

HEALTH and HYGIENE POLICY

The aim of this Health and Hygiene Policy is to set out the procedures for protecting and promoting the health and hygiene of staff, students and children within Humpty Dumpty Childcare, and arrangements for putting this policy into practice.

The health of the children attending the nurseries, Holiday club and After School club is of paramount importance at all times.

The company recognises and accepts responsibility for providing a healthy workplace for all staff, students, children and visitors.

The company will meet this responsibility, according to the Statutory Framework for the Early Years Foundation Stage.

MEDICATION

- Normally only medicines that have been prescribed by their own doctor, dentist, nurse or pharmacist will be administered to a child; however, in the event of your child needing relief for teething pain, etc. you may provide appropriate medication, clearly labelled with your child's name, and comply with the procedure outlined below.
- Prescription medication can only be given when prescribed for the person named on the medication.
- Medicines must be in their original containers, with instructions printed in English
- A child under 16 should never be given medicines containing aspirin unless it has been prescribed for that child by a doctor.
- Those with parental responsibility must give prior written permission for the administration of each and every medication. However, we will accept written permission once for a whole course of medication or for the ongoing use of a particular medication under the following circumstances:
 1. The written permission is only acceptable for that brand name of medication and cannot be used for similar types of medication, e.g. if the course of antibiotics changes, a new form will need to be completed
 2. The dosage on the written permission is the only dosage that will be administered. We will not give a different dose unless a new form is completed
 3. Parents must notify us IMMEDIATELY if the child's circumstances change, e.g. a dose has been given at home, or a change in strength/dose needs to be given.
- The nursery will not administer a dosage that exceeds the recommended dose on the instructions unless accompanied by written instructions from a relevant health professional such as a letter from a doctor or dentist
- The parent must be asked when the child has last been given the medication before coming to nursery; and the staff member must record this information on the medication form. Similarly, when the child is picked up, the parent or guardian must be given precise details of the times and dosage given throughout the day. The parent's signature must be obtained at both times
- Medication records are kept and are not removed from the setting. If a parent requests a child be given medicine, or if child needs continuous regular medication the procedures are as follows:
 1. A member of staff will record the relevant information on the relevant medicine form, i.e. date, name of child, type of medicine, amount to be administered, time to be administered.
 2. The parent will witness the recording of this information and sign the form.
 3. The member of staff will sign on administering the medicine and have the entry witnessed by another member of staff.
- Children's individual emergency medication is available at all times. Where the administration of medicines requires technical/medical knowledge individual training is provided for key staff from a qualified health professional.

- If a child has been prescribed antibiotics they should undergo 48 hours of the treatment at home before returning to the setting.
- Medicines should be stored strictly in accordance with product instructions and in the original container in which dispensed. They should include prescriber's instructions for administration.
- Additionally, we will always endeavour to obtain verbal permission from the parent or alternative emergency contact before administering any emergency pain relief. A medicine administration form will be completed and the parent/carer will be asked to countersign this when they collect their child.
- If the child refuses to take the appropriate medication, then a note will be made on the form
- Where medication is "essential" or may have side effects, discussion with the parent will take place to establish the appropriate response.

SICK CHILDREN

At Humpty Dumpty Childcare we promote the good health of all children attending. To help keep children healthy and minimise infection, we do not expect children to attend nursery if they are unwell. If a child is unwell it is in their best interest to be in a home environment with adults they know well rather than at nursery with their peers.

In order to take appropriate action of children who become ill and to minimise the spread of infection we implement the following procedures:

- * If a child becomes ill during the nursery day, we contact their parent(s) and ask them to pick up their child as soon as possible. During this time we care for the child in a quiet, calm area with their key person, wherever possible
- * We follow the guidance given to us by Public Health England (formerly the Health Protection Agency) in Guidance on Infection Control in Schools and other Child Care Settings and advice from our local health protection unit on exclusion times for specific illnesses, e.g. sickness and diarrhoea, measles and chicken pox, to protect other children in the nursery
- * Should a child have an infectious disease, such as sickness and diarrhoea, they must not return to nursery until they have been clear for at least 48 hours. We inform all parents if there is a contagious infection identified in the nursery, to enable them to spot the early signs of this illness. We thoroughly clean and sterilise all equipment and resources that may have come into contact with a contagious child to reduce the spread of infection
- * We exclude all children on antibiotics for the first 48 hours of the course (unless this is part of an ongoing care plan to treat individual medical conditions e.g. asthma and the child is not unwell) This is because it is important that children are not subjected to the rigours of the nursery day, which requires socialising with other children and being part of a group setting, when they have first become ill and require a course of antibiotics
- * We have the right to refuse admission to a child who is unwell. This decision will be taken by the manager on duty and is non-negotiable
- * Parents are requested to regularly check their children's hair for head lice. If a parent finds that their child has head lice we would be grateful if they could inform the nursery so that other parents can be alerted to check their child's hair.

