

## **Safeguarding and Welfare Requirement: Safety and Suitability of Premises, Environment and Equipment**

Providers must take reasonable steps to ensure the safety of children, staff and others on the premises.

### **Health**

The provider must promote the good health of children attending the setting.

## **8.1 Health and safety general standards**

### **Policy statement**

Little Fingers Pre-school believe that the health and safety of children is of paramount importance. We make our setting a safe and healthy place for children, parents, staff and volunteers.

- We aim to make children, parents, staff and volunteers aware of health and safety issues and to minimise the hazards and risks to enable the children to thrive in a healthy and safe environment.
- Our designated health and safety officer is: **LEANNE SHUTTLEWORTH**
- She is competent to carry out these responsibilities.
- She has undertaken health and safety training and regularly updates her knowledge and understanding.
- For employers: We display the necessary health and safety poster in the main room.

### *Insurance cover*

We have public liability insurance and employers' liability insurance. The certificate for public liability insurance is displayed in the main room, on the notice board.

### **Procedures**

#### *Awareness raising*

- Our induction training for staff and volunteers includes a clear explanation of health and safety issues, so that all adults are able to adhere to our policy and procedures as they understand their shared responsibility for health and safety. The induction training covers matters of employee well-being, including safe lifting and the storage of potentially dangerous substances.
- We keep records of these induction training sessions and new staff and volunteers are asked to sign the records to confirm that they have taken part.
- We explain health and safety issues to the parents of new children, so that they understand the part played by these issues in the daily life of the setting.
- As necessary, health and safety training is included in the annual training plans of staff, and health and safety is discussed regularly at our staff meetings.
- We operate a no-smoking policy.
- We make children aware of health and safety issues through discussions, planned activities and routines.

### *Windows*

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

### *Doors*

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

### *Floors and walkways*

- All our floor surfaces are checked daily to ensure they are clean and not uneven, wet or damaged. Any wet spills are mopped up immediately.
- Walkways and steps are left clear and uncluttered.
- Stair gates are in place in the kitchen doorway.

### *Electrical/gas equipment*

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

### *Storage*

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

### *Outdoor area*

- Our outdoor area is securely fenced. All gates and fences are childproof and safe.
- Our outdoor area is checked for safety and cleared of rubbish, animal droppings and any other unsafe items before it is used.
- Adults and children are alerted to the dangers of poisonous plants, herbicides and pesticides.
- Our pool/pond is securely covered or otherwise guarded.
- We leave receptacles upturned to prevent collection of rainwater. Where water can form a pool on equipment, it is emptied and cleaned before children start playing outside.
- Our outdoor sand pit is covered when not in use and is cleaned regularly.

- We check that children are suitably attired for the weather conditions and type of outdoor activities; ensuring that suncream is applied and hats are worn during the summer months.
- We supervise outdoor activities at all times; and particularly children on climbing equipment.

### *Hygiene*

- We seek information from the Public Health England to ensure that we keep up-to-date with the latest recommendations.
- Our daily routines encourage the children to learn about personal hygiene.
- We have a daily cleaning routine for the setting, which includes the play room, kitchen, rest area, toilets and nappy changing areas. Children do not have unsupervised access to the kitchen.
- We have a schedule for cleaning resources and equipment, dressing-up clothes and furnishings.
- The toilet area has a high standard of hygiene, including hand washing and drying facilities and disposal facilities for nappies.
- We implement good hygiene practices by:
  - cleaning tables between activities;
  - cleaning and checking toilets regularly;
  - wearing protective clothing - such as aprons and disposable gloves - as appropriate;
  - providing sets of clean clothes;
  - providing tissues and wipes; and
  - ensuring individual use of flannels, towels and toothbrushes.

