attending when they are expected to.
- The setting will share our attendance policy with parents/carers, which lists expectations for reporting child absences and the actions the setting will take if a child is absent without notification or for a prolonged period of time.
- Where possible, the setting will hold more than two emergency contact numbers for each child. There is an expectation that contact information will be held for both parents, unless doing so puts a child at risk of harm
- The setting will follow up on absences in a timely manner. If a child is absent for a prolonged period, or if a child is absent without notification from the parent/carer, attempts will be made to contact the child's parents and/or carers and alternative emergency contacts. The setting will consider patterns and trends in a child's absences and their personal circumstances and use professional judgement when deciding if a child's absence should be considered as prolonged. Consideration will be given to the child's vulnerability, parent/carer's vulnerability and home life.
- If the setting has any safeguarding concerns relating to a child's absence, the local Kent multi-agency safeguarding arrangements will be followed in line with the "Child Protection Procedures" part of this policy and/or a police welfare check requested.

Children who may benefit from early help

- Any child may benefit from early help, but all staff should be particularly alert to the potential need for early help for a child who:
 - is disabled or has certain health conditions and has specific additional needs
 - has special educational needs (whether they have a statutory Education, Health and Care plan)
 - has a mental health need
 - is a young carer
 - 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/goes missing from education, home or care,
 - is at risk of modern slavery, trafficking, sexual and/or criminal exploitation
 - is at risk of being radicalised or exploited
 - 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 so-called 'honour'-based abuse such as Female Genital Mutilation or Forced Marriage
 - is a privately fostered child.
- Where it is identified a child may need early help, staff and DSLs will respond in line with the "Child Protection Procedures" part of this policy.

Children who need a social worker (child in need and child protection plans)

- The DSL will hold details of social workers working with children in Happy Faces Pre School so that decisions can be made in the best interests of the child's safety, welfare, and educational outcomes.
- Where children have a social worker, this will inform our decisions about their safety and promoting their welfare, for example, responding to absences and provision of pastoral and/or educational support.

Looked after children (including Kinship Care), previously looked after children and care leavers

- Happy Faces Pre School recognises the common reason for children becoming looked after is as a result of abuse, neglect and/or exploitation and a previously looked after child also potentially remains vulnerable.
- Where a child is looked after, the DSL will hold details of the social worker.

Children who are privately fostered

- [Private fostering](#) occurs when a child under the age of 16 (under 18 for children with a disability) is provided with care and accommodation by a person who is not a parent, person with parental responsibility for them or a relative in their own home. A child is not privately fostered if the person caring for and accommodating them has done so for less than 28 days and does not intend to do so for longer. Such arrangements may come to the attention of our staff through the normal course of their interaction, and promotion of learning activities, with children.
- Where private fostering arrangements come to the attention of the setting, we will notify Kent Integrated Children's Services in line with the local [KSCMP arrangements](#) in order to allow the local authority to check the arrangement is suitable and safe for the child.

Children who are Lesbian, Gay, Bisexual, or Gender Questioning

- The fact that a child or an adult may be lesbian, gay, bisexual, gender questions or transgender is not in itself an inherent risk factor for harm, however, Happy Faces Pre School recognises that children or adults who are lesbian, gay, bisexual, gender questions or transgender or may be perceived to be lesbian, gay, bisexual, gender questions or transgender (whether they are or not) can be targeted.
- Our staff will endeavour to provide a safe space which enables all members of our community to speak out or share any concerns.

Online/Internet Safety

- It is essential that children are safeguarded from potentially harmful and inappropriate material or behaviours online. Happy Faces Pre School will adopt a whole setting approach to online safety which will empower, protect, and educate children and staff in their use of technology, and establish mechanisms to identify, intervene in, and escalate any concerns where appropriate.
- Happy Faces Pre School will ensure online/internet safety is considered as a running and interrelated theme when devising and implementing our policies and procedures, and when planning our education approaches, staff training, the role and responsibilities of the DSL and parental engagement.
- Happy Faces Pre School identifies that the breadth of issues classified within online safety is considerable, 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, and extremism misinformation, disinformation (including fake news) and conspiracy theories.
 - Contact: being subjected to harmful online interaction with other 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: personal 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 nudes and semi-nudes and/or pornography), sharing other explicit images and online bullying.
 - Commerce: risks such as online gambling, inappropriate advertising, phishing and or financial scams.
- Happy Faces Pre School recognises that technology, and the risks and harms related to it, evolve, and change rapidly. We will carry out an annual review of our approaches to online safety, supported by an annual risk assessment, which considers and reflects the current risks our children face online.
 - The manager will be informed of any online safety concerns by the DSL, as appropriate. The named committee member for safeguarding will report on online safety practice and incidents, including outcomes, on a regular basis to the wider governing body.

Policies and procedures

- The DSL has overall responsibility for online safety within the setting but will liaise with other members of staff, for example the manager and IT support/technicians as necessary.
- The DSL will respond to online safety concerns in line with our child protection and other associated policies.
 - Internal sanctions and/or support will be implemented as appropriate.
 - Where necessary, concerns will be escalated and reported to relevant partner agencies in line with local policies and procedures.
- Happy Faces Pre School uses a wide range of technology. This includes: laptops, tablets and other digital devices, the internet and email systems.
 - All setting owned devices and systems will be used in accordance with our acceptable use policies and with appropriate safety and security measures in place.
- Happy Faces Pre School recognises the specific risks that can be posed by mobile phones, cameras and all other electronic devices with imaging and sharing capabilities that may be used in the setting.
 - In accordance with the EYFS, Happy Faces Pre School has appropriate mobile phone, camera and other electronic devices with image and sharing capabilities policy in place, which outline how devices are used in the setting; these policies are shared and understood by all members of the community and can be found on our website and in the hallway.
- Happy Faces Pre School recognises that when used safely, effectively and with the right infrastructure in place, generative artificial intelligence (AI) tools have many uses which could benefit our entire community. However, it is important to recognise that AI tools can also pose safeguarding risks as well as moral, ethical and legal concerns. This includes but is not limited to; exposure to inappropriate or harmful content, including bullying, harassment, abuse and exploitation; privacy and data protection breaches/risks; intellectual property infringements and academic integrity challenges and exposure to inaccurate, misleading, or biased content.
 - Happy Faces Pre School only permits the use of generative AI tools which have been approved and provided for work and/or educational purposes, following the management team undertaking risk assessments and/or data protection impact assessments prior to use.
 - Happy Faces Pre School will respond to any misuse of AI in line with relevant policies, including but not limited to, behaviour, data protection, complaints and child protection.

Appropriate filtering and monitoring

- In line with requirements of the [Prevent duty](#), Happy Faces Pre School will do all we reasonably can to limit children and/or adults exposure to online risks through setting provided devices and systems and will ensure that appropriate filtering and monitoring systems are in place.
- The management team are responsible for:
 - procuring filtering and monitoring systems.
 - documenting decisions on what is blocked or allowed and why.
 - Regularly reviewing the effectiveness of our provision.
 - overseeing reports.
 - ensuring that all staff understand their role, are appropriately trained, follow our policies, processes and procedures, and act on reports and concerns.
 - ensuring the DSL and staff have sufficient time and support to manage their filtering and monitoring responsibilities.
- The DSL has lead responsibility for overseeing and acting on:
 - any filtering and monitoring reports.
 - any child protection or safeguarding concerns identified.
 - checks to filtering and monitoring system.
- The staff have technical responsibility for:
 - maintaining filtering and monitoring systems.
 - providing filtering and monitoring reports to the DSL and management team.
 - completing technical actions identified following any concerns or checks to systems.
 - working with the management team and the DSL to procure systems, identify risks, carry out reviews and carry out checks.
- All members of staff are provided with an understanding of the expectations, applicable roles and responsibilities in relation to filtering and monitoring via setting provided devices and networks as part of the induction process, through our staff training and in our staff behaviour/acceptable use policies.
- All staff, children and parents/carers have a responsibility to follow this policy to report and record any filtering or monitoring concerns.
- Happy Faces Pre School's education broadband connectivity is provided through Espria.
- [Name of filtering system](#) is blocking access to illegal content and activity as identified in the Online Safety Act, including:
 - Child Sexual Abuse Material (CSAM)
 - controlling or coercive behaviour
 - extreme sexual violence
 - extreme pornography
 - fraud
 - Racially or religiously aggravated public order offences
 - Inciting violence
 - Illegal immigration and people smuggling
 - Promoting or facilitating suicide
 - Intimate image abuse
 - Selling illegal drugs or weapons
 - Sexual exploitation
 - Terrorism

- [\[Internet Service Provider\]](#) is a member of [Internet Watch Foundation](#) (IWF) and uses IWF services to block access to CSAM. **We need to check to ensure this is the case.**
- [\[Name of filtering system\]](#) has signed up to Counter-Terrorism Internet Referral Unit list (CTIRU) **We need to check to ensure this is the case.**
- [\[Name of filtering system\]](#) blocks access to sites which could promote or include harmful and/or inappropriate behavior or material. This includes content or activity which promotes hate speech or discrimination, gambling, harmful bullying content, malware/hacking, mis-disinformation, privacy and copyright theft, pornography, self-harm and eating disorders and/or violence against women and girls
- Our filtering system and monitoring approaches are applied to all users, including guest accounts, all setting owned devices and networks, and all devices using the setting broadband connection.
 - All users of our devices/systems will be informed at a level appropriate to their age/ability and/or role and access, that use of our device and systems can be monitored, and that monitoring will be in line with data protection, human rights, and privacy legislation.
 - We work with [\[name of internet service provider/filtering provider\]](#) and our staff to ensure that our filtering policy and monitoring approaches is continually reviewed to reflect our needs and requirements.
 - When implementing appropriate filtering and monitoring, Happy Faces Pre School will ensure that “over blocking” does not lead to unreasonable restrictions as to what children can be taught with regards to age-appropriate education and safeguarding.
- If there is failure in the software or abuse of the system, for example if children or staff accidentally or deliberately access, witness or suspect unsuitable material has been accessed, they are required to:
 - [Insert details of your procedure, for example, turn off monitor/screen, use a screen cover widget, report the concern immediately to a member of staff, report the URL of the site to technical staff/services.](#)
 - Parents/carers will be informed of filtering breaches involving their child.
 - Filtering breaches, or where a concern is identified via our monitoring approaches, will be reported to the DSL and technical staff and concerns will be recorded and escalated as appropriate and in line with relevant policies, including our child protection, acceptable use, allegations against staff and behaviour policies.
 - Any behaviour or access to material believed to indicate a risk of significant harm, or that could be illegal, will be reported as soon as it is identified to the appropriate agencies. This includes but not limited to the [Internet Watch Foundation](#) (where there are concerns about child sexual abuse material), [Kent Police](#), the LADO, [NCA-CEOP](#) or [Kent Integrated Children's Services via the Kent Integrated Children's Services Portal](#).
- Whilst filtering and monitoring is an important part of our online safety responsibilities, it is only one part of our approach to online safety and we recognise that we cannot rely on filtering and monitoring alone to safeguard children and staff; effective safeguarding practice, robust policies, appropriate behaviour management and regular education/training about safe and responsible use is essential and expected.
 - Children will use appropriate search tools, apps and online resources as identified by staff, following an informed risk assessment.
 - Internet use will be supervised by staff as appropriate to children's age, ability and potential risk of harm:
 - [Insert your specific expectations, for example children will be directly supervised by a member of staff if using intern enabled devices.](#)

Information security and access management

- Happy Faces Pre School is responsible for ensuring an appropriate level of security protection procedures are in place, in order to safeguard our systems as well as staff and children. Further information can be found in our acceptable use and E-safety policies.
- Happy Faces Pre School will review the effectiveness of these procedures periodically to keep up with evolving cyber-crime technologies.

Remote/Online learning tools and systems (we may need to introduce this if we start using Family)

Settings may need to remove this section if they do use any remote or online learning tools/systems. Specific guidance for DSLs and managers regarding remote/online learning tools and systems is available at

- DfE: [Safeguarding and remote education during coronavirus \(COVID-19\)](#)
- NSPCC: [Undertaking remote teaching safely](#)
- Kent County Council: [Remote Learning Guidance for SLT](#)
- Happy Faces Pre School will ensure any remote sharing of information, communication and use of online learning tools and/or systems will be in line with privacy and data protection requirements and any local/national guidance.
- All communication with children and parents/carers by staff will take place using setting provided or approved communication channels; for example, setting provided email accounts and phone numbers and/or agreed systems: [list systems used for example, named learning journals/apps etc.](#)
 - Any pre-existing relationships or situations which mean this cannot be complied with will be discussed with the DSL. **Amend as appropriate.**
- All members of our community will engage with remote tools and systems in line with our existing behaviour principles as set out in our [behaviour policy/code of conduct](#) and [Acceptable Use Policies](#). **Amend as appropriate.**

Staff training

- Happy Faces Pre School will ensure that all staff receive online safety training as part of induction and that ongoing online safety training and update for all staff will be integrated, aligned and considered as part of our overarching safeguarding approach.

Educating children

- Happy Faces Pre School will ensure a comprehensive curriculum response is in place to enable children to learn about and manage online risks effectively as part of providing a broad and balanced age-appropriate curriculum.

Working with parents/carers

- Happy Faces Pre School will build a partnership approach to online safety and will support parents/carers to become aware and alert of the potential benefits and risks and to reinforce the importance of children being safe online.
- Happy Faces Pre School will ensure parents/carers understand what systems are used to filter and monitor their children's online use on site, what their children are being asked to do online, including the sites they will be asked to access and who from setting (if anyone) their child is going to be interacting with online.
- Where the setting is made aware of any potentially harmful risks, challenges and/or hoaxes circulating online, national or locally, we will respond in line with the DfE '[Harmful online challenges and online hoaxes](#)' guidance to ensure we adopt a proportional and helpful response. [Think before you scare](#)

Staff Engagement and Expectations

Staff awareness, induction and training

- Happy Faces Pre School will ensure all staff understand our settings safeguarding policy and procedures and have up to date knowledge of safeguarding issues. All members of staff will be

provided with access to this policy and will sign to say they have read **and** understood its contents. All staff are expected to re-read this policy at least annually (and following any updates) to ensure they understand our expectations and requirements.

- All new staff and volunteers (including volunteers, agency and third-party staff) will receive safeguarding and child protection training (including online safety) to ensure they are aware of our internal safeguarding policy and processes as part of their induction. The setting will ensure this training is up-to-date and in line with advice from the Kent safeguarding partners.
- All staff members (including volunteers' agency and third-party staff) will receive regular and appropriate child protection training (including online safety).
 - This training will be in line with the criteria as set out in annex C of the EYFS and will enable staff to identify signs of possible abuse and neglect at the earliest opportunity and respond in a timely and appropriate way in line with the settings safeguarding policy and procedures.
 - Staff training will be renewed at least every two years; however, staff may also be required to undertake and engage with annual training during any two-year period to help maintain basic skills and keep up to date with any changes to safeguarding procedures or as a result of any safeguarding concerns that occur in the setting.
- In addition to specific and regular child protection training, all staff will receive regular safeguarding and child protection updates, at least annually, to maintain their skills and knowledge to safeguard children effectively and in line with our policies and procedures.
- Happy Faces Pre School recognises the expertise staff build by undertaking safeguarding training and from managing safeguarding concerns on a daily basis and staff are encouraged to contribute to and shape our safeguarding arrangements and child protection policies.
- The DSL will maintain an up-to-date record of who has been trained and will provide an annual report to the management committee detailing safeguarding training undertaken.

Supervision and support

- The induction process will include familiarisation with child protection responsibilities and procedures to be followed if members of staff have any concerns about a child's safety or welfare.
- The management committee of Happy Faces Pre School will ensure that members of staff are provided with appropriate supervision in accordance with the statutory requirements as outlined in the safeguarding and welfare requirements of the EYFS.
- Happy Faces Pre School recognises that regular, planned, and accountable supervision is a two-way process, which offers support and develops the knowledge, skills and values of an individual, group, or team.
 - Supervision aims to foster a culture of mutual support, teamwork, and continuous improvement, which encourages confidential discussion of sensitive issues.
 - Effective supervision will enable our setting to monitor the progress of professional practice and to help staff to improve the quality of the work they do, thus improving outcomes for children as well as achieving agreed objectives.
 - Supervision should provide opportunities for staff to discuss any issues they may have, for example, child development and well-being concerns including child protection concerns, or any concerns they have about the setting or a colleague's practice.
- The setting will ensure all members of staff and volunteers receive regular and planned supervision sessions. Uninterrupted time will be set aside to ensure any supervision sessions are effective for both the practitioner and management to ensure that:
 - All staff are competent to carry out their responsibilities for safeguarding and promoting the welfare of children
 - All staff are supported by the DSL in their safeguarding role.

- All members of staff have regular reviews of their own practice to ensure they improve over time.
- Any member of staff affected by issues arising from concerns for children's welfare or safety can seek support from the DSL.
- The DSL will also put staff in touch with outside agencies for professional support if they so wish. Staff can also approach organisations such as Unions, the [Education Support Partnership](#) or other similar organisations directly.

Safer Recruitment and Allegations Against Staff

Safer recruitment and safeguarding checks

- Happy Faces Pre School is committed to developing a safe culture and ensuring that steps are taken to recruit staff and volunteers who are safe to work with children and staff. We recognise that we must ensure that people looking after children in our setting are suitable, have the relevant qualifications, training and have passed any required checks to fulfil their roles, prior to commencing employment.
- The management committee of Happy Faces Pre School are responsible for ensuring that the setting adopts an application, vetting and recruitment process which places safeguarding at its centre, regardless of employee or voluntary role, and in line with the expectations listed in section 3 of the EYFS guidance.
- The management committee of Happy Faces Pre School is responsible for ensuring that the setting follows safe recruitment processes outlined within national and local guidance. At least one member of the interview panel will have completed safer recruitment training.
- To check and confirm the suitability of new recruits, the setting will ensure references in line with section 3 of the EYFS are obtained before employment. We will:
 - Not accept open references e.g. to whom it may concern.
 - Not rely on applicants to obtain their reference.
 - Ensure any references are from the applicant's current employer, training provider or education setting and have been completed by a senior person with appropriate authority.
 - Not accept references from a family member.
 - Obtain verification of the individual's most recent relevant period of employment where the applicant is not currently employed.
 - Secure a reference from the relevant employer from the last time the applicant worked with children. If the applicant has never worked with children, then we will ensure a reference is from their current employer, training provider or education setting.
 - Ensure electronic references originate from a legitimate source.
 - Contact referees to clarify content where information is vague or insufficient information is provided.
 - Compare the information on the application form with that in the reference and take up any discrepancies with the applicant.
 - Establish the reason for the applicant leaving their current or most recent post, and ensure any concerns are resolved satisfactorily before appointment is confirmed.
- The setting will obtain an enhanced check by Disclosure and Barring Service (DBS) in respect of every person aged 16 and over (including unsupervised volunteers, and supervised volunteers who provide personal care) who:
 - works directly with children,
 - lives on the premises on which the childcare is provided 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).

- An additional check by the DBS (or checks if more than one country) will also be made for anyone who has lived or worked abroad.
- The manager of Happy Faces Pre School will ensure appropriate steps are taken to verify qualifications, including in cases where physical evidence cannot be produced.
- The management committee of Happy Faces Pre School is aware of the requirements to make appropriate checks regarding the disqualification status of all staff, including volunteers and temporary staff.
- The manager of Happy Faces Pre School will ensure there is accurate maintenance of staff records which evidence the recruitment and vetting processes. These records will list staff, volunteers and committee members and include appropriate information, such as:
 - Dates of recruitment
 - Dates and details of references
 - Staff qualifications
 - Identity checks
 - Criminal records check reference number, including date a check was obtained and details of who obtained it
 - Eligibility to work in the UK checks
 - Other essential key data.
- We advise all staff to disclose any reason that may affect their suitability to work with children including convictions, cautions, court orders, reprimands and warnings. We will ensure that all staff and volunteers have read our child protection policy and staff behaviour policy/code of conduct and understand that their behaviour and practice must be in line with it.
- When asked for references for previous employees, the setting will ensure these are provided in a timely manner by a senior person with appropriate authority. Any references for previous employees will confirm whether the setting was satisfied with the applicant's suitability to work with children and provide the facts (not opinions) of any substantiated safeguarding concerns or allegations that meet the harm threshold. The setting will not include information about concerns/allegations which are unsubstantiated, unfounded, false, or malicious.

