

POLICIES AND PROCEDURES:

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- o Comments, Complaints and Compliments
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- o Promoting Positive Behaviour
- o Resting and Sleeping Children
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- o Safeguarding of Children
- Separated Parents
- o Social Networking and Mobile Devices
- o Special Educational Needs and Disabilities
- Staff Absence
- Staff Working With Their Own Children or Children of Close Relatives (including breast feeding and expressing of breast milk)
- Students, Volunteers and Apprentices
- Sun Protection
- Transition
- Uncollected Child
- Whistle Blowing



ABUSIVE ADULT POLICY

In the unlikely event that an adult acts in an aggressive or abusive way at the nursery or on the telephone, our policy is to:

- Direct the adult away from the children and into a private area such as the office or an empty classroom.
- Aim to have a second member of staff in attendance where possible, whilst ensuring the safe supervision of the children.
- Act in a calm and professional manner, ask the adult to calm down, making it clear that we do not tolerate aggressive or abusive language or behaviour.
- Contact the police if the behaviour does not diffuse.
- Initiate lockdown procedures if the behaviour is felt to have the potential to endanger others.
- If the adult calms down, the member of staff will then listen to their concerns and respond appropriately.
- If the adult is unable to calm down, they will be asked to leave.

Following the incident, an uninvolved member of the management team will carefully consider the views of all parties before making any decisions.

Abusive adults are not welcome on the nursery premises. Where a parent or carer has been abusive, and are therefore no longer welcome on the settings premises, they must make arrangements for an alternative adult to arrive with and collect their child. Repeated abusive behaviour, or one serious incident, will result in immediate termination of the nursery space. Physically abusive situations, or those which become very heated, will always be reported to the police.

After the incident, a written record will be compiled, detailing the date, time, those present, antecedents, behaviours and any action taken.

Following abusive incidents, staff and others present may require support and reassurance. We will offer a verbal debrief; support for staff can also be sought through our Employee Assistance Program. We will seek to signpost other adults to support whenever possible.

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ACCIDENT POLICY

We encourage children to be healthy and take suitable risk within their play. We aim to protect children from harm or neglect and help them to stay safe.

All children who have an injury will receive appropriate care and treatment by a qualified paediatric first aider (PFA). We are required to have a minimum of one PFA on duty at all times; however, we aim for the majority of our staff to have this training.

First aid boxes are located within each age group, as well as in our outings and evacuation bags. These are checked and restocked monthly.

Following an injury an accident form will be completed, with the child's full name, the date, the time, when and where the accident happened. The child's parent will be contacted, this is usually via message, however for more serious injuries we will make contact via telephone. Where a child requires medical assistance and we are unable to contact a parent, we will phone the emergency contacts provided on the child's registration form. Should the child require an ambulance and parents or emergency contacts have not yet arrived at the setting, a member of staff will accompany the child to hospital, staying with them until an appropriate adult is able to take over. Practitioners will ask the adult collecting the child to read and sign the accident form.

Where the injury has been caused by another child, both sets of parents will be contacted and incident forms/behaviour records completed in addition to the accident record.

Medical advice must be sought for any bites which break the skin.

Accident records are regularly audited, seeking to identify any high-frequency areas/equipment.

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ADMISSIONS POLICY

It is our intention to make our nursery accessible to children and families from all sections of the local community. In order to accomplish this, we will:

- Make our Equal Opportunities policy easily accessible-all policies are located in the hallway and on our website
- Update our SEND 'Local Offer' annually; and publish this on our website.
- Welcome comments, complaints and compliments from all families, including prospective parents/carers.
- The nursery has a website www.amberleynursery.co.uk, Facebook and Instagram to share news with our community. We also utilise newsletters, text messages, emails, WhatsApp broadcasts, telephone calls and face-to-face conversations to keep families updated.
- Families are invited to come and look around Amberley. A member of the management team will explain our routines, philosophies and answer any questions. Families will be offered a copy of our prospectus if they do not have internet access, or prefer paper.
- Children must attend a minimum of three half-day sessions per week, to ensure they come often enough to feel settled within the nursery environment.
- If a parent or carer would like their child to attend Amberley, they are required to return the completed registration form, registration fee and deposits, along with a copy of their child's birth certificate.

 Current prices can be found in our prospectus. Once these have been received, the child's space can be saved and introductory sessions booked.
- This deposit reserves the child's space at Amberley and will be returned to the parent/carer when their child leaves. If a parent or carer declines a space at Amberley then the deposit will not be returned.
- On the first introductory session the keyperson and parents will complete together an 'All About Me' form, giving opportunity to pass on and share information about the child's current interests and needs. Key workers will then book in more sessions with the parents.
- We do not restrict the amount of introductory sessions each child may access, as we recognise that each child is unique, and so each will settle within different time scales; as an average, children often attend around three to five, of gradually increasing length.
- The family will be are asked if the child attends, or has attended, any other childcare provider. With the
 parents' permission we will contact any other settings to share details of the child's development and
 learning.
- Parents/carers are always welcome to stay and play at the setting, and we invite parents/carers to join us on outings.
- We will always aim to make reasonable adjustments to our environment and practices to meet the needs of our children, families and practitioners wherever possible.

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CAMERAS AND RECORDING DEVICES POLICY

Use of photographs and videos forms part of the 'permissions' section on our registrations forms and is discussed as part of a child's initial introductory meeting. Where and how we may use photos can include children's folders, observations, in the local media, on social media and within the nursery. We ask each families permission to use photographs/videos in these ways and will always respect the decision of parents/carers who decline for their child's photos to be used.

Staff members are NEVER permitted to take photos or record using their own personal devices. Staff members are only permitted to use devices provided by the nursery. Practitioners' personal devices are stored in the office throughout the working day and are only to be accessed when on designated lunch breaks and never in the presence of nursery children.

Parents and other visitors to the nursery are asked to keep their devices in their pocket, or handbag, whenever they are on the nursery premises.

CCTV

We use CCTV within our nursery building and grounds. CCTV is usually only accessed by management; however may be shared with staff members as part of investigations. training or supervisions. Where serious incidents occur, the footage may occasionally be shared with outside agencies, for example, because of a safeguarding concern. As the footage will naturally contain images of lots individuals, we are unable to share this footage with parents, or any non-professionals.

Footage is stored for between 5 and 10 days and then automatically recorded over. Where the footage is required as part of an investigation, or to support further training, it may be retained. Retained footage will be deleted as soon as the investigation/training is complete.

The cameras are positioned to avoid nappy changing areas and toilets.

The cameras record for 24 hours a day, every day. We are unable to turn them off for one person, therefore acceptance of the CCTV policy forms part of our contract with parents and is a mandatory part of our registration process. We strongly believe in the benefits of protection afforded to both children and adults; the safety of children is of paramount importance to us.

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CARING FOR THE UNDER 2'S

At Amberley, we care for children under the age of two and ensure their health, safety and well-being through the following:

- Children under two have a separate room and are cared for in a small intimate group, we ensure the younger children have opportunities to have contact with older children whilst at nursery.
- At least half of the staff who care for the under two's will have undertaken specific training for working with under two's, or have at least two years' experience in working with children under two.
- The environment and equipment are checked daily before the children access the area. This will include checking the stability of the cots, and that no loose items are in reach of, or hanging over, the cots.
- All doors are fitted with viewing panels and door finger guards to ensure the safety of children.
- Outdoor shoes are removed or covered when entering the under-two's area.
- The children will have their nappies checked/changed every 2 hours, unless needed before. No children will be left unattended during a nappy change.
- Information will be shared between parents and key worker about nappy changing, in a way that best suits the needs of the parent/carer.
- Changing mats are wiped with anti-bacterial spray before and after each nappy change.
- Each child will use nursery bedding which is washed at the end of every day.
- Cot mattresses will meet current UK safety standards.
- We follow SIDS prevention/safety guidelines (NHS, Lullaby Trust). Please refer to our 'Resting and Sleeping Children' policy.
- Children are always supervised with foods and bottles, they are never left propped up.
- Children under the age of six months will always sleep in the same room as adults, never alone.
- Food/milk is prepared for the children at the milk station, in our baby room this is the worktop area.
- Breastfeeding is welcomed in any area of the nursery, however we are happy to provide a private space should a mother prefer.
- Labelled mothers breast milk is stored in the freezer for no longer then 6 months and once defrosted is used within six hours.
- Unfrozen breastmilk can be stored at the back of the fridge (not in the door) for up to 8 days.
- Providing it has been stored correctly, breastmilk does not need to reach a hot temperature before feeding, as it does not harbour potential bacteria in the same way which formula may.
- Sterilisers are washed and cleaned out daily.
- Formula-fed babies may require small sips of cooled, boiled water during hot weather. Breastfed babies under 6 months do not require additional drinking water, but may wish to feed more often than usual. Cooled, boiled water will be kept in the fridge for a maximum of one hour.
- Babies over six months can drink tap water.
- Use of open-topped cups is encouraged. Should a young child use a cup with a lid, this must be a free-flowing design.

MILK FEEDS

We follow Food Standards Agency, Department of Health and NHS guidelines for preparing milk.

We ask that families help in the following ways:



- We ask families to leave a bottle at nursery. After sterilising, the bottle is fully assembled, with the teat
 and lid in place. This prevents the inside of the sterilized bottle and inside and outside of the teat from
 being contaminated.
- Provide breastmilk in sterile milk bags, labelled with your child's name, date expressed and the quantity in the bag.
- Let us know if you practice pace or cup feeding with your breast-fed child, to prevent bottle flow preference.
- Provide formula in unopened, original packaging. For powdered milks, we will follow the guidelines on the packaging when making a bottle, and cannot accept bottles which have been pre-prepared at home.
- Keep us informed of any changes to your child's milk/food routines and quantities.

We always freshly prepare formula feeds as and when they are required by the baby. When we open a new container of formula, we will label it with the opening date; we only keep formula for 4 weeks from opening.

Our procure for making up powder-formula bottles is:

- Clean the work surface in the kitchen area thoroughly
- · Wash hands with soap and water then dry.
- Boil fresh tap water in a kettle, never reheat water which has already been boiled. Do not allow the boiled water to cool to less than 70C. Pour the required amount of hot water into the sterilised bottle.
- Add the exact amount of formula as instructed on the packaging.
- Shake the bottle well to mix the contents.
- Cool to feeding temperature by holding the bottle (with lid on) under cold, running water.
- Check the temperature by shaking a few drops of milk on to the centre of your arm.
- Discard any feed that has not been drunk following the feed.

Our procure for making up preprepared formula, from sealed bottles is:

- Clean the work surface in the kitchen area thoroughly
- Wash hands with soap and water then dry.
- Pour the formula into a sterile bottle.
- If the formula requires heating, place the bottle (with lid on), into a jug of boiling water. Remove the bottle from the jug and shake well to even the temperature through the milk.
- Milk temperature should be checked every couple of minutes until it reaches the desired temperature.
 Milk must never be heated for longer than 15 minutes, if this should occur then the milk must be discarded.
- Check the temperature by shaking a few drops of milk on to the centre of your arm.
- I required, cool to feeding temperature by holding the bottle (with lid on) under cold, running water
- Discard any feed that has not been drunk following the feed.

Our procure for making up bottles with pumped breast-milk is:

- Clean the work surface in the kitchen area thoroughly
- Wash hands with soap and water then dry.
- Wherever possible, frozen breast milk will be allowed to defrost slowly in the fridge. When this has not been possible, frozen breastmilk can be defrosted by placing the sealed bag into a jug of hot, boiled water.
- Gently shake the bag if milk has separated; this is normal and not cause for concern.



- If the milk requires heating, place the sealed bag into a jug of boiling water. Remove bag from the jug and shake well to even the temperature through the milk.
- Milk temperature should be checked every couple of minutes until it reaches a lukewarm temperature.
- Pour the milk into the baby's bottle or cup.
- Discard any feed that has not been drunk within one hour.

USE OF DUMMIES

At Amberley nursery, we recognise that a dummy can be a source of comfort for a child who is settling or upset, and it may often form part of a child's sleep routine.

We also recognise that overuse of dummies may affect a child's language development as it may restrict the mouth movements needed for speech. As babies get older they need to learn to move their mouths in different ways, to smile, to blow bubbles, to make sounds, to chew food, and eventually talk. As babies move their mouths and experiment with babbling sounds they are learning to make the quick mouth movements needed for speech. The more practice they get the better their awareness of their mouths and the better their speech will be.

We will:

- Discuss the use of dummies with parents/carers.
- Aim to allow dummies only for comfort where a child is upset and no other methods have helped, or part of a child's sleep routine.
- Store dummies in individual, labelled dummy boxes to prevent cross-contamination between children.
- Immediately clean or sterilise any dummy or bottle that falls on the floor, or is picked up by another child.

When discouraging the dummy, practitioners will:

- Liaise with families. Offer advice and strategies for discouraging dummy use during waking hours at home.
- Comfort the child and, if age/stage appropriate, explain in a sensitive manner why they do not have their dummy and reassure them of where the dummy is and they can have it at sleep time.
- Offer other methods of comfort such as a toy, teddy, cuddle or blanket.
- Distract the child through play, ensuring the adult stays alongside them until they feel settled.

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COMMENTS, COMPLAINTS AND COMPLIMENTS PROCEDURE

We believe children, families and staff are entitled to expect courtesy as well as prompt attention to their needs. We work in partnership with families and the community, and welcome compliments, comments and concerns. A copy of the Ofsted parent's poster is displayed in the main entrance. Our policies, complaints book and compliments book are located in the hallway. Complaint records will be retained on file for 10 years from the date on which the record was made.

Complaints made in an informal approach to a member of staff can usually be resolved quickly to the satisfaction of all parties. However, should there be the need to make a formal complaint, in writing or in an electronic form, then the following procedure will apply:

How to complain

- 1. **Discussion with keyperson-** In the first instance families should discuss any concerns, with their child's key person.
- 2. **Discussion with the management team-** Should this not resolve the issue; we invite the parent to speak to the management team.
- 3. **Meeting with the management team-** If either party remains dissatisfied with the outcome then the parents/carers will be invited to meet with the Management team. Both the parents and the management team are able to bring a friend, relative or colleague, if desired, and an agreed written record of the discussion will be made.
- 4. **In writing to the owners** If the management team are unable to bring about a satisfactory outcome within 28 days, or if the problem reoccurs, the parent should put the concerns or complaint in writing to the proprietors, Clare and Mark Ryalls, via the usual nursery address. The nursery owners will reply, in writing, providing an account of the findings and of any action taken as a result within 28 days.
- 5. **External Mediation-** If the matter still remains unresolved, the family and the nursery are unable to reach an agreement, it might be helpful to invite an external mediator, who is acceptable to both parties, to listen to both sides and offer advice. A mediator has no legal powers but can help to define the problem, review the action so far and suggest further ways in which it might be resolved. The mediator will keep all discussions confidential, and will keep written record of any meetings that are held and of any advice they have given. The involvement of a mediator represents the final stage in the internal complaint procedure.
- 6. The role of the registering authority-In some circumstances, it will be necessary to bring in the registering body, Ofsted. Ofsted can be involved if a child appeared to be at risk or where there seemed to a possible breach of registration requirements. In these cases, both parent and nursery would be informed, and Ofsted will lead an investigation.

Should you wish to contact **Ofsted** the number is **0300 123 123 1** or you can use the online form at www.contact.ofsted.gov.uk/contact-form

Alternatively, if your concern relates to the conduct of a member of staff, you can contact **LADO**. LADO are responsible for managing and overseeing concerns, allegations or offences relating to staff and volunteers in any organisations across the local authority. An online referral to LADO can be made via https://www.eastsussex.gov.uk/children-

families/professional-resources/allegations/referrals/form-lado-referral



COMPUTERS, INCLUDING STORAGE OF INFORMATION, SAFE DISPOSAL OF ELCETRONIC EQUIPMENT AND INTERNET SAFETY POLICY AND PROCEDURES

Keeping children safe is always of paramount importance to us. In order to ensure children can access electronic equipment safely we:

- Do not keep the internet password stored on any children's tablets. Section Leaders can input the password to download apps from reputable, trusted sources only. They must then ensure the internet password has been removed.
- The children's tablet is only ever to be used as an adult-led activity, for short periods of time.
- Practitioner tablets have an app lock installed, so they can only access apps that are authorised by the management team and access to the internet is blocked. The apps which staff can access without password control are Evidence Me, the camera and Amazon photo gallery.
- Discuss how to use electronic devices and the internet safely with children on a regular basis.
- Sign up to monthly newsletters from UK Safer Internet; sharing this information with our families as appropriate. Practitioners and families can access a free online e-safety course at https://www.nspcc.org.uk/keeping-children-safe/online-safety/free-online-safety-group-workshops/

In order to keep safe information stored on computers and tablets:

- Office computers are accessed by the management team, practitioners use the laptops- which have a limited Dropbox access.
- All tablets and computer accounts have passwords.
- Any portable storage devices which may leave the building, (such as USB sticks), will have documents password protected.
- Keep up-to-date anti-virus and filtering programs running on our computers.
- All staff are made aware at induction that the computers must be used in an acceptable way, including that material related to violent extremism is prohibited.
- All email accounts are monitored by the nursery owners. Any emails with inappropriate content will be reported to the internet watch foundation www.iwf.org.uk
- When computers need to be disposed of, we will ensure they have all data wiped from them. In accordance with our local councils advice, we take all old electrical equipment to our local household refuse site.