### *Activities, resources and repairs*

- Before purchase or loan, we check equipment and resources to ensure that they are safe for the ages and stages of the children currently attending the setting.
- We keep a full inventory of all items in the setting for audit and insurance purposes.
- The layout of our play equipment allows adults and children to move safely and freely between activities.
- All our equipment is regularly checked for cleanliness and safety, and any dangerous items are repaired or discarded.
- We make safe and separate from general use any areas that are unsafe because of repair is needed.
- All our materials, including paint and glue, are non-toxic.
- We ensure that sand is clean and suitable for children's play.
- Physical play is constantly supervised.
- We teach children to handle and store tools safely.
- We check children who are sleeping at regular intervals of at least every ten minutes. This is recorded with the times checked and the initials of the person undertaking the check.
- If children fall asleep in-situ, it may be necessary to move or wake them to make sure they are comfortable.
- Children learn about health, safety and personal hygiene through the activities we provide and the routines we follow.
- Any faulty equipment is removed from use and is repaired. If it cannot be repaired it is discarded. Large pieces of equipment are discarded only with the consent of the manager and the management team.

### *Jewellery and accessories*

- Our staff do not wear jewellery or fashion accessories, such as belts or high heels, that may pose a danger to themselves or children.
- Parents must ensure that any jewellery worn by children poses no danger; particularly earrings which may get pulled, bracelets which can get caught when climbing or necklaces that may pose a risk of strangulation.
- We ensure that hair accessories are removed before children sleep or rest.

### *Safety of adults*

- We ensure that adults are provided with guidance about the safe storage, movement, lifting and erection of large pieces of equipment.
- We provide safe equipment for adults to use when they need to reach up to store equipment or to change light bulbs.
- We ensure that all warning signs are clear and in appropriate languages.
- We ensure that adults do not remain in the building on their own.
- We record the sickness of staff and their involvement in accidents. The records are reviewed termly to identify any issues that need to be addressed.

### *Control of substances hazardous to health*

- Our staff implement the current guidelines of the *Control of Substances Hazardous to Health Regulations (COSHH)*.
- We keep a record of all substances that may be hazardous to health - such as cleaning chemicals, or gardening chemicals if used and where they are stored.
- Hazardous substances are stored safely away from the children.
- We carry out a risk assessment for all chemicals used in the setting. This states what the risks are and what to do if they have contact with eyes or skin or are ingested.
- We keep all cleaning chemicals in their original containers.
- We keep the chemicals used in the setting to the minimum in order to ensure health and hygiene is maintained. We do not use:
  - bleach;
  - anti-bacterial soap/hand wash, unless specifically advised during an infection outbreak such as Pandemic flu; or
  - anti-bacterial cleaning agents, except in the toilets, nappy changing area and food preparation areas. Anti-bacterial sprays are not used when children are nearby.
- Environmental factors are taken into account when purchasing, using and disposing of chemicals.
- All members of staff are vigilant and use chemicals safely.
- Members of staff wear protective gloves when using cleaning chemicals.

## Legal framework

- Health and Safety at Work Act (1974)
- Management of Health and Safety at Work Regulations (1999)
- Electricity at Work Regulations (1989)
- Control of Substances Hazardous to Health Regulations (COSHH) (2002)
- Manual Handling Operations Regulations (1992 (As Amended 2004))
- Health and Safety (Display Screen Equipment) Regulations (1992)

## Further guidance

- Health and Safety Law: What You Need to Know (HSE Revised 2009)
- Health and Safety Regulation...A Short Guide (HSE 2003)
- Electrical Safety and You: A Brief Guide (HSE 2012)
- Working with Substances Hazardous to Health: What You Need to Know About COSHH (HSE Revised 2009)
- Getting to Grips with Manual Handling - Frequently Asked Questions: A Short Guide (HSE 2011)

This policy was adopted by

Little Fingers Pre-school

On

Date to be reviewed

March 2022

Signed on behalf of the provider

Name of signatory

Carolyn Coleman

Role of signatory (e.g. chair, director or owner)

Chair

## 8.1 Health and safety general standards

### COVID-19 Addendum

**Risk assessment:** We will carry out and continue to review our COVID-19 risk assessment (see example risk assessment form at [www.ndna.org.uk/reopening-after-coronavirus](http://www.ndna.org.uk/reopening-after-coronavirus)) in line with Health and Safety Executive (HSE) guidelines <https://www.hse.gov.uk/coronavirus/assets/docs/risk-assessment.pdf>.