Allegations/concerns raised in relation to staff, including volunteers and contractors

- Happy Faces Pre School recognises that it is possible for any member of staff, including volunteers, contractors, agency and third-party staff (including supply staff) and visitors to be subject to an allegation. In accordance with WTSC, an allegation may relate to a person who works with children who 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 or
 - behaved or may have behaved in a way that indicates they may not be suitable to work with children.
- Any concerns or allegations about staff will be recorded and dealt with appropriately in line with national guidance (Part four of KCSIE) and the [local Kent allegations arrangements](#).
 - In depth information can be found within our 'Managing Allegations against Staff' and/or staff code of conduct policy. This can be found in the hall and on our website.
 - Ensuring concerns are dealt with effectively will protect those working in or on behalf of the setting from potential false allegations or misunderstandings.
- As part of our approach to safeguarding, our setting adopts an open and transparent culture in which all concerns are dealt with promptly and appropriately. All staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in the setting safeguarding regime. The

leadership/management team at Happy Faces Pre School will take all concerns or allegations received seriously.

- Allegations should be referred immediately to the manager who will contact the [Local Authority Designated Officer](#) (LADO) to agree further action to be taken in respect of the child and staff member. In the event of allegations of abuse being made against the manager, staff are advised that allegations should be reported to the next member of senior management who will contact the LADO.
- If practitioners are concerned that appropriate safeguarding action is not being taken following an allegation against a colleague, they are advised to follow our whistleblowing process and/or to contact the LADO directly themselves.
- Where managers are unsure how to respond to an allegation, advice will be sought via the [LADO Education Safeguarding Advisory Service](#) enquiry form.
- If Happy Faces Pre School becomes aware of any relevant information that may lead to an employee being disqualified, we will take appropriate action to ensure the safety of children.
- As a registered provider, we will inform Ofsted of any allegations of serious harm or abuse by anyone living, working, or looking after children at the premises including the disqualification of an employee.
 - 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.
 - We will notify Ofsted of the action taken in response to the allegations.
 - Ofsted will be notified as soon as is reasonably practicable, but in any event within 14 days of the allegations being made.
- All records of concerns will be kept confidential and will be held securely and retained and in compliance with safeguarding requirements, as well as the Data Protection Act 2018 and the UK General Data Protection Regulation (UK GDPR) and other relevant policies and procedures (for example HR/Personnel and data retention policies).
- In all cases where concerns are reported against staff, once proceedings have been concluded, the manager (and if they have been involved the LADO) will consider the facts and determine whether any lessons can be learned and if any improvements can be made.
- The management committee of Happy Faces Pre School will 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.

Physical Safety

Physical interventions

- Happy Faces Pre School recognises that we are responsible for supporting, understanding, and managing children's behaviour in an appropriate way.
- There may however be circumstances when it is appropriate for staff to use a physical intervention in order to safeguard children from harm, for example to avert immediate danger of personal injury to any person (including the child)
 - Staff will not give or threaten corporal punishment or any punishment which could negatively affect a child's well-being.
 - Staff will be made aware of the behaviour management and physical intervention policies, and any physical interventions must be in line with our agreed policy and procedures and national guidance.
 - Happy Faces Pre School keeps a record of any occasion where physical intervention is used. Parents and/or carers will be informed of any physical interventions involving their child on the same day, or as soon as reasonably practicable.

Site security and safety

- The following section should be read in conjunction with the following policies:
 - Arrivals and departures, including collection procedures and uncollected child arrangements
 - Emergency procedures such as evacuations and lockdowns
 - First aid and accidents, including administering medication and managing illness, allergies, health, and infection
 - Health and safety
 - Personal and intimate care, including toilets and intimate hygiene
 - Risk assessments, such as trips/outings, use of technology
 - Safe and healthy eating
 - Sleep and rest policies
 - Ratios and lone working expectations, in line with EYFS
 - Visitors' policy
- In accordance with our health and safety and/or staff: child ratio policies, our staffing arrangements will ensure we are able to meet the needs of all children and ensure their safety.
- All members of staff have a responsibility for maintaining awareness of buildings and grounds security and for reporting concerns that may come to light.
- Happy Faces Pre School will ensure children are only released into the care of individuals of whom the parent has explicitly approved/agreed.
- Happy Faces Pre School will ensure children are not able to leave the premises unsupervised and will ensure children are kept safe whilst on outings.
- All reasonable steps will be taken to prevent unauthorised people entering the premises.
 - Appropriate checks will be undertaken in respect of visitors and volunteers coming into the setting as outlined within national guidance.
 - Visitors will be expected to sign in and out via the office visitors' book.
 - Any individual who is not known or identifiable on site should be challenged for clarification and reassurance
- The setting will not accept the behaviour of any individual (parent or other) that threatens our safety or security or leads others (child or adult) to feel unsafe. Such behaviour will be treated as a serious concern and may result in a decision to refuse access for that individual to the site.
- In accordance with our health and safety policies, at least one person who has a current paediatric first aid (PFA) certificate will always be on the premises and available when children are present and will always accompany children on outings.
 - The setting will ensure the PFA training accessed by staff is provided by a competent training provider.
 - 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 our setting is satisfied that they are competent and responsible and if they hold a valid and current PFA qualification.
- Happy Faces Pre School will ensure that children's privacy is considered and balanced with safeguarding and support needs when changing nappies and toileting.

Adult Safeguarding Local Support

- All members of staff at Happy Faces Pre School are made aware of local support available.
- **Kent Integrated Children's Services; Children's Social Work Services and Early Help Intensive Support**
 - [Kent Integrated Children's Services Portal](#) – select 'urgent' if there is an immediate risk/concern
 - Front Door Service No Name Consultation: 03000 411111
 - Out of Hours Number: 03000 419191
 - Kent Support level guidance: www.kscmp.org.uk/guidance/kent-support-levels-guidance
- **Local Early Help and Preventative Services and Family Hubs**
 - Early Help & Preventative Services [Sevenoaks North, Tonbridge and Malling](#) - 03000 42 15 76
 - Tonbridge Family Hub - 03000 418008
- **Kent Police**
 - 101 or 999 if there is an immediate risk of harm
 - Jack Bridger, Police Constable, Community Safety Unit (Kent Police website)
- **Kent Safeguarding Children Multi-Agency Partnership (KSCMP)**
 - www.kscmp.org.uk
 - 03000 421126 or kscmp@kent.gov.uk
- - Adult Social Care via 03000 41 61 61 (text relay 18001 03000 41 61 61) or email social.services@kent.gov.uk
- **Kent LADO Education Safeguarding Advisory Service (LESAS)**
 - [Local Authority Designated Officer \(LADO\) - Kent Safeguarding Children Multi-Agency Partnership](#)
 - To refer to the LADO following an allegation being made against a member of staff, complete a referral on the [Kent Integrated Children's Services Portal](#).
 - To enquire if a LADO referral should be made, to request strategic education safeguarding or online safety advice, or request other LESAS commissioned services/support, please use the [LESAS enquiry form](#).

Appendix 1: Categories of Abuse

All staff should be aware that abuse, neglect, and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases multiple issues will overlap with one another.

Abuse: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. They may be abused by an adult or adults or another child or children. It should be noted that abuse can be carried out both on and offline and be perpetrated by men, women, and children.

Sexual abuse: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include 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 (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Signs that MAY INDICATE Sexual Abuse

- Sudden changes in behaviour and performance
- Displays of affection which are sexual and age inappropriate
- Self-harm, self-mutilation or attempts at suicide
- Alluding to secrets which they cannot reveal
- Tendency to cling or need constant reassurance
- Regression to younger behaviour for example thumb sucking, playing with discarded toys, acting like a baby
- Distrust of familiar adults, for example, anxiety of being left with relatives, a childminder or lodger
- Unexplained gifts or money
- Depression and withdrawal
- Fear of undressing for PE
- Sexually transmitted disease
- Fire setting

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.

Signs that MAY INDICATE physical abuse

- Bruises and abrasions around the face
- Damage or injury around the mouth
- Bi-lateral injuries such as two bruised eyes
- Bruising to soft area of the face such as the cheeks
- Fingertip bruising to the front or back of torso
- Bite marks
- Burns or scalds (unusual patterns and spread of injuries)
- Deep contact burns such as cigarette burns
- Injuries suggesting beatings (strap marks, welts)
- Covering arms and legs even when hot
- Aggressive behaviour or severe temper outbursts.
- Injuries need to be accounted for. Inadequate, inconsistent, or excessively plausible explanations or a delay in seeking treatment should signal concern.

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 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 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.

Signs that MAY INDICATE emotional abuse

- Over reaction to mistakes
- Lack of self-confidence/esteem
- Sudden speech disorders
- Self-harming
- Eating Disorders
- Extremes of passivity and/or aggression
- Compulsive stealing
- Drug, alcohol, solvent abuse
- Fear of parents being contacted
- Unwillingness or inability to play
- Excessive need for approval, attention, and affection

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 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 care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Signs that MAY INDICATE neglect.

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Inadequate clothing
- Frequent lateness or non-attendance
- Untreated medical problems
- Poor relationship with peers
- Compulsive stealing and scavenging
- Rocking, hair twisting and thumb sucking
- Running away
- Loss of weight or being constantly underweight
- Low self esteem

Appendix 2: Support Organisations

KSCMP

- Factsheets: www.kscmp.org.uk/training/factsheets
- Supporting resources: www.kscmp.org.uk/training/training-resources
- Video explainers: www.kscmp.org.uk/training/video-explainers

NSPCC 'Report Abuse in Education' Helpline

- [0800 136 663](tel:0800136663) or help@nspcc.org.uk

National Organisations

- NSPCC: www.nspcc.org.uk
- Barnardo's: www.barnardos.org.uk
- Action for Children: www.actionforchildren.org.uk
- Children's Society: www.childrenssociety.org.uk
- Centre of Expertise on Child Sexual Abuse: www.csacentre.org.uk

Support for Staff

- Education Support Partnership: www.educationsupportpartnership.org.uk
- Professional Online Safety Helpline: www.saferinternet.org.uk/helpline
- NSPCC Whistleblowing helpline: www.nspcc.org.uk/keeping-children-safe/reporting-abuse/dedicated-helplines/whistleblowing-advice-line/

Support for Children

- ChildLine: www.childline.org.uk
- Papyrus: www.papyrus-uk.org
- The Mix: www.themix.org.uk
- Shout: www.giveusashout.org
- Fearless: www.fearless.org
- Victim Support: www.victimsupport.org.uk
- Lucy Faithfull Foundation 'Shore Space': <https://shorespace.org.uk/>

Support for Adults

- Family Lives: www.familylives.org.uk
- Crime Stoppers: www.crimestoppers-uk.org
- Victim Support: www.victimsupport.org.uk
- The Samaritans: www.samaritans.org
- NAPAC (National Association for People Abused in Childhood): www.napac.org.uk
- MOSAC: www.mosac.org.uk
- Action Fraud: www.actionfraud.police.uk
- Shout: www.giveusashout.org
- Advice now: www.advicenow.org.uk

Support for Early Years Parents/Carers

- Kent County Council Family Hubs: www.kent.gov.uk/education-and-children/kent-family-hub
- Health visiting: www.kent.gov.uk/education-and-children/kent-family-hub/pregnancy-and-the-first-two-years/toddler/health-visiting
- Kent Children and Families Information Service (CFIS): www.kent.gov.uk/education-and-children/childcare-and-pre-school/our-childcare-advice-line
- ICON: <https://iconcope.org/>

Support for Special Education Needs and Disabilities

- Respond: www.respond.org.uk
- Mencap: www.mencap.org.uk
- Council for Disabled Children: <https://councilfordisabledchildren.org.uk>
- Kent Autistic Trust: www.kentautistictrust.org/
- AFASIC: www.afasic.org.uk/
- National Autistic Society: www.autism.org.uk/
- Kent County Council: www.kent.gov.uk/education-and-children/special-educational-needs-and-disabilities/support-for-parents-with-send-children
- Portage: www.kent.gov.uk/education-and-children/special-educational-needs-and-disabilities/support-for-children-under-5/portage-supporting-pre-school-children-with-send
- Information Advice and Support Kent (IASK): www.iask.org.uk/

Contextual Safeguarding Network

- <https://contextualsafeguarding.org.uk/>

Kent Resilience Hub

- <https://kentresiliencehub.org.uk/>

Children with Family Members in Prison

- National information Centre on Children of Offenders (NICCO): <https://www.nicco.org.uk/>

Substance Misuse

- We are with you: www.wearewithyou.org.uk/services/kent-for-young-people/
- Talk to Frank: www.talktofrank.com

Domestic Abuse

- KSCMP: www.kscmp.org.uk/guidance/domestic-abuse
- Domestic abuse services: www.domesticabuseservices.org.uk
- Refuge: www.refuge.org.uk
- Women's Aid: www.womensaid.org.uk
- Men's Advice Line: www.mensadviceline.org.uk
- Mankind: www.mankindcounselling.org.uk
- National Domestic Abuse Helpline: www.nationaldahelpline.org.uk
- Respect Phoneline: <https://respectphoneline.org.uk>

Criminal and Sexual Exploitation

- KSCMP: www.kscmp.org.uk/guidance/exploitation
- Kent & Medway Violence Reduction Unit: <https://kentandmedwayvru.co.uk/>
- National Crime Agency: www.nationalcrimeagency.gov.uk/who-we-are
- It's not okay: www.itsnotokay.co.uk
- NWG Network: www.nwgnetwork.org
- County Lines Toolkit for Professionals: www.childrenssociety.org.uk/information/professionals/resources/county-lines-toolkit
- The Children's Society: www.childrenssociety.org.uk/what-we-do/our-work/preventing-child-sexual-exploitation

So-called Honour Based Abuse

- Karma Nirvana: <https://karmanirvana.org.uk>
- Forced Marriage Unit: www.gov.uk/guidance/forced-marriage
- FGM Factsheet: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/496415/6_1639_HO_SP_FGM_mandatory_reporting_Fact_sheet_Web.pdf
- Mandatory reporting of female genital mutilation: procedural information: www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information
- The right to choose - government guidance on forced marriage: www.gov.uk/government/publications/the-right-to-choose-government-guidance-on-forced-marriage

Radicalisation and hate

- Kent Prevent Education Officers: www.kelsi.org.uk/child-protection-and-safeguarding/The-Prevent-Duty-In-Education
- Educate against Hate: www.educateagainsthate.com
- Counter Terrorism Internet Referral Unit: www.gov.uk/report-terrorism
- True Vision: www.report-it.org.uk

Child-on-Child abuse, including bullying, sexual violence and harassment

- Rape Crisis: <https://rapecrisis.org.uk>
- Brook: www.brook.org.uk
- Upskirting – know your rights: www.gov.uk/government/news/upskirting-know-your-rights
- Lucy Faithfull Foundation: www.lucyfaithfull.org.uk
- Stop it Now! www.stopitnow.org.uk
- Parents Protect: www.parentsprotect.co.uk
- Anti-Bullying Alliance: www.anti-bullyingalliance.org.uk
- Diana Award: www.antibullyingpro.com/
- Kidscape: www.kidscape.org.uk

- Centre of expertise on Child Sexual Abuse: www.csacentre.org.uk
- Lucy Faithfull Foundation 'Shore Space': <https://shorespace.org.uk/>

Online Safety

- NCA-CEOP: www.ceop.police.uk and www.ceopeducation.co.uk
- Internet Watch Foundation (IWF): www.iwf.org.uk
- Childnet: www.childnet.com
- UK Safer Internet Centre: www.saferinternet.org.uk
- Report Harmful Content: <https://reportharmfulcontent.com>
- Marie Collins Foundation: www.mariecollinsfoundation.org.uk
- Internet Matters: www.internetmatters.org
- NSPCC: www.nspcc.org.uk/online-safety
- Get Safe Online: www.getsafeonline.org
- Parents Protect: www.parentsprotect.co.uk
- Cyber Choices: <https://nationalcrimeagency.gov.uk/what-we-do/crime-threats/cyber-crime/cyberchoices>
- National Cyber Security Centre (NCSC): www.ncsc.gov.uk
- KSCMP: www.kscmp.org.uk/guidance/online-safety

Mental Health

- KSCMP: www.kscmp.org.uk/guidance/children-and-young-peoples-mental-health
- Kent & Medway Children & Young People's Mental Health Services (CYPMHS): www.nelft.nhs.uk/services-kent-children-young-peoples-mental-health/
- Mind: www.mind.org.uk
- Moodspark: <https://moodspark.org.uk>
- Young Minds: www.youngminds.org.uk
- We are with you: www.wearewithyou.org.uk/services/kent-for-young-people/
- Anna Freud: www.annafreud.org/schools-and-colleges/
- MindEd: <https://mindedforfamilies.org.uk/>

Child welfare and protection summary

This form is placed at the front of a child’s child protection file and is completed by the designated safeguarding lead after a concern has been raised about the child’s welfare or if significant harm (actual or likely) is suspected. It is a summary only of the concerns already fully recorded.

Child’s name:	Date of Birth:	Address:	Name of setting:
Date of record:	Summary of Concern and Impact on Child:		Agreed Actions:
Adult reporting:			
Designated safeguarding lead:			
Date of record:	Summary of Concern and Impact on Child:		Agreed Actions:
Adult reporting:			

Designated safeguarding lead:		
Date of record:	Summary of Concern and Impact on Child:	Agreed Actions:
Adult reporting:		
Designated safeguarding lead:		

Safeguarding incident reporting form (for concerns, child welfare, physical intervention, witness statement, fact-finding)

Name of setting:

Child's name:

Name of person reporting:

**Name of designated
safeguarding lead:**

Date of birth:

Job title:

Job title:

Date of concern – when observation, event, disclosure was made

Nature of Concern. In the space below describe what was observed, using a body diagram, if necessary.

Impact: what are your main concerns about how this might impact on the child physically or emotionally, please include the child's voice (as appropriate)?

Response to allegation/complaint: Please advise in your words, what happened, when and where, what did you see or hear and where you were in relation to the alleged incident.

Signature of person completing the form

Hand this form to your setting's designated safeguarding lead; discuss your concerns and agree what action is to be taken and when it will be reviewed.

Outcome decisions/actions to be taken (Tick all that apply)

No further action

Offer support (provide details)

Continue to monitor (detail what, who by and until when)

Referral/signposting/advice/guidance to be offered by setting (provide details)

Refer to social care for child protection.

Liaise with social care to refer to CAF (Common Assessment Framework)/EHA (Early Help Assessment)

Signature of designated
safeguarding lead:

Date completed:

Physical intervention

If this form is used to record an incident of physical intervention being used on a child to prevent them from harming themselves or others, please ask the parent to sign here to confirm that they have been informed of the circumstances of the event as recorded here.

Signature of parent:

Date:

Confidential safeguarding incident report form

New case or Update (cross out to show correct option)

Section A Completed on the day of the incident by the designated safeguarding lead and handed/emailed immediately with “New Case” email heading, as an encrypted document to designated officer/line manager. As additional information becomes available this form is updated and re-sent. Updates with “Update” in email heading, continue until the case/incident is resolved. It is important that additional fact-finding reports are included with this form. It is the designated person’s responsibility to carry out a thorough fact finding of the incident in line with our safeguarding procedure. It is the designated officer/line manager’s responsibility to complete additional detail as indicated.

Date & time of report:

Name of setting and Ofsted EY Number:

Manager’s name:

Date and time of incident:

Child’s full name, age, gender and date of birth:

Safeguarding Incident; does this relate to: (put a cross against most relevant)

- a) referral to social care (early help, child protection, or other concern such as radicalisation)
- b) it has become known that a family is involved with social care currently (i.e. child is subject to Child Protection plan, child in need plan or other form of early help assessment)
- c) a safeguarding incident in the nursery, e.g. child left unsupervised, or allegations against a member of staff.
- d) other

Give a full and detailed description of the incident and background information

Is there a CPP or any other involvement with children's social care?

Yes/No

Date and time LADO informed, and advice/instructions given by LADO with date provided:

Date and time trustees consulted, prior to informing Ofsted:

Date and time Social Care team informed:

Date and time Ofsted informed:

Date and time parents/carers informed:

Provide details on other persons/agencies informed of the incident (including the designated safeguarding lead on the day of the incident, and note method of communication i.e. telephone, e-mail)

Planned next steps/actions

Any implications for communications i.e. press enquiries or parents/carers enquiries, complaints etc (if known)

Issues for registration, insurance and any other potential legal issues (if known)

Trustees considers HR implications (e.g. disciplinary or grievance actions (if known))

Update (brief details and date)

Update (brief details and date)

Update (brief details and date)

Report completed by:

Section B – to be completed by the designated officer/line manager when the necessary information is available.

Follow up action (if required), *e.g. risk assessments, staff training*

Report of Investigation (*Full and detailed report of the circumstances and outcome of the investigation. If a disciplinary hearing is held record date and outcome*)

Outcome of Risk Assessment:

List areas at risk and how the risk has been mitigated. Has the risk assessment changed the practise of the staff or setting?

