**Section – 1.9 Promoting Health and Hygiene on the premises**

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**Policy Statement**

The health and welfare of the children and staff at Little Apples of Bramley will remain our first priority.

1. **Administering and storing medicines**

Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that medicine has been obtained from the child’s parent and/or carer. Permissions including time, dose and delivery method are recorded in the medicine book.

Training must be provided for staff where the administration of medicine requires medical or technical knowledge.

Staff confirm regularly that the information we hold is up to date. Key person and Manager have initial responsibility.

Prescription medicines must not be administered unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist (medicines containing aspirin should only be given if prescribed by a doctor).

Providers must keep a written record each time a medicine is administered to a child and inform the child’s parents and/or carers on the same day, or as soon as reasonably practicable.

Medicines are stored out of children’s reach, either in the medicine safe or in the fridge if refrigeration is required. We acknowledge that this does not comply with guidelines that medicines should be stored in a non-portable container but this is not possible due to the shared nature of our premises.

Where staff are taking medication, they have an obligation to inform management where this may affect their ability to perform their duties as detailed in their job description. Management check staff status in this regard regularly at supervision and offer support where required. Management will decide if a risk assessment is required.

Where staff must take medication during the working day, this must be stored in a non-child area (kitchen, storage facility, medicine safe) and individual staff members are responsible for this in the first instance. Staff medical issues remain confidential and can only be shared with permission on a need-to-know basis, for the protection of children and staff.

1. **Allergies, sick and infectious children**

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

**Procedures - allergies**

Any known allergies are recorded on the acceptance form by parents and the medical advice by the manager. A copy is available in the emergency contact folder and with the food preparation equipment.

If a child has an allergy, a risk assessment form is completed to detail the following:

The allergen (i.e. the substance, material or living creature the child is allergic to such as nuts, eggs, bee stings, cats etc).

The nature of the allergic reactions e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc.

What to do in case of allergic reactions. Use of medications is provided in the medicine book.

Control measures – such as how the child can be prevented from contact with the allergen.

Review.

This form is kept with the risk assessments and a copy is displayed where staff can see it.

Parents or medical professionals train staff in how to administer special medication in the event of an allergic reaction.

Generally, no nuts or nut products are used within the setting. Parents are made aware of this in our Welcome pack.

**Children with Chronic illness**

A chronic medical condition means a child has a health condition that is ongoing and can have a considerable impact on their life. There are multiple types including more complex conditions and they may mean a child has special educational needs and disabilities (SEND)

Little Apples is an inclusive setting and will work with parents to accommodate children with chronic conditions.

An Individual Health and Care Plan (IHCP) must be developed with parents, relevant healthcare professional, setting staff and the manager.

An IHCP should include the medical condition, its triggers, signs, symptoms and treatment. It should also state the child’s resulting needs such as medication and other treatments, access to food and drink if this is necessary to manage their condition, dietary requirements and environmental issues. It must also include what action should be taken in an emergency.

The IHCP is reviewed regularly and parents provided with information on their child’s condition regularly. This may be daily if required.

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

If children appear unwell during the day – have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – Staff call the parents and ask them to collect the child, or send a known carer to collect on their behalf.

If a child has a temperature, they are kept cool, by removing top clothing, sponging their heads with cool water, but kept away from draughts.

In extreme cases of emergency an ambulance is called for the child. A member of staff travels with the child unless parents arrive before the ambulance leaves.

Little Apples will refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease.

Where children have been prescribed antibiotics, parents are asked to keep them at home for 48 hours before returning to the setting.

After vomiting or diarrhoea, parents must keep children home for 48 hours after the last instance of either.

The setting has a list of excludable diseases and current exclusion times.

**Reporting of ‘notifiable diseases’**

If a child or adult is diagnosed suffering from a notifiable disease under the Public Health (Infectious Diseases) Regulations 1988, the GP should report this to the Health Protection Agency.

When the setting becomes aware, or is formally informed of the notifiable disease, the manager informs Public Health England.

**Infection control**

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.

Gloves are used for cleaning/sluicing clothing after changing.

Soiled clothing is bagged for parents to collect.

Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and mops; cloths used are disposed of with the clinical waste.

Tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit are cleaned using a disinfectant.

Separate strategic plans are developed for operation during a pandemic and available with the risk assessment. These are shared to all staff.