CONFIDENTIALITY POLICY

At Amberley, our work with children and families brings us into contact with confidential, personal and sensitive information. To ensure that all those using and working in the nursery can do so with confidence, we will respect confidentiality in the following ways:

People responsible for data protection: Jess Hammond & Lisa Gray

- We comply with the General Data Protection Regulations (2018) and the Data Protection Act (2018).
- Safety of children is paramount and we will always share information when we are doing so to ensure the safety of a child.
- We are registered with the Information Commissioners Office.
- We will ensure that we have one of the following lawful basis (article 6 of GDPR) for processing data:
 - Consent
 - Contract
 - Legal Obligation
 - Vital Interests
 - Public Task
 - Legitimate Interests
- Additionally, where data may be considered sensitive (e.g. race, ethnicity, religion, trade union membership, biometrics) we will ensure that one of the Special Category Data Conditions apply (Article 9 of the GDPR):
 - Explicit consent
 - Employment and social protection
 - Vital interests
 - Provision of medical treatment
 - Public health
 - Legal and court claims
- Some information is required by us to operate as a nursery, such as children's dates of birth and staff addresses. Individuals can request that their personal information be deleted (right to object), we will consider all requests and respond to them within 20 working days.
- Some information is not compulsory, those using our services will be asked for their consent at registration, or during the induction process for staff. Individuals can ask for this information to be edited/deleted at any time.
- To request your information is edited/deleted, or object to information held about you, please write to, or email us:

Amberley Nursery
9 Buckhurst Road
Bexhill
East Sussex
TN40 1QF



- As we have young children attending our setting, we ask their parents/carers to give consent for
 information processing. Therefore, when children register with us their parent/carer will be asked to
 provide proof that they have parental responsibility for their child. This can often be done in the form of
 a birth certificate.
- When students attend Amberley for a work placement who are under 16 years, we will not ask them to complete the consent section of their induction and we will not take photographs of them. Students on induction will be new to us, we are therefore unable to be certain of their capacity to give their own consent when under the age of 16.
- Registration forms will be reissued to parents/carers annually to remind them they have the option to update their child's personal details and consent choices if they wish to do so.
- An individual who believes that we hold information about them, may request that we share this with them. We will aim to do this within one month and without charge, unless the request is substantial or repetitive. Where we feel that someone may be put at risk by the sharing of this information, we will seek the advice of specialist agencies such as the police or children's social services. Individuals will only be provided with information relating to themselves and any other names or identifying details will be deleted.
- Details of the information we hold, retention periods, safe storage and the legal basis for holding/using this information can be found within our data audit. This audit will be reviewed annually.
- Parents or carers will have ready access to the files and records of their own children, but will not have access to information about any other child.
- Staff will not discuss individual children outside of the nursery setting unless they are engaged in activities which form part of their work, such as attending meetings or training.
- Staff will not discuss matters relating to colleagues, except with their line manager or when engaged in an appropriate task, such as staff meetings, peer on peer observations, or appraisals. Gossiping is unpleasant and unnecessary. Amberley will always seek to discipline staff members who share information about others without good reason.
- Practitioners will share information about children and their families within the setting only where this may be needed to inform planning, routines, or to keep a child safe.
- Information given by parents/carers to Amberley will only be passed on externally without permission for the purposes of safeguarding, or in an emergency.
- Issues to do with the employment of staff, whether paid or unpaid, will remain confidential to the people directly involved with making personnel decisions.
- Any concerns/evidence relating to a child's personal safety will be kept in a confidential file and will
 only be shared with those working directly with the child. Keys to the locked cabinet are held by
 Designated Safeguarding Lead and their deputy.
- Like all policies, staff, students and volunteers will be advised of our confidentiality policy and required to respect it.
- All nursery electronic devices, such as our mobile phone or tablets are password protected.
- CCTV footage will generally only be used by management for in-house operations with staff, such as training or supervisions. On occasion, other agencies may need to view the footage, such as for purposes of child protection. In this instance ID will be sought and only recognised agencies will be allowed access to the material. Those without a DBS will never be shown the footage by us, including parents and non-professionals.



- Any files taken from the nursery premises will be signed in/out, forming a clear trail of where the information is being taken/used.
- Any digital information which leaves the nursery premises, for example on a memory stick will have a
 password, or only refer to children by non-identifying terms such as an initial.
- Sensitive information will be stored in the office which is locked overnight.
- Office computers are password protected and have different accounts for managers and practitioners.
- All adults within the nursery setting must agree to uphold our policy on social media.
- Staff will be reminded about data protection and their responsibilities at least once per year. This often forms part of the annual safeguarding updates for staff.
- The induction process for new staff members will include a focus on data protection and confidentiality.
- Where children attend more than one setting, or move between settings, their parents/carer will be asked for permission to share information about the development of their child.

DATA BREACHES

Any breaches of confidentiality which may significantly affect the rights and privacy of the individuals involved will be reported to the Information Commissioners Office online at https://ico.org.uk/for-organisations/ within 3 working days; affected individuals will be informed where possible.

Minor data breaches, which are unlikely to have an impact upon an individual can be investigated in-house and a record kept. The persons responsible for data protection will complete this investigation, or where considered more appropriate, the proprietors.

Policy revised October 2024 Lisa Gray

Audit of Information Which Contains Personal Information

Where references are made to archiving: our archived files are scanned, placed in a named folder on the computer.

For ease of reading, the word 'parent' has been used within this document. It indicates the person who has parental responsibility for a child.

The safety of children will always be paramount. The Children's Act supersedes the GDPR where a child may be at risk.

Type of information:	Who the record is about?	Who can access the information?	Format?	How it is held/stored?	Retention Period	How is the information disposed of?	Which lawful basis?
							And in the cases of
							sensitive data,
							which Special
							Category Data?
Children's	The child and their	All practitioners if	Paper	Kept in a lockable	Scanned onto	Paper shredder	Legal Obligation.
registration forms	families	required during the		cupboard in the	Dropbox when the		
		nursery day.		office.	child leaves, and	Vital int	Vital interests
					their invoice is		Dravision of
		Managers and			clear.		Provision of
		proprietors have					medical treatment
		access to the			Until the child		
		locked office			turns 25 and 3		
		cupboard.			months.		
		Managers and					
		proprietors have					
		password access					
		to the archives.					
		3					



Staff files	Staff. Also holds names and phone numbers of who they would like contacted in an emergency.	Managers and proprietors have access to the locked office cupboard. Managers and proprietors have password access to the archives.	Paper	Kept in a locked cupboard inside the office. Archived once the staff member has left and all employment details have been finalised.	Scanned onto Dropbox. 8 years after the staff member ceases employment.	Paper shredder	Contract Vital interests Provision of medical treatment Employment and social protection
Registers	Children and staff	Any practitioner during the week they are being used. Managers and proprietors have access to the locked office cupboard. Managers and proprietors have password access to the archives.	Paper	Kept in the rooms for the weeks they are being used. 1-6 months of records are kept in the lockable office cupboard. Records older than 3-6 months are archived onto Dropbox and originals shredded.	Until the child turns 21 and 3 months.	Paper shredder	Legal obligation
SEND records	Children. Some references to their families, staff and any other professionals	Managers, Inclusion Support and Proprietors have password access to the computer records.	Computer and paper	Stored electronically and password controlled. Paper information is scanned and	Until the child turns 25 and 3 months.	Deleted from computer/Dropbox Paper shredder	Legal Obligation. Vital interests Provision of medical treatment



	working with the	Managers and		then placed in the			
	_	•		'			
	child.	proprietors have		child's file.			
		access to the		0			
		locked office		Computers have			
		cupboard.		virus protection.			
		All practitioners		Once the child			
		have access to the		leaves the setting,			
		plans, reports and		records are			
		notes detailing		archived on			
		_		Dropbox.			
		strategies and					
		support required.					
		Paper information					
		stored in the					
		child's learning					
		journal, or locked					
		office cupboard.					
Child protection	Children and their	Jess & Lisa are key	Paper	Kept in a locked	Records are hand-	Passed on to next	Legal Obligation.
records	families. Some	holders to the filing		cabinet inside the	delivered, or	setting.	
	references to staff,	cabinet,		lockable office.	posted via		Vital interests
	families and any	(Designated			registered mail, to	If records are	
	other professionals	Safeguarding Lead			the children's next	unable to be	Provision of
	working with the	trained).			setting and written,	passed on- until	medical treatment
	child.				signed	the child is 25	Logol and court
					confirmation of	years and 3	Legal and court
					acceptance, or	months.	claims
					postage racking		
					receipt is obtained.		
					This is kept until		
					the child reaches		
					01110 10001100		





Children's observations	Children. Sometimes more than one child will be included within an observation description or photograph.	permission for information sharing. Staff working with the child. Parents are emailed them termly and can request to see them before this. Jess, Jess, Lisa, Morgan & Nyree have access to Evidence Me online system, which is password protected.	Held electronically	Access via tablet or office computer. A reputable company is used.	Date the child leaves Amberley.	Emailed to parents when child leaves Amberley. Deleted from website.	Legal obligation (own child's observations) Consent (group photos) obtained on registration form
Complaints records	Children, families, staff.	Anyone can access anonymous details of the complaint via the complaints book. Records with personal details on are kept in either the staff file or safeguarding file	Paper	In the hallway.	If relating to a child-when the child turns 25 years and 3 months. If relating to a staff member-until their anticipated retirement age.	Paper shredder	Legal Obligation Possibly: Vital interests Provision of medical treatment Employment and social protection



Safer Food Better	Staff	(whichever is most appropriate)-see above. All staff	Paper	In the kitchen	If relates to both staff and children-21 years and 3 months. Staff records are as	Paper shredder	Legal and court claims (depending upon the nature of the complaint) Legal obligation
Business					per staff files- see above		
Training matrix	Staff	All staff	Paper	On display in the office	Reviewed each year. Not retained.	Paper shredder	Legal obligation
Visitors book	Anyone who comes into the building who is not staff, parent or a child.	Anyone	Paper	In the hallway, ready for use in an emergency evacuation.	Until the book expires	Paper shredder	Legal obligation
Staff photo and names in hallway	Staff	Anyone visiting	Paper	On display in the hallway	Date the staff member leaves Amberley	Paper shredder or given to the individual staff member	Legal obligation
Website	Staff photos, names and information about them. Children's photographs	Anyone	Online/electronic	On website	Removed within 3 months of the staff member leaving employment (unless they withdraw consent sooner).	Deleted from website	Consent obtained as part of registration/ induction



					Children's photos ongoing, unless consent is withdrawn.		
Accident forms	Anyone who comes onto our premises and suffers an injury or near-miss	The individual the form relates to. The first aider. The parent (if applicable) Medical staff such as paramedics (if applicable) Other agencies, such as OFSTED (if applicable) Other staff, e.g. to provide feedback to parents, or when taking over care of a child from the first aider.	paper	Forms are kept in a folder in the rooms until they are audited every 3-6 months. After auditing the forms are electronically archived.	25 years, 3 months.	Paper shredder	Legal obligation.
Incident records	Children. May contain references to staff, families and any other professionals	Parent, staff members working with the child, Designated Safeguarding	Paper	Forms are kept in the locked safeguarding cabinet, key	These records form part of child protection, please refer to the above section.	See above for child protection records.	Legal Obligation



	working with the child.	Leads, other professionals.		holders are Jess H & Lisa			
Medicine records	Children. Some references to parents and staff.	All staff working with the child.	Paper	In a folder, in the individual rooms. Completed forms are removed at 3-6 monthly audits and archived on the computer.	Until the child is 25 years and 3 months.	Paper shredder	Legal obligation. Vital interests Provision of medical treatment
Photos on displays	Children, staff, students, visitors.	Anyone visiting the setting	Paper	On display within the nursery grounds	Displays are updated regularly, at longest one year after a child leaves the setting. Sooner if consent is withdrawn.	Given to the individual or paper shredder.	Consent obtained at registration, staff/student induction or by visitor permission at the time of the event.
Social media	Children, staff, students, visitors, families.	Anyone Jess, Lisa, Clare, Mia and Mark have administrator access to our Facebook page. Mark has administrator	Online	Online	Forever. Only removed when consent is withdrawn.	Photos are deleted if consent is withdrawn.	Consent Consent obtained at registration, staff/student induction or by visitor/family permission at the time of the event.



		access to Instagram.					
Media publications	Children, staff, students, visitors, families.	Anyone	Paper and online	In the public domain, this will depend upon the type of media publication.	Forever.	Amberley will be unlikely to control the disposal and storage of this information.	Consent Consent obtained at registration, staff/student induction or by visitor/family permission at the time of the event.
Diary	Anyone (minimal details about a person, usually only their name and their telephone number if they choose to give it to us)	Any staff member	paper	Kept in the office.	Up to 1 year after the diary has ended	Paper shredder	Legal consent
Holiday records	Staff	Management	Electronic	Stored electronically and password controlled.	8 years after the staff members employment ends.	Deleted from computer/Dropbox	Legal consent

Audit completed by: Lisa Gray

Date completed: August 2024

Review due: September 2025



DRUGS AND ALCOHOL POLICY (INCLUDING PRESCRIPTION AND OVER THE COUNTER MEDICINES)

We are dedicated to providing a safe environment for all who visit, work and attend here. We promote the health, safety and the wellbeing of all who are involved with our setting.

We recognise that there are significant health risks (both physical and mental) associated with alcohol and drug use. Further information and support can be sourced at the links below:

Alcohol www.drinkaware.co.uk

Drugs <u>www.talktofrank.com</u>

Employees are expected to arrive for work promptly and free from alcohol or illegal drugs. The consumption of alcohol or illegal drugs during the working day, including breaks, is strictly forbidden. If an employee smells of alcohol or appears to be under the influence of any substance they will be deemed unsuitable for work and asked to leave the setting. Formal disciplinary action will be taken against the employee.

If a parent or other adult arrives at nursery to collect or drop off a child who appears to be under the influence of alcohol or drugs they will be asked to leave the setting. The parent/carer will then be required to arrange for another adult to collect their child. These incidents will be reported to our designated safeguarding lead and child protection procedures followed.

When a staff member starts at Amberley they are required to complete a Health Declaration Form and are also required to provide an update of their health at each of their supervision meetings; this includes notifying us of any medication which could affect their work.

Staff members should ensure they are following all manufacturers' advice when taking medication, including over the counter medications, and that they are using medications for their intended purpose. Staff are to be aware that some medications which can be obtained without a prescription, such as anti-histamines, can also affect their ability to work.

If staff members are taking medication which may affect their ability to care for children, they should inform the management team and seek medical advice. They must inform the management team of the medical advice given and only work directly with children if a doctor (or other appropriate, medically trained person) has confirmed the mediation is unlikely to impair their ability to look after children properly. Instances where medication may affect a staff member's ability to carry out tasks will be assessed on an individual basis and give reflection to the tasks they are required to carry out.

There is no requirement to inform the management team of any medication taken in periods of absence, unless it may continue to be taken, or affect, the employee after they return to work.

Employees of Amberley Nursery are representing the setting, they should remain responsible and maintain a professional image at all times. Employees are not permitted to trade or sell any drugs on the nursery premises, or engage in such activities outside of work.

All employees are responsible for their own medication and should ensure they are stored safely and away from children.

Policy revised

August 2024

Lisa Gray



EARLY YEARS PUPIL PREMIUM (EYPP)

Person responsible for EYPP: Jessica Hammond

Making families aware of EYPP: We include EYPP information within our prospectus and explain about EYPP when we are showing prospective parents around Amberley. When parents tell us their home/financial situations may have changed we will provide them with information about EYPP. When we publish how we have spent EYPP, we will also provide details of eligibility and how to claim. When parents are completing their funding forms we encourage them to complete the EYPP section, this allows us to check the child's eligibility on the EYEE portal.

How we use our EYPP budget: We will always use our EYPP budget with the intention of supporting each individual child's development. We will initially look at development within the prime areas and if, in partnership with the child's parents, we are satisfied that the child is doing well within these areas, we will also look at the specific areas of learning. If a child has any external agencies involved in their care then we will consult with them as we recognise the vital role they may be playing in families' lives.

At the beginning of term the person responsible for EYPP and the child's keyperson, will review the child's summative assessment and observations, thinking about how the child learns best, their motivations and interests; they will chat to the child's parent about how things are at home and where they feel their child could benefit from some extra support.

We will look at different ways to support the child, this could be through training for staff and/or families, resources, small group work, funding a support worker, Forest School places, buying in the services of outside agencies, or anything else that we all agree could support the child within the identified area(s) of learning.

At the end of term we will review the impact of the EYPP; working together to restart the process for the next term. The person responsible will keep a record of the EYPP budget and how this has been spent.

At the end of each term we will publish how we have spent the EYPP budget for the previous term, we usually do this through in-house display.



EMERGENCY CLOSURE POLICY

There may be occasions when, due to circumstances out of our control, Amberley may be forced to close for a limited time. We expect these to be rare.

In all emergency situations, our priority will be to the safety of children, families and staff. We understand that us being forced to close will likely have significant impacts for families, and will take all steps possible to prevent closures. However, we recognise that there may be situations where it would be inappropriate for us to open, or we may be forced to offer a reduced service.

Possible reasons for closure are (but not limited to):

- Weather for example, heavy snow or flooding, resulting in staff and families not being able to get to nursery safely, and/or the access to our premises being unsafe.
- Outbreak of illness/contagious disease, leading to staffing levels being too low to maintain our legally required ratios and/or keep children safe. In this instance, the nursery may be required to close to prevent cross-contamination and/or carry out a deep clean.
- Structural problem with the nursery and/or surrounding area.
- Gas, electric or water cut.
- Fire
- We are advised to close by an appropriate government body, eg the Health Protection Agency, or OFSTED.