What has been learnt from the incident? (*What should have been done/could have done, are procedural changes needed?*)

Section C to be completed by the designated officer and trustees.

Follow up actions:

Learning to be cascaded across the organisation. How will this be done, by who and when?

Date to be reviewed:

Date case closed:

To be completed by manager where necessary

Please record any follow-up action taken, where relevant:

Manager signature:

Date:

Safeguarding children, young people and vulnerable adults procedures

Happy Faces Pre School

Concerns and allegations of serious harm or abuse against staff, volunteers or agency staff

Concerns may come from a parent/carer, child, colleague or the public. Allegations or concerns must be referred to the designated safeguarding lead without delay - even if the person making the allegation later withdraws it.

What is a low-level concern?

The NSPCC defines a low-level concern as 'any concern that an adult has acted in a way that:

- is inconsistent with the staff code of conduct, including inappropriate conduct outside of work
- doesn't meet the threshold of harm or is not considered serious enough...to refer to the local authority.

Low-level concerns are part of a spectrum of behaviour. This includes:

- inadvertent or thoughtless behaviour
- behaviour that might be considered inappropriate depending on the circumstances
- behaviour which is intended to enable abuse

Examples of such behaviour could include:

- being over friendly with children
- having favourites
- adults taking photographs of children on their mobile phone
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door
- using inappropriate sexualised, intimidating or offensive language'

(NSPCC [Responding to low-level concerns about adults working in education](#))

Responding to low-level concerns

Any concerns about the conduct of staff, students or volunteers must be shared with the designated safeguarding lead and recorded. The designated safeguarding lead should be informed of all concerns, including those that may be considered "low level" and make the final decision on how to respond. Where appropriate this can be done in consultation with their line manager.

Reporting concerns about the conduct of a colleague, student or volunteer contributes towards a safeguarding culture of openness and trust. It helps ensure that adults consistently model the setting's values and helps keep children safe. It protects adults from potential false allegations or misunderstandings.

If it is not clear that a concern meets the local authority threshold, the designated safeguarding lead should contact the LADO for clarification.

In most instances, low-level concerns about staff conduct can be addressed through supervision, training, or disciplinary processes where an internal investigation may take place.

Identifying concerns about serious harm, or abuse

An allegation against a member of staff, volunteer or agency staff constitutes serious harm or abuse if they:

- behaved in a way that has harmed, or may have harmed a child
- possibly committed a criminal offence against, or related to, a child
- behaved towards a child in a way that indicates they 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

Informing

- All staff report allegations to the designated safeguarding lead.
- The designated safeguarding lead alerts the designated officer. If the designated officer is unavailable the designated safeguarding lead contacts their equivalent until they get a response - which should be within 3-4 hours of the event. Together they should form a view about what immediate actions are taken to ensure the safety of the children and staff in the setting, and what is acceptable in terms of fact-finding.
- It is essential that no investigation occurs until and unless the LADO has expressly given consent for this to occur, however, the person responding to the allegation does need to understand what explicitly is being alleged.
- The designated safeguarding lead must take steps to ensure the immediate safety of children, parents, and staff on that day within the setting.
- The Local Authority Designated Officer (LADO) is contacted as soon as possible and within one working day. If the LADO is on leave or cannot be contacted the LADO team manager is contacted and/or advice sought from the point of entry safeguarding team/mash/point of contact, according to local arrangements.
- A child protection referral is made if required. The LADO, line managers and local safeguarding children's services can advise on whether a child protection referral is required.
- The designated safeguarding lead asks for clarification from the LADO on the following areas:
 - what actions the designated safeguarding lead must take next and when and how the parents/carers of the child are informed of the allegation
 - whether or not the LADO thinks a criminal offence may have occurred and whether the police should be informed and if so who will inform them
 - whether the LADO is happy for the setting to pursue an internal investigation without input from the LADO, or how the LADO wants to proceed

- whether the LADO thinks the person concerned should be suspended, and whether they have any other suggestions about the actions the designated person has taken to ensure the safety of the children and staff attending the setting
- The designated safeguarding lead records details of discussions and liaison with the LADO including dates, type of contact, advice given, actions agreed and updates on the child's case file.
- Parents/carers are not normally informed until discussion with the LADO has taken place, however in some circumstances the designated safeguarding lead may need to advise parents/carers of an incident involving their child straight away, for example if the child has been injured and requires medical treatment.
- Staff do not investigate the matter unless the LADO has specifically advised them to investigate internally. Guidance should also be sought from the LADO regarding whether suspension should be considered. The person dealing with the allegation must take steps to ensure that the immediate safety of children, parents/carers and staff is assured. It may be that in the short-term measures other than suspension, such as requiring a staff member to be office based for a day, or ensuring they do not work unsupervised, can be employed until contact is made with the LADO and advice given.
- The designated safeguarding lead ensures staff fill in a "Safeguarding incident reporting" form.
- If after discussion with the designated safeguarding lead, the LADO decides that the allegation is not obviously false, and there is cause to suspect that the child/ren is suffering or likely to suffer significant harm, then the LADO will normally refer the allegation to children's social care.
- Notification to Ofsted is required for any allegations made against a member of staff, therefore the designated safeguarding lead will inform Ofsted as soon as possible, but no later than 14 days after the event has occurred. The designated safeguarding lead will liaise with the designated officer/line manager about notifying Ofsted.
- Ofsted must be updated of the actions taken by the setting, even if the LADO decides the allegation does not meet their threshold for investigation. The designated safeguarding lead ensures that the "Confidential safeguarding incident" report form is completed and sent to the designated officer/line manager. If the designated officer is unavailable their equivalent must be contacted.
- Avenues such as performance management or coaching and supervision of staff will also be used instead of disciplinary procedures where these are appropriate and proportionate. If an allegation is ultimately upheld the LADO may also offer a view about what would be a proportionate response in relation to the accused person.
- The designated safeguarding lead must consider revising or writing a new risk assessment where appropriate, for example if the incident related to an instance where a member of staff has physically intervened to ensure a child's safety, or if an incident relates to a difficulty with the environment such as where parents and staff are coming and going and doors are left open.
- All allegations are investigated even if the person involved resigns or ceases to be a volunteer.

Allegations against agency staff

Any allegations against agency staff must be responded to as detailed in this procedure. In addition, the designated safeguarding lead must contact the agency following advice from the LADO

Allegations against the designated safeguarding lead

- If a member of staff has concerns that the designated safeguarding lead has behaved in a way that indicates they are not suitable to work with children as listed above, this is reported to the designated officer following the setting's whistleblowing process, who will investigate further.
- During the investigation, the designated officer/line manager will identify another suitably experienced person to take on the role of designated safeguarding lead.
- If an allegation is made against the designated officer/line manager, then the trustees are informed.

Recording

- A record is made of an allegation/concern, along with supporting information using the setting's safeguarding management software or it is entered on the file of the child, (if the allegation involves a specific child or children, and the "Child welfare and protection summary" is completed and placed in the front of the child's file.
- If the allegation refers to more than one child, this is recorded in each child's file
- If relevant, a child protection referral is made, with details held on the child's file.

Disclosure and Barring Service

- If a member of staff is dismissed because of a proven or strong likelihood of child abuse, inappropriate behaviour towards a child, or other behaviour that may indicate they are unsuitable to work with children such as drug or alcohol abuse, or other concerns raised during supervision when the staff suitability checks are done, a referral to the Disclosure and Barring Service is made.

Escalating and whistleblowing concerns

- If a member of staff at Happy Faces Pre School believes at any time that children may be in danger due to the actions or otherwise of a member of staff or volunteer, they must discuss their concerns immediately with the designated safeguarding lead.
- If after discussions with the designated safeguarding lead, they still believe that appropriate action to protect children has not been taken they must speak to the designated officer/line manager.
- If there are still concerns then the whistle blowing procedure must be followed, as set out in "Responding to safeguarding or child protection concerns".

Safeguarding children, young people and vulnerable adults procedures

Visitor or intruder on the premises

The safety and security of the premises at Happy faces Pre School is maintained at all time and staff are vigilant in areas that pose a risk, such as shared premises. A risk assessment is completed to ensure that unauthorised visitors cannot gain access.

Visitors with legitimate business - generally a visitor will have made a prior appointment

- On arrival, any visitor to Happy Faces Pre School are asked to verify their identity and confirm who they are visiting.
- Staff will ask them to sign in and explain the procedures for the use of mobile phones and emergency evacuation.
- Visitors (including visiting VIPs) are never left alone with the children at any time.
- Visitors to the setting are monitored and asked to leave immediately should their behaviour give cause for concern.

Intruder

An intruder is an individual who has not followed visitor procedures and has no legitimate business to be in the setting; he or she may or may not be a hazard to the setting.

- An individual who appears to have no business at Happy Faces Pre School will be asked for their name and purpose for being there.
- The staff member identifies any risk posed by the intruder.
- The staff member ensures the individual follows the procedure for visitors.
- The setting manager is immediately informed of the incident and takes necessary action to safeguard children.
- If there are concerns for the safety of children, staff evacuate them to a safe place in the building and contact police. In some circumstance this could lead to 'lock-down' of the setting and will be managed by the responding emergency service (see procedure "Emergency evacuation and lock-down").
- The designated safeguarding lead informs their designated officer of the situation at the first opportunity.
- In the case of a serious breach where there was a perceived or actual threat to the safety of the children at Happy Faces Pre School, the manager/designated person completes "Confidential safeguarding incident report form" and copies in their line manager on the day of the incident. The trustees ensure a robust organisational response and ensure that learning is shared.

Further guidance

Visitors Signing in Record (Alliance Publication)

Safeguarding children, young people and vulnerable adults procedures

Uncollected child

If a child is not collected by closing time at Happy Faces Pre School, or the end of the session and there has been no contact from the parent/carer, or there are concerns about the child's welfare then this procedure is followed.

- The designated safeguarding lead is informed of the uncollected child as soon as possible and attempts to contact the parents/carers by phone.
- If the parents/carers cannot be contacted, the designated safeguarding lead uses the emergency contacts to inform a known carer of the situation and arrange collection of the child. Happy Faces Pre School will endeavour to get more than two emergency contacts where possible.
- After one hour, the designated safeguarding lead contacts the local social care out-of-hours duty officer if the parents/carers or other known carer cannot be contacted and there are concerns about the child's welfare or the welfare of the parents/carers.
- The designated safeguarding lead should arrange for the collection of the child by social care.
- Where appropriate the designated safeguarding lead should also notify police.

Members of staff at Happy Faces Pre School 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
- a record of conversations with parents/carers should be made and recorded on the child's file with parents/carers being asked to sign and date the recording.
- This is logged on the child's personal file along with the actions taken. "Confidential safeguarding incident report form" should also be completed if there are safeguarding and welfare concerns about the child, or if Social Care have been involved due to the late collection.
- If there are recurring incidents of late collection, a meeting is arranged with the parents/carers to agree a plan to improve time-keeping and identify any further support that may be required.

Safeguarding children, young people and vulnerable adults procedures

Missing child

In the building Happy Faces Pre School

- As soon as it is noticed that a child is missing, the member of staff informs the designated safeguarding lead who initiates a search within the setting.
- If the child is found on-site, the designated safeguarding lead checks on the welfare of the child and investigates the circumstances of the incident.
- If the child is not found on site, one member of staff searches the immediate vicinity, if there is no sign of the child, the police are called immediately. The parents/carers are then called and informed.
- The designated safeguarding lead contacts their designated officer/line manager.

Off-site Happy Faces Pre School (outing or walk)

- As soon as it is noticed that a child is missing, the senior staff present carries out a headcount.
- One member of staff searches the immediate vicinity.
- If the child is not found, the senior staff calls the police and then contacts the designated safeguarding lead (if not already on the outing).
- The designated safeguarding lead informs the parents/carers.
- Members of staff return the children to the setting as soon as possible if it is safe to do so. According to the advice of the police, one senior member of staff should remain at the site where the child went missing and wait for the police to arrive.
- The designated safeguarding lead contacts the designated officer/line manager.

Recording and reporting

- A record is made on “Child welfare and protection summary” and “Safeguarding incident reporting form”. The manager as designated safeguarding lead completes and circulates “Confidential safeguarding incident report form” to the designated officer/line manager on the same day that the incident occurred.

The investigation

- Ofsted are informed as soon as possible (and at least within 14 days).
- The designated officer/line manager carries out a full investigation.
- The designated safeguarding lead and the designated officer/line manager speak with the parents/carers together and explain the process of the investigation.
- Staff present during the incident write a full report using “Safeguarding incident reporting form”, or the setting management software system. The reporting form (if used) is filed in the child’s file. Staff do not discuss any missing child incident with the press.

Safeguarding children, young people and vulnerable adults procedures

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 at Happy Faces Pre School 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 "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 officer/line manager/trustees 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 Happy Faces Pre School while incapacitated the police are called immediately and a referral is made to social care.

Recording

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

Safeguarding children, young people and vulnerable adults procedures

Death of a child on-site

Identifying

- If it is suspected that a child has died in Happy Faces Pre School, 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 “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/line manager and the information given should be the same to each parent.
- 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 trustees will coordinate support for staff and children to ensure their mental health and well-being.

Further guidance

Supporting Children's Experiences of Loss and Separation (Alliance Publication)

Safeguarding children, young people and vulnerable adults procedures

Looked after children

Identification.

A 'Looked after Child' is a child in public care, who is placed with foster carers, in a residential home or with parents/carers or other relatives.

Services provided to Looked After Children

Two-year-olds

- Places will be offered to two-year-old children who are looked after; where the placement in the setting will normally last a minimum of three months.
- Where the child is already in attendance and has a secure attachment with an existing key person a continuation of the existing place will be offered.

Three- and four-year-olds

- Places will be offered for funded children who are looked after; where the placement in the setting will normally last a minimum of six weeks.
- If a child who attends a setting is taken into care and is cared for by a local carer the place will continue to be made available to the child.

Additional Support

- The designated safeguarding lead and key person at Happy Faces Pre School liaise with agencies and professionals involved with the child, and their family, and ensure appropriate information is gained and shared.
- A meeting of professionals involved with the child is convened by the setting at the start of a placement. A Personal Education Plan (PEP) for children over 3 years old is put in place within 10 days of the child becoming looked after.
- Following this meeting, "Care plan for looked after children form" is completed. The care plan is reviewed after two weeks, six weeks, three months, and thereafter at three to six monthly intervals.
- Happy Faces Pre School will have regular contact with the social worker and this will be maintained through planned meetings, which will include contribution to the PEP which is reviewed annually.

Care plan for looked after children

This form must be used alongside the individual child's registration form which contains further details.

Name of child		Date of birth:	
Child's address			
Contact information for main carers			
1. Name			
Relationship to child			
Phone numbers			
2. Name			
Relationship to child			
Phone numbers			
Any additional healthcare needs (give details and complete "Health care plan form", if required)			
Social Care/Social Worker			
Name			
Phone no.			
GP/Doctor			
Name			
Phone No.			
Details of professionals meeting convened at start of placement (include date of meeting, names of agencies/professionals attending and any special considerations for the child)			

Risk assessment required?	Yes or No
If yes, include details here, including date completed:	
Daily care requirements e.g. before meals/going outdoors	
Describe what constitutes an emergency for the child and what actions are to be taken if this occurs	
Name(s) of staff responsible for an emergency situation with this child	

The child's carer and key person must sign below to indicate that the information in this plan is accurate and the carer agrees for any relevant procedures to be followed.

Carer's name		Signature		Date	
Key person's name		Signature		Date	
Setting manager's name		Signature		Date	

Review completed (at 2 weeks, 6 weeks, 3 months onwards)

Carer's name		Signature		Date	
Key person's name		Signature		Date	
Setting manager's name		Signature		Date	

Copies circulated to:

Carers

Other agencies/professionals

Child's personal records (with registration form)

Safeguarding children, young people and vulnerable adults procedures

E-safety (including all electronic devices with imaging and sharing capabilities)

An E-safety audit is included in these procedures to assist with compliance to the revised EYFS 2025.

Online Safety

It is important that children and young people attending Happy Faces Pre School 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

I.C.T Equipment

- The manager at Happy Faces Pre School ensures that all computers have up-to-date virus protection installed.
- Tablets are only used by practitioners at Happy Faces Pre School for the purposes of observation, assessment, and planning and to take photographs for individual children's learning journeys.
- Tablets remain on the premises and are always stored securely when not in use.
- Staff follow the additional guidance provided with the system.

Internet access

- Children never have unsupervised access to the internet.
- The setting manager ensures that risk assessments in relation to e-safety are completed.
- Only reputable sites with a focus on early learning are used (e.g. CBeebies).
- Video sharing sites such as YouTube are not accessed due to the risk of inappropriate content.
- Children are taught the following stay safe principles in an age-appropriate way:
 - only go online with a grown up
 - be kind online **and** keep information about me safely
 - only press buttons on the internet to things I understand
 - tell a grown up if something makes me unhappy on the internet

- Staff at Happy Faces Pre School support children's resilience in relation to issues they may face online, and address issues such as staying safe, appropriate friendships, asking for help if unsure, not keeping secrets as part of social and emotional development in age-appropriate ways.
- 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.

The setting manager ensures staff have access to age-appropriate resources to enable them to assist children to use the internet safely.

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. (source: <https://www.gov.uk/government/publications/safeguarding-children-and-protecting-professionals-in-early-years-settings-online-safety-considerations/safeguarding-children-and-protecting-professionals-in-early-years-settings-online-safety-guidance-for-practitioners>)

Personal mobile phones – staff and visitors (includes internet enabled devices)

- Personal mobile phones and internet enabled devices are not used by staff at Happy Faces Pre School during working hours. This does not include breaks where personal mobiles may be used off the premises or in a safe place e.g. staff room. The setting manager completes a risk assessment for where they can be used safely.
- Personal mobile phones are stored in the office in a personal drawer.
- In an emergency, personal mobile phones may be used in the privacy of the office/staff room with permission.
- Staff ensure that contact details of the setting are known to family and people who may need to contact them in an emergency.
- Members of staff do not use personal equipment to take photographs of 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.

Cameras and videos

- Members of staff do not bring their own cameras or video recorders to the setting.
- Photographs/recordings of children are only taken for valid reasons, e.g. to record learning and development, or for displays, and are only taken on equipment belonging to the setting. Children are given the opportunity to consent to their photograph being taken, even if parent/carer permissions are in place.
- Camera and video use is monitored by the setting manager.
- Where parents/carers request permission to photograph or record their own children at special events, general permission is first gained from all parents/carers for their children to be included. Parents are told they do not have a right to photograph or upload photos of anyone else's children.
- Photographs/recordings of children are only made if relevant permissions are in place.
- If photographs are used for publicity, parental consent is gained and safeguarding risks minimised, e.g. children may be identified if photographed in a sweatshirt with the name of their setting on it.

Cyber Bullying

If staff become aware that a child is the victim of cyber-bullying at home or elsewhere, they discuss this with the parents and refer them to help, such as: NSPCC Tel: 0808 800 5000 www.nspcc.org.uk or ChildLine Tel: 0800 1111 www.childline.org.uk

Use of social media

Staff are expected to:

- understand how to manage their security settings to ensure that their information is only available to people they choose to share information with
- ensure Happy Faces Pre School is not negatively affected by their actions and do not name the setting
- are aware that comments or photographs online may be accessible to anyone and should use their judgement before posting
- are aware that images, such as those on Snapchat may still be accessed by others and a permanent record of them made, for example, by taking a screen shot of the image with a mobile phone
- observe confidentiality and refrain from discussing any issues relating to work
- not share information they would not want children, parents or colleagues to view
- set privacy settings to personal social networking and restrict those who are able to access
- not accept service users/children/parents as friends, as it is a breach of professional conduct
- report any concerns or breaches to the designated safeguarding lead in their setting
- not engage in personal communication, including on social networking sites, with children and parents with whom they act in a professional capacity. There may be occasions when the practitioner and family

are friendly prior to the child coming to the setting. In this case information is shared with the manager and a risk assessment and agreement in relation to boundaries are agreed

Use/distribution of inappropriate images

- Staff are aware that it is an offence to distribute indecent images and that it is an offence to groom children online. In the event of a concern that a colleague at Happy Faces Pre School is behaving inappropriately, staff advise the designated safeguarding lead who follows procedure “Allegations against staff, volunteers or agency staff”.

Internet Safety Audit Happy Faces Pre School.....