This assessment directly addresses risks associated with coronavirus (COVID-19), so that the right measures can be put in place to control those risks for children, their families and staff.

We are aware that HSE has stated that inspectors will carry out spot checks to see how well businesses are complying with health and safety law, and the obligation to control the risk from COVID-19 to workers and the public. This could include site visits, phone calls and the collection of supporting visual evidence, such as photos.

We will consult all employees on health and safety, so they are best placed to understand the risks in pre-school.

**We ensure all staff, parents and visitors are familiar with the risk assessment.**

**Legionnaires check** (*applicable where premises have been temporarily closed during the lockdown period or where they may need to temporarily close during future lockdowns*): Appropriate health and safety checks will be conducted prior to reopening including legionnaires checks.

**Social distancing:** The early years sector know that unlike older children and adults, babies and young children cannot be expected to remain two metres apart from each other and staff. The government guidelines acknowledge this through advising grouping measures that are in place. Although there is no longer a requirement to keep children in 'bubbles', addendums to policies and procedures have been put in place to help minimise the risk of infection through avoiding contact with anyone with symptoms, frequent hand cleaning and good respiratory hygiene practices; regular cleaning of settings, minimising contact and mixing of different rooms/age groups, where possible.

**Lifts:** (Where applicable) will be avoided other than where essential.

**COSHH assessment:** We will ensure that a COSHH assessment is completed for any intended use of bleach and disinfectant products used on site.

**Personal protective equipment (PPE):** Government guidance is that PPE is not required for general use in early year's settings to protect against COVID- 19 transmission. PPE will be continued to be worn as normal for nappy changing and the administration of paediatric first aid.

PPE will also be worn by staff caring for a sick child while they await collection if a distance of two metres cannot be maintained (such as for a very young child or a child with complex needs). This includes a specific type of mask and eye shield. Where appropriate staff will be provided with adequate training on the use of PPE.

**Face covering:** During everyday practice, staff and children will not be asked to wear face coverings as per the government guidelines. It is for providers to decide if staff should wear these in situations where social distancing between adults in settings is not possible (e.g. when moving around in corridors and communal areas). Settings may also decide to ask parents/staff to wear face covering at drop off and collection.

There is a process for when face coverings are worn and how they should be removed, including allowing for adjustments to be made for adults with Special Educational Needs and Disabilities (SEND) who may be distressed if required to remove a face covering against their wishes. Safe wearing of face coverings requires the cleaning of hands before and after touching, including to remove or put them on, safe storage of them in individual, sealable plastic bags between use and staff disposing of them if they becomes damp.

**Toothbrushing (applicable for settings following supervised toothbrushing programmes):** PHE have confirmed that supervised toothbrushing programmes may be re-established within settings using the dry brushing method. The wet brushing model is not recommended because it is considered more likely to risk droplet and contact transmission and offers no additional benefit to oral health over dry toothbrushing. For information on the cleaning and storage of toothbrushes and storage systems, see the guidance for supervised toothbrushing programmes in early years and school settings.

**Essential supplies:** We will ensure an adequate supply of essential supplies by ordering in advance. Contingency plans are in place to minimise the impact of any shortages of supplies. The setting will not be able to operate without essential supplies required for the management of infection control.

A monitoring system for the usage of PPE is essential to ensure that a supply of stock is available to all who require it, as and when required to meet the operational needs of the setting.

In case the supply of food is interrupted, procedures will be implemented to ensure appropriate and sufficient food alternatives are sourced, and normal food safety, and hygiene, processes are followed.