If an emergency closure occurs before the nursery day begins: we will update social media without delay. We will endeavour to contact all families via either phone call, text or email; however, depending on the nature of the emergency, we may not be able to access all contact information, or have an appropriate length of time to contact all families before the start of the day. We will ensure there is a sign up at the nursery to explain why the closure has occurred. If possible, a staff member will be present to speak to families who do arrive.

If an emergency closure occurs during a session: We will update social media and send out Whatsapp broadcasts without delay, asking parents to collect their children. We will contact parents, or the child's emergency contacts, asking them to collect without delay. We will do our utmost to keep children and staff warm, safe and comfortable until parents/carers arrive. We have an emergency agreement with Birkdale Nursery, that in the event of a fire or similar emergency, we may temporarily use a room there until children are collected. See also Emergency Evacuation Policy.

Should we be able to offer a reduced length day: We will update our social media, display signs at the nursery entrance and speak to the person dropping off the child.

Should we be able to offer a reduced number of places: Sessions will be cancelled in the following order:

- Children who attend fully-funded spaces will have their session cancelled
- Parents will be asked if they are voluntarily able to keep children home that day. (In this instance, we will do our utmost to offer replacement hours to families; however, due to the fullness of the nursery, this may not always be possible).



• We will allocate remaining spaces depending upon the staff/rooms available for use, aiming to ensure that children who are admitted to the nursery have familiar adults and environments whenever possible.

To ensure the sustainability of Amberley. If we close due to circumstances beyond our control, all fees will remain due (in full) for any sessions, whether these were able to be attended by the child or not.

Policy revised

August 2024

Lisa Gray



EMERGENCY EVACUATION PROCEDURE AND FIRE SAFETY POLICY

An emergency evacuation drill will be held at least once each term, at all different times and days of the week. Staff, students and volunteers will receive instruction regarding our emergency evacuation procedures as part of their induction. Records of the evacuation drills will be noted within the evacuation log. Fire equipment is maintained yearly by a fire protection service and break points tested monthly.

The nursery has its own fire alarm. The fire exits are clearly labelled and access is constantly maintained.

Daily records contain details of who is on the premises, including visitors; these must remain accurate throughout the day and be taken during an emergency evacuation whenever possible.

Our emergency evacuation procedure is the same for a range of situations and we will always seek to notify and follow the instructions of the emergency services in these situations. These include:

- Fire
- Bomb threat
- Terrorist attack (also refer to 'lock-down' policy and procedure)
- Explosion
- Any other incident where it is deemed unsafe to stay in the building

The procedure is as follows:

- 1) Sound the nearest fire alarm by breaking the alarm glass.
- 2) Nursery staff are to lead the children and any visitors out in a calm controlled manner, via the safest exit, taking registers, radios and evacuation bags with them.
- 3) Practitioners are responsible for ensuring fire doors are closed behind them whenever possible and taking out the register for a headcount.
- 4) Once outside group leads are to take the register and radio to the person in charge with details of which evacuation point they have gone to and headcount findings.
- 5) The person in charge will call the appropriate emergency services
- 6) DO NOT stop to collect personal belongings.
- 7) NEVER re-enter the building. Wait for the emergency services to report any unaccounted-for persons and their possible locations.

Fire Alarm buttons are located:

- 1) In toddler classroom by the backdoor
- 2) Next to the front door
- 3) In the upstairs flat
- 4) In Preschool

Fire extinguishers are located:

- 1) In Preschool
- 2) In the hallway
- 3) In the Kitchen



4) In Baby room hallway

A fire blanket is in the kitchen.

Meeting Points

Depending on the location of the emergency, toddlers and preschool would firstly try to meet in the back garden, by the baby area, as this is the furthest point away from the building; with the babies using the front door and congregating by the buggy store, preventing them travelling through the ground floor of the building. However, practitioners will use their own judgement as to the safest and quickest route away from danger in an emergency. It may be necessary (depending on the ferocity of the fire) to meet in the conservative car park.

Should we be unable to re-enter the building for any length of time we may need to find a safe place to take the children to, particularly when the weather conditions may be extreme. We have an arrangement in place with Birkdale Nursery (8 London Road, TN39 3JU) that a room will be provided where the children can be kept safe until their parents/carers have been contacted and arranged to collect them. Naturally this is mirrored should Birkdale practitioners need to evacuate their nursery.

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October 2024

Lisa Gray



EMPLOYEE WELLBEING POLICY AND PROCEDURE

For the purpose of this policy, we use the term mental wellbeing, to cover all mental illness, whether diagnosed or undiagnosed, including signs of stress and anxiety.

At Amberley we value our staff team and believe healthy and engaged employees create a successful and happy nursery environment. We appreciate individuals can experience periods of poor mental wellbeing, sometimes prolonged periods, in the same way as for physical health. We are committed to providing support to employees for their individual wellbeing; we comply with all health and safety legislation to create a safe workplace environment which limits risks to employee health and wellbeing and seek to make our workplace inclusive, adopting reasonable adjustments whenever possible.

Employees are encouraged to come and speak to a senior member of the team at any time, and raise any concerns about their individual wellbeing; however, we also have regular opportunities where this can be discussed:

Supervisions- Supervision meetings are generally held every 3 months, between employees and their line manager. As part of these, the individual will be encouraged to openly discuss their health and reminded Wellbeing Action Plans (WAPs) are available should they like one (template attached). Line mangers will check with employees how known health problems are and whether there has been any change, aiming to create an environment for open discussion.

Wellbeing Meetings/Action Plans/Risk Management- any employee can have a wellbeing meeting with their line manager and these may be initiated by either the employee, or the line manager. The aim of the meeting is to create a mutually agreed, individualised plan, exploring together if there are workplace events or situations which can trigger poor mental wellbeing for the individual, as well as what support Amberley can offer. The employee will be expected to participate in supporting themselves, through open and ongoing communication and encouraged to have an open-mind as to what may help them. Meetings and review timings can be decided together- plans may be long-term or require regular updates.

As part of the discussion, the line manager will consider how the employees wellbeing may impact upon their work and what steps can be put into place; this ensures the employee can be successful within their work and the nursery continue to run to a high standard; the line manager may complete a Risk Management Plan (RMP). Depending upon the severity of the wellbeing concern, there may be very little effect on the nursery, up to higher levels of risk, with the potential to have an effect on the safe running of the group, colleagues and children. Any risks will be carefully considered with the aim of finding a balance for all in the setting and may include seeking advice from external services, such as a GP, Occupational Health or the LADO. Unless there are safeguarding concerns, the individual will always be asked for permission to share information; information regarding mental wellbeing is considered sensitive data.

Employee responsibilities employees naturally know themselves best and are likely to have an idea of support which may help them. We encourage employees to be open and honest about their mental wellbeing and inform their line manager at an early opportunity, to allow any concerns to be addressed. Employees are expected to act in a friendly, polite and helpful manner to each other at all times and prejudice towards those with mental wellbeing difficulties will not be tolerated. Where one employee has a concern about the conduct of a colleague, they should follow the reporting procedures as detailed in our 'Safeguarding of Children' policy.



Managing Absence Employees absence is monitored by way of the Bradford Factor, further details can be found in our 'Staff Absence' policy. Usual procedures will apply, subject to any pre-agreed, reasonable adjustments made to the employees working arrangements.

Physical Health We recognise there are times when a physical condition or life event may result in mental wellbeing difficulties for an employee. Additionally, hormones can effect wellbeing, such as during the menopause or monthly menstruation. We aim to support all employees with their mental wellbeing, irrespective of any underlying cause, treating each employee individually and responding to their own needs at the current time.

Employee Assistance Program We subscribe to an employee assistance program, through Health Assured, which can be accessed by any employee at any time and is a free and confidential service. EAP services can be accessed through an app, or via phone call and following discussion with Health Assured may include face-to-face appointments if desired. Employees can locate contact details and passwords for access on the staff room noticeboard.

Policy revised

August 2024

Lisa Gray



EPIPEN POLICY AND PROCEDURE

We have used the term EpiPen, as well feel it is a commonly recognised term. This policy will remain the same for any form of auto-injector of adrenalin, whatever the brand name.

When a child is prescribed an EpiPen the parent or carer will be asked to discuss the child's allergy with practitioners and complete a medicine form. The child will have a care plan created and this information will be available to all staff within the setting. Consideration will be given to whether a request for updated EpiPen training is required for the team; this can be obtained via the Conquest Hospital.

Ideally, parents or carers will provide two EpiPens for their child to be left at the setting; these will be stored in the child's group, in an easily accessible (but out of children's reach) place. Should the child leave the setting for an outing or to attend Forest School, the EpiPen must also be taken. When babies visit the garden they must also take the EpiPen downstairs.

If the child has an allergic reaction and is in anaphylactic shock their EpiPen is to be administered without delay and an ambulance is to be called. The parent or carer of the child will also be contacted.

Procedure for administering an EpiPen:

- Remove the coloured cap from the end of the EpiPen.
- Hold it in your fist, without placing your thumb over the end.
- Press the EpiPen firmly into the outer thigh of the affected person until a click is heard.
- Continue holding the EpiPen in place for 10 seconds.
- When the EpiPen is removed from the leg it will automatically sheath the needle, it cannot be reused.
- If the EpiPen is removed from the leg without waiting for 10 seconds the dose of adrenalin will not have had time to be administered and the second EpiPen should be given.
- If the person continues to become more unwell after a couple of minutes, the second EpiPen is to be administered.
- The EpiPen contains adrenalin which may start to wear off after 10 minutes (although this time length can vary from person to person), if the person's condition begins to worsen and the ambulance has not arrived then the second EpiPen can be administered.

Under the 1970 Medications Act regulations if anyone goes is in life threatening anaphylactic shock and an EpiPen is available then it can legally be administered to them, even when prescribed for someone else. We recognise that anaphylaxis is a rare emergency, however it is life threatening and so we will always seek to administer an EpiPen where one is available.

Procedure for when a prescribed EpiPen has been given to another person:

- The parents or carer of the child it was initially prescribed for will be contacted after the emergency has been dealt with. They will be asked to obtain another prescription as soon as is reasonably possible.
- If the child is in the nursery and they have another EpiPen here then the parents will be given the option of if they wish for their child to remain for the rest of their session.
- If the child is in attendance and they have no other EpiPen here then the parents will be asked to collect their child. The parent or carer will be asked to obtain another EpiPen, preferably two, before the child can return for their next session.
- If the child is not in attendance the parent to carer will be asked to obtain another EpiPen, preferably two before the child can return for their next session.

It is possible for an EpiPen to have been administered in error, for example it is believed that a person has been exposed to their allergen, their EpiPen is given and is later found out that the person was actually just panicking, not going into anaphylaxis. The person, particularly if a child, may need reassurance and comfort; their heart may feel as though it is racing, they may feel shaky. The length of time this may last for varies from person to person, however these feelings may



start to subside from around 10 minutes. No medical treatment would be required as adrenalin is a naturally occurring hormone which no one is allergic to. Parents or carers will always be informed of any administration of an EpiPen.

Parents or carers of a child with a prescribed EpiPen will be asked to read and sign this policy to say they understand all aspects of it; including that in a life-threatening emergency their child's EpiPen may be used on another person, as well as the steps that would be taken to safeguard their child in this instance. A copy of the signed policy will be kept with the child's registration form and also attached to the medicine form.

Parent/Carer's	Signature:	
Date:		
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Parent/Carers Name:



EQUAL OPPORTUNITIES POLICY

At Amberley, we believe that the group's activities should be open to all children and families, and to all adults committed to their education and care. We aim to ensure that all who wish to work in, or volunteer to help with our setting have an equal chance to do so.

The legal framework for this policy is based on:

- Special Education Needs and Disabilities Code of Practice 2015
- Children and Families Act 2014
- Equality Act 2010
- Childcare Act 2006
- Children Act 2004
- Care Standards Act 2002
- Special Educational Needs and Disability Act 2001
- Convention on the Rights of the Child

Admissions and Vacancies

Amberley is open to all families.

Any job vacancies will be advertised. We will invite applicants to an interview equally, including men and women, with and without disabilities, from all religious, social, ethnic and cultural groups and people of various sexual orientations. Using a fair system, to encourage equal opportunities, we will appoint the best person for each job and will treat fairly all applicants. The successful applicant will undertake an enhanced DBS. *Positions are exempt from the Rehabilitation of Offenders Act 1974*.

Commitment to implementing the group's Equal Opportunities Policy will form part of the job description for all workers.

Festivals and Communities

Our aim is to show respectful awareness of all the major events in the lives of those in the nursery, and in our society as a whole, and to welcome the diversity of backgrounds from which they come. In order to achieve this:

- We aim to acknowledge all the festivals which are celebrated in our area and by the families involved in the nursery, and these are discussed with families at their introductory session.
- Without indoctrination in any specific faith, children will be made aware of the festivals and special events which are being celebrated by their own families or others. Where appropriate children will be introduced to the stories behind festivals, food tasting, examples of dance, music or art.
- Before introducing a festival with which the adults in the nursery are not themselves familiar, they must seek appropriate advice from reliable sources, these could include suitable websites, the local library, local religious groups or utilising families' knowledge.

We are aware of the importance of being involved with our local community and take the children on outings to local shops, the De La Warr pavilion, the library and to day centre's for the elderly. We invite local services to visit us, including the emergency services and charitable organisations.

Languages

Children and parents who have English as an additional language are valued and an asset to the setting, their languages are recognised and respected in the nursery. Basic information, written and spoken, will be clearly



communicated in as many languages as necessary and possible. Support for this can be obtained through the ISEND team. Parents will be encouraged to speak to children in their first language at home.

The Curriculum

All children will be respected and their individuality and potential recognised, valued and nurtured. Activities and the use of play equipment offer children opportunities to develop in an environment free from prejudice and discrimination. Management of resources within the nursery will ensure that all genders have full access to activities and equipment and are equally encouraged to enjoy and learn from them. Appropriate opportunities will be given to children to explore, acknowledge and value similarities and differences between themselves and others.

Resources

Resources will be chosen to give children a balanced view of the world and an appreciation of the rich diversity of our multi-racial society.

Materials will be selected to help children to develop their self-respect and to respect other people by avoiding stereotypes and by using images and words which reflect positively the contribution of all members of society.

Special Educational Needs and Disabilities

The nursery recognises that children cam have a wide range of needs, and will consider what part it can play in meeting these needs as they arise. When children join our nursery who have medical or developmental needs with which staff are unfamiliar, we shall seek advice and support from external agencies. We will make all reasonable adjustments to our nursery to accommodate children and their families from a range of backgrounds and with a variety of needs. For more information please refer to our Inclusion and SEND policies.

Discriminatory Behaviour/Remarks

Any discriminatory language, behaviour or remarks by staff, children, parents or any other adults are unacceptable in the nursery.

Our response will aim to demonstrate support for the victim(s), to help those responsible to understand and overcome the prejudice, and to make clear that such behaviour/remarks will not be tolerated.

Food

Working in partnership with parents and carers, children's medical, cultural and dietary needs will be met, in conjunction with our healthy eating policy.

Meetings

The nursery will make every effort to ensure that the time, place and conduct of meetings enable the majority of parents to attend so that all families have an equal opportunity to be involved.

Should anyone require this policy or any of our other policies in additional languages, or audio format, please let us know.



EQUIPMENT & RESOURCES

The toys and resources in the nursery provide opportunities for children, with adult support, to develop new skills and concepts in the course of their play and exploration.

The equipment we provide:

- Offers challenge
- Is appropriate for the ages and stages of the children.
- Aids developing skills
- Includes opportunities for exploration and investigation to encourage children's thought processes.
- Features positive images of people, both male and female, from a range of ethnic and cultural groups, with and without disabilities.
- Include raw materials which can be used in a variety of ways and encourages an open-ended approach to creativity and problem-solving.
- Will encourage children to follow their interests and work towards their individual next steps.
- Conforms to all relevant safety regulations and is sound and well made.
- Is cleaned regularly
- Will, wherever possible be stored in a way which is easily accessible to the children, and rotated according to the children's current interests.

Adults will model using resources respectfully and encourage children to do the same. We will seek resources and equipment to meet the needs of individual children.

Toys from home:

Families should deter children from bringing in their own toys as it can cause unnecessary tensions for them. Staff who are involved with their key groups of children do not have time to look for personal toys at the end of a session, nor will the setting accept liability for such items.



FAMILY INVOLVEMENT

At Amberley we believe that children needs are best met when families and practitioners work in partnership.

We will:

- Signpost new families to our online prospectus and invite them to share any questions or concerns they may have.
- Consider openly and discuss all suggestions from families.
- Publish upcoming events on social media, in our newsletters and via WhatsApp broadcasts.
- Operate a keyperson system to support and develop relationships between families and practitioners, encouraging the flow of two-way communication. Parents will be introduced to their child's keyperson when they start at the setting, or each time there is a change.
- Encourage families to share their children's experiences with us and to share home observations and WOW moments about their child's learning and development. This can be done on paper or through the 'Evidence Me' app.
- Invite families to contribute to their child's Learning Journals. If parents wish not to contribute in writing, then the child's keyperson will happily record things the parent would like to share verbally.
- Send Evidence me observations to families termly, covering the characteristics and areas of learning.
- Share information about the EYFS, Birth to Five and children's learning in the nursery, offering ideas for parents to support this at home.
- Give feedback to the adult collecting their child at the end of each session. (If a child is collected late or at the very end of their session, important information only will be passed on, parents will be encouraged to arrive at a suitable time for future sessions so detailed feedback can be shared).
- Invite parents to an annual family meeting; where parents are unable to attend these meetings, we will offer a telephone discussion.
- Ensure that parents are given information on a regular basis about their child's progress and have an opportunity to discuss it with staff.
- Invite all families to contribute from their own skills, knowledge and interests to the activities of the group, welcoming their contributions, whatever form they may take.
- Respect the religious and cultural backgrounds and beliefs of our families and accommodate special requirements whenever possible and practical.
- Invite families to share their religious or cultural celebrations with the group.
- Welcome contribution to the group's policies and procedures, these are kept in the hallway and are available on our website.
- Make known to all parents the systems for registering queries, complaints or suggestions, the complaints book and compliments file, are kept in the hallway for families to view.