**Nits and head lice**

Nits and head lice are not an excludable condition, although in exceptional cases a parent may be asked to keep the child away 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 if they are found to have head lice.

1. **Animals**

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

**Procedures**

**Animals in the setting as pets or visitors**

* We take account of the views of parents and children when selecting an animal or creature to keep as a pet in the setting.
* We carry out a risk assessment with a knowledgeable person accounting for any hygiene or safety risks posed by the animal or creature.
* We provide suitable housing for the animal or creature and ensure this is cleaned out regularly and is kept safely.
* We ensure the correct food is offered at the right times.
* We make arrangements for weekend and holiday care for the animal or creature.
* We register with the local vet and take out appropriate pet care health insurance.
* We make sure all vaccinations and other regular health measures, such as de-worming are up-to-date and recorded.
* Children are taught correct handling and care of the animal or creature and are supervised.
* Children wash their hands after handling the animal or creature and do not have contact with animal soil or soiled bedding.
* Staff wear disposable gloves when cleaning housing or handling soiled bedding.
* If animals or creatures are brought in by visitors to show the children they are the responsibility of the owner.
* The owner carries out a risk assessment, detailing how the animal or creature is to be handled and how any safety or hygiene issues will be addressed.

**Other animals at the setting**

Where animals enter the setting unplanned, including the garden, staff act to ensure the safety of the children in the first instance. This may involve moving the children to another area.

Sensible efforts are made to remove the animal where it is in the best interest of child, staff and animal welfare. Animals are treated with respect. Expert advice e.g RSPCA, RSPB is sought where required.

**Visits to farms**

* Before a visit to a farm a risk assessment is carried out - this may take account of safety factors listed in the farm’s own risk assessment which should be viewed.
* The outings procedure is followed.
* Children wash their hands after contact with animals.
* Outdoor footwear worn to visit farms are cleaned of mud and debris and should not be worn indoors.

1. **First Aid**

In our setting staff are able to take action to apply first aid treatment in the event of an accident involving a child or adult. At least one member of staff with current first aid training is on the premises or on an outing at any one time. The first aid qualification includes first aid training for infants and young children.

**The First Aid Kit**

Our first aid kit complies with the Health and Safety (First Aid) Regulations 1981 and contains the contains the following items:

* Triangular bandages (ideally at least one should be sterile) - x 4.
* Sterile dressings:

a) Eye pad - x 2

b) Medium x 6

c) Large x 2

* Composite pack assorted (individually-wrapped) plasters 2.
* Medium gloves x 3
* Low adherent pad
* Resusciade
* Non-woven swap
* Scissors
* Tape
* Sterogauz and applicator
* Guidance card as recommended by HSE 1.
* The first aid box is easily accessible to adults and is kept out of the reach of children. It maybe considered sensible to have more than one First aid kit to ensure that all areas and eventualities e.g evacuation are covered.
* The First aid kit/kits are checked termly to ensure contents are in date and all present. This is the responsibility of the deputy manager.
* At the time of admission to the setting, parents' written permission for emergency medical advice or treatment is sought. Parents sign and date their written approval.
* Parents sign a consent form at registration allowing staff to take seek emergency medical attention or advice for children if staff consider it necessary.

1. **Food and drink, including food hygiene**

This setting regards snack and meal times as an important part of the setting's day. Eating represents a social time for children and adults and helps children to learn about healthy eating. We promote healthy eating and at snack and meal times, we aim to provide nutritious food, which meets the children's individual dietary needs.

In our setting we provide and serve food for children on the following basis.

Snacks.

Packed lunches.

Optional lunch provided by Little Apples.

Food and cooking activities.

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

We are registered as a food provider with the local authority Environmental Health Department.

**Procedures**

We follow these procedures to promote healthy eating in our setting.

Before a child starts to attend the setting, we find out from parents their children's dietary needs and preferences, including any allergies.

We record information about each child's dietary needs in her/his registration record and parents sign the record to signify that it is correct.

We regularly consult with parents to ensure that our records of their children's dietary needs - including any allergies - are up-to-date. Parents sign the up-dated record to signify that it is correct.

We display current information about individual children's dietary needs so that all staff and volunteers are fully informed about them.