Meningitis procedure

If a parent informs the nursery that their child has meningitis, the nursery manager will contact the Infection Control (IC) Nurse for their area. The IC Nurse will give guidance and support in each individual case. If parents do not inform the nursery, we will be contacted directly by the IC Nurse and the appropriate support will be given. We will follow all guidance given and notify any of the appropriate authorities including Ofsted if necessary.

- Children should not be brought to the setting if they are known to be suffering from sickness, diarrhoea, or any other infectious illness. They should be clear for at least 48 hours after the last bout of sickness or diarrhoea before returning.
- If in the opinion of the staff a child is ill the parent/carer will be notified and requested to collect him/her as soon as possible whilst the child is kept as quiet and comfortable as possible.
- If a child has a fever of 101 f/38 c or over, has diarrhoea and/or vomiting or shows signs and symptoms of any communicable diseases the parent/carer will be notified and requested to collect him/her as soon as possible. If a child is sent home ill with a temperature they should be absent from nursery for a minimum period of 24 hours.
- In the event of a child being taken ill with potentially dangerous communicable disease that a qualified medical practitioner considers notifiable e.g. German Measles, Meningitis, the nursery will inform all parents of the risk of infection.
- If we have reason to believe that any child is suffering from a notifiable disease identified as such in the Public Health (Infection Diseases) Regulations 1988, we will inform Ofsted. We will act on any advice given by the Health Protection Agency and inform Ofsted of any action taken.

Transporting children to hospital procedure

- The nursery manager/staff member must:
- Call for an ambulance immediately if the sickness is severe. DO NOT attempt to transport the sick child in your own vehicle
- Whilst waiting for the ambulance, contact the parent(s) and arrange to meet them at the hospital
- Redeploy staff if necessary to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together
- Arrange for the most appropriate member of staff to accompany the child taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Inform a member of the management team immediately
- Remain calm at all times. Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the accident.

EXCLUSION PROCEDURE FOR ILLNESS/COMMUNICABLE DISEASE taken from Public Health England Guidance on Infection Control in Schools and other Childcare Settings May 2016

MINIMUM PERIODS OF EXCLUSION FROM NURSERY	
<i>Disease/Illness</i>	<i>Minimal Exclusion Period</i>
Chickenpox	Until all vesicles have crusted over

E.coli, Typhoid, Dysentery	48 hours from last episode of sickness or diarrhea. further exclusion may be needed for children who are still excreting and those children who have difficulty adhering to hygiene practices.
Hand, foot and mouth	None
Impetigo	Until lesions are crusted and healed or 48 hours after starting antibiotic treatment
Infective hepatitis	7 days from onset of jaundice
Measles	4 days from appearance of the rash
Meningococcal meningitis/septicaemia/meningitis due to other bacteria	Until recovered from the illness
Mumps	5 days after onset of swelling
Pediculosis (lice)	None
Pertussis (whooping cough)	5 days from starting antibiotic treatment or 21 days from the onset of illness if no antibiotic treatment
Ringworm	Exclusion not usually required
Rubella (German measles)	4 days from appearance of the rash
Scabies	Child can return after first treatment
Scarlet fever	Child can return 24 hours after starting appropriate antibiotic treatment
Slapped cheek/fifth disease	None
Tuberculosis	Always consult local PHE centre
Vomiting/Diarrhoea	If sent home ill, child must be off for 48 hours from last episode of sickness or diarrhoea

ILLNESS AND INJURIES

- First aid boxes comply with health and safety regulations.
- First aid boxes contain a list of contents and are checked regularly by the Manager of the setting. The H&S Officer is notified of supplies that have been used and these are replenished.
- First aid kits are taken on outings.
- First aid boxes are clearly identifiable and easily accessible to all staff
- All key staff have current first aid training certificates and refresher courses are taken at least every three years.
- First aid training undertaken includes training in first aid for infants and young children.
- At least one First Aider will be present during every session and outing.
- First Aid procedures will be performed only by certified First Aiders.