FEE AND FINANCE POLICY

Our registration fee is £50, which is to cover administration and introductory sessions. This fee is waived if a child is accessing fully-funded sessions via funding for working parents or disadvantaged two-year olds. The registration fee is non-refundable.

When booking a place with us, we ask for a deposit of:

- £200 for three to six half days per week.
- £300 for seven or more half days per week.
- £25 if a child is accessing EYEE only sessions.

This deposit will be refunded in your final bill.

Invoices are produced monthly in advance, on an average basis. For example, your weekly session cost * 52 /12. This makes the invoice the same every month, which families tell us is useful for household budgets. Invoices are emailed out by QuickBooks, 7 days before the end of the month, for the calendar month ahead. Fees are payable by the 5th of the month.

Payment may be made by BACS, standing order or through the Tax-free childcare system. We do not accept cash.

If payment is not made by the 6th the following procedure will begin:

- Late payment fee of £25 applied to the account, and a reminder issued through Quickbooks, asking for payment by the 12th of the month. If payment is received, then no further action will be taken.
- If payment is not received by the 12th, the child's place will be suspended and the child will not be allowed to attend until the fees are paid in full. Late fees of £10 per week will also be levied.
- If the fees remain unpaid after one weeks suspension, your child's placement is terminated and the matter filed on Money claim online for potential CCJ application. This will incur more costs which will be added to the outstanding debt.

Our fees are reviewed annually, and any price changes are communicated with at least a month's notice period. A copy of our latest fee structure is displayed in the hall of the nursery.

We require one month's notice from parents to change or terminate their child's sessions.

If you are struggling to pay please, please, talk to us.

We reserve the right to inform the Local Authority and local settings of non-payment of fees.

See also 'Integrated Care Package' policy

Policy revised October 2024 Lisa Gray



HEALTH, SAFETY AND HYGIENE POLICY AND PROCEDURES

The designated person for Health and Safety is Mia Ryalls, however overall and final responsibility lies with Mark and Clare Ryalls.

All staff, students and volunteers have a responsibility to follow health and safety guidelines and raise any health and safety problems to a senior member of staff without delay. Failure to follow health and safety procedures will be regarded as a disciplinary matter.

Risk Assessments are carried out 3 monthly, or sooner if required, for example when new equipment is purchased. Practitioners read and sign these at each review and must raise any health and safety concerns as they arise.

Broken equipment or resources will be immediately removed from children's reach and repaired or discarded.

Low level glass is all safety glass.

The back garden is securely fenced. It is an area for children to run, jump, explore and play at their own pace. We recognise that children need to explore risk in order for them to learn to identify and assess hazards as they grow.

- Before allowing children access to the garden it will be checked for hazards, e.g. animal faeces
- Staff will position themselves to gain a view of the whole area of the garden which is in use, e.g. if there are 2 staff one will focus on the top of the garden, one on the bottom.
- If a staff member needs to leave the garden they will be inform the other staff where they are going and for how long.

Room risk assessments (daily) each morning the rooms are checked to ensure they are a suitable temperature, lighting is adequate, there is provision for the children to assess drinking water, the environment and equipment appears safe and practitioners have the group register.

Room temperatures are taken and recorded each session and are aimed to be maintained between 18 and 21°C. Practitioners must take action when room temperatures fall outside of these parameters, such as turning the heating on or opening windows to increase air flow.

Room layouts and ratios will allow for children and adults to move safely and freely between activities. Large equipment is erected with care and checked regularly. Equipment offered to children will be developmentally appropriate, recognising that materials suitable for an older child may pose a risk to younger children. There is a gate to prevent children from climbing the stairs. Everyone is encouraged to knock before entering a room as children may be close to the door.

The Front door is a security controlled entrance. At all times:

- Parents, carers, students and other visitors are not permitted to allow anyone entry to the building, they must never hold the door open for anyone, remember family circumstances may have changed. All adults must ensure the door is firmly closed behind them.
- Visitors must be identified by staff.
- Parents and carers can be 'buzzed in' using the entry system; for any other visitors (e.g. prospective parents, workmen, professional bodies) staff will go to the door and greet them personally.



- Identity cards will be asked for from unknown workmen or professional bodies before being allowed to carry out their duties.
- Any visitor, other than parents or carers must read the visitors declaration (attached to the visitors book) and be signed in.

Children will be supervised by an appropriate adult at all times, and will always be within sight or hearing of an adult. Children will only leave the group accompanied by a suitable adult. Children will be carefully supervised if they need to access the kitchen. There will always be at least two adults on the premises when children are present. Our sleep policy must be followed whenever a child would like to rest or sleep. They will never be left unattended on the nappy changing area.

Water play and activities which involve the use of heat, will be continually supervised.

Fresh drinking water will always be available to children.

Packed lunches provided by parents must contain an icepack and the temperature of the Zebedee hot dinner delivery is checked daily, before food is given to the children.

Hot taps which children can access are temperature controlled.

Hot drinks are not permitted in the garden and must be kept out of children's reach, adults must not walk around with a hot drink.

Electrical cables are to be kept out of the reach of children, or securely fixed where possible. Electrical Equipment has a Portable Appliance Test (PAT) annually.

Gas appliances are checked annually by a Gas Safe registered engineer. Radiators are appropriately covered and have temperature controls fitted.

Carbon monoxide and fire alarms are in place. There are adequate systems and equipment in place for the detection and control of fire. Fire doors will never be obstructed and will be easily identifiable. Records will be maintained of checks completed on fire safety equipment, and of emergency evacuation drills. Fire extinguishers are checked annually.

Mains locations:

Water stop tap- in the road

Gas point- 2-3 years room, under the change unit,

Main electricity point- in the cupboard next to the front door, (additional fuse boxes in the 3-5 section toilets, above the sinks and in the flat at the bottom of the stairs).

Control of Substances Hazardous to Health (COSHH) safety data sheets for each substance used at Amberley are kept in the health and safety folder. All dangerous substances, including medicines, are stored out of the reach of children, in original containers with the safety information labels attached. PPE is available in the kitchen and in each group for staff to use.

Manual handling advice will be given during the induction period. Where possible adults are to reduce the amount of times they need to lift and to encourage children to move themselves. When lifting cannot be avoided adults must:

- Think about the task to be performed and plan the lift. What are you lifting? Where will you put it? How far is it? How will you get there?
- Never attempt manual handling unless they understand the correct techniques.



- Ensure that they are capable of undertaking the task; people with health problems or who are pregnant may be particularly at risk of injury.
- Assess the size, weight and centre of gravity of the load to make sure they can maintain a firm grip.
- Assess whether they can lift the load safely without help.
- If more than one adult is involved plan the lift first and agree who will lead the move.
- Plan their route and check for hazards, such as uneven flooring, removing obstructions where possible.
- Ensure adequate lighting
- Wear appropriate clothing and the uniform provided; make use of PPE provided.
- Stand in front of the load with their leading leg forward and weight over both feet. Position themselves with the heaviest part of the load next to them. Not twist or stoop. Bend their knees slowly, keeping their back straight. Tuck their chin in on the way down. Keep shoulders level and smoothly bring the load to waist height, keeping it close to the body.
- Use a step ladder when items are stored at or above head height.

Accident forms are provided for when an injury or near-miss occurs. Regular monitoring of these helps us to identify risks, risk assess and make our environment as safe as possible.

First aid boxes are located in each group, and are always taken on outings. The majority of our staff hold a paediatric first aid qualification, there will always be a minimum of one first-aider in the nursery setting and on any outings.

Medicines are stored in the baby room bathroom. Where medicines need to be stored in the fridge they will be kept in an air-tight container, clearly labelled box in the baby room fridge.

Immunisations are recommended by the NHS for all children. For up to date NHS advice on recommended ages for immunisations please visit https://www.nhs.uk/conditions/vaccinations/nhs-vaccinations-and-when-to-have-them/

Oral Health will be promoted in our setting, through play, activities and discussions. Resources and information will be provided to families periodically, and always available on request. Oral health/dentist visits will be discussed at annual family meetings.

Uniforms are to be worn at all times, including suitable footwear.

30 minute lunch breaks are given to staff working over 6 hours. Young workers (under 18 years of age) are entitled to 30 minutes if they are working more than 4.5 hours. School-age workers have an hours break when working four hours.

Our transport is insured, taxed and has a current MOT. The driver conducts a visual check on the vehicle weekly and any necessary maintenance is promptly arranged. Booster seats are used in the minibus for children over three years old and the seatbelts are fitted with height adjusters.

Hands must be washed before handling food, upon entry to the building, after dealing with any bodily fluid such as toileting or wiping noses, using the toilet, messy play or contact with animals. Staff must ensure they use the PPE provided when dealing with any bodily fluids.

Spillage kit is available in the toddler toilet and contains PPE, disinfectant and granules for absorbing bodily fluids.

Open cuts and sores, whether on adults or children, will be covered.



Laundry is done throughout the week. Any items which may be used in the kitchen or on the children, such as flannels, towels, bedding and cloths are laundered at 90°C. Flannels and towels are used once and laundered never shared between children, paper towels are used to dry hands.

Cleaning is completed on a daily, weekly and monthly basis, depending on the item/area to be cleaned. Toilets are checked regularly throughout the day, but cleaned more frequently if required. Toileting equipment such as nappy mats are cleaned after every use. Staff must be aware of the general hygiene in the nursery and ensure that high standards are maintained at all times.

Kitchen checks are completed upon the opening and closing of the business, including fridge and freezer temperatures. All staff are shown the Better Food Better Business pack as part of their induction and hold an up to date food hygiene certificate (new employees achieve this in the first six months of employment). Reheating of foods is avoided where possible, but when absolutely necessary, food temperatures must reach 75°C. All foods in the fridge/freezer must be covered and labelled once opened with the 'use by' date. Work surfaces are disinfected with anti-bacterial spray.

Children are encouraged to learn about good hygiene routines, such as washing their hands, wiping their noses and covering their coughs with their inner elbows.

All adults in the group must be aware of, and show respect for, our safety policies and procedures.

No smoking or vaping, shall be permitted within the nursery property or its grounds at any time, (this includes the carpark) by any adult- including parents and carers or workmen, this is a legal requirement. At Amberley Nursery we believe that everyone has the right to breathe clean air, and non-smokers are in the majority; we ensure that children are in a smoke free environment.

Uniform is not to be worn when smoking on lunch breaks or walking to work, if staff wish to smoke before starting work or on a lunch break, they must change all clothing before re-entering the building.

When vaping, staff must cover uniform.

Office safety Where staff members are required to spend a significant amount of time completing office duties including sitting at a computer we shall put safeguards in place to protect their health and safety. The person responsible for risk assessments (currently Mia Ryalls) will assess each person's work space, equipment and resources to ensure they are safe for each staff member's individual needs. The following guidelines should be adhered to:

- Seating arrangements should ensure eyes are level with the top of the computer screen and forearms are parallel to the desk. Seats should provide adequate lumbar support. Their height and back should be adjustable.
- Staff members should be encouraged to maintain good posture, take breaks to stand and walk as well as change position frequently.
- When using a keyboard wrists should be straight and excessive force should not be used.
- Screens must be positioned to avoid glare and reflections.
- Screens should be kept clean.
- Foot support can be provided if required by the employee.
- Staff members must report any problems to their line manager without delay.

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HEALTHY DIET POLICY AND PRACTICE

The sharing of refreshments plays an important part in developing children's understanding of the importance of healthy eating and their social skills. We will ensure that we fulfil the requirements of the registering authority and that:

- All meals and snacks provided are nutritious, avoiding large quantities of fat, sugar, salt, additives, preservatives and colourings
- As part of a child's initial settling-in session practitioners discuss with families the child's dietary
 needs, including allergies, religious requirements and parental preferences, ensuring these are shared
 across the team.
- All dietary requirements for children and adults are detailed on a care plan, which practitioners must check before preparing a meal or snack.
- Menus are planned in advance and food offered is fresh, wholesome and balanced.
- Children who attend nursery on the fully-funded sessions will bring in their own snacks, following our snack menus and lunch box precautions for the safe storage of foods. Alternatively, they can pay a small charge per session and we will provide the child's snacks.
- We offer foods from a range of cultures giving children the opportunity to try unfamiliar foods.
- Cooking and food play give children the opportunity to use a range of senses to explore foods.
- When eggs are used within a cooking activity, we will only use those which have the 'lion' safety mark. This reduces the risk of salmonella poisoning.
- We do not cook with nuts, and ask parents/carers to ensure packed lunches do not contain nuts, due to children in attendance with nut allergies.
- Water jugs are constantly available. We do not promote the drinking of anything other than milk or water, where children bring different drinks into nursery they will be asked to take them home, and provided with water.
- Where children under 6 months require a drink, we will only use water which has been boiled and cooled.
- All children over six months will be given drinks in open topped cups.
- Children are offered food at least every 3 hours, and where possible staff will sit with the children during snack times.
- Staff will always supervise children when eating.
- Children are given time to eat at their own pace and are not rushed.
- Children are not expected to eat everything on their plate, but can have seconds if they are still hungry.
- Food will never be withheld, for example a child being told they cannot have pudding if they haven't eaten their dinner.
- Daily meals/snacks are displayed for the information of parents; the quantity of hot dinner eaten by each child is recorded.
- Children's preferences are taken into consideration when our menus are reviewed and children are encouraged to tell us things they like, or dislike.
- Milk provided for children is whole and pasteurised.



- Breast-feeding is encouraged within our setting. We have a fridge and freezer available to store
 expressed breastmilk.
- Food areas (including tables) are cleaned with anti-bacterial spray before and after use.
- Hot lunches are provided by an outside catering company. Meals arrive in a closed, insulated box.
- Food temperatures are checked before being served to the children to ensure they comply with current guidance (detailed in the Better Food, Better Business pack, stored in the kitchen).
- Any families wanting advice on healthy eating or packed lunch ideas can speak to a member of staff, who will access this for them.
- Allergen information is available for each food item we serve.
- All staff will be trained on the 'Better Food, Better Business' information, and complete food hygiene training,
- Children who may be reluctant to eat, or to try new foods, will never be pressured. Practitioners will model to the children trying new things, eating with the children where possible. Foods will still be offered to all children and praise will be given to children for trying new foods.

Where families choose to provide their child with a packed lunch, they should include:

- An ice-pack.
- A minimum of one portion of fruit or vegetables per day
- A source of protein, such as meat, lentils, kidney beans, chickpeas, hummus, falafel
- A source of dairy, such as milk, cheese, yogurt, fromage frais, custard
- A source of carbohydrate such as pasta, rice, noodles, couscous, bread, pitta, potatoes
- There may be one 'unhealthy' snack such as chocolate, biscuits, crisps etc.

If more than one unhealthy snack is in the child's lunch box the children will be asked to take them home and a slip will be put into the child's box to explain to the parent/carer why this has been left unopened.

We recognise that children's needs vary, where medical advice has been given about a child's diet we will always seek to meet these needs.

Policy revised October 2024 Lisa Gray



ILL CHILD POLICY AND PROCEDURE

At Amberley we promote healthy choices. We aim to protect children from harm or neglect and help them to stay safe. We recognise that it is in the child's best interest to be in a home environment when they are unwell, rather than at nursery with their peers.

In order to minimise cross-infection children must stay at home if they have a contagious illness. We ask parents to promptly inform the nursery as to the nature of the illness. This will allow us to alert other families, as necessary, and to make careful observations of any child who seems unwell.

We ask parents not to bring their child into the setting if they have been vomiting or had diarrhoea until at least 48 hours has elapsed since their last attack.

Children who have been prescribed an anti-biotic must not attend nursery for the first 48 hours of taking their medication, unless this is part of ongoing care, to treat chronic medical conditions, and it has been agreed by the child's doctor that they do not need to absent for 48 hours.

Children who have been given medicines before nursery, such as paracetamol, cough/cold medicines or ibuprofen must not attend nursery. If they have been deemed unwell enough to require this medication, they are very unlikely to be well enough to attend nursery. It will also mask their illness, enabling it to spread to children and Staff.

When a child becomes unwell whilst in our care, we will ensure that the child receives appropriate care and attention, make them comfortable and minimise the risk of cross-infection. We will contact the parent/carer using the information on the child's registration form. If the parent is not contactable, we will then call the child's emergency contacts. In certain situations, and depending upon prior parental consent, we may administer paracetamol, in line with our 'Medications' policy. The 'Uncollected Child' procedure will be implemented if no authorised persons on the registration form are contactable. If it is deemed the child needs hospital care, an ambulance will be called, and a member of the nursery team will accompany the child to hospital and remain with them until their parent arrives.

Our exclusion period chart below follows this policy; we have reached these decisions following careful consideration of advice given by the NHS, Local Authority and UK Health Security Agency, as well as the age of our children and the close nature of their play, ability to follow hygiene procedures, and the regularity of pregnant ladies visiting our setting. Following current guidance we shall report incidents to Ofsted, the Local Authority and UK Health Security Agency where required. We will utilise posters, messaging, social media, and email communication to alert parents to cases of communicable illness within their child's group.