Technology used in our setting (Add the types and numbers of devices)	ICT Equipment Computers (office) iPad (staff/children) Cameras/videos Electronic learning journals Nursery Management Software Other.	Quantity	Wi-fi enabled Yes or No?	Security settings i.e. passwords, firewalls, screen locks etc..	Who has access?
Policies and Procedures - name of policy, or policy in which it is incorporated.	Subject <ul style="list-style-type: none"> Acceptable use: Yes/No Staff use of social media Yes/No GDPR/Data Protection Yes/No Personal mobile phones / wearable technology 		Policy/Procedure	Further action required	
Approved Apps/websites/online tools.	<i>List the apps/websites/online tools that you use in your setting with the children</i> i.e YouTube Kids, CBeebies, Hungry Little Minds.				
How are children supervised when using devices?	Please give details here...				
How is the physical safety of users managed , i.e. posture, time spent on devices	Please give details, including, posture, time spent on devices etc.				
How are devices stored securely when not in use?	Please give details....				
	Please give details...				

How do staff model safe practice when using technology with children?	
How is internet safety and use of technology incorporated into the early Years curriculum?	Please give details...
How is the home learning environment supported?	Add details of information shared with parents to support safe internet use at home.
Resources to support Internet safety in early years provision.	<ul style="list-style-type: none"> • <u>http://internetmatters.org/</u> • <u>Online safety guide 0-5 year olds - Internet Matters</u>

Safeguarding children, young people and vulnerable adults procedures

Key person supervision

Staff taking on the role of key person must have supervision meetings in line with this procedure.

Structure

- Supervision meetings are held every 4-6 weeks for key persons. For part-time staff this may be less frequent but at least every 6-8 weeks
- 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.

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.
- Concerns raised during supervision about an individual child's welfare may result in safeguarding concerns not previously recognised as such, these are recorded on "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.

Further guidance

Recruiting Early Years Staff (Alliance Publication)

People Management in the Early Years (Alliance Publication)

Record keeping policy

Alongside associated procedures in “Record keeping”, this policy was adopted by Happy Faces Pre School in August 2021.

Aim

We have record keeping systems in place for the safe and efficient management of the setting and to meet the needs of the children; that meet legal requirements for the storing and sharing of information within the framework of the GDPR and the Human Rights Act.

Objectives

- Children’s records are kept in personal files, divided into appropriate sections, and stored separately from their developmental records, or are kept electronically on management software systems.
- Children’s personal files contain registration information as specified in procedure “Children’s records and data protection”.
- Other material described as confidential as required, such as Common Assessment Framework assessments, Early Support information or Education, Health and Care Plan (EHCP), case notes including recording of concerns, discussions with parents/carers, and action taken, copies of correspondence and reports from other agencies are kept in separate SEN and/or Safeguarding files.
- Ethnicity data is only recorded where parents/carers have identified the ethnicity of their child themselves.
- Confidentiality is maintained by secure storage of files in a locked cabinet with access restricted to those who need to know. Client access to records is provided for within procedure “Client access to records”.
- Staff know how and when to share information effectively if they believe a family may require a particular service to achieve positive outcomes
- Staff know how to share information if they believe a child is in need or at risk of suffering harm.
- Staff record when and to whom information has been shared, why information was shared and whether consent was given. Where consent has not been given and staff have taken the decision, in line with guidelines, to override the refusal for consent, the decision to do so is recorded.
- Guidance and training for staff specifically covers the sharing of information between professions, organisations, and agencies as well as within them, and arrangements for training takes account of the value of multi-agency as well as single agency working.

Records

The following information and documentation are also held:

- name, address and contact details of the provider and all staff employed on the premises
- name address and contact details of any other person who will regularly be in unsupervised contact with children
- a daily record of all children looked after on the premises, their hours of attendance and their named key person

- certificate of registration displayed and shown to parents on request
- records of risk assessments
- record of complaints

Legal references

General Data Protection Regulation 2018

Freedom of Information Act 2000

Human Rights Act 1998

Statutory Framework for the Early Years Foundation Stage (DfE 2025)

Data Protection Act 2018

Further guidance

[Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers](#) (HMG 2018 updated May 2024)

[Business management mini-guide](#) (Alliance publication)

Record keeping procedures

Children's records and data protection

During an outbreak of serious illness of disease there may be the need to keep additional records as part of outbreak management. A record is kept of individual cases of children/families who are self-isolating due to symptoms as per usual record-keeping procedures. In all cases the principles of data protection are maintained at Happy Faces Pre School.

Principles of data protection: lawful processing of data

Personal data shall be:

- a) *processed lawfully, fairly and in a transparent manner in relation to the data subject*
- b) *collected for specified, explicit and legitimate purposes and not further processed in a manner that is not compatible for these purposes*
- c) *adequate, relevant and necessary in relation to the purposes for which they are processed*
- d) *accurate, and where necessary, kept up to date; every reasonable step must be taken to ensure that personal data that are inaccurate, having regard to the purpose for which they are processed, are erased or rectified without delay*
- e) *kept in a form which permits identification of data subjects for no longer than is necessary for the purposes for which the personal data are processed*
- f) *processed in a manner that ensures appropriate security of the personal data, including protection against unauthorised or unlawful processing and against accidental loss, destruction or damage, using appropriate technical or organisational measures ("integrity and confidentiality")* Article 5 of the General Data Protection Regulations (2018)

Practitioners should process data, record and share information in line with the principles above.

General safeguarding recording principles

- It is vital that all relevant interactions linked to safeguarding children's and individual's welfare are accurately recorded.
- All recordings should be made as soon as possible after the event.
- Recording should be to a good standard and clear enough to enable someone other than the person who wrote it, to fully understand what is being described.
- Recording can potentially be viewed by a parent/carer or Ofsted inspector, by the successors of the practitioners who record, and may be used in a Family Court as relevant evidence to decide whether a child should remain with their biological parents or be removed to live somewhere else. Recording needs to be fair and accurate, non-judgemental in tone, descriptive, relevant, and should clearly show what action has been taken to safeguard a child and reflect decision-making relating to safeguarding.
- Recording should be complete, it should show what the outcome has been, what happened to referrals, why decisions were made to share or not share information, and it should contain summaries and minutes of relevant multi-agency meetings and multi-agency communication.

- If injuries or other safeguarding concerns are being described the description must be clear and accurate and should give specific details of the injury observed and where it is located.

The principles of GDPR and effective safeguarding recording practice are upheld at Happy Faces Pre School

- Recording is factual and non-judgemental.
- The procedure for retaining and archiving personal data and the retention schedule and subsequent destruction of data is adhered to.
- Parents/carers and children where appropriate are made aware of what will be recorded and in what circumstances information is shared, prior to their child starting at the setting. Parents/carers are issued with "Privacy notice" and should give signed, informed consent to recording and information sharing prior to their child attending the setting. If a parent/carer would not expect their information to be shared in any given situation, normally, they should be asked for consent prior to sharing.
- There are circumstances where information is shared without consent to safeguard children. These are detailed below, but in summary, information can be shared without consent if a practitioner is unable to gain consent, cannot reasonably be expected to gain consent, or gaining consent places a child at risk.
- Records can be accessed by, and information may be shared with, local authority professionals. If there are significant safeguarding or welfare concerns, information may also be shared with a family proceedings Court or the police. Practitioners are aware of information sharing processes and all families should give informed consent to the way the setting will use, store and share information.
- Recording should be completed as soon as possible and within 5 working days as a maximum for safeguarding recording timescales.
- If a child attends more than one setting, a two-way flow of information is established between the parents/carers, and other providers. Where appropriate, comments from others (as above) are incorporated into the child's records.

Children's personal files at Happy Faces Pre School (where nurse management software is not used)

- Files we keep are as follows:
 - Registration file - personal details: registration form and consent forms as well as signed policies – additional emergency contact numbers should be provided
 - SEND - SEND support requirements, additional focussed intervention provided by the setting e.g. support for behaviour, language or development that needs an Action Plan at setting level, records of any meetings held
 - Safeguarding - welfare and safeguarding concerns: correspondence and reports: all letters and emails to and from other agencies and confidential reports from other agencies, records of meetings held
- Children's files are kept in a filing cabinet/drawer, which is always locked when not in use.

- Correspondence in relation to a child is read, any actions noted, and filed immediately
- Access to children's files is restricted to those authorised to see them and make entries in them, this being the setting manager, deputy or designated safeguarding lead for child protection, the child's key person, office administrator, or other staff as authorised by the setting manager.
- Children's files are not handed over to anyone else to look at.
- Children's files may be handed to Ofsted as part of an inspection or investigation; they may also be handed to local authority staff conducting a S11 audit if authorisation is seen.

Happy Faces Pre School's Privacy notice

This notice explains what personal data (information) we hold about you, how we collect, how we use and may share information about you. We are required to give you this information under data protection law.

Who are we?

Happy Faces Pre School collects, uses and is responsible for certain personal information about you. When we do so we are regulated under the General Data Protection Regulation which applies across the European Union (including in the United Kingdom) and we are responsible as 'controller' of that personal information for the purposes of those laws.

The personal information we collect and use

Information collected by us

In the course of providing education and care we collect the following personal information when you provide it to us:

- Personal information (such as name, date of birth, gender, home address and postcode)
- Special category characteristics (such as special educational needs (SEN) information, ethnicity, relevant medical information)
- Parents/Carers Information (such as name, date of birth, National Insurance or National Asylum Support Service Number)
- Financial eligibility information (such as 30 hours codes)
- Attendance information (such as sessions attended, number of absences and absence reasons)

We also obtain personal information from other sources as follows:

- Kent County Council Special Educational Needs
- Health visitors
- Specialist Teaching Service
- Speech and Language Therapy
- Kent County Council Social Services

How we use your personal information

We use your personal information to:

- Check and calculate free entitlement
- Provide appropriate pastoral care and support services to children
- Provide funding
- Provide advice, support and guidance to the setting
- Enable financial and policy compliance checks of the setting
- Assess and improve the quality of our services
- Comply with the law regarding data sharing
- Safeguard children

How long your personal data will be kept

We will hold financial information securely and retain it for 7 years, after which the information is archived or securely destroyed.

We will hold your personal information securely and retain it from the child /young person's date of birth until they reach the age of 25, after which the information is archived or securely destroyed.

Reasons we can collect and use your personal information

We collect and use personal information to comply with our legal obligations under section 537A of the Education Act 1996, section 83 of the Children Act 1989, and to carry out tasks in the public interest. If we need to collect special category (sensitive) personal information, we rely upon reasons of substantial public interest (equality of opportunity or treatment).

Who we share your personal information with

- Department for Education (DfE) (statutory for early years funding and policy monitoring)
- Kent County Council Management Information & Finance (to provide funding)
- Other local authorities, or other early years settings, to resolve duplicate claims and funding queries
- Kent County Council teams working to improve outcomes for children and young people
- The Education People (TEP) who are commissioned by KCC to provide Education services for KCC including most of the CFIS services
- Commissioned providers of local authority services (such as education services)
- Local multi-agency forums which provide SEND advice, support and guidance (such as EY Local Inclusion Forum Team (EY LIFT))
- Schools that you attend after leaving us
- Partner organisations signed up to the Kent & Medway Information Sharing Agreement, where necessary, which may include Police, school nurses, doctors and mental health workers and Kent Community Health NHS Foundation Trust
- Contracted providers of services (such as external photographers and catering providers) where consent has been given

We will share personal information with law enforcement or other authorities if required by applicable law.

The National Pupil Database (NPD)

We are required by law, to provide information about our pupils to the DfE as part of statutory data collections such as the school census and early years' census. Some of this information is then stored in the NPD. The law that allows this is the Education (Information About Individual Pupils) (England) Regulations 2013.

The NPD is owned and managed by the DfE and contains information about pupils in schools in England. It provides invaluable evidence on educational performance to inform independent research, as well as studies commissioned by the DfE. It is held in electronic format for statistical purposes. This information is securely collected from a range of sources including schools, local authorities and awarding bodies.

The DfE may share information about our pupils from the NPD with third parties who promote the education

or well-being of children in England by:

- conducting research or analysis
- producing statistics
- providing information, advice or guidance

The DfE has robust processes in place to ensure the confidentiality of our data is maintained and there are stringent controls in place regarding access and use of the data. Decisions on whether DfE releases data to third parties are subject to a strict approval process and based on a detailed assessment of:

- who is requesting the data
- the purpose for which it is required
- the level and sensitivity of data requested: and
- the arrangements in place to store and handle the data

To be granted access to pupil information, organisations must comply with strict terms and conditions covering the confidentiality and handling of the data, security arrangements and retention and use of the data.

Your Rights

Under UK GDPR you have rights which you can exercise free of charge which allow you to:

- Know what we are doing with your information and why we are doing it
- Ask to see what information we hold about you (Subject Access Request)
- Ask us to correct any mistakes in the information we hold about you
- Object to direct marketing
- Make a complaint to the Information Commissioners Office
- Withdraw consent (if applicable)

Depending on our reason for using your information you may also be entitled to:

- Ask us to delete information we hold about you
- Have your information transferred electronically to yourself or to another organisation
- Object to decisions being made that significantly affect you
- Object to how we are using your information
- Stop us using your information in certain ways

We will always seek to comply with your request however we may be required to hold or use your information to comply with legal duties. Please note: your request may delay or prevent us delivering a service to you.

For further information about your rights, including the circumstances in which they apply, see the guidance from the UK Information Commissioners Office (ICO) on individuals' rights under UK GDPR.

If you would like to exercise a right, please contact Sharon Danch, Manager of Happy Faces Pre School.

Keeping your personal information secure

We have appropriate security measures in place to prevent personal information from being accidentally lost, or used or accessed in an unauthorised way. We limit access to your personal information to those who have a genuine business need to know it. Those processing your information will do so only in an authorised manner and are subject to a duty of confidentiality.

We also have procedures in place to deal with any suspected data security breach. We will notify you and any applicable regulator of a suspected data security breach where we are legally required to do so.

Who to Contact and Where to go for Further Information

Please contact Sharon Danch to exercise any of your rights, or if you have a complaint about why your information has been collected, how it has been used or how long we have kept it for.

If you would like to get a copy of the information about you that KCC shares with the DfE or how they use your information, please contact the Information Resilience and Transparency Team at data.protection@kent.gov.uk.

For more information about services for young children, please go to: <http://www.kent.gov.uk/education-and-children/childcare-and-pre-school> or the KCC website at www.kent.gov.uk

UK GDPR also gives you right to lodge a complaint with a supervisory authority. The supervisory authority in the UK is the Information Commissioner who may be contacted at <https://ico.org.uk/concerns> or telephone 03031 231113.

For further information visit <https://www.kent.gov.uk/about-the-council/about-the-website/privacy-statement>

For further information about how the Department for Education uses your information:

To find out more about the pupil information we share with the DfE, for the purpose of data collections, go to <https://www.gov.uk/guidance/early-years-census>

To find out more about the NPD, go to <https://www.gov.uk/government/publications/national-pupil-database-user-guide-and-supporting-information>.

For more information about the DfE's data sharing process, please visit: <https://www.gov.uk/data-protection-how-we-collect-and-share-research-data>

For information about which organisations the department has provided pupil information, (and for which project), please visit the following website: <https://www.gov.uk/government/publications/national-pupil-database-requests-received>

To contact DfE: <https://www.gov.uk/contact-dfe>

Record keeping procedures

Confidentiality, recording and sharing information

Most things that happen between the family, the child and the setting are confidential to Happy Faces Pre School. In certain circumstances information is shared, for example, a child protection concern will be shared with other professionals including social care or the police, and settings will give information to children's social workers who undertake S17 or S47 investigations. Normally parents/carers should give informed consent before information is shared, but in some instances, such as if this may place a child at risk, or a serious offence may have been committed, parental consent should not be sought before information is shared. Local Safeguarding Partners (LSP) procedures should be followed when making referrals, and advice sought if there is a lack of clarity about whether parental consent is needed before making a referral due to safeguarding concerns.

- Staff discuss children's general progress and well-being together in meetings, but more sensitive information is restricted to designated persons and key persons and shared with other staff on a need-to-know basis.
- Members of staff do not discuss children with staff who are not involved in the child's care, nor with other parents/carers or anyone else outside of the organisation, unless in a formal and lawful way.
- Discussions with other professionals should take place within a professional framework, not on an informal basis. Staff should expect that information shared with other professionals will be shared in some form with parent/carers and other professionals, unless there is a formalised agreement to the contrary, i.e. if a referral is made to children's social care, the identity of the referring agency and some of the details of the referral is likely to be shared with the parent/carer by children's social care.
- It is important that members of staff explain to parents that sometimes it is necessary to write things down in their child's file and explain the reasons why.
- When recording general information, staff should ensure that records are dated correctly, and the time is included where necessary and signed.
- Welfare/child protection concerns are recorded on "Safeguarding incident reporting form". Information is clear and unambiguous (fact, not opinion), although it may include the practitioner's thoughts on the impact on the child.
- Records are non-judgemental and do not reflect any biased or discriminatory attitude.
- Not everything needs to be recorded, but significant events, discussions and telephone conversations must be recorded at the time that they take place.
- Recording should be proportionate and necessary.
- When deciding what is relevant, the things that cause concern are recorded as well as action taken to deal with the concern. The appropriate recording format is filed within the child's file.
- Information shared with other agencies is done in line with these procedures.

- Where a decision is made to share information (or not), reasons are recorded.
- Staff may use a computer to type reports, or letters.
- The setting is registered with the Information Commissioner's Office (ICO). Staff are expected to follow guidelines issued by the ICO, at <https://ico.org.uk/for-organisations/guidance-index/>
- Additional guidance in relation to information sharing about adults is given by the Social Care Institute for Excellence, at www.scie.org.uk/safeguarding/adults/practice/sharing-information
- Staff should follow guidance including Working Together to Safeguard Children (DfE 2023); Information Sharing: Advice for Practitioners Providing Safeguarding Services to Children, Young People, Parents and Carers 2024 and What to do if you're Worried a Child is Being Abused (HMG 2015)

Confidentiality definition

- Personal information of a private or sensitive nature, which is not already lawfully in the public domain or readily available from another public source, and has been shared in a relationship, where the person giving the information could reasonably expect it would not be shared with others.
- Staff can be said to have a 'confidential relationship' with families. Some families share information about themselves readily; members of staff need to check whether parents/carers regard this information as confidential or not.
- Parents/carers sometimes share information about themselves with other parents/carers as well as staff; the setting cannot be held responsible if information is shared beyond those parents/carers whom the person has confided in.
- Information shared between parents/carers in a group is usually bound by a shared agreement that the information is confidential and not discussed outside. The setting manager is not responsible should that confidentiality be breached by participants.
- Where third parties share information about an individual; staff need to check if it is confidential, both in terms of the party sharing the information and of the person whom the information concerns.
- Information shared is confidential to the setting.
- Practitioners ensure that parents/carers understand that information given confidentially will be shared appropriately within the setting (for instance with a designated person, during supervision) and should not agree to withhold information from the designated person or their line manager.

Breach of confidentiality

- A breach of confidentiality occurs when confidential information is not authorised by the person who provided it, or to whom it relates, without lawful reason to share.
- The impact is that it may put the person in danger, cause embarrassment or pain.
- It is not a breach of confidentiality if information was provided on the basis that it would be shared with relevant people or organisations with lawful reason, such as to safeguard an individual at risk or in the public interest, or where there was consent to the sharing.
- Procedure "Children's records and data protection" must be followed.

Exception

- GDPR enables information to be shared lawfully within a legal framework. The Data Protection Act 2018 balances the right of the person about whom the data is stored with the possible need to share information about them.
- The Data Protection Act 2018 contains “safeguarding of children and individuals at risk” as a processing condition enabling “special category personal data” to be processed and to be shared. This allows practitioners to share without consent if it is not possible to gain consent, if consent cannot reasonably be gained, or if gaining consent would place a child at risk.
- Confidential information may be shared without authorisation - either from the person who provided it or to whom it relates, if it is in the public interest and it is not possible or reasonable to gain consent or if gaining consent would place a child or other person at risk. The Data Protection Act 2018 enables data to be shared to safeguard children and individuals at risk. Information may be shared to prevent a crime from being committed or to prevent harm to a child, Information can be shared without consent in the public interest if it is necessary to protect someone from harm, prevent or detect a crime, apprehend an offender, comply with a Court order or other legal obligation or in certain other circumstances where there is sufficient public interest.
- Sharing confidential information without consent is done only in circumstances where consideration is given to balancing the needs of the individual with the need to share information about them.
- When deciding if public interest should override a duty of confidence, consider the following:
 - is the intended disclosure appropriate to the relevant aim?
 - what is the vulnerability of those at risk?
 - is there another equally effective means of achieving the same aim?
 - is sharing necessary to prevent/detect crime and uphold the rights and freedoms of others?
 - is the disclosure necessary to protect other vulnerable people?