**Coronavirus testing:** We will ensure that we follow the NHS Test and Trace process and contact the dedicated advice service introduced by Public Health England (PHE) and delivered by the NHS Business Services Authority. This can be reached by calling the DfE Helpline on 0800 046 8687 and selecting option 1, for advice on the action to take in response to a positive case.

We will ensure that staff members and parents/carers understand that they will need to be ready and willing to:

Book a test if they are displaying symptoms. Staff and children must not come into the setting if they have symptoms, and must be sent home to self-isolate if they develop them in the setting. All children can be:

- Tested, including children under 5, but children under 11 will need to be helped by their parents or carers if using a home testing kit
- Provide details of anyone they have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace
- Self-isolate if they have been in close contact with someone who tests positive for coronavirus (COVID-19) symptoms.

Settings should ask parents, carers and staff to inform them immediately of the results of the test:

If someone tests negative, and they feel well and no longer have symptoms similar to coronavirus (COVID-19), they can stop self-isolating. They could still have another virus, such as a cold or flu – in which case it is still best to avoid contact with other people until they are better. Other members of their household can also stop self-isolating.

If someone tests positive, they should follow [Stay at home: guidance for households](#) with possible or confirmed coronavirus (COVID-19) infection and must continue to self-isolate for at least 10 days from the onset of their symptoms and then return to the setting only if they do not have symptoms other than cough or loss of sense of smell or taste. This is because a cough or anosmia can last for several weeks once the infection has gone. The 10-day period starts from the day when they first became ill. If they still have a high temperature, they should keep self-isolating until their temperature returns to normal. Other members of their household/support bubble or childcare bubble should continue self-isolating for the full 10 days.

Further information can be found at: [www.hse.gov.uk/news/coronavirus.htm](http://www.hse.gov.uk/news/coronavirus.htm)

### **Promote and engage in asymptomatic testing**

Rapid testing remains a vital part of the process to suppress the COVID-19 virus. All staff are asked to carry out rapid lateral flow antigen tests twice weekly (every three to four days). The use of this allows us, as a setting, to identify asymptomatic cases that would otherwise go undetected.

Staff are asked to do this at home following the guidance/instructions. They can safely dispose of the test items in their normal household waste.

Staff are asked to follow government guidance in terms of reporting a COVID-19 rapid lateral flow test results to NHS Test and Trace on the same day they take the test online or by calling 119. Further information can be found at: <https://www.gov.uk/report-covid19-result>

Staff should inform their manager of a positive result in the usual way and should not attend the workplace if they have had a positive LFT test. A confirmatory PCR test should then be arranged immediately.

LFD tests detect proteins in the coronavirus and work in a similar way to a pregnancy test. They are simple and quick to use. LFD tests are not as accurate as PCR tests in all circumstances, but can detect a similar

number of people with high levels of coronavirus as PCR tests. They are mainly used in people who do not have symptoms of COVID-19.

If anyone tests positive or gets coronavirus symptoms, they should:

- Self-isolate immediately
  - Follow the stay at home guidance for households with possible coronavirus infection
  - Get a PCR test to confirm the result and continue to self-isolate until you get the result of the PCR test.
- Follow the advice you're given when you get the PCR result. If this PCR test result is negative, and you have no symptoms of COVID-19, you and your household can stop isolating.

A negative result means that active coronavirus infection was not detected, at the time of the test. However, this does not guarantee that you do not have coronavirus. You should continue to follow coronavirus rules, including regular hand washing, social distancing and face coverings where required.

We are also aware whole families and households with primary school, secondary school and college age children, including childcare and support bubbles, will be able to test themselves twice every week from home from 8 March. We ask any parents that are eligible to do this, e.g. those with older siblings inform us of any positive tests in the usual way and to follow the stay at home guidance.

You may wish to inform parents that you are taking part in the asymptomatic testing and the process if a member of staff tests positive.

Further information can be found at: [www.hse.gov.uk/news/coronavirus.htm](http://www.hse.gov.uk/news/coronavirus.htm)

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