We implement systems to ensure that children receive only food and drink that is consistent with their dietary needs and preferences as well as their parents' wishes.

We plan menus in advance, involving children and parents in the planning.

We display the menus of meals/snacks for the information of parents.

We provide nutritious food for all meals and snacks, avoiding large quantities of saturated fat, sugar and salt and artificial additives, preservatives and colourings.

We include a variety of foods from the four main food groups:

* meat, fish and protein alternatives;
* dairy foods;
* grains, cereals and starch vegetables; and
* fruit and vegetables.

We include foods from the diet of each of the children's cultural backgrounds, providing children with familiar foods and introducing them to new ones.

We take care not to provide food containing nuts or nut products and are especially vigilant where we have a child who has a known allergy to nuts.

Through discussion with parents and research reading by staff, we obtain information about the dietary rules of the religious groups to which children and their parents belong, and of vegetarians and vegans, and about food allergies. We take account of this information in the provision of food and drinks.

We provide a vegetarian alternative on days when meat or fish are offered and make every effort to ensure Halal meat or Kosher food is available for children who require it.

We require staff to show sensitivity in providing for children's diets and allergies. Staff do not use a child's diet or allergy as a label for the child or make a child feel singled out because of her/his diet or allergy.

We organise meal and snack times so that they are social occasions in which children and staff participate.

We use meal and snack times to help children to develop independence through making choices, serving food and drink and feeding themselves.

We provide children with utensils that are appropriate for their ages and stages of development and that take account of the eating practices in their cultures.

We have fresh drinking water constantly available for the children. We inform the children about how to obtain the water and that they can ask for water at any time during the day.

In order to protect children with food allergies, we discourage children from sharing and swapping their food with one another.

For children who drink milk, we provide pasteurised cow’s milk or oat milk.

**Packed lunches**

Where parents choose to provide a lunchbox for their child, we ensure perishable contents of packed lunches are kept in a cool place and we advise parents to place an ice pack in lunch boxes to maintain temperature. Parents are informed of our policy on healthy eating and provided with advice on preparing a healthy lunchbox. We give parents information about suitable containers for food.

**Food hygiene**

The person in charge and the person responsible for food preparation understands the principles of Hazard Analysis and Critical Control Point (**HACCP**) as it applies to their business. The basis for this is risk assessment as is applies to the purchase, storage, preparation and serving of food to prevent growth of bacteria and food contamination. We use the food management system “Food Safety Hazards, Controls and Checks” as recommended by the Local Authority Food Hygiene inspector and the information in *Safer Food Better Business*.

At least one person has an in-date Food Hygiene Certificate.

The person responsible for food preparation and serving carries out daily opening and closing checks on the kitchen to ensure standards are met consistently.

We use reliable suppliers for the food we purchase.

Food is stored at correct temperatures and is checked to ensure it is in-date and not subject to contamination by pests, rodents or mould.

Packed lunches are stored in a cool place. Parents are advised to include an icepack.

Food preparation areas are cleaned before use as well as after use.

There are separate facilities for hand-washing and for washing up.

All surfaces are clean and non-porous.

All utensils, crockery etc are clean and stored appropriately.

Waste food is disposed of daily.

When children take part in cooking activities, they are supervised at all times and taught to understand the importance of hand washing and simple hygiene rules, are kept away from hot surfaces and hot water and do not have unsupervised access to electrical equipment such as blenders etc.

**Reporting of food poisoning**

Food poisoning can occur for a number of reasons; not all cases of sickness or diarrhoea are as a result of food poisoning and not all cases of sickness or diarrhoea are reportable.

Where children and/or adults have been diagnosed by a GP or hospital doctor to be suffering from food poisoning and where it seems possible that the source of the outbreak is within the setting, the manager will contact the Environmental Health Department and the Health Protection Agency, to report the outbreak and will comply with any investigation.

If the food poisoning is identified as a notifiable disease under the Public Health (Infectious Diseases) Regulations 1988 the setting will report the matter to PHE and to Ofsted via <https://www.gov.uk/guidance/report-a-serious-childcare-incident>

1. **Hot weather policy**

During times of hot and sunny weather, staff will take action to ensure children are protected from the effects of sun and heat.

**Procedures**

During hot or sunny weather parents are asked to bring in named sun hats. Some spares are available here. Children are not allowed outside without a hat.