The decision to share information should not be made as an individual, but with the backing of the designated person who can provide support, and sometimes ensure protection, through appropriate structures and procedures.

Obtaining consent

Consent to share information is not always needed. However, it remains best practice to engage with people to try to get their agreement to share where it is appropriate and safe to do so.

Using consent as the lawful basis to store information is only valid if the person is fully informed and competent to give consent and they have given consent of their own free will, and without coercion from others, Individuals have the right to withdraw consent at any time.

You should not seek consent to disclose personal information in circumstances where:

- someone has been hurt and information needs to be shared quickly to help them
- obtaining consent would put someone at risk of increased harm
- obtaining consent would prejudice a criminal investigation or prevent a person being questioned or caught for a crime they may have committed

- the information must be disclosed regardless of whether consent is given, for example if a Court order or other legal obligation requires disclosure

NB. The serious crimes indicated are those that may harm a child or adult; reporting confidential information about crimes such as theft or benefit fraud are not in this remit.

- Settings are not obliged to report suspected benefit fraud or tax evasion committed by clients, however, they are obliged to tell the truth if asked by an investigator.
- Parents/carers who confide that they are working while claiming should be informed of this and should be encouraged to check their entitlements to benefits, as it may be beneficial to them to declare earnings and not put themselves at risk of prosecution.

Consent

- Parents/carers share information about themselves and their families. They have a right to know that any information they share will be regarded as confidential as outlined in "Privacy notice". They should also be informed about the circumstances, and reasons for the setting being under obligation to share information.
- Parents/carers are advised that their informed consent will be sought in most cases, as well as the circumstances when consent may not be sought, or their refusal to give consent overridden.
- Where there are concerns about whether to gain parental consent before sharing information, for example when making a Channel or Prevent referral the setting manager must inform their line manager for clarification before speaking to parents/carers
- Consent must be 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.

Separated parents/carers

- Consent to share need only be sought from one parent/carers. Where parents/carers are separated, this would normally be the parent/carer with whom the child resides.
- Where there is a dispute, this needs to be considered carefully.
- Where the child is looked after, the local authority, as 'corporate parent' may also need to be consulted before information is shared.

Age for giving consent

- A child may have the capacity to understand why information is being shared and the implications. For most children under the age of eight years in a nursery or out of school childcare context, consent to share is sought from the parent/carer, or from a person who has parental responsibility.
- Young persons (16-19 years) are capable of informed consent. Some children from age 13 onwards may have capacity to consent in some situations. Where they are deemed not to have capacity, then someone with parental responsibility must consent. If the child is capable and gives consent, this may override the parent/carer's wish not to give consent.

- Adults at risk due to safeguarding concerns must be deemed capable of giving or withholding consent to share information about them. In this case 'mental capacity' is defined in terms of the Mental Capacity Act 2005 Code of Practice (Office of the Public Guardian 2007). It is rare that this will apply in the context of the setting.

Ways in which consent to share information can occur

- Policies and procedures set out the responsibility of the setting regarding gaining consent to share information, and when it may not be sought or overridden.
- Information in leaflets to parents/carers, or other leaflets about the provision, including privacy notices.
- Consent forms signed at registration (for example to apply sun cream).
- Notes on confidentiality included on every form the parent/carer signs.
- Parent/carer signatures on forms giving consent to share information about additional needs, or to pass on child development summaries to the next provider/school.

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)

Record keeping procedures

Client access to records

Under the General Data Protection Regulations there are additional rights granted to data subjects which must be protected by Happy Faces Pre School.

The parent/carer 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 the setting has compiled on them.

- If a parent/carer wishes to see the file, a written request is made, which the setting acknowledges in writing, informing the parent/carer that an arrangement will be made for him/her to see the file contents, subject to third party consent.
- Information must be provided within 30 days of receipt of request. If the request for information is not clear, the manager must receive legal guidance, for instance, from Law-Call for members of the Alliance. In some instances, it may be necessary to allow extra time in excess to the 30 days to respond to the request. An explanation must be given to the parent/carer where this is the case. The maximum extension time is 2 months.
- A fee may be charged to the parent/carer for additional requests for the same material, or any requests that will incur excessive administration costs.
- The setting manager informs their line manager and legal advice is sought.
- The setting manager goes through the file with their line manager and ensures all documents are filed correctly, 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. The setting manager should always ensure that recording is of good quality, accurate, fair, balanced and proportionate and should have quality assurance processes in place to ensure that files are checked for quality regularly and that any issues are addressed promptly.
- Each of those individuals are written to explaining that the subject of the file has requested sight of the file which contains a reference to them, stating what this is.
- They are asked to reply in writing to the setting manager giving or refusing consent for disclosure of that material.
- Copies of these letters and their replies are kept on the child's file.
- Agencies will normally refuse consent to share information, and the parent should be redirected to those agencies for a request to see their file held by that agency.
- Entries where you have contacted another agency may remain, for example, a request for permission from social care to leave in an entry where the parent was already party to that information.

- Each family member and/or carer noted on the file is a third party, so where there are separate entries pertaining to each parent/carers, step-parent, grandparent etc, each of those have to be written to regarding third party consent.
- Members of staff should also be written to, but the setting reserves the right under the legislation to override a refusal for consent or just delete the name and not the information.
 - 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, then the refusal may be granted.
 - If that information is the basis of a police investigation, then refusal should also be granted.
 - If the information is not sensitive, then it is not in the setting's interest to withhold that information from a parent. It is a requirement of the job that if a member of staff has a concern about a child and this is recorded; the parents/carers are told this at the start and in most cases, concerns that have been recorded will have been discussed already, so there should be no surprises.
 - The member of staff's name can be removed from an entry, but the parent/carers may recognise the writing or otherwise identify who had provided that information. In the interest of openness and transparency, the setting manager may consider overriding the refusal for consent.
 - In each case this should be discussed with members of staff and decisions recorded.
- When the consent/refusals have been received, the setting manager takes a photocopy of the whole file. On the copy file the document not to be disclosed is removed (e.g. a case conference report) or notes pertaining to that individual in the contact pages blanked out using a thick marker pen.
- The copy file is then checked, and legal advisors verify that the file has been prepared appropriately, for instance, in certain circumstances redaction may be appropriate, for instance if a child may be damaged by their data being seen by their parent/carers, e.g. if they have disclosed abuse. This must be clarified with the legal adviser.
- The 'cleaned' copy is then photocopied again and collated for the parent to see.
- The setting manager informs the parent that the file is now ready and invites him/her to make an appointment to view it.
- The setting manager and their line manager meet with the parent/carers to go through the file, explaining the process as well as what the content records about the child and the work that has been done. Only the persons with parental responsibility can attend that meeting, or the parent/carers's legal representative or interpreter.
- The parent/carers may take a copy of the prepared file away, but it is never handed over without discussion.
- It is an offence to remove material that is controversial or to rewrite records to make them more acceptable. If recording procedures and guidelines have been followed, the material should reflect an accurate and non-judgemental account of the work done with the family.

- If a parent/carer feels aggrieved about any entry in the file, or the resulting outcome, then the parent/carer should be referred to section “Complaints procedure for parents and service users”.
- The law requires that information held must be accurate, and if a parent/carer says the information held is inaccurate then the parent/carer has a right to request 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/carer, the setting retains the right not to change the entry but can record the parent/carer’s view. In most cases, a parent/carer would have had the opportunity at the time to state their side of the matter, and this should have been recorded there and then.
- If there are any controversial aspects of the content of a client’s file, legal advice must be sought. This might be where there is a court case between parents or where social care or the police may be considering legal action, or where a case has already completed and an appeal process is underway.
- A setting should never ‘under-record’ for fear of the parent/carer seeing, nor should they make ‘personal notes’ elsewhere.

Further guidance

The Information Commissioner’s Office www.ico.gov.uk/ or helpline 0303 123 1113.

Record keeping procedures

Transfer of records

Records about a child's development and learning in the EYFS are made by the staff at Happy Faces Pre School; to enable smooth transitions, appropriate information is shared with the receiving setting or school at transfer. Confidential records are passed on securely where there have been concerns, as appropriate.

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

- It is the setting manager's responsibility to ensure that records are transferred and closed in accordance with the archiving procedures, set out below.
- If the Local Safeguarding Partners (LSP) retention requirements are different to the setting, the designated safeguarding lead will liaise with their line manager and seek legal advice if necessary.

Development and 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.

Transfer of confidential safeguarding and child protection information

- The receiving school/setting will need a record of child protection concerns raised in the setting and what was done about them. The responsibility for transfer of records lies with the originating setting, not on the receiving setting/school to make contact and request them.
- To safeguard children effectively, the receiving setting must be made aware of any current child protection concerns, preferably by telephone, prior to the transfer of written records.

- Parents/carers should be reminded that sensitive information about their child is passed onto receiving settings where there have been safeguarding concerns and should be asked to agree to this prior to the information being shared. Settings are obliged to share data linked to “child abuse” which is defined as physical injury (non-accidental) physical and emotional neglect, ill treatment and abuse.
- Parents/carers should be asked to agree to this, however, where safeguarding concerns have reached the level of a referral being made to local children’s social work services (either due to concerns that a child may be at risk of significant harm or that a child may be in need under Section 17 of the Children Act,) if consent is withheld the information will most likely need to be shared anyway. It is important that any decisions made to share or not share with or without consent are fully recorded.
- For any safeguarding or welfare concerns that resulted in an early help referral being made, and if consent to share is withheld, legal advice is sought prior to sharing.
- If the level of a safeguarding concern has not been such that a referral was made for early help, or to children’s social work services or police, the likelihood is that any concerns were at a very low level and if they did not meet the threshold for early help, they are unlikely to need to be shared as child abuse data with a receiving setting, however, the designated safeguarding lead should make decisions on a case by case basis, seeking legal advice as necessary.
- The designated safeguarding lead should check the quality of information to be transferred prior to transfer, ensuring that any information to be shared is accurate, relevant, balanced and proportionate. Parents/carers can request that any factual inaccuracies are amended prior to transfer.
- If a parent/carer wants to see the exact content of the safeguarding information to be transferred, they should go through the subject access request process. It is important that a child or other person is not put at risk through information being shared.
- If no referrals have been made for early help or to children’s social work services and police, there should not normally be any significant information which is unknown to a parent/carer being shared with the receiving school or setting.
- If a parent/carer has objections or reservations about safeguarding information being transferred to the new setting, or if it is unclear what information should be included, the designated person will seek legal advice.
- If LSP requirements are different to the setting’s this must be explained to the parent/carer, and a record of the discussion should be signed by parents/carers to indicate that they understand how the information will be shared, in what circumstances, and who by.
- Prior to sharing the information with the receiving setting, the designated safeguarding lead should check LSP retention procedures and if it becomes apparent that the LSP procedures are materially different to setting’s procedures this is brought to the attention of the designated safeguarding lead’s line manager, who will agree how to proceed.
- If a child protection plan or child in need plan is in place “Child welfare and protection summary” is also photocopied and a copy is given to the receiving setting or school, along with the date of the last professional meeting or case conference.
- If a S47 investigation has been undertaken by the local authority a copy of the child welfare and protection concern summary form is given to the receiving setting/school.

- Where a CAF (Common Assessment Framework)/early help assessment has been raised in respect of welfare concerns, the name and contact details of the lead professional are passed on to the receiving setting or school.
- If the setting has a copy of a current plan in place due to early help services being accessed, a copy of this should be given to the receiving setting, with parental consent.
- Where there has been a S47 investigation regarding a child protection concern, the name and contact details of the child's social worker will be passed on to the receiving setting/school, regardless of the outcome of the investigation.
- Where a child has been previously or is currently subject to a child protection plan, or a child in need plan, the name and contact details of the child's social worker will be passed onto the receiving setting/school, along with the dates that the relevant plan was in place for.
- This information is posted (by 'signed for' delivery) or taken to the school/setting, addressed to the setting's or school's designated person for child protection and marked confidential. Electronic records must only be transferred by a secure electronic transfer mechanism, or after the information has been encrypted.
- Parent/carers should be made aware what information will be passed onto another setting via the "Privacy notice".
- Copies of the last relevant initial child protection conference/review, as well as the last core group or child in need minutes can be given to the setting/school.
- The setting manager must review and update "Child welfare and protection summary", checking for accuracy, proportionality, and relevance, before this is copied and sent to the setting/school.
- The setting manager ensures the remaining file is archived in line with the procedures set out below.

No other documentation from the child's personal file is passed to the receiving setting or school. The setting keeps a copy of any safeguarding records in line with required retention periods.

Archiving children's files

- The child's registration, SEND and safeguarding files are placed in banker's box storage files which are labelled clearly with its contents and destruction date.
- This is secured and placed in a locked cabinet for seven years after the child has left the setting and then destroyed. Safeguarding files are kept in accordance with required retention periods.
- For web-based or electronic children's files, the designated person must also use the archiving procedure, and records details of what needs to be retained/destroyed. The designated person must plan to ensure that electronic files are deleted/retained as required in accordance with the required retention periods in the same way as paper-based files.
- Health and safety records and some accident records pertaining to a child are stored in line with required retention periods.

Staff, assistants, volunteers and student policy

Alongside associated procedures in “Staff, volunteers and students”, this policy was adopted by Happy Faces Pre School in August 2021.

Aim

Staff at Happy Faces Pre School are deployed to meet the care and learning needs of children and ensure their safety and well-being. There are effective systems in place to ensure that adults looking after children are suitable to do so.

Objectives

- Recruitment checks meet the requirements of the EYFS as stipulated in procedure “Recruitment checks”
- All staff and volunteers who work more than occasionally with the children have enhanced DBS disclosure checks.
- All staff and volunteers working with children have appropriate training, skills, and knowledge.
- All staff, students and volunteers are deployed in accordance with the procedures.
- There is a complaints procedure and staff, and volunteers know how to complain and who they complain to.
- There is a whistleblowing procedure for all staff, students and volunteers to raise any concerns they may have.
- Ofsted are notified of staff changes or changes to the setting’s name or address.
- Parents/carers are involved with their children’s learning and their views are considered.

Legal references

Protection of Children Act 1999

Safeguarding Vulnerable Groups Act 2006

Childcare Act 2006

Further guidance

Recruiting Early Years Staff (Alliance Publication)

People Management in the Early Years (Alliance Publication)

Staff, assistants, volunteers and student policy

Recruitment Checks

Obtaining references

As part of our commitment to safer recruitment Happy Faces Pre School 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 as follows:

- Our application process requires candidates to supply us with the contact details of a suitable referee from:
 - Their current 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 checked to ensure that it originates from a legitimate source.
- 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.

Further information and guidance

[A120 New Employee Handbook](#) (Alliance Publication)

[A128 Recruiting Early Years Staff](#) (Alliance Publication)

[A129 People Management in the Early Years](#) (Alliance Publication)

Staff, assistants, volunteers and student procedures

Staff deployment

Members of staff, including assistants, bank staff and students (where eligible to be counted in ratios) at Happy Faces 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 Happy Faces Pre School is compliant with paediatric first aid requirements.
- The setting manager deploys staff to give adequate supervision of indoor and outdoor areas, ensuring that children are usually 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, deputy or senior practitioner 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 their key children 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/carer's 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
 - the situation is reviewed as required, to ensure that the needs of the child are being met, and that the parent 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

Staff, assistants, volunteers and student procedures

Deployment of volunteers and parent/carers helpers

Volunteers and parent/carers helpers are always under the supervision of a permanent member of staff at Happy Faces Pre School. 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.

- The setting manager ensures that volunteers and parent/carers helpers are deployed to assist permanent staff.
- Volunteers and parent/carers 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/carers 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/carers helpers are available to support staff at story and other circle times.

Staff, assistants, volunteers and student procedures

Babysitting

It is inappropriate for members of staff to look after/babysit children or siblings of children who attend Happy Faces Pre School, outside of preschool hours. This is because:

- There could be difficulties about confidentiality.
- There could be differences in behavioural expectations between home and preschool which could cause difficulties for the member of staff.
- It could cause an imbalance in the relationship between the child/family and the child's key person and other members of staff.
- Problems could arise where payment is involved which could affect the relationship between the family and staff member.

Exceptions to the rules would be:

- Where children related to a staff member attend the setting.
- Where children of a close friendship formed before the child began attending the setting are concerned, and for whom the member of staff was already performing a babysitting service.

Staff, assistants, volunteers and student procedures

Student placement

Qualifications and training make an important contribution to the quality of care and education at Happy Faces Pre School. As part of our commitment, we may offer placements to students undertaking relevant qualifications/training. We aim to provide students experiences that will contribute to the successful completion of their studies and provide examples of quality practice in early years care and education.

- The setting manager ensures that students meet the 'suitable person' requirements.
- The setting manager discusses the aim of the placement with the student's tutor prior to the placement commencing. The expectations of both parties are agreed at this point.
- The good character of students under 17 years old is vouched for by the establishment that places them, the setting manager must be satisfied that all relevant checks have been made.
- Students do not have unsupervised access to children.
- 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.
- Public liability and employer's liability insurance is in place that covers students and voluntary helpers.
- Students are aware of confidentiality.
- Student induction includes how the setting and sessions are managed, and policies and procedures, in particular safeguarding, confidentiality and health and safety.
- Appropriate members of staff co-operate with students' tutors to assist them in fulfilling the requirements of their course of study.
- The setting communicates a positive message to students about the value of qualifications and training.
- The needs of the children and their families remain paramount at all times and students are only admitted in numbers that do not hinder the work of the setting.
- The setting manager ensures that students and trainees on placement are engaged in bona fide early years training, which provides the necessary background understanding of children's development and activities.

Early years practice policy

Alongside associated procedures in “Early years practice”, this policy was adopted by Happy Faces Pre School in August 2021.

Aim

Children are safe, happy, and eager to participate and to learn.

Objectives

- Babies and young children need to form a secure attachment to their key person when they join the setting to feel safe, happy and eager to participate and learn. It is their *entitlement* to be settled comfortably into a new environment.
- The needs of part-time children are considered.
- There is a procedure for when children do not settle and for prolonged absences.
- Introductions and induction of the parent/carer is carried out before children start.
- *Prime times* of the day make the very best of routine opportunities to promote ‘tuning-in’ to the child emotionally and create opportunities for learning. We actively promote British values, inclusion, equality of opportunity and the valuing of diversity.
- We operate a positive behaviour management approach. Behaviour management procedures cover how staff should respond to all aspects of behaviour, including children who exhibit challenging behaviour towards other children. These procedures build on the Early Years Alliance’s approach to learning based on three key statements.
 1. Learning is a lifelong process, which enables children and adults to contribute to and shape their world.
 2. We want the curriculum we provide to help children to learn to:
 - be confident and independent
 - be aware of and responsive to their feelings
 - make caring and thoughtful relationships with other people
 - become increasingly excited by, interested in, and knowledgeable and questioning about the world around them.
 3. We provide a wide range of interesting child-chosen and adult-initiated activities which:
 - give children opportunities to use all their senses
 - help children of different ages and stages to play together
 - help children be the directors of their own learning
 - help children develop an inquiring and questioning attitude to the world around them

The *Early Years Foundation Stage* is used as a framework to provide care and learning for babies and children under two years.

Older children (2-5 years)

- To feel securely settled and ready to learn, children from two to five years need to form attachments with adults who care for them, primarily to a key person, but with other adults and children too. In this way children feel part of a community of learners; they can contribute to that community and receive from it. The three-stage model, as detailed in “Prime times – settling in and transitions” procedure, is applicable, but with some differences in the procedures for children moving up into the next group and for older children.

Waiting list and admissions

Our provision is accessible to children and families from all sections of the local and wider community. We aim to ensure that all sections of the community receive accessible information and that our admissions procedures are fair, clear, and open to all parents who apply for places. The availability of a place at the setting considers staff/child ratios, the age of the child and registration requirements.

- We operate in an inclusive manner which enables all children and families to access our services.
- We also have regard for the needs of parents/carers who are:
 - looking to take up work, remain in work or extend their hours of work
 - looking to commence training or education
- We work in partnership with the local authority and other agencies to ensure that our provision is accessible to all sections of the community.
- Services are widely advertised, and information is accessible to all sections of the community.
- Where the number of children wanting places exceeds the number of places available a waiting list is operated using clear criteria for allocation of places as detailed in section “Waiting list and admissions procedure”.

Funded places – free entitlement

All 3- and 4-year-olds in England are entitled to 15 hours free childcare and early education each week for 38 weeks of the year. Some eligible 2-year olds are also entitled. Funded places are offered in accordance with national and local codes of practice and adherence to the relevant Provider Agreement/Contract with the local authority.