The vast majority of our staff hold a Paediatric First Aid certificate. There will always be at least one first aider onsite and on all outings.

Exclusion periods

Please note these are minimum periods, children must be fit and well for their nursery day, an individual's recovery make take longer than the time periods specified below.

Exclusion Period	Comments



Antibiotics	48 hours from start of dose.	
Athletes foot		Must have footwear on until cleared.
Chicken pox	7 full days or until all blisters have scabbed over and dried out.	Pregnant staff and parents are to contact their GP or midwife.
Cold sore	48 hours once treatment has started. – Treatment must remain being used until clear. (around 2 weeks for this to heal).	Avoid kissing with peers.
Conjunctivitis	48 hours if antibiotic drops have been started.	Children cannot return to nursery until discharge has completely stopped and eyes are no longer pink/red.
	However, if using non-antibiotic/natural methods of treatment- minimum 5 days.	
Covid	3 full days from testing positive.	
Croup	5 days from the start of croup symptoms, NOT from the start of cold-like symptoms, which may occur first.	
Diarrhoea & vomiting	48 hours free from D&V.	
Flu	Once fit for nursery – Temp has returned to normal and child is feeling well.	
Glandular Fever		May return once child is feeling better.
Hand foot and mouth	7 full days from when rash appears	Avoid contact with pregnant woman.
Headlice	Once treated can return.	
Hepatitis A	7 full days	
Impetigo	Until all areas are crusted over or healed. Must have 48 hours of antibiotic treatment before returning.	
Measles	5 days from when rash appears.	
Meningitis	7 Full days or until recovered.	
MRSA	7 full days.	
Mumps	5 full days from swelling.	
Ringworm	48 hours of treatment is required before returning.	
Rubella (German Measles)	5 days from when rash appears	
Scabies	48 hours after first treatment	
Scarlett fever	5 Full days from when rash appears	



	Must also have had 48 hours of	
	antibiotics, temperature returned to	
	normal and child is well.	
Slapped cheek	5 full days from when rash appears.	Pregnant staff and parents are to contact
		their GP or midwife.
Strep A throat	48 hours from start of antibiotics.	
Temperature (over 38)	Once a normal body temperature	
	resumes	
Threadworm	48 hours after treatment.	Whole house needs to be treated not just
		the child.
		Check with pharmacist/GP if a second
		treatment is required after two weeks
		(don't need to be off for this one, if
		symptomless).
Thrush (oral)	48 hours once treatment commenced and	No exclusion for thrush to genitals or
	child is not showing signs of	other areas- usual daily hygiene
	discomfort/regularly putting hands into	procedures to be maintained.
	mouth (saliva can spread the thrush	
	fungus in young children).	
Tuberculosis	2 weeks after the start of antibiotics.	
Warts & Verrucae		Must have footwear on until cleared.
		Warts must be covered.
Whooping Cough	48 hours from starting antibiotic. If no	
	antibiotics, 21 days from onset.	

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Lisa Gray



INCLUSION POLICY & PROCEDURE

Our nursery aims to provide a warm welcome and appropriate learning opportunities for all children. We have regard to the Special Educational Needs and Disabilities (SEND) Code of Practice and will treat each personchild or adult-as an individual.

Person responsible for inclusion: Mia Ryalls

- Our inclusion support officer, works with children who have special educational needs, disabilities (SEND), English as an additional language (EAL), behavioural challenges, or any other identified need, to maximise their inclusion within the setting.
- Children with special educational needs or disabilities, like all children, are admitted to the nursery after consultation between parents and practitioners. We strive to make all reasonable adjustments to our setting.
- Our aim is to provide for the developmental needs of each child.
- All children in the group, irrespective of any special educational needs or disabilities, are encouraged wherever possible and appropriate to participate in all the group's activities.
- Our system of observation and record-keeping, which operates in conjunction with parents, enables us to monitor children's needs and progress on an individual basis.
- The needs and progress of children who have special educational needs or disabilities are monitored by our Inclusion Support Officer (SENCO).
- If it is felt that additional personnel, training and/or equipment are required to support a child, parental permission will be sought for local authority referrals and funding, to ensure that provision is appropriate to the child's individual needs.
- We work closely with the parents of all the children in the group to ensure that:
 - The group draws upon the knowledge and expertise of parents, carers and families in planning provision for the child; we recognise that often the parent will know their child and his/her needs best.
 - o The child's progress, achievements and next steps are shared and discussed regularly.
 - Parents know, or can easily find out, the identity of the groups SENCO (called our Inclusion Support Officer).
- Our 'SEN and Disability Information' (formerly local offer), details arrangements for the admission and integration of children with special educational needs or disabilities and can be accessed by prospective families through our website.
- We will seek the support of, and work in liaison with, relevant professionals to meet children's needs.
- Our staff members attend (whenever possible) training on special educational needs and disabilities, as relevant to the needs of the group.
- Upholding our inclusion, equal opportunities and SEND policies forms an integral part of employees' job descriptions.
- Practitioners will model inclusive, non-stereotypical behaviours to children, and will seek to challenge in an age-appropriate way, any discriminatory behaviours or attitudes.
- If you have any complaints regarding our inclusion policy, please follow our complaints procedure.

Families with English as an Additional Language



Families and children who have English as an Additional language are always welcomed into our setting. As part of the initial settling in session each child's keyperson will discuss with the child's parent languages which the family use at home and create a list of keywords and their correct pronunciations. The keyperson will also discuss the family's ability to access English information (both verbally and in writing) and seek to gain the services of translators where necessary. Support can be gained via translation applications, or for more complicated/lengthy information, through ISEND.

Children with EAL may have an EAL plan, aiming to ensure that all practitioners are aware of which strategies are being used to support the child. The child's keyperson may also make notes onto this of new words and phrases spoken or understood by the child.

We value children learning more than one language and will always seek to support and encourage parents to continue to use their first language at home. We will share dual language stories with the child and will ask parents if they are happy to create a recording of this story for us to celebrate at nursery too.

We recognise that to become fluent in a new language can easily take many years; children will be supported within their communication and language development, but never rushed.

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Lisa Gray



INTEGRATED CARE PACKAGE POLICY

The amount of government funding given to each childcare provider doesn't cover the full cost of your child's hours or the essentials and extras we just wouldn't be Amberley without. To help us give your child the best start in life, we'll ask you to contribute towards the costs for these, along with any non-funded hours; we call this an Integrated Care Package (ICP). These are just what they sound like: all the important essentials like food and toiletries, along with those enriching, Amberley things that make our nursery so fantastic. The government funding isn't meant to cover the costs of things like these, so like most nurseries, we'll ask you to contribute towards them. But when you see what you're paying for, we think you'll understand-drinks, snacks, enhancements and activities- fun, exciting and educational experiences to teach your child essential life skillsour team carefully plan and create opportunities for your child to build their learning and development in every area. Families can benefit from access to Evidence Me, an online learning journal and yearly parents evenings too. We provide dedicated care, with one member of staff for up to 8 children, compared to 13 in some settings.

We offer fully-funded places, to support those most in need. These are released each term, and depend on staffing levels and availability. As parents don't need to contribute towards these places, there's an operational and financial impact on our nursery - so to ensure the care we provide isn't affected, and that we can run sustainably, we have to limit the number of places available. A waiting list is in place, please speak to our management team to be added onto it; until a fully-funded space becomes available, you can choose to either remain in an ICP paying space, or provide us with the appropriate notice period. Giving notice for an ICP space will not affect your child's place on the fully-funded waiting list.

In order to remain eligible for working families childcare funding, the onus is on parents to update your information via HMRC every 3 months, or when prompted to do so.

Funding for all-year round places is stretched across 52 weeks of the year.

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Parent/Carer Contract for the Integrated Care Package

I agree to pay the ICP, as described above, which will be added to my monthly invoice, as per Amberley's	'Fee
and Finance' policy.	

and Finance' policy.		
Parent name:		
Signature:		
Date:		



INTIMATE CARE POLICY (INCLUDING NAPPY CHANGING AND ASSISTING CHILDREN TO USE THE TOILET)

At Amberley Nursery every child has the right to go to the toilet and have their nappy changed in a clean, hygienic environment.

In order to achieve this, we shall ensure that when age/developmentally appropriate:

- Once children are confident in using the toilet they will be encouraged to have the door closed at least partway for their privacy. Within our preschool, low-level toilet doors can be locked by the child, but reached by an adult from the outside should the child require assistance.
- Each child will be encouraged to wipe themselves.
- Each child will be encouraged to flush the toilet.
- Each child will have access to liquid, antibacterial soap to wash their hands and a disposable, paper towel to dry them with.
- Practitioners will spot check the toilets four times a day, and record their findings. They will ensure that
 the toilets are fully stocked with anti-bacterial soap, paper towels and toilet tissue and that high-touch
 points are cleaned.
- Clear, disposable gloves are available for adult use, and must be worn for tasks involving bodily fluids if adults have open sores or cuts on their hands. Gloves are to be changed between tasks.
- Hands should be washed before and after each time a child is assisted with intimate care.
- Aprons are available, which must be cleaned with anti-bacterial cleaner after each use.
- Nappies, wipes, gloves and any other materials used in the nappy changing/toileting process will be disposed of into the yellow, clinical waste bin.
- Children will never be left unattended on the changing area.
- All equipment will be checked regularly for damage; any broken equipment will be replaced.
- Toilets and nappy changing areas are risk assessed as part of the whole nursery risk-assessment.
- Nappy mats are cleaned with anti-bacterial spray and disposable tissue after each use.
- Each nappy change will be recorded on the nappy changing chart, clearly marked with the contents of the nappy; time changed and staff member's initials.
- If nappy cream is provided by the parent/carer, its use will be noted on the nappy changing chart.
- Nappy changing areas are positioned to provide a balance of privacy for the child and areas where
 practitioners can be seen, promoting the safeguarding of children. CCTV does not cover nappy
 changing areas or toilets.
- Toilet and nappy changing areas are always separate from food preparation/consumption areas.
- The nappy changing area will remain free from clutter to ensure children are being changed in a safe and hygienic place.
- When children are having their nappies changed they will be engaged with conversation, singing and rhymes or offered a wipe-clean toy.
- Whenever possible children will have their nappy changed by a familiar adult.
- If at any point a practitioner is unsure of any processes involved in toileting, nappy changes or any other intimate care they should seek support and guidance immediately from their group lead, or the management team.
- Toileting, nappy changing and intimate care will be discussed at each child's initial introductory session at Amberley.



- Where a child has specialist needs we will seek training and support as required, ensuring all staff are competent in the processes needed by the child.
- Practitioners attend safeguarding training and follow our safeguarding and whistle blowing policies
 regarding the recording and reporting of concerns; any concerns noticed during nappy changing or
 toileting will be reported to the DSL immediately and recorded on a body map/welfare form.
- Anyone involved in the intimate care of children will have an enhanced DBS check, students will only
 change a nappy or assist a child to use the toilet when this is a required part of their qualification and
 they hold a DBS check; they will be closely supervised by a practitioner at all times throughout the
 process.
- Practitioners will feedback to parents/carers if a child has a rash or any marks, as well if they have shown any discomfort or distress during nappy and/or toileting procedures.
- Where children need to change their clothing, they will be afforded the same privacy and respect as for a nappy change, following the above procedures.
- Do not routinely use potties. Where these are required for a medical or developmental reason, parents may bring in a clean potty at the beginning of the child's session and must always take it with them at hometime. Potties must be stored on a shelf, not left on the toilet floor where other children can access them. After use the potty must be cleaned with antibacterial spray and disposable tissue.

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KEYPERSON POLICY

At Amberley Nursery we realise the importance of each family having a key person, who will take on the following responsibilities; (when a keyperson is absent another, familiar practitioner will take on this role, preferably the co-keyperson):

- Support families with the settling in period, liaising with parents about a child's individual needs and routines.
- o Develop a trusting relationship with key families.
- o Communicate transparently with families, encouraging a two-way flow of information.
- o Greet and settle in key children on arrival into the setting where possible, ensuring any messages are recorded or passed on to relevant staff.
- Compile regular observations relevant to the children's development; update individual learning journals and complete all development records.
- Complete PLODs termly, ensuring each child's individual interests and motivations are planned for, then carry out these activities.
- o Being fully aware of their keychildren's individual needs, including those in relation to EYPP, EAL or SEND; ensuring they are using and recording identified strategies.
- o Liaising with the Inclusion Support Officer, DSL and outside agencies as required.
- Offering comfort and support to each child.
- To offer annual family meetings, in person or via telephone. Of course, these meetings may be held more often if the keyperson or family feel there is a need.

As a team:

o To ensure verbal feedback is passed to families at the end of each session

Policy revised August 2024 Lisa Gray



LOCK DOWN POLICY AND PROCEDURE

We recognise there are some instances where in an emergency it may be safer to remain inside the building, or within certain areas of the building, rather than evacuate. There are a number of situations which could arise which may lead to following the lockdown policy, rather than the emergency evacuation policy, examples include (but are not limited to) threat of violence from someone known or unknown, terrorist attack, weapons attack.

Where the threat is outside of the building

Where the threat is outside of the building, we recognise that it is probably safer to remain in the building.

In the instance that someone reports, or suspects, a serious threat, the following procedure is to be implemented **immediately**:

 Staff member to use the radio to alert all other staff. Speak clearly and slowly to ensure your message is understood. Repeat it twice.

"Emergency at specify the place of the threat e.g. front garden. Lock down the nursery"

- The person in charge of the nursery is to immediately call the police. Try to give them as detailed
 information as possible, this could include descriptions of persons, weapons or vehicles; the place the
 person was last seen, details of casualties, where we plan to congregate.
- All children and adults to move to the nearest congregation area and lock the door. These are:
 - The 3-5 toilets
 - The 2-3 toilets
 - The baby room sleep room
 - The office
 - The staffroom (anyone working here should stay in this area)
- The practitioners who are outside are to bring all children inside, locking the doors as they go.
- In the instance that no-one is outside, practitioners who are working in the rooms are to check the external doors are locked.

Once congregated:

- Lock the door of the room you have congregated in.
- Section leader/practitioners are to conduct a headcount as soon as their group have congregated together (if safe, to take the register with the group, however safety is priority).
- Radio the person in charge that you have reached a congregation area, if everyone is present or anyone is missing, then turn off your radio.
- Practitioners can take the evacuation bags if there is time, but they must not put themselves in danger.
- If there is a missing person, staff must judge their action depending upon the severity of the emergency, whilst considering the safety of themselves and the other people in the congregation areas. It may be possible to return to the room the child was previously in to collect them. However, we recognise that there are times when it may be considered safer to leave a child or adult where they are, rather than risk attracting further attention. This is for the individual staff members to judge in the moment and not



something which can be pre-decided; practitioners must consider the safety of themselves and others in the congregation zone.

- Make the police aware by telephone (if available) of where we have congregated. If you have
 congregated in the office or staffroom you should have a phone or mobile nearby, both groups are to
 dial 999. It does not matter if the emergency services are contacted twice, it is far better than not at all.
- Keep assessing the danger, if the person/people gain entry to the building then to follow police advice on whether to stay in the room or to instigate the emergency evacuation procedure.
- NEVER answer the doorbell, open windows or communicate with people outside unless the police have instructed you to do so.
- Give emergency first-aid to those in need.
- Stay where you are until instructed to move by the police, or they come to rescue you. Do not assume the threat is over until this is confirmed by the emergency services.

If you are unable to get to a congregation area:

- Keep children away from windows where possible and close curtains if available.
- Use anything available to create cover. Upturn furniture and tables, then hide behind these.
- Stay where you are until instructed to move by the police, or they come to rescue you. Do not assume the threat is over until this is confirmed by the emergency services.

Where the threat is inside the building

Where the threat is inside the building the manager is to be notified immediately and, depending upon the severity of the situation, they will decide to either instruct a staff member to set off the fire alarm, initiating the emergency evacuation, or use the radio to instruct staff to gather in one place, following the procedure above. Where for any reason the manager is unavailable, or injured, any staff member present is to make this decision.

Remember that safety is priority. As long as you act responsibly and with good reason, you will not be 'in trouble' for over-reacting if a situation ends up being less serious than you initially imagined.

Drills will be held monthly to ensure staff and children are familiar with the procedures.

Policy revised October 2024 Lisa Gray



LOST CHILD PROCEDURE

If a child goes missing while in Amberley's care, the practitioner will inform the person in charge without delay.

The manager will:

- Instigate a search of the premises/area without causing undue panic amongst other children
- If the child is not found, the police will be contacted on the emergency phone number of 999.
- If the child is not found on the premises (or the immediate area if on an outing) widen the search to the surrounding area.
- Contact the parents to inform them
- Maintain correct adult child ratios
- Review security procedures after the event
- Complete a thorough investigation and inform all relevant parties of findings, implications and outcomes of review

Policy revised August 2024 Lisa Gray



MEDICATION POLICY AND PROCEDURE

At Amberley we encourage children to make healthy choices. We aim to protect children from harm or neglect and help them to stay safe.