- In the case of a serious accident or illness occurring that requires hospital treatment an ambulance will be called and the parent/carer notified immediately. In the absence of the parent/carer a senior staff member will accompany the child to hospital and stay with the child until the arrival of a parent/carer. All the child's relevant medical/personal details will also be taken to the hospital.
- Any major accidents, e.g. bone fractures, unconsciousness or any accident that results in more than 24 hours hospitalisation, will be reported to the Environmental Health Office and the Registration department, in addition to being recorded on an accident form.
- We will notify local child protection agencies of any serious accident or injury to, or the death of, any child whilst in our care and act on any advice given.
- All accidents/incidents involving children in our care, or staff, are recorded on accident/incident forms (white for children, green for staff) giving the date, time, brief description of accident/incident, any first aid administered and by whom.
- In the event of a child being bitten by another child, **and the skin has been broken**, the wound must be cleaned with water and antiseptic wipes. The Health Protection officer has informed us that parents need to be advised of the nature of this injury and that they may wish to take the child to a medical practitioner within 24 hours of the injury to have the risk of infection assessed. Permission is requested from the parents/carers of the child who bit, that their GP can be contacted by the GP of the child who has been bitten should there be concern over infection.
- Staff will decide when the best time to inform parents is, in relation to when the injury was sustained and when the child will be collected (e.g. if a child is bitten in the morning session but is not collected until the end of the day the parents will be called to inform them of what has happened.) A note of this advice given to parents must be made on the Accident Report form. All accidents/incidents involving children are reported to parents, who are asked to read the details on the accident form and to sign it.

HYGIENE

- Suitable hand washing and hand drying facilities and posters informing best practice are provided at all settings.
- Hygiene procedures are included in staff induction.
- Information about cross-contamination and good hygiene practice is included in staff health and safety training.
- The health and safety officer monitors all settings and ensures that staff are complying with good hygiene practice at all times.
- Cultural and religious practices are respected at all times.
- Children are encouraged to learn about personal hygiene, healthy living and good hygiene practices through daily routines, appropriate play and learning activities and by adults providing good role models.

Procedures for handling and disposing of nappies

- Gloves and aprons must be worn when changing nappies
- All nappies must be wrapped in a nappy sack before being placed in a lined nappy disposal bin *which is only to be used for soiled and wet nappies, gloves and aprons.*
- Gloves and aprons must be disposed of in same bin.
- Do not mix up normal room waste with disposed nappies.

Infection Control

We follow the guidance below to prevent a virus or infection from moving around the nursery. Our staff:

- * Encourage all children to use tissues when coughing and sneezing to catch germs

- * Ensure all tissues are disposed of in a hygienic way and all children and staff wash their hands once the tissue is disposed of
- * Develop children's understanding of the above and the need for good hygiene procedures in helping them to stay healthy
- * Wear the appropriate Personal Protective Equipment (PPE) when changing nappies, toileting children and dealing with any other bodily fluids. Staff are requested to dispose of these in the appropriate manner and wash hands immediately
- * Clean and sterilise all potties and changing mats before and after each use
- * Clean toilets at least daily and check them throughout the day
- * Remind children to wash their hands before eating, after visiting the toilet, playing outside or being in contact with any animal and explain the reasons for this
- * Clean all toys, equipment and resources on a regular basis by following a comprehensive cleaning rota and using antibacterial cleanser or through washing in the washing machine
- * Wash or clean all equipment used by babies and toddlers as and when needed including when the children have placed it in their mouth
- * Store toothbrushes (where applicable) hygienically to prevent cross-contamination
- * Provide individual bedding for children that is not used by any other child and wash this at least once a week
- * Ask parents and visitors to remove all outdoor footwear when entering Under 2s rooms where children may be crawling
- * Where applicable wear specific indoor shoes or slippers whilst inside the rooms and make sure that children wear them as well
- * Follow the sickness and illness policy when children are ill to prevent the spread of any infection in the nursery. Staff are also requested to stay at home if they are contagious.
- * The nursery manager retains the right of refusal of all children, parents, staff and visitors who are deemed contagious and may impact on the welfare of the rest of the nursery
- * Periodically each room in the nursery will be deep cleaned including carpets and soft furnishings to ensure the spread of infection is limited. This will be implemented earlier if the need arises
- * The nursery will ensure stocks of tissues, hand washing equipment, cleaning materials and sterilising fluid are maintained at all times and increased during the winter months or when flu and cold germs are circulating.

Staff medication

All nursery staff have a responsibility to work with children only where they are fit to do so. Staff must not work with children where they are infectious or too unwell to meet children's needs. This includes circumstances where any medication taken affects their ability to care for children, for example, where it makes a person drowsy. If any staff member believes that their condition, including any condition caused by taking medication, is affecting their ability they must inform their line manager and seek medical advice. *The nursery manager/person's line manager/registered provider will decide if a staff member is fit to work, including circumstances where other staff members notice changes in behaviour suggesting a person may be under the

influence of medication. This decision will include any medical advice obtained by the individual or from an occupational health assessment.

Where staff may occasionally or regularly need medication, any such medication must be kept in the person's locker/separate locked container in the staff room or nursery room where staff may need easy access to the medication such as an asthma inhaler. In all cases it must be stored out of reach of the children. It must not be kept in the first aid box and should be labelled with the name of the member of staff

Storage

All medication for children must have the child's name clearly written on the original container and kept in a closed box, which is out of reach of all children.