Legal References

Special Educational Needs and Disability Act 2001

Special Educational Needs and Disability Code of Practice (DfE and DHSC 2014)

Equality Act 2010

Childcare Act 2006

Early years practice procedures

Waiting list and admissions

We aim to ensure that all sections of the community receive accessible information, and that our admissions procedures are fair, clear and open to all parents who apply for a place.

- The setting is widely advertised in places accessible to all sections of the community.
- Information about the setting is accessible, using plain English, in written and spoken form and, where appropriate, provided in different community languages and in other formats on request.
- Children with disabilities are supported to take full part in all activities within the setting and the setting makes reasonable adjustments to ensure that this will be the case from the time the child is placed on the waiting list.
- The waiting list is arranged in birth order and in addition may consider the following:
 - the age of the child with priority being given to children eligible for the free entitlement
 - length of time on the waiting list
 - the vicinity of the home to the setting
 - siblings already attending the setting
 - the capacity of the setting to meet the individual needs of the child
- Funded places are offered in accordance with the Early Years Entitlements: Operational Guidance for local authorities and providers (DfE) and any local conditions in place at the time.
- Where it is financially viable to do so, a place is kept vacant for an emergency admission.
- The setting and its practices are welcoming and make it clear that fathers, mothers, other relations and carers and childminders are all welcome.
- The setting and its practices operate in a way that encourages positive regard for and understanding of difference and ability, whether gender, family structure, class, background, religion, ethnicity or competence in spoken English.
- The needs and individual circumstances of children joining the setting are monitored on “Childcare registration form”, to ensure that no accidental or unintentional discrimination is taking place and that reasonable adjustments are made as required.
- “Equality procedures” are shared and widely promoted to all.

Admissions

- Once an early education and childcare place has been offered the relevant paperwork is completed by the setting manager or deputy before the child starts and filed on the child’s personal file. Forms completed include:
 - “Privacy notice” - explains what personal data we collect, why we collect it, how we use it, the control parent/carers have over their personal data and the procedures we have in place to protect it.
 - “Registration form” - contains personal information about the child and family that must be

completed in full prior to the child commencing.

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 at www.gov.uk/disability-living-allowance-children/how-to-claim.
- 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.

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](#)

Early years practice procedures

Fees

At Happy Faces we believe in open communication with all parents/carers and staff and are therefore we are presenting this fees structure to ensure that everyone fully understands our charging. Our fee structure is fully inclusive of all drinks, but we do ask that you provide your child with a snack for each session they attend. We also ask that you provide a packed lunch if your child is staying to lunch. We are open for 38 weeks per year, closing on Bank Holidays. Our fees do not include any outings that are in addition to our usual session activities.

FEES: Fees are payable in full within 7 days or weekly in advance, in accordance with the rates in force at the time. Fees are reviewed annually, in April of each year, or in the event of any changes to the Code of Practice. Any changes to current rates will be advised in writing, at least one term in advance.

Full Day 9.00am – 3.30pm	£60.00
Morning Session 9.00am – 12.00pm	£25.00
Afternoon Session 12.30pm – 3.30pm	£25.00
Lunch Session 12.00pm – 12.30pm	£10.00

ILLNESS/ABSENCE: No refund will be given in the event of a child's absence due to illness, holiday or any other reason (excluding lunches, earlies or late pick-ups.)

CLOSURES: Should Happy Faces be unable to open due to bad weather or any other unforeseen circumstances, parents will be refunded for a chargeable session or have it discounted from their next invoice. Should closure need to take place part way through a session, a refund will not be given in this instance.

LATE PICK UP: Children must be collected promptly at the end of a session. Should a parent fail to collect their child within 15 minutes of the session end, a late collection fee of £10.00 will be charged, and a further £10.00 per every 15 minutes thereafter until 4pm. If your child is collected after 4pm, the charge raises to £22 per 15 minutes as normal preschool ends at 4pm.

LATE PAYMENTS: Fees are to be paid in advance, either termly or weekly. If you are experiencing financial hardship please speak, in confidence, to the manager so that alternative payment arrangements can be made. If without negotiation, fees are not settled, we are left with no alternative but to withdraw your child's place and if necessary, take legal action to recover the amount owed. Children in receipt of Free Early Education will be unable to access any additional fee-paying hours until outstanding fees are settled. Brothers and sisters of children with fees outstanding will not be allocated places until all arrears are paid in full.

PAYMENT METHODS: Invoices can be settled by cash or cheques. Please make cheques payable to Happy Faces Pre School Limited. We also accept internet banking payments (please see the invoice for details) and Childcare Vouchers.

FREE EARLY EDUCATION (FEE): The following information details how your child can access their FEE hours at this pre-school.

FEE and ADDITIONAL FEES: All children become eligible for Free Early Education the term after they become 3. Working parents may be able to get free childcare for a child aged 9 months to 4 years old. If your child is:

- 9 months to 2 years old, you can get 30 hours per week of free childcare
- 3 to 4 years old, you can get 30 hours per week of free childcare

You may be able to get free childcare if you have a 2-year-old and get certain benefits.

This means eligible children will receive up to 1140 hours of free childcare a year.

A child is eligible for FEE at the start of the term after their second (if eligible), or third birthday in line with the Department for Education table below:

A CHILD BORN ON OR BETWEEN	WILL BECOME ELIGIBLE FOR A FREE PLACE FROM
1 st April and 31 st August	Start of term 1, in September, following their 2 nd /3 rd birthday
1 st September and 31 st December	Start of term 3, in January, following their 2 nd /3 rd birthday
1 st January and 31 st March	Start of term 5, in April, following their 2 nd /3 rd birthday

FEE OVER 38 WEEKS

Each child will be funded to a maximum of 15 hours per week over a minimum of 2 days. No session is to be longer than 10 hours per day or shorter than 2.5 hours per day for 38 weeks per year. Some children might be eligible for 30hr funding. Please visit this website for confirmation. **Kent.gov.uk/freechildcare**.

At this pre-school the FEE hours are offered in the following formats.

Morning Session 9.00am – 12.00pm	3 hours free
Afternoon Session 12.30pm – 3.30pm	3 hours free

For all 2, 3 and 4 year old children accessing their FEE hours only, the following pattern is: Monday to Friday 9.00am – 12.00pm, Monday to Friday 12.30pm – 3.30pm, a mixture of five morning/afternoon sessions, 2 full day sessions 9:00am – 3:00pm plus one morning/afternoon session, or 5 full day sessions 9:00am – 3:00pm (for 30 hours funding)

Children attending non-funded sessions in addition to their FEE will be charged at our current rates as shown in the table on page 1. You will be invoiced in the usual way showing how many free hours your child is receiving in that period and what the additional charges are.

Please note that the FEE can be split between 2 providers up to a maximum of 15 hours.

N.B. Based on a 6-term year.

These terms and conditions are intended to protect those parents who pay on time, and to safeguard Happy Faces Pre School Ltd against the consequences of the defaults of others.

Early years practice procedures

Attendance and absence

We take steps to ensure that children are kept safe, that their wellbeing is promoted, and they do not miss their entitlements and opportunities. At the very least, good attendance promotes good outcomes for children. In a small minority of cases, good attendance may also lead to early identification of more serious concerns for a child or family.

There are several reasons why a child may be absent from a setting. In most cases it is reasonable to expect that parents/carers alert the setting as soon as possible, or in the case of appointments and holidays give adequate notice. The attendance and absence policy are shared with parents and carers, and they are advised that they should contact the setting within one hour of the time the child would have been expected to advise of their absence. Designated safeguarding leads must also adhere to Local Safeguarding Partners (LSP) requirements, procedures and contact protocols for children who are absent or missing from the provision.

- If a child who normally attends fails to arrive and no contact has been received from their parents/carers, or if the child is absent for a prolonged period of time, the designated safeguarding lead, takes immediate action to contact them to seek an explanation for the absence and be assured that the child is safe and well.
- Attempts to contact the child's parents/carers or other named carers continue throughout the day on the first day of absence.
- If no contact is made with the parents/carers and there is no means to verify the reason for the child's absence i.e. through a named contact on the child's registration form, this is recorded as an unexplained absence on the child's personal file and is followed up by the manager each day until contact is made.
- If contact has not been made, and we have any reason for concern about a child's wellbeing and welfare, children's services will be contacted for advice about making a referral. Other relevant services maybe contacted as per LSP procedures.
- All absences are recorded on the register with the reason given for the absence, the expected duration and any follow up action taken or required with timescales.
- Registers will be monitored to identify patterns and trends in children's attendance. An understanding of the child's and family's individual circumstances will inform the setting's judgement in determining what constitutes a 'prolonged period of absence'.
- Registers are retained for at least three years, or until the next Ofsted inspection following a cohort of children moving on to school.
- If at any time further information comes to light that gives cause for concern, procedure "Responding to safeguarding or child protection concerns" is immediately followed.

Safeguarding vulnerable children

- The designated safeguarding lead attempts to contact the parents/carers to establish why the child is absent. If contact is made and a valid reason given, the information is recorded in the child's file.
- Any relevant professionals involved with the child are informed, e.g. social worker/family support worker.
- If contact is made and the designated safeguarding lead is concerned that the child is at risk, the relevant professionals are contacted immediately. The events, conversation and follow-up actions are recorded. If contact cannot be made, the designated person contacts the relevant professionals and informs them of the situation.
- If the child has current involvement with social care, the social worker is notified on the day of the unexplained absence.
- If at any time information becomes known that gives cause for concern, "Safeguarding children, young people and vulnerable adults procedures" are followed immediately.

Safeguarding

- If a child misses three consecutive sessions and it has not been possible to make contact, the designated person calls Social Care and makes a referral if advised. Contact with Social Care may be made sooner if there are concerns for a child's wellbeing or welfare
- If there is any cause for concern i.e. the child has a child protection plan in place or there have been previous safeguarding and welfare concerns, the designated person attempts to contact the child's parent/carer immediately. If no contact is made, the child's absence is logged on "Safeguarding incident reporting form", and Social Care are contacted immediately, and safeguarding procedures are followed.

Poor/irregular attendance

Whilst attendance at an early years setting is not mandatory, regular poor attendance may be indicative of safeguarding and welfare concerns that should be followed up.

- In the first instance the setting manager should discuss a child's attendance with their parents/carers to ascertain any potential barriers i.e. transport, working patterns etc and should work with the parents/carers to offer support where possible.
- If poor attendance continues and strategies to support are not having an impact, the setting manager must review the situation and decide if a referral to a multi-agency team is appropriate.
- Where there are already safeguarding and welfare concerns about a child or a child protection plan is in place, poor/irregular attendance at the setting is reported to the Social Care worker without delay.

In the case of funded children, the local authority may use their discretion, where absence is recurring or for extended periods, considering the reason for the absence and impact on the setting. The setting manager is aware of the local authority policy on reclaiming refunds when a child is absent from a setting.

Early years practice procedures

Prime times – The role of the key person

'Each child must be assigned a key person' (EYFS 2024)

Babies and young children need to form a secure attachment to a key person when they join Happy Faces Pre School to feel safe, happy, and eager to participate and learn.

The key person role

- A key person builds an on-going relationship with the child and his/her parents/carers and is committed to that child's well-being while in the setting.
- Every child that attends is allocated a key person before they begin settling in - it is not the responsibility of the child to choose their own key person.
- Where possible a "back-up" key person, or buddy, is also identified for each child so that they can fulfil the role in the absence of the main key person, for example, during sickness.
- The key person conducts the progress check at age two for their key children.
- The role is fully explained to parents/carers in the parent pack and the name of the child's key person is recorded on the child's learning journey.
- The key person is central to settling a child into the setting. The setting manager and key person explain the need for a settling in process and agree a plan with the parents.
- Shift patterns and staff absence can affect a child who is just settling in; where possible, settling in should be matched to when the key person is on duty.
- The number of children for each key person considers the individual needs of children and the capacity of the key person to manage their cohort; it is also influenced by part-time places and part time staff. The setting manager should aim for consistency i.e. matching part-time staff to part-time children; full-time children should not be divided between key persons during the week.
- Photographs of key persons and their key group colour is displayed clearly on the staff photo board in the hallway and carried through to the child's peg, tray and snack bar name.
- The key person spends time daily with his or her key group to ensure their well-being.

Parents/carers

- Key persons are the first point of contact for parents regarding matters concerning their child and any concerns parents/carers may have are addressed with the key person in the first instance.
- Key persons support parents/carers in their role as the child's first and most enduring educators.
- The key person is responsible for the child's developmental records, completing the progress check at age two, and for sharing information about progress with the child's parents/carers.

Learning and development

- The key person helps to ensure that every child's learning and care is tailored to meet their individual needs. This is achieved through regular observation and assessment of children, using information

gathered about their achievements, interests and learning styles to plan for each individual child's learning and development.

- If a child's progress in any of the prime areas gives cause for concern, the key person must discuss this with the setting manager or SENCO who will contact the child's parents to discuss.

Prime times

The key person role is explained further in the "prime time procedures".

Back-up key person

- The role of the back-up key person is to step in when the main key person is absent or unavailable to provide a stable and consistent care relationship for the child.
- The back-up key person is identified when the child starts but is not introduced to the child until an attachment is beginning to form with the key person.
- The back-up key person gradually forms a relationship with the child until the child is happy to be cared for by this person.
- The back-up key person shares information with parents/carers in the key person's absence and makes notes in the child's records where appropriate.
- The back-up key person ensures information is shared with the key person.

Safeguarding children

- The key person has a responsibility towards their key children to report any concern about their development, welfare or child protection matter to the setting manager and to follow the procedures in this respect.
- Regular supervision with the setting manager provides further opportunities to discuss the progress and welfare of key children.
- The back-up key person has a duty likewise.

Further guidance

Being a Key Person in an Early Years Setting (Alliance Publication)

Early years practice procedures

Prime times – Settling in and transitions

To feel securely settled and ready to learn, children need to form attachments with the adults who care for them, primarily a key person, but others too. In this way they feel part of a community; they can contribute to that community and receive from it. Very young children, especially two- to three-year-olds, approach separation from their parent with anxieties, older children have a more secure understanding of 'people permanence' and can approach new experiences with confidence; but also need time to adjust and feel secure. It is the entitlement of all children to be settled comfortably into a new environment.

Happy Faces Pre School follow a three-stage model of settling in based on three key needs:

1. *Proximity* – Young children feel safest when a familiar adult, such as a parent, is present when they are getting used to a new carer and new surroundings. In this way they can become confident in engaging with those experiences independently later on.
2. *Secure base* – Because the initial need for proximity of the parent has been met, young children gradually begin to feel secure with a key person in a new surrounding so that they are able to participate independently for small periods of time.
3. *Dependency* – Young children are able to separate from parents' and main carers when they have formed a secure attachment to their key person who knows and understands them best and on whom they can depend for their needs to be met.

The setting manager and key person explain the need for settling in and agree a plan with the parents.

Settling-in those with SEND

- If a child has been identified as having SEND then the setting manger/SENCO and parents will need to identify and address potential barriers to settling in e.g. timings of medication and invasive procedures, specific routines and levels of support.

Two-year-olds starting a setting for the first time

- A two-year-old may have little or no experience of group care. As part of gathering information from parents, it is important to find out about the child's experience of non-parental care, for example grandparents, or childminder; this informs staff as to how a child may respond to a new situation.
- The three-stage approach involving *Proximity*, *Secure Base* and *Dependency/Independence* is applied to two-year-olds.
- To settle in a two-year-old, the setting will go through the process of gradually increasing the time a child attends with a parent/carer during the proximity stage.
- On the first day, the parent/carer attends with the child and stays for as long as is required for their child. It becomes evident that the child is developing a sense of secure base when he or she shows interest in activities and begins to engage with the key person and other children. Then the parent/carer

may gradually start to spend short periods of time in another room to see how the child responds, this time increases until the child can manage a whole session without the parent.

- Separation causes anxiety in two-year-olds, as they have no concept of where their parents/carers have gone. Parents/carers should always say goodbye and tell them when they will return. Patience with the process will ensure children are happy and eager to come to play and be cared for in the setting.

Three- and four-year-olds

- Most children of this age can move through the stages more quickly and confidently.
- Some children take longer, and their needs for proximity and secure base stages should be accommodated as much as possible.
- Some children appear to leap to dependency/independence within a couple of days. In most cases, they will revert to the need for proximity and secure base. It can be difficult to progress to true dependency/independence and this can be frustrating.
- On the first day, the parent/carer attends with the child and stays for as long as is required for their child. If the child shows interest in the activities and is beginning to engage with their key person and other children, the parent/carer spends time in another room to see how the child responds.
- Parents/carers are encouraged to explain to their child where they are going, and that they will return.

For children whose first language is not English

- For many children learning English as an additional language, the stage of proximity takes longer as the child is dependent upon the parents/carers' input to make sense of what is going on.
- If the parent/carer does not speak English, efforts are made to source an interpreter; it will be helpful for them to see around the setting and be clear about their role in interpreting in the play area.
- The settling-in programme is explained to the parent/carer, and it is emphasised how important it is that they stay with the child and talk to him/her in the home language to be able to explain things.
- Through the interpreter, the key person will try to gauge the child's level of skills in their home language; this will give the key person an idea of the child's interests and levels of understanding.
- The need for the parent/carer to converse in the child's home language is important.
- The key person makes the parent/carer feel welcome using smiles and gestures.
- With the parent/carer, make a list of key words in the child's home language; sometimes it is useful to write the word as you would pronounce it. These words will be used with the child and parents/carers will be addressed with 'hello' and 'goodbye' in their language.
- The key person prepares for the child's visits by having a favourite toy or activity ready for the child to provide a means to interact with the child.
- Children will be spoken to as per any other child, using gestures and facial expressions to help.

- When the child feels happy to spend time with the key person (secure base), the parent should spend time outside of the room.
- Progress with settling in will be done as with any other child; it just takes a little longer to reach dependency/independence.

Early years practice procedures

Establishing children's starting points

When children start at Happy Faces Pre School they arrive at different levels of learning and development. To help them to settle and make rapid progress it is important that they are provided with care and learning opportunities that are suited to their needs, interests and abilities. This means establishing and understanding their starting points and whether there are any obstacles to their learning, so that teaching can be tailored to the 'unique child'.

- The aim of establishing a child's starting points is to ensure that the most appropriate care and learning is provided from the outset.
- Starting points are established by gathering information from the first contact with the child's parents/carers and during the 'settling in' period. Staff do not 'wait and see' how the child is settling before they begin to gather information.
- The key person is responsible for establishing their key children's starting points by gathering information in the following ways:
 - observation of the child during settling in visits
 - discussion with the child's parents/carers
 - building on information that has been gathered during registration by referring to the registration form

The information gathered is recorded within two weeks of the child's official start date and sooner where possible.

- The key person must make a 'best fit' judgment about the age band the child is working in, referring to Development Matters or Birth to Five Matters.
- The key person should complete details by indicating where they have gathered their evidence from, using more than one source where possible i.e. parent/carer comment and observation during settling in.

If the initial assessment raises any concerns that extra support may be required procedure "Identification, assessment and support for children with SEND" is followed.

Early years practice procedures

Prime times – arrivals and departures

Prime times of the day make the very best of routine opportunities to promote 'tuning-in' to the child emotionally and to create opportunities for learning. Arrivals and departures are key times in the day when children need support from their carer to make the transition smooth and happy; these times of day also pose a certain level of risk as parents and carers come and go. All staff at Happy Faces Pre School are aware of the potential risks and take measures to minimise them.

Arrivals

- The staff member(s) on the door always greets the children. This ensures that young children are received into the setting by a familiar and trusted adult.
- The staff member who greets the child marks their presence and time of arrival (if not at the normal start time of the session) in the register.
- If a child who is expected fails to arrive, this is recorded in the register and the setting manager is immediately notified so that they can contact the child's parents/carers to find out why the child is absent following procedure "Attendance and absence".
- The staff member ensures that the child has been signed in by the parent/carers and there is a clear indication of who will be collecting the child, and at what time.
- The staff member greets the parents/carers and takes time to hear information the parents/carers need to share. They inform the parents/carers of aspects of the day, such as if there is an agency member of staff or flexible worker in, which members of staff will be around later when parents/carers collect their child, any planned outings, or special planned event. Any consent forms are signed.
- Staff receive the child physically and tune in to how he or she is feeling and prepares to meet his/her needs.
- Always ensure that the parents/carers say goodbye to their child and say when they are coming back, such as 'after lunch', rather than just 'later'.
- If the member of staff receiving the child is not the key person, the member of staff will hand over the information shared by the parents/carers to the key person once all children have arrived.