Prescribed Medications

When a parent or carer provides a prescribed medication for their child, the following procedures will be adhered to:

- Medications will only ever be given to the person named on the chemist's label.
- All medicine must be in its original container and have the chemists label attached.
- Written information and permission to administer will be obtained from the parent/carer with details of:
 - If the medication is for a long or short term period of time
 - The name of the medication (including the strength)
 - Dosage
 - Form
 - Times the mediation is to be given
 - If the medication is to be given as required which symptoms indicate a need for it
 - The parent or carers signature
- Practitioners will check:
 - The chemist label matches the information detailed by the parent or carer.
 - The expiry date of the medication.
- A separate form must be competed for each medication.
- Families must notify us immediately of any changes to a medication.
- Before administering medication, practitioners will check the chemists label against the medication form and ensure they contain the same administration instructions.
- If there any discrepancies between the labels the parent or carer will be contacted and the medication will not be administered.
- The administering practitioner and a witness will sign the medication form and record the time the medicine was given.
- When the child is collected the adult who collects them will be informed of times the medication has been given and asked to sign the medication form.
- All medicines will be stored in the lockable medicines cupboard, which is in the baby room in the toilet and out of children's reach or, if they need to be refrigerated, in a labelled, air-tight container in the baby room fridge.
- No volunteers or students will administer medicine. Aside from an emergency situation, medicines will only be administered by section leaders, the deputy manager or manager. At forest school medicines will be administered by the forest school lead. At forest school there is no resources to keep medicine suitably refrigerated, therefore it may not be appropriate for children who require refrigerated medication to attend-this will be assessed on a case by case basis, with the child's family. The safety of the child will always be of paramount importance.
- Some forms of medication (e.g. injections) may require practitioners to undertake additional training before these medications are able to be administered at Amberley.



Under certain circumstances we may administer non-prescribed medicines, including:

- **Nappy creams** Parents or carers must provide permission for us to administer nappy cream to their child and provide a container clearly labelled with the child's name. This is included on the 'All About Me' form and will be discussed with parents/carers at the initial introductory session.
- **Teething products** Parents or carers must complete a medicine form as for prescribed medications. Teething products must be clearly labelled with the child's name.
- **Epipens** Although epipens are prescribed, these may be used for a person they were not prescribed for during a life-threatening situation. Please refer to the Epipen policy for further information.
- **Paracetamol Medicine** A supply of paracetamol liquid will be stored on site. This will be checked during medicine audits, to ensure storage requirements are adhered to and the medicine remains in date.
 - As part of the registration process, parents are given the option to complete a paracetamol consent form, should they wish.
 - o If a child over three months exhibits the symptoms for which consent has been given, we will initially make every attempt to contact the child`s family.
 - Where this proves unsuccessful, the nursery manager or deputy will take the decision as to whether the child should be given paracetamol, based on the time the child has been in the nursery, the circumstances surrounding the need for this medication and the known medical history of the child.
 - Giving non-prescription medication will be a last resort and the nursery staff will use other methods first to try and alleviate the symptoms e.g for an increase in temperature the nursery will first remove clothing.
 - o Parents will be expected to collect their child if we have deemed it necessary to give the child paracetamol, as detailed on the consent form; with the exception that a teething child may have one dose and remain at nursery, if their discomfort is not relieved by the paracetamol, the child's parent/carer will be asked to collect them.
 - o The child will be closely monitored until the parents, or emergency contacts collect the child.

We will never give non-prescribed paracetamol to a baby under 3 months. For children who are very small for their age, or were premature, the parent must check with the appropriate dose with the child's GP or health visitor and record this on the consent form.

Other non-prescribed medicines non-prescribed medicines may be provided by parents/carers and administered within nursery, providing the following criteria are met:

- ✓ Children with transmissible or contagious illnesses must stay home
- ✓ Children who are unwell and unable to cope with the nursery day must stay home
- √ If medicines are expected to be given on a regular basis, they should be prescribed.
- ✓ Medicines must be in original packaging, in date and the medicine leaflet must be provided.
- ✓ Any non-prescribed medicine will only be given at the discretion of the manager in charge that day. If the manager (or deputy) has any doubts about giving the medicine within nursery, they will decline to accept it from the parent.

Staff and medication-Please refer to the Drugs and Alcohol Policy (including prescription and over the counter medicines).

Policy revised October 2024 Lisa Gray



OUTINGS POLICY

As part of the registration process, parents give or decline permission for children to be taken on outings in the local community. This is discussed again at the child's initial settling in session recorded onto the child's 'All About Me' form.

Prior to leaving the building, practitioners will complete the outings book and take a photograph of each child on the nursery mobile phone, which they will take with them. In the event that a child goes missing whilst on an outing, this photograph can be messaged/emailed to the police to enable them to better help search for the child. All adults who are supporting the children within a trip are to have been shown any relevant risk assessments, as well as the 'Student Placements and Volunteers Policy' by the practitioners working in that group. The outings bag is to be checked before leaving and is to always be taken, this contains a first aid kit and accident forms; a first aider must always go on a trip. If only one member of staff is on the trip, then emergency contact details for the nursery must be clearly visible to others, e.g. tied to a bag strap.

We recognise that the ratios of adults to children will vary depending upon the age of the children, their development and abilities, the destination and route, as well as the experience of the adults attending. Practitioners are to use their own judgement to ensure the ratios are safe, however they are never to exceed 1:4 (1:3 for under 2's).

All practitioners attending are to be responsible for knowing how many children have left the setting; headcounts are to be carried out at regular intervals.

Policy reviewed August 2024 Lisa Gray



PHYSICAL ACTIVITY POLICY

We follow the UK Physical Activity Guidelines for Under 5s which can be found at Physical activity guidelines: early years (under 5s) - GOV.UK (www.gov.uk)

At Amberley we are committed to promoting the health and wellbeing of all children and practitioners in our setting. We strive to maximise opportunities for physical play in an inclusive manner, making reasonable adaptations to our environment, activities and resources to enable all children to participate. We recognise the importance of risk taking in building children's resilience and offer age-appropriate risks within play.

We operate a free-flow system between the garden and indoors and encourage all children to explore the outdoor space. We explore and play outdoors in all weather conditions; on the very rare occasions extreme weather conditions force us to stay indoors, we will incorporate physical activities into our indoor space. We use the balance bikes to encourage children's development of balancing skills- research has shown that children often make the transaction to a pedal bike with greater ease when they have had the opportunity to enjoy the balance bikes from an early age.

We will provide activities across all areas of the EYFS in our garden and change these regularly to maintain children's interest, we encourage the children to help choose activities and to have a balance of both adult-led and child-led activities. We provide varied developmentally appropriate physical activities for all children to enjoy regularly throughout the course of every day. Children will be observed both indoors as well as in the garden and individual 'Possible Lines of Direction' (PLODs) are planned for termly and are reviewed by the child's keyperson.

Practitioners are encouraged to be good role-models for children and so will engage in physical play alongside the children, our home learning bags can be borrowed from nursery and are for the whole family to enjoy. We have two storage chests for the storage of buggies, bikes or scooters to promote active travel to nursery. We share news of local clubs and events through leaflets in our hallway, recognising the importance of physical activity for the health of families as a whole.

We are a Forest School and sessions are offered to children over the age of three, travelling to the High Woods to engage within walking, climbing, using tools and building fires-please refer to our Forest School policy for more information.

Policy revised August 2024 Lisa Gray



PREVENT DUTY, RADICALISATION AND PROMOTING BRITISH VALUES

We believe the safeguarding of children to be of paramount importance. We recognise the value of working together to prevent children, families and staff/students being radicalised or subjected to extremism, including:

- Terrorism
- Intentional targeting of the vulnerable
- Sowing division between communities
- Justifying discrimination
- Calling for the death of our armed forces
- Those who argue against democracy and the rule of law.

We follow guidance as set out within Working Together to Safeguard Children (2018) and the Counter Terrorism and Security Act (2015).

We discuss the prevent duty as part of our annual safeguarding training, then hold a British Values focus week to raise staff and family awareness of the subject, highlighting our everyday practice. For staff members who remain unsure of the subject we will provide additional training and support. If any staff member feels that they are unsure of the signs and symptoms of radicalisation, they are to raise this with their line manager and seek further training.

Signs of radicalisation:

- Isolating themselves from family or friends
- Talking as if from a scripted speech
- Unwillingness or inability to discuss their views
- A sudden disrespectful attitude towards others
- Increased levels of anger
- Increased secretiveness, especially around internet use

If we suspect radicalisation, we will report this in line with our usual safeguarding procedures (refer to safeguarding policy).

We recognise that the British Values are interlinked into the EYFS and are embedded in our everyday practice. We encourage our Amberley family to be respectful to each other's beliefs and celebrate our differences, tackling discrimination every time it occurs.

We:

British Value Description		Some of the things we do to support this	
Democracy	This is about making decisions together. Children are actively encouraged to express their	 The children are encouraged to choose what they would like at snack times. Children are encouraged to select activities, free-flow operates for a large part of the day. Helping to choose activities for group times and adult-led activities. Children's interests are recorded on their PLODs and reflected in our activities and acquisition of new resources. 	



	opinions and value others.	 Choosing if they would like to be indoors or outdoors. Helping to decide choices about their rooms, looking through catalogues of resources or selecting what to make in the role-play area.
Individual Liberty	This is about encouraging children to have a positive view of themselves and celebrating differences.	 Turn taking and kindness are actively promoted. Self-care skills are encouraged and children are supported to develop their independence. All children's work is valued and praised. Displays of children's work/achievements. Children help to make our group rules and these are displayed in the classrooms. Providing opportunities for risk-particularly through Forest School. Encourage children to share ideas and news. Celebrating each other's beliefs, similarities and differences. Allowing children who want to help to do so; this could be to have a turn helping in the younger class, or to give the plates out at lunchtimes. Child-led activities. Resources at child height where possible.
Rule of Law	 Resources at child height where possible. This is about children Demonstrating to children ways to deal with their emotions appropriately. Practitioners modelling and praising manners, kindness and hap choices. Giving children specific praise and using positive reinforcement children helping to create a set of group rules, having these rudisplayed. Visual timetables to help children who are struggling to settle, who may have a SEN. 	
Mutual Respect and Tolerance of Those with Different Faiths	This is about children respecting their own and other's cultures and beliefs, creating an ethos of inclusivity.	 We ask each family (including staff and volunteers) who join our setting about their celebrations and include these within our planning. Trying a variety of foods, we often link this to a celebration or festival. Supporting and developing children's social skills. Promoting an inclusive and respectful environment through actions and words. Inviting people from the local community to visit our setting, these include visits form emergency services and charitable organisations. Recognising, discussing and celebrating our similarities and differences. Where possible we do short trips out to our local community. Providing opportunities for group play.

Policy revised August 2024

Lisa Gray



PROMOTING POSITIVE BEHAVIOUR POLICY AND PROCEDURE

We believe that children and adults flourish when they feel safe and secure and have their needs met in a supportive environment, where everyone knows what is expected of them and children are free to develop their play and learning without fear or being hurt or hindered by anyone else. We recognise and encourage the use of British Values throughout the nursery. In order to achieve this we:

- Recognise the individuality of our children and that some behaviours represent normal development in young children, including biting.
- Support children to co-regulate, recognising that the vast majority of the children in attendance will not have the brain maturity to self-regulate their emotions consistently just yet.
- Work in partnership, and communicate transparently, with families, to give children a consistent approach to support.
- Expect adults to be positive role-models for the children with regard to friendliness, care and courtesy; recognise their responsibilities in encouraging positive behaviour, including modelling how to settle disagreements peacefully.
- Recognise and praise positive choices children make.
- Apply boundaries consistently, fostering the security of knowing what is expected
- Regularly discuss and review group rules with the children, communicating these to new comers in an age/developmentally appropriate manner
- Listen carefully to children, both their verbal voices and their non-verbal cues
- Recognise that occasionally children will use unwanted behaviours as a way of attracting attention, taking steps to ensure that time with an adult is positive and beneficial to the child
- Encourage the development of social skills through group play, consistently encouraging consideration for others and our surroundings.
- Encourage children to communicate with each other, respecting when a peer may request "stop"
- Expect adults to be aware of, and respect, a range of cultural expectations regarding interactions between people. Any behaviour problems will be handled in a developmentally appropriate fashion, respecting individual children's level of understanding and maturity.
- Adults will be aware that behaviours can arise for a variety of reasons, including tiredness, frustration, illness language delay or a special educational need.
- Never use, or threaten, physical punishment, such as smacking or shaking
- Do not use Techniques intended to single out or humiliate the individual child such as the 'Naughty Chair'
- Adults will not shout or raise their voices in a threatening manner
- Never describe another as "naughty", rather describe the action, e.g. "that was dangerous".
- Challenge all discriminatory behaviours, aiming to educate rather than blame
- Make clear to the child or children that it is the behaviour and not the child that is unwelcome.
- Incidents will be communicated openly and honestly to parents or carers when the child is collected from nursery, or at the time of the incident where behaviours have been more serious/caused harm to another.

When children make sad choices:

- Adults will calmly intervene, using clear language, gestures and symbols as appropriate for the child.



- Anyone requiring first aid will be prioritised, then all parties involved will have an opportunity to explain, and be listened to.
- Adults may redirect children to other areas/rooms, this can sometimes help to 'reset' things for the child by offering a fresh environment for play.
- Alternatively, children may benefit from a quiet period with bubbles, a book or dough to allow them to calm and for hormones to settle.
- Children will never be sent out of the room by themselves
- When the child is ready, they will be supported to identify what went wrong and what they could try next time.
- Children may be encouraged to think about how a peer feels, or decide what actions/words they may like to offer as resolution. Children are never made to say sorry.

Physical restraint, such as holding, would only be used in an emergency, where there is significant risk of injury to children or adults and/or serious damage to the property. Any significant event of this sort will be recorded onto an incident record, and the parent informed without delay.

Where children are regularly requiring support with behaviours, above that which is common for their age, the settings Inclusion Practitioner may liaise with parents, key people and external agencies to implement a Setting Based Support Plan and/or risk assessment.

Policy revised September 2024 Lisa Gray



RESTING AND SLEEPING CHILDREN

We believe it`s extremely important for all children to have enough rest and sleep. We follow advice given by the Lullaby Trust and the NHS on safe sleep.

We ensure:

- Children heads are always uncovered and we tuck blankets up no higher than their armpits.
- Children are never placed to sleep in front of radiators.
- Room temperatures are monitored, sleep rooms should be 16-20°C.
- Bedding is suitable for the weather.
- We remove outer clothing before children go to sleep, e.g. jumpers / Hoodies, trousers, bibs etc. Children will usually sleep in their nappies and vests.
- We remove hair bands, clips when children are sleeping Making sure the child's hair is down.
- Pillows and cot bumpers are never used.
- Children will always be put to sleep on a suitable piece of equipment, these could include travel cots, cot beds or sleep mats. Bean bags, the sofa and on cushions, are **never** deemed a suitable place for children to sleep.
- When a child falls asleep unplanned, e.g. at lunch time or during play, they will be moved to a place that is suitable without delay.
- We record times that children sleep and have this information available to parents/carers when children are collected.
- We monitor children who are sleeping by sound at all times. Every ten minutes, practitioners will do an additional sight check- by placing a hand on the child's chest to check they are breathing, or by putting a hand near the child's mouth to feel for breath. Children will be checked to ensure they are not too hot or cold and that blankets remain below their armpits. This check is recorded onto a daily record.
- In the baby's room, there are movement sensors in the top cots, which transmit sounds to a receiver kept close to a practitioner. Children under the age of one must sleep on the top cots with the angel monitor on.
- Top cots must not be used once a child is showing interest in climbing.
- Children under six months must always sleep in the same room as an adult, they are never to be left in the sleep room alone.
- Babies are always laid to sleep on their back, with their feet touching the end of the cot.

Policy revised August 2024 Lisa Gray



SAFE AND APPROPRIATE USE OF PHYSICAL COMFORT

We believe that in order for children to learn and develop, they need to feel safe, secure and happy. This involves nursery staff being responsive to children's holistic needs, whilst maintaining professionalism. To promote good practise and minimise the risk of allegations we:

- Recognise it is entirely appropriate to cuddle young children.
- Let children initiate, or choose to accept an offered cuddle, respecting when they decline.
- Model and encourage respectful behaviour
- Discourage inappropriate behaviour such as kissing, or asking children to tell someone they love them.
- Challenge behaviour which could be considered inappropriate in line with whistle blowing and safeguarding policies through supervisions, appraisals and disciplinary procedures where appropriate.

Policy revised September 2024

Lisa Gray



SAFEGUARDING OF CHILDREN

If something worries you about a child, or how an adult has behaved, talk to Lisa, Jess or Jess. If for any reason you feel you cannot speak to one of them, call SPOA or one of the numbers on the child protection phone numbers poster, explain what's happened and ask them to help you.

No question or worry is too small or silly, communicating is key.

Safeguarding the children in our care will always be of paramount importance to us. The children's well-being is forefront in our minds and at the heart of everything we do.