Emergency medication, such as inhalers and EpiPens, will be within easy reach of staff in case of an immediate need, but will remain out of children's reach.

Any antibiotics requiring refrigeration must be kept in a fridge inaccessible to children.

All medications must be in their original containers, labels must be legible and not tampered with or they will not be given. All prescription medications should have the pharmacist's details and notes attached to show the dosage needed and the date the prescription was issued. This will all be checked, along with expiry dates, before staff agree to administer medication.

ANIMALS

- Any animals children have contact with are free of disease and have appropriate health checks.
- Where animals are kept in the setting suitable housing and care routines are provided.
- Children are supervised at all times when handling or caring for animals.
- Children are encouraged to wash their hands after contact with animals and/or their equipment.
- Staff will consider all factors which need to be taken into account when considering children having contact with animals, including informing parents, religious beliefs, allergies and anxiety.

SANDPITS AND SAND TRAYS

- Wet and dry sand play and sand alternatives (e.g. pasta, rice, compost) are a core early years activity and are available daily
- Outdoor sandpits are inspected for foreign bodies/contamination etc. before every use
- Sand swept from a clean floor can be re-used – sieved/sterilized as necessary
- Sand is clean and changed/replaced as necessary
- Sufficient quantities of sand/sand alternatives are provided for the number of children wishing to play

SMOKING

- Humpty Dumpty Childcare abide by The Smoke Free Regulations 2007 law.
- It is also written into the staff contracts that staff members will never smoke when and where children may be conscious of them doing so.
- Staff must never smoke while on site or while wearing work clothes.

FOOD AND DRINK

Humpty Dumpty Childcare recognises that a balanced healthy and varied diet contributes positively to children's growth and development, and that mealtimes are a social occasion. To this end we aim to provide meals and snacks that are nutritious and to encourage appropriate behaviour at shared food times.

Food Management is seen as extremely important and our Health and Hygiene and Equal Opportunities policies state how we go about meeting the needs of all children in our care. We provide opportunities for staff training in Food Handling and Food Hygiene.

There are regular environmental checks on the premises, and particularly on food preparation areas. Fresh, produce is used wherever possible and meals are prepared on a “same day” basis. A nominated person orders, checks stock and prepares meals. The Parents as Partners policy encourages regular two way communication about children’s eating, and the home link books record what is eaten, and when, for each child.

DRINKING WATER

- Fresh drinking water is available to children at all times.
- Children are encouraged to help themselves or ask for a drink as appropriate. Younger children are offered drinks regularly.
- Individual children’s drinking is monitored to ensure their needs are met.
- Factors which affect how much children need to drink, such as indoor/outdoor temperatures, energetic play activities, illness and some types of medication, are taken into account.

MEALS

- Individual dietary requirements are respected.
- Cultural differences in eating habits are respected.
- Staff set an example of acceptable meal-time behaviour.
- Children are encouraged to say ‘please’ and ‘thank you’ when and where appropriate.
- Quiet conversation is actively encouraged.
- Any child who shows signs of distress has their food removed without any fuss.
- Staff set a good example whenever possible by eating the same food as the children.
- Children who are slow eaters are given time and not rushed.
- Quantities served take account of the ages and appetites of individual children.
- Children are encouraged where reasonably possible to wait until everyone has had enough of their main course before starting on their dessert.
- Learning situations that arise and can be created whilst preparing, serving and eating food are used.
- Children are encouraged to eat a variety of foods from all food groups and to try new and unfamiliar foods.
- Children with allergies or food intolerances will be closely supervised always.
- Staff are to be made aware of any children with any allergies or intolerances
- The manager is to ensure that dietary information is correct and forwarded to the cook.
- There is to be a list of children, with photos in each room and the kitchen.
- We will notify Ofsted of any food poisoning affecting two or more children looked after on the premises. Notification will be made as soon as is reasonably practicable, but in any event within 14 days of the incident occurring. We recognise that if, without reasonable excuse, we fail to comply with this requirement, we are committing an offence.

INFORMATION FROM AND FOR PARENTS

- It is the responsibility of the parent/carer to notify staff of any allergies or intolerances their child may suffer.
- It is the responsibility of the parent/carer to access medical attention if it is recommended to do so within 24 hours of an injury, and it is not life threatening.
- Permission may be sought to speak to a child’s GP if it has bitten another child and the skin has been broken.
- Menus are displayed for parents to see.
- Details of a child’s food and drink intake during their time at nursery will be written in their home link book, if parents request that they receive a Home link book.
- If a child has severe symptoms parents/carers are to provide a written care plan.
- Regular updates regarding the child’s allergies/intolerances are to be obtained from parents/carers and practice adjusted as needed.

• This policy was adopted on	Signed on behalf of the nursery	Date for review