Injuries noted on arrival

- If a child is noted to have visible injuries when they arrive at the setting, a "bumps from home form" is completed by the parent and staff member on the door.

Changing shifts and handing over information

- When the key person leaves or goes on a break, they handover the care of the child to a back-up key person or another member of staff.
- If someone other than the key person receives the child, he/she will share any information from the parent and write a note for the key person. Confidential information should be shared with the setting manager to pass on.

- The key person shares information with the back-up key person; in this way they ensure that all information is passed on to the parent/carer in the key person's absence.

Departures

- Children are prepared for home, with clean faces, hands and clothes if required.
- The member of staff on the door greets parents/carers when they arrive, ensuring that the person who has arrived to collect the child is named on the child's registration form. They hand over the child personally and marks their departure and enters the time of departure (if collected before the session officially ends) in the register.
- Only persons aged over 16 years should normally collect children. If a parent has no alternative, then this is agreed with the setting manager and a risk assessment completed and signed by the parent. In all cases the setting manager will ask the parents/carers to ensure that in future alternative arrangements are made. If the parent/carer is under 16 years of age a risk assessment will be completed. No child will be collected by anyone who has not reached 14 years of age. The risk assessment should take account of factors such as age/vulnerability of child, journey travelled, arrangements upon leaving the setting to go home/elsewhere.
- Practitioners verbally exchange information with parents/carers.
- If someone other than the key person is with the child at the end of the day, the key person should pass general information to the other staff or write a note for the parents/carers. Confidential information should be shared with the setting manager to pass on.

Maintaining children's safety and security

Arrivals and departures pose a particular threat to the safety and security of the children, particularly when parents arrive at the same time or when in shared premises. To minimise the risk of a child leaving the building unnoticed, the setting manager conducts a risk assessment that identifies potential risks and the measures put in place to minimise them, such as staff busy talking to individual parents/carers or doors left ajar. The risk assessment is shared with their line manager and is updated as and when required. View procedure "Risk assessment" and "Generic risk assessment form" for further guidance.

Early years practice procedures

Prime times – Snack times and lunchtime

Children are supervised during snack time lunchtime and always remain within sight and hearing of staff and where possible should be sat facing children whilst they are eating so they can make sure children are eating in a way to prevent choking and also prevent food sharing and be aware of any unexpected allergic reactions. A member of staff with a valid paediatric first aid certificate is always present at snack time and lunchtime.

Snack times

- A 'snack' is prepared mid-morning and mid-afternoon and can be organised according to the discretion of the setting manager e.g. picnic on a blanket.
- Children may also take turns to help set the table. Small, plastic jugs are provided with choice of semi-skimmed milk or water.
- Children wash their hands before and after snack-time.
- Parents are asked to provide a healthy snack for their child.
- Children arrive as they want refreshment and leave when they have had enough. Children are not made to leave their play if they do not want to have a snack. They will be asked at a later time.
- All key persons will sit with the children at least once a week.
- Staff join in conversation and encourage children's independence by allowing them to pour drinks and tidy away their snack.

Lunchtime

- Tables are never overcrowded during lunchtime.
- Children are always within sight and hearing of staff at mealtimes and where possible sat facing them while they are eating.
- There is a Paediatric First Aider present at children's lunch and snack times.
- Their lunchboxes are brought to the room on the lunch trolley.
- Children wash their hands and sit down.
- Children are given time to eat at their own pace and are not hurried to fit in with adults' tasks and breaks.
- To protect children with food allergies or specific dietary requirements, children are discouraged from sharing and swapping their food with one another.
- Lunchtimes are relaxed opportunities for social interaction between children and adults.
- After lunch children are encouraged to tidy up their lunchbox and help wipe the table and sweep the floor.
- Children wash their hands after lunch.
- Information for parents/carers is displayed on the notice board, including:

- Ten Steps for Healthy Toddlers https://infantandtoddlerforum.org/media/upload/pdf-downloads/HR_toddler_booklet_green.pdf

Early years practice procedures

Prime times – Intimate care and nappy changing

Prime times of the day make the best of routine opportunities to promote 'tuning-in' to the child emotionally and to create opportunities for learning while attending Happy Faces Pre School. 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.

Nappy changing is always done in an appropriate/designated area. Children are not changed in play areas or next to snack tables. If there are limitations for nappy change areas due to the lay-out of the room or space available this is discussed with the setting manager's line manager so that an appropriate site can be agreed that maintains the dignity of the child and good hygiene practice.

Intimate care and toileting

- Young children are always changed within sight or hearing of other staff whilst maintaining their dignity and privacy at all times. Where the layout of the setting makes this difficult to achieve, the setting manager completes a risk assessment to ensure that alternative arrangements are in place.
- Young children from two years may be put into 'pull ups' as soon as they are comfortable with this and if parents/carers agree.
- Changing areas are warm, appropriately sited and there are safe areas to lay young children if they need to have their bottoms cleaned. There are mobiles or other objects of interest to take the child's attention.
- If children refuse to lie down for nappy change, they can be changed whilst standing up, providing it is still possible to clean them effectively.
- Each young child has his/her own bag on their peg with their nappies/pull ups and changing wipes.
- Staff ensure that nappy changing is relaxed and a time to promote independence in young children.
- Members of staff put on aprons before changing starts and the area is prepared, gloves are always worn.
- All members of staff are familiar with the hygiene procedures and carry these out when changing nappies.
- Staff never turn their back on a child or leave them unattended on a changing mat.
- Young children are encouraged to take an interest in using the toilet; they may just want to sit on it and talk to a friend who is also using the toilet.
- They are encouraged to wash their hands and have soap and paper towels to hand. They should be allowed time for some play as they explore the water and the soap.
- Anti-bacterial hand wash liquid or soap should not be used by young children, as they are no more effective than ordinary soap and water.

- Staff are gentle when changing and avoid pulling faces and making negative comment about the nappy contents.
- Wipes or cotton wool and water are used to clean the child. Where cultural practices involve children being washed and dried with towels, staff aim to make reasonable adjustments to achieve the desired results in consultation with the child's parents/carers. Where this is not possible it is explained to parents/carers the reasons why. The use of wipes or cotton wool and water achieves the same outcome whilst reducing the risk of cross infection from items such as towels that are not 'single use' or disposable.
- Staff do not make inappropriate comments about young children's genitals when changing their nappies.
- Older children use the toilet when needed and are encouraged to be independent.
- Members of staff do not wipe older children's bottoms unless there is a need, or unless the child/parent has asked.
- Parents/carers are encouraged to provide enough changes of clothes for 'accidents' when children are potty training.
- Spare clothes are kept by the setting.
- If young children are left in wet or soiled nappies/pull-ups in the setting, this may constitute neglect and will be a disciplinary matter.

Nappy changing records.

- Staff record when they changed the child on the nappy checklist.
- Exceptionally soft, watery stools are signs of diarrhoea; strict hygiene needs to be carried out in cleaning the changing area to prevent spread of infection. The parent/carer should be called immediately to collect their child, who must be taken to the doctor. The child must stay at home for 48 hours after the diarrhoea has stopped.
- Sometimes a child may have a sore bottom. This may have happened at home because of poor care; or the child may have eaten something that, when passed, created some soreness. The child also may be allergic to a product being used. This must be noted and discussed with the parent and a plan devised and agreed to help heal the soreness. This may include use of nappy cream or leaving the child without a nappy in some circumstances. If a medicated nappy cream prescribed by a doctor is used, this must be recorded as per procedure "Administration of medicine". All other nappy creams will be indicated, if applied, on the nappy checklist.

Early years practice procedures

Prime times – Sleep and rest time

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 are encouraged to lay in the quiet area if they become tired or they are moved to the quiet area if they have fallen asleep elsewhere in the setting.
- Heavier clothing, such as coats, are removed.
- Hair accessories with parts that may come lose or detached and pose a choking hazard are removed before sleep/rest time.
- If children fall asleep in-situ it may be necessary to move or wake them to make sure they are comfortable.
- Sleeping children are regularly checked at least every five minutes; this is recorded with the time checked and the initials of the person responsible for checking on a sleep record form. Children are within sight and/or hearing of staff.

Further guidance

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

Early years practice procedures

Promoting positive behaviour

Positive behaviour is located within the context of the development of children's personal, social and emotional skills and well-being. A key person who understands children's needs, their levels of development, personal characteristics, and specific circumstances, supports this development. This ensures children's individual needs are understood and supported. Settling into a new environment is an emotional transition for young children especially as they learn to develop and master complex skills needed to communicate, negotiate and socialise with their peers. Skills such as turn taking and sharing often instigate minor conflicts between children as they struggle to deal with powerful emotions and feelings. During minor disputes, key persons help children to reflect and regulate their actions and, in most instances, children learn how to resolve minor disputes themselves. However, some incidents are influenced by factors, requiring a strategic approach especially if the behaviour causes harm or distress to the child or others. These situations are managed by the SENCO/key person using a stepped approach which aims to resolve the issue and/or avoid the behaviour escalating and causing further harm.

This is an unsettling time for young children. Practitioners are alert to the emotional well-being of children who may be affected by the disruption to their normal routine. Where a child's behaviour gives cause for concern, practitioners take into consideration the many factors that may be affecting them. This is done in partnership with the child's parents/carers and the principles of this procedure are adhered to

The setting manager/SENCO will:

- ensure that all new staff attend training on behaviour management such as *Understanding and Addressing Behaviour in the Early Years* (EYA Central)
- help staff to implement procedure "Promoting positive behaviour" in their everyday practice
- advise staff on how to address behaviour issues and how to access expert advice if needed

Rewards and sanctions

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 immediate results for the adult but do not teach a child how to act when a 'prize' is not being given or provide the skills to manage situations and emotions themselves. Instead, a child is taught to be 'compliant' and respond to meet adult expectations to obtain a reward (or for fear of a sanction). If used the type of rewards and their functions must be carefully considered.

Children are never labelled, criticised, humiliated, punished, shouted at or isolated by removing them from the group to be left in 'time out' or on a 'naughty chair'. If a child is distressed or causing harm to others, it may help to remove them from the immediate environment where the incident occurred. They should be taken to a quiet area by their key person for up to 5 minutes to help them calm down. If appropriate, the key person can use this time to help the child reflect on what has happened. Physical punishment of any kind is never used or threatened which could adversely affect a child's well-being. If staff become aware that

another person has given corporal punishment to a child, they follow “Safeguarding children, young people and vulnerable adults procedures”. Physical intervention to safeguard a child/children must be carried out as per the guidance in this procedure.

Step 1

- The setting manager, SENCo and other relevant staff members are knowledgeable with, and apply the procedure “Promoting positive behaviour”.
- Unwanted behaviours are addressed using an agreed and consistently applied approach to deescalate situations
- Behaviours that result in concern for the child and/or others must be discussed by the key person, SENCo/setting manager. During the meeting the key person must use their all-round knowledge of the child and family to share any known influencing factors such as a new baby in the family, child and/or parental illness, underlying additional needs to help place the child’s behaviour into context.
- Appropriate adjustments to practice must be agreed within the setting. If relevant, a risk assessment should be carried out.
- If the adjustments are successful and the unwanted behaviour does not reoccur or cause concern, then normal monitoring can resume.

Step 2

- If the behaviour remains a concern, then the key person and SENCo must liaise with the parents to try to discover possible reasons for the behaviour and to agree next steps. If relevant and appropriate the views of the child must 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 setting manager/SENCo must suggest using a focused intervention approach to identifying a trigger for the behaviour such as the ABC approach, i.e. Antecedents – what happened before; Behaviour – what was the behaviour observed; Consequences – what happened after the event.
- If a trigger is identified, then the SENCo and key person must meet with the parents to plan support for the child through a graduated approach via SEN support.
- Aggressive behaviour by children towards other children will result in a staff member intervening immediately to stop the behaviour and prevent escalation using the agreed initial intervention approach. If the behaviour has been significant or may have a detrimental effect on the child, the parents/carers of the victim of the behaviour and the parents/carers of the perpetrator must be informed. If the setting has applied a physical intervention, they must follow the guidance as set out below. The designated safeguarding lead completes “Safeguarding incident reporting form” and contact Ofsted if appropriate. A record of discussions is recorded, and parents/carers are asked to sign.
- Parents/carers must also be asked to sign risk assessments where the risk assessment relates to managing the behaviour of a specific child.
- If relevant, actions for dealing with the behaviour at home are agreed with parents and incorporated into the action plan. Other staff are informed of the agreed interventions and help implement the actions.

The plan must be monitored and reviewed regularly by the key person/SENCo until improvement is noticed.

- Incidents and intervention relating to unwanted/challenging behaviour by children must be clearly and appropriately logged on “SEN Support - Action plan”.

Step 3

If despite applying initial intervention to deescalate situations and focused interventions to identify triggers the child's behaviour continues to occur and/or is of significant concern, the SENCo and key person invite the parents/carers to a meeting to discuss external referral and next steps for supporting the child. It may be agreed that the setting request support from the Early Help team and/or other specialist services such as the Area SENCo. This will help address most developmental or welfare concerns. If the behaviour is part of other welfare concerns that include a concern that the child may be suffering or likely to suffer significant harm, safeguarding procedures “Safeguarding children, young people and vulnerable adults” procedures must be followed immediately.

- Advice provided by external agencies is incorporated in “SEN Support: Action Plan” and regular multi-disciplinary meetings held to review the child's progress.
- If a review determines a statutory assessment may be needed then all relevant documentation must be collected in preparation for an Education Health and Care Assessment which may lead onto an Education, Health and Care Plan.

Use of physical intervention

Staff will already use different elements of physical contact with a child as part of their interaction in the setting especially when they are comforting a child or giving first aid. However, physical intervention to keep a child or other children safe is different and should only be applied in exceptional circumstances.

The EYFS states that physical intervention from a staff member towards a child may be used for the purposes of “averting immediate danger of personal injury to any person (including the child) or to manage a child's behaviour if it is absolutely necessary”.

Staff must do all they can to avoid using a physical intervention because this is not the preferred way of addressing children's behaviour.

To offer protection to children a range of appropriate graded interventions may be needed before physical intervention is applied. Most single incidents such as a child throwing a book on the floor or kicking a chair usually only require a verbal intervention from a member of staff. In other situations, an intervention can be applied through mechanical and environmental means such as locking doors and stair gates. This usually stops a situation escalating. However, there will be some situations where a child places themselves or others in danger which requires an immediate need for the use of both verbal and physical intervention. If a single or persistent incident requires a physical intervention such as physical handling from a staff member towards a child, then this is used intentionally to restrict a child's movement against their will. In most cases this can be applied using the adult's body gently and safely blocking the child from access to danger or to prevent danger.

To physically intervene, a practitioner may use “reasonable force” to protect a child from injuring themselves or others. Legally a practitioner may also use reasonable force to prevent a child from damaging property. However, we would expect that in instances of damaging physical property a child would only experience a physical intervention if the broken property presented a risk or is high value.

If a situation arises which requires urgent physical hands-on intervention this is best applied by the staff who knows the child well such as their key person who is more able to calm them or use other known methods for defusing situations without physical intervention.

Physical handling

We use the principle of applying reasonable minimal force and handling in proportion to the situation. Staff use as little force as necessary to maintain safety. This intervention should only be used for as short a period as possible to keep the child safe and maintain well-being by aiming for:

- keeping the child's safety and well-being paramount
- a calm, gentle but firm approach and application of the intervention
- never restricting the child's ability to breathe
- side-by-side contact with the child
- no gap between theirs or the child's body
- keeping the adults back as straight as possible
- avoiding close head-to-head positioning to avoid injury to the child and themselves (head butting)
- only holding the child by their 'long' bones to avoid grasping at the child's joints where pain and damage are most likely to occur
- avoiding lifting the child unless necessary
- reassuring the child and talking about what has happened
- only applying a physical intervention on a disabled child if training or preferred method is provided from a reputable external source e.g. British Institute of Learning Disabilities www.bild.org.uk/

Risks

There are risks associated with any physical intervention and handling of a child. The younger and more vulnerable a child may be, the greater risk to the child of using physical intervention towards them.

However, there are also risks to children associated with not intervening physically; for instance, if a practitioner did not take hold of a child by the wrist, they may have run into the path of a fast-moving car.

Before intervening physically to protect a child from immediate harm a practitioner needs to decision make in a split second, considering the following factors. This is described as dynamic risk assessment.

- What is the immediate risk to this child if I do not intervene now?
- What might the risks be if I do intervene? If this was my child, what would I want someone looking after them to do in this situation?
- What is the minimum level of intervention that will be effective here? How can I do this as gently as possible for as short a time as possible and how am I going to manage myself to stay calm?

Recording

Any instance of physical intervention is fully recorded immediately and reported to the designated person as soon as possible on "Safeguarding incident reporting form", ensuring that it is clearly stated when and how parents were informed. Parents/carers are asked to sign a copy of the form which is then kept on the child's file. The designated person decides who will notify the parent/carer and when, ensuring that the parent/carer signs to say they have been notified. An individual risk assessment should be completed after any physical intervention with a child which considers the risks and likelihood of such behaviour re-occurring and how this will be managed. The risk assessment should be agreed and signed by parents.

Temporary suspension (fixed term)

Any decision to temporarily suspend a child must be carefully considered lawful, reasonable and fair. If despite following the stepped approach for behaviour it is necessary to temporarily suspend a child, for no more than five days, on the grounds of health and safety, the following steps are followed.

- The setting manager provides a written request to suspend a child to their line manager; the request must detail the reason why the child must be suspended and the length of time of the proposed suspension.
- If the line manager approves, the parents/carers must be invited to a meeting to discuss next steps. Parents/carers are invited to bring a representative along. Notes must be taken at the meeting and shared later with the parents. The meeting must aim for a positive outcome for the child and not to suspend.
- If no acceptable alternative to suspension is found then the setting manager must give both verbal and written notice of time related suspension to the parent, meanwhile the setting manager must ensure that continued resolution is sought, and suitable adjustments are in place for the child's return.

Suspension of a disabled child

We have a statutory duty not to discriminate against a child based on a protected characteristic. This includes suspending a child based on a disability. Ignorance of the law or claiming it was unknown that a child was disabled is no defence. However, if the child's behaviour places themselves or others at risk then the setting must take actions to avoid further harm. Time limited suspension may be applied to keep the child and/or others safe whilst finding a solution. Suspension is only used if reasonable steps and planned adjustments are first used to help resolve the situation. Without this action, suspension of a child with SEND may constitute disability discrimination (Equality Act 2010). A decision to suspend a disabled child must be clearly evidenced, specific, measurable, achievable, realistic and targeted. Plans and intervention must be recorded on the child's file and "SEN Support - Action plan". If little or no progress is made during the suspension period, the following steps are taken.

- The setting manager sends a written/electronic invite to the parents/carers, a local authority representative and any relevant external agencies to attend a review meeting. Each attendee must be made aware that the meeting is to avoid the situation escalating further and to find a positive solution.
- After the meeting the setting manager continues to maintain weekly contact with the parents/carers and local authority to seek a solution.

- Suitable arrangements offer the parent/carer continued support and advice during the suspension. The setting manager reviews the situation fortnightly and provides their line manager with a monthly update.

Expulsion

In some exceptional circumstances a child may be expelled due to:

- if despite applying a range of interventions (including reasonable adjustments), the setting has been unable to adequately meet the child's needs or cannot protect the health, safety and well-being of the child and/or others.

Challenging unwanted behaviour from adults in the setting

We do not tolerate behaviour demonstrating dislike, prejudice, discriminatory attitudes or action towards any individual/group. This includes those living outside the UK (xenophobia). This also applies to behaviour towards specific groups of people and individuals who are British Citizens residing in the UK.

Allegations of discriminatory remarks or behaviour 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. Where a parent/carer makes discriminatory or prejudice remarks to staff at any time, or other persons 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/carer is 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/carer requesting them to sign a written agreement not to make discriminatory remarks or behave in discriminatory or prejudice ways; the third stage may be considering withdrawing the child's place.

Further guidance

Behaviour Matters (Alliance Publications)

Early years practice procedures

Identification, assessment and support for children with SEND

We have regard for the Special Educational Needs and Disability (SEND) (DfE and DoH 2015) which states that local authorities must ensure that all early years providers that they fund in the maintained, private, voluntary and independent sectors are aware of the requirement on them to meet the needs of children with SEN and disabilities. When securing funded early education for two-, three- and four-year-olds local authorities should promote equality and inclusion for children with disabilities or SEN; this includes removing barriers that prevent access to early education and working with parents/carers to give each child support to fulfil their potential.