Designated Safeguarding Leads (DSL): Jessica Hammond & Lisa Gray

At Amberley we work with children, parent/carers, external agencies and the community to ensure the welfare of children and to give them the very best start in life. Children have the right to be treated with respect, be able to thrive and be safe from any abuse, in whatever form. We realise that safeguarding is a much wider subject then can be covered within a single policy, therefore this document should be read in conjunction with the nursery`s other policies and procedures, especially:

- Abusive Adults
- Camera and recording Devices
- Computers, Safe Storage, Disposal and Internet Safety
- Drugs and Alcohol
- Ill child
- Intimate Care
- Prevent Duty, Radicalisation and Promoting British Values
- Safe Care and Appropriate Use of Physical Comfort
- Social Networking and Mobile Devices
- Staff Working with Their Own Children and Those of Close Friends
- Students and Apprentices
- Uncollected Child

Our policy has been reviewed with local policies in mind, as well as giving full regard to the following legal frameworks:

- Child Sexual Exploitation (DfE) 2017 (non-statutory guidance)
- Childcare Act 2006 (amended 2018)
- Children act 1989/2004.
- Children and Social Work Act 2017
- Counter-Terrorism and security Act 2015
- Criminal Justice and Court Services Act 2000
- Data Protection Act 2018
- Female Genital Mutilation Act 2003 *(amended 2015)



- Freedom of Information Act 2012
- Information Sharing (DfE) 2024 (non-statutory guidance)
- Keeping Children Safe in education 2024
- Prevent Duty 2023
- Safeguarding Vulnerable Groups Act 2006
- The Domestic Abuse Act 2021
- The Equality Act 2010
- The Human Rights Act 1998
- The Police Act 1997
- The Sexual Offences Act 2003
- The Statutory Framework for the Early years Foundation Stage (EYFS) 2024
- What to do if you`re worried about a child being abused (DfE) 2015 (non-statutory guidance)
- Working together to Safeguard Children 2023

Working Together to Safeguard Children defines safeguarding and promoting the welfare of children as:

- Providing help and support to meet the needs of children as soon as problems emerge
- Protecting children from maltreatment, whether that is in or outside the home, including online
- Preventing the 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 by their birth parents, or otherwise their family network through a kinship care agreement, whenever possible and where this is in the best interests of the children
- Taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children's Social Care National Framework

We will:

- Follow this procedure for staff, students and volunteers in our setting who are under 18, should we have concerns they are experiencing abuse
- Create an environment where children are encouraged to develop a positive self-image
- Provide positive role-models and develop a safe culture where staff are confident to raise concerns about professional conduct
- Discuss safeguarding and whistle blowing at every staff meeting, supervision and appraisal
- Always be ready to listen to the concerns of staff
- Support staff to notice the signs of abuse and know what action to take
- Encourage children to develop a sense of independence and autonomy in an age-appropriate manner



- Help children to learn they can say "no" and expect others to stop when they do not like something
- Provide a safe and secure environment where children are always listened to
- Promote tolerance, acceptance and celebration of all beliefs, cultures and communities, showing sensitivity to how economic, social and cultural circumstances may impact children's lives
- Encourage staff and children to work together in decision making
- Encourage and support practitioners confidence in identifying where children and families may need intervention and how to seek help
- Share information with other agencies as appropriate. **Safeguarding of children will always** supersede data protection.
- Help children to keep themselves safe by:
 - Asking them to help risk assess their environments and think of appropriate solutions to hazards.
 - Using anatomically correct terminology for body parts with children
 - Teaching children about consent and respect for others from a young age; through telling each other "stop" when they dislike something and listening when others say "stop" or "no"
 - Labelling and recognising their own and others emotions, "A you look angry",
 understanding all emotions and behaviours can act as a form of communication.
 Supporting children with their big emotions, understanding that young children need
 to have support for their emotions and behaviours, for them to in turn begin to learn
 to regulate these themselves.
 - Encouraging children to communicate their own likes, dislikes, wishes, fears and needs
 - Encouraging mutual listening, where adults listen to children and children listen to adults, with both parties are able to speak up where they disagree.

Amberley nursery is aware that, unfortunately, child abuse does occur in our society and we are vigilant in identifying signs of abuse and reporting concerns. Our staff have a duty to protect and promote the welfare of children, to be vigilant, to communicate concerns in a timely manner and to raise any breaches of this policy to the DSL. Due to the many hours of care we are providing, staff may often be the first people to identify that there may be a problem. They may well be the first people in whom children confide information that may suggest abuse or to spot changes in a child's behaviour which may indicate abuse. Our prime responsibility is the welfare and well-being of each child in our care. As such we believe we have a duty to the children, parents and staff to act quickly and responsibly in any instance that may come to our attention. This includes sharing information with any relevant agencies, such as local authority services for children's social care, health professionals or the police. All staff will work with other agencies including as part of a multi-agency team, where needed, in the best interests of the child.

The nursery aims to:



- Keep the child at the centre of all we do.
- Ensure staff are trained right from induction to understand child protection and safeguarding, know our policies and procedures, are alert to possible signs of abuse (including soft/lower level signs), understand what is meant by child protection and are aware of the different ways in which children can be harmed, including online and by other children through bullying or discriminatory behaviour.
- Be aware of the increased vulnerability of children with Special Educational and Needs and Disabilities (SEND), children under 1, those who have experienced Adverse Childhood Experiences (ACE) and other vulnerable or isolated families and children.
- Ensure that all staff feel confident and supported to act in the best interest of the child, express professional curiosity, share information and seek the help that a child may need at the earliest opportunity.
- Make child protection referrals in a timely manner, sharing relevant information as guided by East Sussex Safeguarding Children Partnership (ESSCP).
- Share information only with those that need to know in order to protect the child and act in their best interests.
- Identify and respond to changes in staff behaviour
- Identify and encourage staff to report risks in the nursery, aiming to minimise and manage them
- Take action relating to allegations of harm or abuse, including reporting to OFSTED, DBS or SPOA and working with LADO where appropriate.
- Support children and families, by offering reassurance, comfort and sensitivity.
- Make our safeguarding policy available to families, both online and in paper form (kept in our hallway)
- Give staff contact details for local and national agencies so they can report concerns if they
 feel unable to speak to a DSL or DDSL within nursery, or feel their concerns are not being acted
 upon.

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused within a family, institution or community setting by those known to them, or more rarely, a stranger. The abuser could be one person or multiple, and an adult or child.

Whilst there are no absolute criteria to rely on when judging what constitutes significant harm, consideration will be given to:

- The severity of the ill-treatment, including the degree of harm
- The extent and frequency of abuse and/or neglect
- The impact this is likely to have, or is having, on the child involved

There may be a single, traumatic event or a combination or acute or long-standing events.

Types and Indicators of Abuse



Fabricating or Inducing Illness (FII)

FII is when a parent makes up, or deliberately causes, symptoms of illness in a child. The parent may seek out unnecessary medical treatment or investigations, exaggerate real symptoms, deliberately cause an illness e.g. through poisoning, or interfere with medical treatments. The parent may encourage the child to appear disabled or ill.

Peer on peer

Peer on peer (or child on child) abuse will be reported in the same way as adult to child abuse. Due to the young nature of the children within our setting, peer on peer may be perpetrated by a child outside of our setting, and can take the form of physically hurting another child, bullying, emotional harm or sexual abuse. We recognise that the perpetrators of peer on peer abuse may often have been victims of abuse themselves, and so we will seek to support both the victim and the perpetrator.

Physical abuse

Physical abuse includes causing deliberate harm or poisoning, burning or scalding; as well as when an adult fabricates, or induces an illness (FII) in a child. Young children are learning to move and explore physical play, therefore we recognise childhood injuries are common; we are alert for injuries where the explanation does not appear to match the injury, patterns to injuries, or these in less common areas, e.g. fleshy parts of the arms and legs, back, wrists, ankles and face. **We will always report physical injuries in a non-mobile child.**

• Female Genital Mutilation (FGM)

Our lead people for FGM are the DSLs.

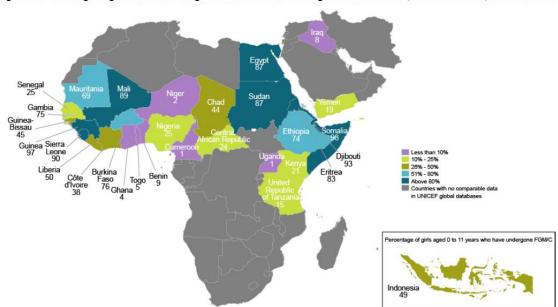


Figure 1: Percentage of girls and women aged 15-49 who have undergone FGM in Africa, the Middle East, and Indonesia

FGM is practised as a cultural ritual by some ethnic groups, it is not a religious practice. FGM involves female gentalia being injured or changed, without valid medical reason; it may be carried out shortly after birth or during childhood and adolescence, prior to marriage or during pregnancy. Symptoms may include bleeding, pain to the intimate areas, urinary retention,



urinary infection, wound infection, septicaemia, incontinence, mental health problems, PTSD and even death. There is a mandatory duty to report all suspected cases of FGM to a person under 18 and we will always seek to do this when we have concerns FGM may be, or has been, committed.

Free training on FGM can be accessed at: https://www.virtual-college.co.uk/resources/free-courses/recognising-and-preventing-fgm

Resource packs are available at: https://www.gov.uk/government/publications/female-genital-mutilation-resource-pack

The NSPCC has a free phone helpline for FGM concerns: 0800 028 3550

• Breast Ironing

Also known as breast flattening is the process where young girls breasts are massaged, ironed or pounded with hard and heated objects to prevent or delay breast development. It is believed in some cultures that by carrying out this act, young girls will be protected from harassment, abduction, forced marriage at a young age and rape. We recognise that breast ironing is unlikely to happen to children within our care, due to their young age, however we are vigilant for whole families, and will report any concerns as they arise.

Sexual Abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities, including both penetrative and non-penetrative acts, non-contact acts such as looking at, or encouraging children to look at, images, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse. Sexual abuse can take place in person as well as through technology and online. Perpetrators may be of any age or gender.

We use the Parent Protect traffic light tool, available at <u>Parents Protect - Traffic light tools for parents carers and professionals</u>, to aid us in identifying behaviours which are representative of normal, healthy, physical development, compared to those which may be an indicator of sexual abuse. Children may also, become worried when their clothes are removed for personal care, display a change in their personality, regress to younger behaviours, display changes to their eating patterns, express a lack of trust, have bruises, bleeding, discharge, pain or soreness to their genital or anal area.

Child Sexual Exploitation (CSE)

CSE occurs where an imbalance of power is used to coerce, manipulate or deceive a child into a sexual activity, even where this appears consensual. It may involve physical contact and/or the use of technology in exchange for something the victim needs or wants, or for the financial advantage or increased status of the perpetrator. Signs and symptoms include physical injuries, bruising, bleeding, unexplained money or gifts, changes to appearance, alcohol/drug use, becoming emotionally volatile, use of sexual language beyond that which is age-expected, less engagement with friends or family, appearing controlled by their phone, switching screens when an adult goes near the computer, nightmares, sleeping problems, running away from home, staying out overnight, school absence, eating changes, talking about a new, older friend or partner, secretiveness, contracting STDs.

• Child Criminal Exploitation (CCE)



CCE involves an individual or group utilising an imbalance of power to coerce, control, manipulate or deceive a child into a criminal activity. Due to the age of the children we care for, it is unlikely they will themselves be victims of CCE, however we are vigilant for whole families, and will report any concerns as they arise.

Emotional Abuse

Working Together to Safeguard Children, describes emotional abuse as 'the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development'. It may include conveying to a child they are worthless, unloved, inadequate or valued only insofar as they meet the needs of another person, not allowing a child to express their views, deliberately silencing then, making fun of what they say or how they communicate, placing of age or developmentally inappropriate expectations or boundaries-including overprotection, bulling which makes a child feel frightened, enforced social exclusion and interactions which are beyond the development of the child and witnessing another be ill-treated.

Witnessing domestic abuse, alcohol or drug misuse may also constitute emotional abuse, the Domestic Abuse Act, recognises in law, that children are victims of abuse if they see, hear or otherwise experience the effects of domestic abuse.

Emotional abuse is a feature of all types of abuse and can also occur alone.

Children suffering emotional abuse may have developmental or speech delays, overreact to mistakes, express extreme fears, display neurotic behaviours (e.g. hair twisting, rocking), be extremely passive or aggressive, appear unconfident and lacking in self-assurance.

Neglect

Neglect is the commonest type or abuse, with 1 in 10 children in the UK being neglected, younger children are particularly vulnerable. It is the persistent failure to meet a child's basic physical and emotional needs. Neglect can cause serious impairment of children's health and development, and can include substance misuse in pregnancy, failing to provide adequate supervision (including the providing of inadequate caregivers), food, clothing and shelter; failing to protect a child from physical or emotional harm, failing to ensure access to appropriate medical care and treatment; failing to respond to a child's basic emotional needs. Signs may include a child arriving dirty or unkempt, clothes and shoes which are too small, persistent hunger, arriving in a dirty nappy repeatedly, having an illness, disability or special need that is not being addressed by the parent, persistent hunger, the craving of love and attention.

County Lines

Involves gangs and organised criminal networks exporting illegal drugs from larger cities to smaller towns, using drug runners to transport drugs and collect payments. Children are often targets. Due to the age of the children we care for, it is unlikely they will themselves be recruited into county lines, however we are vigilant for whole families, and will report any concerns as they arise.

Cuckooing



Cuckooing is a form of county lines, where drug dealers take over the home of a vulnerable person and criminally exploit them as a base for drug dealing. Cuckooing is a form of abuse.

• Domestic Abuse

Domestic abuse is between two people over the age if 16, consisting of physical, emotional, psychological, economic or sexual abuse and/or violent, threatening, controlling or coercive behaviour. It may be one incident, or multiple and can happen to anyone over 16. Sings of domestic abuse may include behaviour changes, bruising and injuries with unlikely explanations, change to style of dress, stalking, excessive contact, a partner who exerts an unusual amount of control or demands over work life, frequent lateness or absence from work. Exposure to domestic abuse can have serious, long-lasting consequences for children (see also emotional abuse).

Where domestic abuse concerns are shared by our adult members of staff, we will aim to support them to seek help, but respect if they are not ready to do so (unless a risk of serious harm is perceived). Where domestic abuse concerns a child in our setting, a child of a staff member, or a staff member who is under 18, we will always report this.

Honour Based Abuse (HBA)

HBA is incidents which are committed to protect the honour of the family or community (see also FGM, forced marriage and breast ironing). Perpetrators may perceive that a relative has shamed the family and/or community, breaking their 'honour code' and often involves the wider family networks. Signs in children may include a change in how the child dresses or acts, injuries with unlikely explanations, depression, anxiety, self-harm, frequent absences and restrictions on friendships or attending of events.

Where HBA concerns are shared by our adult members of staff, we will aim to support them to seek help, but respect if they are not ready to do so (unless a risk of serious harm is perceived). Where HBA concerns a child in our setting, a child of a staff member, or a staff member who is under 18, we will always report this.

• Forced Marriage

A forced marriage is where one or both partners do not consent to the marriage and are coerced into it.

Where forced marriage concerns are shared by our adult members of staff, we will aim to support them to seek help, but respect if they are not ready to do so (unless a risk of serious harm is perceived). Where forced marriage concerns a child in our setting, a child of a staff member, or a staff member who is under 18, we will always report this.

Chid Abuse Linked to Faith of Belief (CALFB)

Child abuse linked to faith or belief may occur in families where there is a concept of belief in:

- witchcraft and spirit possession, demons or the devil acting through children or leading them astray-traditionally seen in some Christian beliefs
- o the evil eye or djinns- traditionally known in some Islamic faith contexts, and dakini- in the Hindu context
- Ritual or multi murders where the killing of children is believed to bring supernatural benefits, or the use of their body parts is believed to produce potent magical remedies



- Use or belief in magic or witchcraft to create fear in children to make them more compliant when they are being trafficked for domestic slavery or sexual exploitation
- o Children's actions are believed to have brought bad fortune to the family or community

Child Trafficking and Modern Slavery

This is when children are recruited, moved, transported and then sexually or financially exploited, forced to work/domestic servitude, illegally adopted or are sold. Victims of modern slavery are also likely to be subjected to other types of abuse such as physical, sexual or emotional. Signs and symptoms may include appearing under control, reluctance to interact with others, having few personal belongings, wearing the same clothes, appearing frightened or withdrawn.

Extremism and Radicalisation

(see also our Prevent Duty policy). Children can be exposed to different views and receive information from various sources and some of these views may be considered radical or extreme. Radicalisation is the way a person comes to support or be involved in extremism and terrorism, usually it's a gradual process so those who are affected may not realise what's happening. Radicalisation is a form of harm. The process could include being groomed online or in person, exploitation, psychological manipulation, exposure to violent material and inappropriate information, risk of physical harm or death through extremist acts.

Upskirting/downblousing

These are criminal offences involving taking intimate photos under a person's clothing without their knowledge, either for sexual satisfaction or to cause distress to the individual.

Online Safety

Technology use has become a component of many safeguarding issues. There are four main areas of risk associated with online safety:

- CONTENT being exposed to illegal, inappropriate or harmful material such as pornography, fake news, racist or radical and extremist views.
- o CONTACT being subjected to harmful online interactions with other users such as commercial advertising or adults posing as children.
- CONDUCT personal online behaviour that increases the likelihood of, or causes, harm, such as making, sending and receiving explicit images and online bullying.
- COMMERCE risks such as online gambling, inappropriate advertising, phishing and/or financial scams.

Reporting Concerns

All adults have a responsibility to report safeguarding concerns.

Amberley expects all adults in the setting to co-operate fully with the local authority, children's social care, police, OFSTED or any other agency in any way to ensure the safety of children.

DSL Jess H-



Deputy DSL Jess M-

Adults must:

- Report concerns to the DSL without delay- Jessica Hammond or Lisa Gray. If you are unable to
 contact either Jess or Lisa, you can also report to the Deputy DSL- Jess McVoy. In the unlikely
 event that neither the DSLs nor DDSL can be contacted, the staff member with the
 concern MUST use the contact numbers below to report their concerns themselves. THEY
 MUST TAKE ACTION.
- Record concerns clearly and accurately on a Welfare Record as soon as possible, to ensure accuracy of information.
- Where a child has arrived at nursery with an existing injury, complete an Incident Record, detailing the parent/carers explanation. Professional curiosity around explanations is encouraged.
- If appropriate, discuss any reported concerns with the parent or carer. If you feel that to share your concerns may place a child in additional danger, or where you suspect sexual abuse, seek guidance from the DSL first.
- If for any reason the adult feels unable to go to either the DSLs or DDSL, they MUST contact any external agency, numbers are displayed in the hallway, kitchen and safeguarding notice board in the adult toilet.