Sun cream – parents are asked to apply cream before the session. If they wish sun cream to be re-applied they are asked to provide written authority to do so. Little Apples supply sun protection but children can bring their own named cream in their bag, parents must advise staff. Staff will use disposable gloves to apply cream at timely intervals.

During periods of very hot weather, access to the garden is restricted to time slots, maximum time 45 minutes or as staff feel appropriate.

Drinking water is always available, including outside in hot weather. All children are reminded to have a drink at snack time (mid morning), lunchtime and mid-afternoon. All children are encouraged to have a drink regularly throughout the day where conditions require this.

1. **Nappy changing**

No child is excluded from participating in our setting because they are not yet toilet trained and who may still be wearing nappies or equivalent. We work with parents towards toilet training when developmentally appropriate.

We make necessary adjustments to our bathroom provision and hygiene practice in order to accommodate children who are not toilet trained. We see toilet training as a self-care skill that children have the opportunity to learn with the full support and non-judgemental concern of adults when they are developmentally ready.

**Procedures**

Key persons are aware of the changing times for children in their care.

Key persons undertake changing young children in their key groups with the support of co-key person and other staff as required.

Changing areas are warm and safe.

Each young child has their own bag with their nappies or ’pull ups’ and changing wipes.

Gloves and aprons are put on before changing starts and the areas are prepared. Paper towel is put down on the changing mat freshly for each child. Gloves are latex free.

All staff are familiar with the hygiene procedures and carry these out when changing nappies.

In addition, key persons ensure that nappy changing is relaxed and a time to promote independence in young children.

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 should be encouraged to wash their hands and have soap and towels to hand. They should be allowed time for some play as they explore the water and the soap.

Key persons are gentle when changing; they avoid pulling faces and making negative comment about ‘nappy contents’.

Key persons do not make inappropriate comments about young children’s genitals when changing their nappies

Older children access the toilet when they have the need to and are encouraged to be independent.

Nappies and ’pull ups’ are disposed of hygienically. Any soil (faeces) in nappies or pull ups is flushed down the toilet and the nappy or pull up is double bagged and put in the bin. Cloth nappies, trainer pants and ordinary pants that have been wet or soiled are rinsed if required and double bagged for the parent to take home.

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. Settings have a ‘duty of care’ towards children’s personal needs.

Staff do not shut themselves off to change nappies, areas offering relative privacy but always accessible to other adults are used.

1. **Smoking/Vaping**

Little Apples is a No Smoking environment.

All staff, parents and volunteers are made aware of our no-smoking policy.

We display no-smoking signs.

The no-smoking policy is stated in our prospectus and welcome pack for parents.

Staff who smoke do not do so during working hours. This includes on breaks.

Where staff smoke before work they must wash their hands before work. Staff who vape must do so in the designated smoking area out of sight of the children and wash their hands before returning to work.

**Guidance**

EYFS Statutory framework <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/974907/EYFS_framework_-_March_2021.pdf>

Health and Safety (First Aid ) Regulations (1981)

<https://www.hse.gov.uk/pubns/priced/l74.pdf>

Helping children with medical conditions in education (2015) <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf>

Children with chronic illness

<https://www.earlyyearseducator.co.uk/features/article/well-rounded-approach-can-overcome-barriers>

Supporting pupils with medical conditions

[Statutory\_guidance\_on\_supporting\_pupils\_at\_school\_with\_medical\_conditions.pdf (publishing.service.gov.uk)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/306952/Statutory_guidance_on_supporting_pupils_at_school_with_medical_conditions.pdf)

Children and Families Act (2014)

<https://www.legislation.gov.uk/ukpga/2014/6/contents/enacted>

Notifiable diseases

<https://www.gov.uk/guidance/notifiable-diseases-and-causative-organisms-how-to-report>

Managing infection and exclusion periods

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

Food Hygiene

<https://www.food.gov.uk/business-guidance/hazard-analysis-and-critical-control-point-haccp>

<https://www.food.gov.uk/business-guidance/safer-food-better-business-sfbb>

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| **This policy was adopted by Little Apples of Bramley** |
| **On 6th September 2021** |
| **Date to be reviewed** |
| **Signed on behalf of the management committee *J V Whatley*** |
| **Name of signatory J V Whatley** |
| **Role of signatory Manager** |