The term SEN support defines arrangements for identifying and supporting children with special educational needs and/or disabilities. We are required to offer appropriate support and intervention and to promote equality of opportunity for children that we care for. Children's SEND generally falls within the following four broad areas of need and support:

- communication and interaction
- cognition and learning
- social, emotional and mental health
- sensory and/or physical needs

Graduated approach

Initial identification and support (identifying special educational needs)

- Ongoing formative assessment forms part of a continuous process for observing, assessing, planning and reviewing children's progress.
- Children identified as having difficulty with one or more area of development should be given support by applying some simple strategies and resources.
- For most children, application of some simple differentiation approaches will be enough to build confidence and help the child develop.
- If despite applying differentiated strategies a child continues to struggle and is showing significantly more difficulty with learning than their peers or has a disability which requires specific adjustments, then the key person should raise a concern with the setting's SENCo/setting manager for the manager to arrange a meeting with the parents.

Observation and assessment of children's SEN

Where a child appears to be behind expected levels, or their progress gives cause for concern, practitioners should consider all the information about the child's learning and development from within and beyond the setting.

- Information can be collated from formal checks such as the progress check at age two, observations from parents/carers and observation and assessment by the setting of the child's progress.

- When specialist advice has been sought externally, this is used to help determine whether a child has a special educational need (SEN).
- The child's key person and SENCo/Manager use this information to decide if the child has a special educational need.
- If the decision is that the child does have a SEN and the parents are not already aware of a concern, then the information is shared with them. Once parents/carers have been informed, they should be fully engaged in the process, contributing their insights to all future actions for their child.

Planning intervention

- Everyone involved with the child should be given an opportunity to share their views. Parents/carers should be encouraged to share their thoughts on the child's difficulties and be involved in the decision as to what will happen next.
- A first intervention option may be to carry on with applying differentiated support and to review the child's progress at an agreed date. If the child's needs are more complex, then the decision maybe to go straight ahead and prepare a personalised plan with detailed evidence-based interventions being applied straight away and simultaneously external referrals made.
- If relevant, then the child should be appropriately included in development of the personalised plan but only at a level which reflects their stage of comprehension.
- The personalised plan described below, ensures that children that are identified, or suspected of having a SEN will receive the right level of support and encouragement with their learning and development as early as possible.

Involving the child

- The SEND Code of Practice supports the rights of children to be involved in decisions about their education.
- Inclusion of children with SEND helps build self-confidence and trust in others.
- Ascertaining children's views may not be easy, a range of strategies will be needed.
- Accurate assessment helps identify children's strengths and possible barriers to learning.
- The key person and setting manager/SENCo work in partnership with parents/carers and other agencies to involve the child wherever appropriate.
- Children are involved at appropriate stages of the assessment and to their level of ability.
- Establishing effective communication is essential for the child's involvement.

SEN action plan

- The personalised plan should show what support is required to help achieve outcomes for the child and detail the frequency of these interventions and who will apply them and with what resources.
- A review date (at least termly) should be agreed with the parents/carers so that the child's progress can be reviewed against expected outcomes and next steps agreed.

- A copy of the plan is stored in the child's SEND file so that any other member of staff or an inspector looking at the file will see how the child is progressing and what interventions have been or are being applied.
- If a child requires specific medical interventions during their time in the setting, a "Health care plan form" should also be completed and integrated into the general plans to ensure the child's medical needs are known and safely met.
- The personalised plan should provide an accessible summary of the child's needs, which can be used if further assessment is required including a statutory Education Health and Care (EHC) Assessment, and development of an EHC plan.

Drawing up a SEN personalised plan

- If external agencies are already involved at this stage, then they should also be invited to help decide on what appropriate interventions are needed to help meet outcomes for the child. The SENCo/setting manager should take the lead in coordinating further actions including preparation of the personalised plan and setting short-term targets.
- Where there are significant emerging concerns (or an identified special educational need or disability) personalised plans are formulated that relate to a clear set of expected outcomes and stretching targets.
- The personalised plan highlights areas in which a child is progressing well; areas in which some additional support might be needed and any areas where there is a concern that a child may have a developmental delay (which may indicate a special educational need or disability). It describes the activities and strategies the provider intends to adopt to address any issues or concerns.
- Planned intervention should be based on the best possible evidence and have the required impact on progress with longer-term goals covering all aspects of learning and development and shorter-term targets meeting goals.
- The plan should focus on the needs of the child, the true characteristics, preferences, and aspirations of the child and involvement of the parents with a clear set of targets and expected outcomes for the child. Effective planning at this stage should help parents and children express their needs, wishes, and goals:
 - focus on the child as an individual and not their SEN label
 - be easy for children to understand and use clear ordinary language and images, rather than professional jargon
 - highlight the child strengths and capacities
 - enable the child, and those who know them best, to say what they have done, what they are interested in and what outcomes they are seeking in the future
 - tailor support to the needs of the individual

- organise assessments to minimise demands on families
- bring together relevant professionals to discuss and agree together the overall approach
- If the child fails to make progress and multi-agency support is sought, then it is at this point that Early Help/CAF assessment should be considered.

Record keeping

If a child has or is suspected of having a SEN, a dated record should be kept of:

- the initial cause for concern and the source of this information, (the progress check at age two and/or outcomes of previous interventions).
- the initial discussion with parents/carers raising the possibility of the child's SEN
- the views of the parents/carers and other relevant persons including, wherever possible, the child's views;
- the procedures followed regarding the Code of Practice to meet the child's SEND e.g. SEN action plan, referrals to external agencies and for statutory assessment
- evidence of the child's progress and any identified barriers to learning
- advice from other relevant professionals; and all subsequent meetings with parents and other persons and any subsequent referrals

Records may include

- observation and monitoring sheets
- expressions of concern
- risk assessments
- access audits
- health care plans (including guidelines for administering medication)
- SEN action plans
- meetings with parents/carers and other agencies
- additional information from and to outside agencies
- agreements with parents/carers
- guidelines for the use of children's individual equipment; Early help CAF referrals
- referral to the local authority identifying a child's special educational needs and request for statutory Education, Health, Care (EHC) needs assessment, and a copy of an EHC plan

Seeking additional funding/enhanced/top up

If the child's needs cannot be met from within the setting's core funding, then it will be at this point that the evidence collated will be used to apply for top up/enhanced funding from the local authority's inclusion fund. If a new or existing child is disabled, then the setting should check if the family is in receipt or have applied

for Disability Living Allowance. If so, the setting will be able to apply to their local authority for the local Disability Access Fund.

Statutory education, health and care (EHC) assessment and plan

Statutory assessment

- If a child has not made progress, then the next steps may be for the child to undergo an Education, Health and Care Assessment.
- If a child is under compulsory school age, the local authority will conduct an EHC needs assessment if they consider that the child's needs cannot be met within the resources normally available to the early years setting.
- Children aged under two are eligible where an assessment has indicated that the child is likely to have SEN which requires an EHC plan when they reach compulsory school age.
- When a child's needs appear to be sufficiently complex, or the evidence suggest specialist intervention then the local authority is likely to conclude that an EHC plan is necessary
- The local authority should fully involve the parent and must seek advice from the setting in making decisions about undertaking an EHC assessment and preparing an EHC plan.
- Settings should prepare by collating information about the child's SEND including:
 - documentation on the child's progress in the setting
 - interventions and support provided to date
 - evidence of external agency assessment, support and recommendations
 - parent/carers views and wishes (and where appropriate those of the child)

The information will then be submitted to the local authority to allow them to accurately assess the child in the context of the support already given.

- The local authority must inform the child's parents of their decision within six weeks of receiving a request for an assessment and give its reasons for their decision. If the local authority decides to conduct an assessment, it must ensure the child's parents are fully included right from the beginning and are invited to contribute their views. If the local authority subsequently decides not to conduct an assessment it must then inform the parents of their right to appeal that decision, of the requirement for them to consider mediation should they wish to appeal.
- If the local authority decides that a statutory EHC plan is not necessary, it must notify the parents/carers and inform the provider, giving the reasons for the decision. This notification must take place within 16 weeks of the initial request or of the child having otherwise been brought to the local authority's attention.
- If the decision following an assessment is to compile an EHC plan the local authority should consult collaboratively with the parents/carers in the preparation of the plan ensuring that their

views and their child's preferences are considered and that plans describe positively what the child can do and has achieved to date.

- Plans are evidenced based and focus on short term outcomes and long-term aspirations for the child including family and community support. Parents/carers have the right to request a particular provision for their child to be named within their EHC plan.
- If an early years setting is named, the local authority must fund this provision. They cannot force a setting to take a child and can only name the provision in the EHC if the setting agrees.
- Local authorities should consider reviewing an EHC plan for a child under age five at least every three to six months. Such reviews would complement the duty to carry out a review at least annually but may be streamlined and not necessarily require the attendance of the full range of professionals, depending on the needs of the child. The child's parents/carers must be fully consulted on any proposed changes to the EHC plan and made aware of their right to appeal to the Tribunal.

External intervention and support

Where external agency intervention has been identified to help support a child with SEND then this intervention should be recommended in writing by a suitably reliable source such as a speech and language therapist, paediatrician or educational psychologist.

Further guidance

[SEND Code of Practice: 0 to 25 years](#) (DfE and DoH 2015)

[Ready, Steady, SENCO](#) (Alliance Publication)

Early years practice procedures

Prime times – Transition to school

Moving on to school is a major transition in a child's life involving separation from familiar adults and children. Older children have a more secure understanding of 'people permanence' and can approach new experiences with confidence. However, they need preparation if they are to approach transition to school with confidence and an awareness of what to expect.

Partnership with schools

- Details of the school that a child will be attending are recorded.
- Every effort is made to forge and maintain strong links with all schools that children may attend. The setting manager will approach schools to open lines of communication where these have not previously existed.
- Details of the school's transition or settling in procedures are kept by the setting and are referred to so that members of staff are familiar with them and can develop a consistent approach to transition with teachers, parents/carers and children.
- Teachers are welcomed into the setting and sufficient time is made for them to spend both with the child, their parents/carers and with the key person, to discuss and share information that will support the child's transition to school.
- A child's transition form is forwarded to the school along with other information that will aid transition and settling in. Parents/carers receive a copy of this.
- Any action plans relating to a child's additional needs are also shared, where this is in place.
- Other formal documentation such as safeguarding information is prepared in line with procedure "Transfer of records".

Partnership with parents/carers

- Key persons discuss transition to school with parents and set aside time to discuss learning and development summaries. Parents/carers are encouraged to contribute to summaries.
- Key persons will discuss with parents/carers how they are preparing their child for school and will share information about how the setting is working in partnership with the school to aid transition.
- Key persons will make clear to parents the information that will be shared with the school, for example, information regarding child protection and work that has taken place to ensure the child's welfare.

Increasing familiarity for children

- If there are several schools in a catchment area, or the setting is not within a reasonable distance of the school, other means of familiarisation will be explored. This could be through videos, photographs or other information about the school that can be shown within the setting. Staff may borrow resources from the schools and will use these with the children.

Preparing children for leaving

- Children and parents/carers form bonds with adults and children in the setting and will need preparation for separating from the relationships they have formed.
- The child's last day should be prepared for in advance and marked with a special celebration or party that acknowledges that the child is moving on.
- Parents/carers should not be discouraged from bringing the child for the occasional brief visit, as separations often take time to complete. Sometimes children need the reassurance that their pre-school is still there and that they are remembered.

Early years practice procedures

Progress check at age two

- A template for completing the two-year-old progress check is provided by KCC.
- The key person is central to the progress check and must be the person completing it.
- Settings should take guidance from their local authority as to when the progress check at age two is completed; if no such guidance is provided, the progress check is completed when the child is between 26 and 30 months old. The child should be attending the setting for at least 1 term before the check is completed.
- Once the timing of the child's progress check is confirmed, parents/carers are invited to discuss their child's progress at a mutually convenient time.
- The setting must seek to engage both parents/carers and make allowance for parents/carers who do not live with their child to be involved.

Completing the progress check at age two

- On-going observational assessment informs the progress check and must be referred to.
- Children's contributions are included in the report. Staff must be 'tuned in' to the ways in which very young children, or those with speech or other developmental delay or disability, communicate.
- Where any concerns about a child's learning and development are raised these are discussed with the parents/carers, the SENCo and the setting manager.
- If concerns arise about a child's welfare, they must be addressed through "Safeguarding children, young people and vulnerable adults" procedures.
- The key person must be clear about the aims of the progress check as follows:
 - to review a child's development in the three prime areas of the EYFS
 - to ensure that parents have a clear picture of their child's development
 - to enable practitioners to understand the child's needs and, with support from practitioners, enhance development at home
 - note areas where a child is progressing well and identify any areas where progress is less than expected
 - describe actions the provider intends to take to address any developmental concerns (working with other professionals as appropriate)

Working in partnership with parents/carers and other agencies policy

Alongside associated procedures in “Working in partnership with parents/carers and other agencies”, this policy was adopted by Happy Faces Pre School in August 2021.

Aim

Happy Faces Pre School actively promote partnership with parents/carers and recognise the importance of working in partnership with other agencies to promote the well-being of children and their families. This includes signposting parents/carers to support as appropriate.

Objectives

- We believe that parents/carers are children’s first and most enduring educators and our practice aims to involve and consult parents/carers on all aspects of their child’s well-being.
- We also recognise the important role parents/carers must play in the day-to-day organisation of the provision.
- We consider parents/carers views and expectations and will give the opportunity to be involved in the following ways:
 - sharing information about their child’s needs, likes, achievements and interests
 - settling in their child to the agreed plan according to our settling in procedures
 - taking part in children’s activities and outings
 - contributing with ideas or resources as appropriate to enhance the curriculum of the setting
 - taking part in early learning projects, sharing with practitioners knowledge and insights about their child’s learning
 - contributing to assessment with information, photos and stories that illustrate how their child is learning within the home environment, taking part in day-to-day family activities
 - taking part in discussion groups
 - taking part in planning, preparing, or simply participating in social activities organised within the setting
 - Ofsted and setting contact details are displayed on the parent/carer notice board for parents/carers who have a complaint that cannot be resolved with the setting manager in the first instance, or where a parent/carer is concerned that the EYFS standards are not being maintained

Partnership and signposting to other agencies

- We are committed to ensuring effective partnership with other agencies including:
 - local authority early years services about the EYFS, training and staff development

- local programmes regarding delivering children's centres or the childcare and early education element of children's centres
- social welfare departments regarding children in need and children who need safeguarding or for whom a child protection plan is in place
- child development networks and health professionals to support children with disabilities and special needs
- local community organisations and other childcare and early education providers
- Ofsted and setting contact details are made available to other agencies who have a complaint that cannot be resolved with the setting manager in the first instance, or where a parent/carer is concerned that the EYFS welfare standards are not being maintained.

Legal references

Childcare Act 2006

Education Act 2011

Working in partnership with parents/carers and other agencies procedures

Working in partnership with parents/carers and other agencies

Happy Faces Pre School believe that families are central in all services we provide for young children. They are involved in all aspects of their child's care, their views are actively sought, and they are actively involved in the running of the setting in various ways.

We work in partnership with local and national agencies to promote the well-being of all children.

Families

- Parents/carers are provided with written information about the setting, including the setting's safeguarding actions and responsibilities under the Prevent Duty
- Parents/carers are made to feel welcome in the setting; they are greeted appropriately.
- Every effort is made to accommodate parents/carers who have a disability or impairment.
- The expectations we make on parents/carers are made clear at the point of registration.
- There is a clear expectation that parents/carers will participate in settling their child at the commencement of a place according to an agreed plan.
- There is sufficient opportunity for parents/carers to share necessary information with staff and this is recorded and stored to protect confidentiality.
- Key persons support parents/carers in their role as the child's first and most enduring educators.
- Key persons regularly meet with parents/carers to discuss their child's learning and development and to share concerns if they arise.
- Key persons work with parents/carers to carry out an agreed plan to support a child's special educational needs.
- Key persons work with parents/carers to carry out any agreed tasks where a child protection plan is in place.
- According to the nature of the setting, there is provision for families to be involved in activities that promote their own learning and well-being.
- Parents/carers are involved in the social and cultural life of the setting and actively contribute.
- As far as possible the service is provided in a flexible way to meet the needs of parents/carers without compromising the needs of children.
- Parents/carers are involved in regular assessment of their child's progress, including the progress check at age two, as per procedure "Progress check at age two".
- There are effective means for communicating with parents/carers on all relevant matters and "Complaints procedure" for parents/carers and service users is referred to when necessary.

- Every effort is made to provide an interpreter for parents/carers who speak a language other than English and to provide translated written materials.
- Information about a child and their family is kept confidential within the setting. 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 their child's development that need to be shared with another agency. Parental permission will be sought unless there are reasons not to, to protect the safety of the child.
- Parental consent is sought to administer medication, take a child for emergency treatment, take a child on an outing and take photographs for the purposes of record keeping.
- Parents/carers' views are sought regarding changes in the delivery of the service
- There are opportunities for parents/carers to take active roles in supporting their child's learning in the setting: informally through helping out or activities with their child, or through structured projects engaging parents/carers and staff in their child's learning.

Agencies

- We work in partnership or in tandem with local and national agencies to promote the wellbeing of children.
- Procedures are in place for sharing of information about children and families with other agencies, as set out in procedures "Confidentiality, recording and sharing information".
- Information shared by other agencies (third party information) is also kept in confidence and not shared without consent from that agency.
- When working in partnership with staff from other agencies, individuals are made to feel welcome in the setting and professional roles are respected.
- Staff follow the protocols for working with agencies, for example on child protection.
- 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 children during their visit.
- Staff do not casually share information or seek informal advice about any named child/family.
- We consult with and signpost to local and national agencies who offer a wealth of advice and information promoting staff understanding of issues facing them in their work and who can provide support and information for families. For example, ethnic/cultural organisations, drug/alcohol agencies, welfare rights advisors or organisations promoting childcare and education, or adult education.

Schools

- Settings work in partnership with schools to assist children's transition as per procedure "Prime times – transition to school" and share information as per procedure "Transfer of records".
- The setting manager actively seeks to forge partnership with local schools with the aim of sharing best practice and creating a consistent approach.

Working in partnership with parents/carers and other agencies procedures

Complaints procedure for parents/carers and service users

There is a fair way of dealing with issues as they arise in an informal way, but parents/carers may wish to exercise their right to make a formal complaint. They are informed of the procedure to do this, and complaints are responded to in a timely way. The same procedures apply to agencies who may have a grievance or complaint.

Parents/carers

- If a parent/carer is unhappy about any aspect of their child's care or how they have been treated, this should be discussed with the setting manager. The setting manager will listen to the parent/carer and acknowledge what they are unhappy about. The setting manager will then talk to the key person for an explanation and ask them to apologise if appropriate. The issue and how it was resolved is recorded in the child's file and Complaint Investigation Record. The recording will also make clear whether the issue being raised relates to a concern about quality of the service or practice, or a complaint. For allegations relating to serious harm to a child caused by a member of staff or volunteer procedure "Allegations against staff, volunteers or agency staff" will be followed.
- If the parent/carer is not satisfied, or if the complaint is about the setting manager, the setting manager is asked to forward their complaint verbally or in writing to the committee chair, who will respond to the parent within 14 days.
- If the complainant believes that the matter has not been resolved and there has been a breach of the EYFS requirements they are entitled to make a complaint to Ofsted. The manager will assist in any complaint investigation as well as in producing documentation that records the steps that were taken in response to the original complaint.
- The setting manager ensures that parents/carers know they can complain to Ofsted by telephone or in writing at any time as follows:

Applications, Regulatory and Contact (ARC) Team, Ofsted, Piccadilly Gate, Store Street, Manchester M1 2WD or telephone: 0300 123 1231

Other services

- If an individual from another service wishes to make a formal complaint about a member of staff or any practice of the setting, it should be made in writing to the setting manager.
- The complaint is acknowledged in writing within 10 days of receiving it.

The setting manager investigates the matter and meets with the individual to discuss the matter further within 28 days of the complaint being received.

- An agreement needs to be reached to resolve the matter.
- If agreement is not reached, the complainant may write to the setting manager's line manager, who acknowledges the complaint within 5 days and reports back within 14 days.

- If the complainant is not satisfied with the outcome of the investigation, they are entitled to appeal and are referred to the trustees.

Ofsted complaints record

- Legislation requires settings to keep a record of complaints and disclose these to Ofsted at inspection, or if requested by Ofsted at any other time.
- The record of complaints is a summative record only.
- A record of complaints will be kept for at least 3 years.
- In all cases where a complaint is upheld a review will be undertaken by the trustees to look for ways to improve practice where it is required.

Ofsted's "Parents" poster is displayed on the notice board.

Further guidance

Complaint Investigation Record (Alliance Publication)