The DSL/DDSL must:

- Decide what action to take based upon the severity of the concern. They may refer the matter
 to SPOA or speak to the parent and keep a record in the safeguarding file. If the DSL has any
 doubt about the action they should take, they must seek advice from SPOA. If it is felt that
 speaking to the parent/carer may further endanger the child, then a referral should always be
 made.
- If the child already has a social worker, it may be appropriate for the DSL to contact them directly, all emails to a child's social worker should cc in SPOA, to ensure a receipt in the instance the social worker is absent from work; likewise, if phone contact is attempted and unsuccessful, the DSL must contact SPOA.
- If the matter relates to a member of staff, the DSL will also Contact LADO for advice without delay, via the online form.
- If it is believed a child is in immediate danger, contact the police.
- Record the information accurately onto the child's chronology in their safeguarding file, including all actions and outcomes
- Take any actions as advised by SPOA,LADO or the police, keeping accurate and detailed record throughout.



- Speak to the parents, unless advised not to by SPOA or the police.
- Consider whether they need to report to the LA or OFSTED, depending upon the situation. If in any doubt, either service can be contacted for a discussion.
- Follow up with SPOA if no response is received, never assuming that action has been taken.

Responding to a child's disclosure:

- The adult should give the child their full attention, use open body language, be compassionate, offering reassurance without interrupting, allowing the child to go at their own pace.
- Reflect back what the child has said to check you have understood, using the child's own language
- Only ask questions for clarification and never using leading questions
- Reassure the child they have done the right thing in telling you
- Never promise confidentiality
- Follow the reporting procedure above

Recording Concerns/Disclosures:

Records must include the child's name, date of birth, date and time of the observation or disclosure, exact words used by the child and any non-verbal communication, exact position and type of injuries and marks, detailed explanation of incidents observed and the names of others present, any discussion held with the parents (if deemed appropriate), disclosures should be recorded using the persons own words, as soon as possible after the disclosure. Records should be signed by the reporting adult and the DSL/DDSL, then placed into the child's individual safeguarding record.

Record Keeping:

Safeguarding records are confidential, factual, maintained in chronological order and stored in a locked cabinet; the DSL and DDSL are keyholders. Records are audited by the DSL to look holistically at children's needs.

Safeguarding records may be shared with parents only if appropriate and in line with guidance of the local authority, with the care and safety of the child remaining paramount.

In line with our data audit, safeguarding records are stored in a locked filing cabinet in the office which is kept locked overnight. Keys are held by the DSL and DDSL. When a child leaves Amberley their records are passed on to their next setting, either by recorded mail or in person and a signed receipt is obtained. If a child becomes home educated, or we are unable to ascertain their next location, we will retain their records until the child turns 25 years and 3 months.

Confidentiality:



Confidentiality must never over-ride the right of children to be protected from harm- where adults have concerns they MUST share these, either through our in-house procedures, or via external agencies (the contact details for these can be found in the staff room and staff toilet).

All suspicions, enquiries and investigations are kept confidential and shared only with those who need to know. Any information is shared in line with guidance from the local authority. All staff, students and volunteers are bound by confidentiality and any information must never be discussed outside of work.

Amberley has due regard to the Data Protection Act 2018 and GDPR.

Support for Families:

Amberley aims to build trusting and supportive relationships with our families. We will continue to welcome families whilst enquiries are ongoing. Families will be treated with respect in a non-judgemental manner whilst any investigations are carried out.

Allegations against adults working or volunteering with children:

The allegation should be reported to the DSL without delay. If the DSL is the subject of the allegation, another member of the safeguarding/management team should be contacted without delay:

The DSL will:

- Contact LADO
- Contact SPOA
- Contact OFSTED
- Contact our local authority
- Contact the police (if appropriate)
- Carry out a full investigation under the guidance of SPOA/LADO
- Follow all instructions given by SPOA/LADO and OFSTED and expect all staff members to cooperate
- Suspend staff members involved in the investigation if it is appropriate to do so. Guidance will be sought from SPOA/LADO if there is any uncertainty.
- Keep full and accurate records and store these securely (see Data Audit)
- Keep all records until the employee reaches retirement age or for 22 years if that is longer. This ensures accurate information is available for future reference requests.

A staff member resigning will not prevent an investigation from proceeding.

Unfounded allegations will result in all rights being reinstated.

Founded allegations will be reported to the LA, LADO, OFSTED and DBS, and, where an offence has believed to have been committed, to the police. All founded allegations of abuse will result in termination of employment.



All staff members have access to an Employee Assistance Program, and all staff involved can access this for further support.

Low-level Concerns

Inappropriate, problematic and concerning behaviours by staff members which do not meet the threshold for harm or reporting to LADO will still be treated as significant concerns. These could include behaviours which are not in keeping with our policies, including online or outside of work, a sense of unease or 'nagging doubt'.

Where the DSL has any uncertainties around if a behaviour meets the harm threshold, they should consult LADO.

If the harm threshold is not met, the DSL will record the concerns raised, speak with all parties involved and consider any previous concerns noted in the staff members file, retaining these throughout the persons time at Amberley. Where misconduct is suspected, disciplinary procedures will be followed.

Looked after children (LAC):

As part of our commitment to safeguarding all children, we will work in partnership with all agencies involved in the care of a LAC. We recognise that the circumstances surrounding each child and their family will be individual, therefore we will be guided by the information we receive from the child's social worker and the virtual school.

Absence Procedure-Child

Parents/carers are asked to call or text to let us know if their child is going to be absent. This is not intended to stop families having precious time together, but enables us to log attendance and check children are safe.

For unexpected absences, where no contact has been made from the parents, practitioners contact parents by 9.30am(or 2.30pm for an afternoon session), to enquire about the child's whereabouts. If no response has been received within one hour, practitioners must alert the DSL/DDSL. The safeguarding lead for that day will again try to call the parents, then the child's emergency contacts. If no response has been received then the DSL or DDSL will contact SPOA and/or the police.

We are required to monitor all children's attendance patterns to ensure they are consistent and not a cause for concern, we do this four times a year via register and absence reviews.

Where children have a child protection or child in need plan, any absences will be reported to their social worker. If the social worker is unavailable, the team or SPOA will be contacted.

Staff and volunteers:



Only adults who hold an enhanced DBS check may be in an unsupervised position with children. Safeguarding is a high priority for all staff at all times and there will always be a DSL or DDSL contactable-usually they will be on the premises- to ensure prompt action can be taken when concerns arise.

Applicants for posts within our nursery are informed that positions are exempt from the Rehabilitation of Offenders Act 1974. Candidates are informed of the need to carry out checks before posts can be confirmed. Where applications are rejected because of disclosed information, applicants have the right to know and challenge information they believe to be incorrect. Identity and Right to Work checks are completed and a minimum of two references will always be obtained (one of which must be the most recent childcare employment) and these are followed up with a phone call also. Staff members are required to read the employees handbook as part of their induction, which contains details of our capability, disciplinary and grievance procedures.

All staff members will be required as part of their employment contract to be on the DBS update service. This service will be checked (as a minimum) once a year, as part of the staff members appraisal.

We conduct regular supervisions, peer on peer feedback and management observations, to ensure that the care we provide for children is at the highest level, share constructive feedback, develop practice, build trust and identify any areas for staff development.

Staff members and volunteers are given regular opportunities to disclose changes that may affect their suitability to work with children as part of their termly supervision meetings. These may include changes to health, medication or in their home life, such as child protection plans for their own children.

Any changes in adult behaviour will be investigated, this could include changes in mood, sudden change in religious or cultural beliefs, changes in manner towards other staff members or to the children, sudden outbursts, becoming withdrawn, secretive behaviours, missing shifts or calling in sick more frequently, work standards slipping, extreme changes to appearance, staff becoming overly domineering of other staff, where there is any concern surrounding peer on peer bullying.

Where there is a concern about staff behaviour a meeting will be called with the individual and a member of management, to ascertain what is occurring; we will aim to support the staff member wherever possible. We aim to ensure staff are able to continue working with children as long as they are suitable to do so, however, should behaviours cause concern about the safety or welfare of the children then safeguarding procedures will be followed and SPOA/LADO will be contacted. All conversations, observations and notes will be recorded and remain confidential.

Staff training:

All staff are expected to keep their safeguarding knowledge up to date; records are maintained of training attended and needed.



As part of their induction, all staff members will complete the East Sussex online safeguarding training and familiarise themselves with this policy. They will then complete the local authority Practitioner Child Protection training. All staff will then complete annual safeguarding training, usually inhouse. Additionally, safeguarding of children is discussed as part of every staff meeting, supervision and appraisal.

We have a safeguarding display board which is updated as our setting receives information. We also put up relevant serious case reviews for practitioners to read.

As part of induction all staff members are given the contact details for SPOA, NSPCC, OFSTED and the out of hour's service. These numbers are also displayed in the kitchen, toilet and staff room. Staff are asked to read and offer contributions to, the nursery policies annually.

The DSLs and DDSL will attend local authority DSL training every 2 years, and do the local authority esafeguarding annually, to ensure they are aware of, and can cascade any changes in local procedures to the team. One DSL will also attend Advanced Safeguarding and Train the Trainer, having responsibility for the inhouse training.

Safeguarding is discussed at every staff meeting, supervision and appraisal. We have an 'open door' policy, where staff are encouraged to have a conversation about anything safeguarding, no matter how insignificant it may feel.



SEPARATED PARENTS

Many children live within families where parents are separated and families may become blended; most of these families are able to work together to care for their child. Unfortunately, there are some occasions where family relationships are challenging, this policy sets out our decision-making processes at these times. We recognise and welcome both parents to be involved in a child's education and care.

We will not mediate between parents or become involved in disagreements or altercations; we expect our staff to be treated with respect at all times. For further information please refer to our 'Abusive Adults' policy.

At registration, we request to see a child's birth certificate, and record onto the child's registration form the details we have seen. Unless a court order or other written, legal documentation is provided, parents named on a child's birth certificate are presumed to have equal parental responsibility for the child.

We encourage families to work together to make decisions, as this is frequently in the best interests of the child; where parents are unable to agree, we advise they seek support through mediation or the family court. Until a court order or similar documentation is provided, where parents share care of a child, then they may make decisions for the time the child stays with them, e.g. 'their' days; however, these decisions must also align with our nursery processes, for example, sessions must remain unchanged week-to-week.

Where a court order specifically denies visitation to a child, we will seek to offer feedback in other ways, such as via messages, post or telephone.

WRITTEN RECORDS

Both parents have the right to receive progress assessments and other records. If the parents are separated or divorced, progress reports will be sent to the main residental parent, with the expectation that they will share the report with the other parent. The nursery will send copies of the progress report to both parents only where we receive a written request to do so; consideration will be given to details relating to the other parent, such as addresses- these may be redacted to maintain confidentiality.

PARTICIPATION AT IN-PERSON EVENTS

Unless a legal document such as a court order, bail conditions, restraining order or non-molestation order prevents it, both parents are welcome, and encouraged, to participate in in-person events such as parents evenings, outings or Christmas celebrations. Both parents are welcome to follow us on social media and request our email newsletters and Whatsapp broadcasts, where details of upcoming events are shared.

PEOPLE AUTORISED TO COLLECT AND EMERGENCY CONTACTS

Unless a court order or other legal document specifies differently, either parent, may, at any time, collect their child from nursery.

Where parents are unable to agree upon additional people authorised to collect their child, (including emergency contacts), parents may give, in writing, separate details for their own time with the child. They must also provide, in advance, the dates when the child will be under the care of each parent. Should the other parent disagree with these persons, they must seek legal advice and provide us with an appropriate court document, otherwise we will follow the wishes of the parent responsible for the child at the appropriate time.



Where these details have not been provided in advance, we will be unable to accept a child for their session, as we must be clear on can collect and who we can contact in an emergency.

Policy revised

July 2024

Lisa Gray



SOCIAL NETWORKING AND MOBILE PHONE/ANY OTHER ELECTRICAL DEVICE POLICY

This policy applies to all types of electronic device such as mobile phones, smartwatches, ipods/pads, tablets or anything similar; for ease of reading we will call them mobile phones throughout this policy.

At Amberley, we recognise staff actions on social networking sites can impact upon the nursery, and how families view the setting and our staff.

We believe that staff should be completely attentive and so practitioners must not use or access their mobile phones during their times of work (excluding lunch breaks).

All adults in the setting must adhere to the following restrictions:

- Mobile phones are to be kept in the office upstairs, on silent or turned off during working hours.
- Mobile phones can be used only in designated lunch breaks, this must be away from the children.
- During outings, staff will use the mobile phone belonging to the nursery.
- Photographs may only be taken on the nursery mobile phone or tablet.
- Staff must not post anything on social networking sites that would have a negative impact on Amberley's reputation or have any impact on the way the nursery and/or its staff are viewed.
- Staff must not post anything on social networking sites that may offend a staff member or parent/carer using the nursery.
- All staff are to be professional and responsible in their use of social networking sites.
- If staff choose to allow a parent/carer or other family member of a child at Amberley to view their page on social networking sites then the relationship must be kept professional at all times. **Staff are strongly encouraged not to have current families on their social networking sites.**
- Parents and other visitors to the nursery are asked to keep their mobile phones turned off and in their pocket or handbag whenever they are on the nursery premises. All staff must remind any visitors to our setting of this and ask them to put away their mobile phones if they see them being used.
- Use of the Amberley Nursery social media, including the use of children's photographs, is discussed with parents/carers at each child's initial introductory session and parents/carers permission is sought for the use of their child's photograph.
- If any of the above points are not followed then the staff member involved will face disciplinary action, which could result in dismissal.
- We invite the raising of any concerns regarding inappropriate use of social media and will always treat these confidentially.
- Smartwatches which only count your steps and do your heart rate are fine to be worn within the setting; however, any smart watch which has any recording capability- image or audio, or can make/receive calls/ send text messages, must not be worn.

Policy revised October 2024 Lisa Gray



Special Educational Needs and Disability (SEND) Policy

Person responsible for SEND: Mia Ryalls

Amberley Nursery and Forest School welcomes all children from our local community, it's our aim that every child has the opportunity to access and enjoy Amberley, whilst having their individual needs met.

At Amberley we work in partnership with the child's family and welcome other professionals at every opportunity, to observe and discuss children's progress and needs. We encourage children to accept and value each other.

Amberley Nursery and Forest School follow the Special Educational Needs and Disability (SEND) code of practise for 0-25 years old. Our SEND Policy should be read in conjunction with the following policies:

- Equal Opportunities
- Admissions
- Promoting Positive Behaviour
- Inclusion

Our SENCO (special educational needs and disabilities co-ordinator) is Mia Ryalls, who has responsibility for liaising with the child, their families, key person, support workers and any other professionals. All members of the team are fully committed to including children with Special Educational Needs and/or disabilities, this includes children who are excelling within an area of their development.

Our key people regularly hold informal discussions with families in regard to children's progress, sharing concerns through daily feedback. We recognise the huge importance of parent partnerships and families indepth knowledge of their child.

Everyone in our team is aware of current Setting Based Support Plan (SBSP) targets and work closely together to ensure continuity for the child. The SENCo works with the child's families, their keyperson and any other agencies to plan SBSP targets and strategies, aiming to ensure they are both challenging and achievable. All practitioners are required to contribute to these, with the keyperson having overall responsibility of ensuring children's targets and strategies are worked towards. Plans are reviewed termly, or before if required, in conjunction with parents and any external agencies. We will always keep in mind the needs of the child and recognise these can change frequently.

It is our aim for all our team to access relevant training and support, with opportunities to attend a wide range of courses such as those focused on Speech and Language, Behaviour Management and Makaton.

We firmly believe in an early response to an identified need. When in-house strategies are not sufficient, our SENCo will liaise with parents and key people to involve outside services who may be able to offer additional support and advice; at times this may include seeking additional local authority funding to access lower adult: child ratios, training or resources. Practitioners and our SENCo will liaise with outside agencies to contribute to EHC (Education and Health Care) Plans, attend transition meetings or PEP (Personal Education Plan) meetings where appropriate.

Exceptional Circumstances



As our policy details, our goal is for all children to be able to participate fully within the nursery day, to feel happy, safe and secure and to have their individual needs met. On rare occasions, we may have to balance the needs and behaviours of one child, with keeping others in the environment safe. Where behaviours are causing significant physical and/or emotional risk to others, we will:

- Be transparent in our communications with families and agencies working with the child
- Seek to understand the reasons why the child is displaying these behaviours
- Use EABC and incident records to identify any antecedents or patterns in behaviours
- Reflect openly as a team on our practice and environment
- Ask families to join us for a meeting to discuss what has been happening and review the risk assessments and support we have in place
- Keep external agencies updated throughout
- Seek to obtain funding for additional support, via the local authority
- If the child has an EHCP, consideration will be given to if an emergency review needs to be requested

If at any point a child's behaviours are causing significant physical and/or emotional risk to their peers, and we have been unable to support the child to resolve these behaviours, we will contact the child's parents to collect them. Should the parent be uncontactable, we will work down the list of emergency contacts, implementing our 'Uncollected Child' policy.

Where children are frequently causing risk of harm to others, we may seek to implement a temporary reduced timetable, whilst additional support and/or funding is sourced. This will be individual to each child and discussed with families at commencement and weekly contact will be encouraged. Our aim will always be for a reduced timetable to be increased at a rate which allows the child to succeed within their sessions.

We appreciate that a reduced timetable may have a financial implication for families, with this in mind, for a period of four weeks we will reduce the child's nursery fees to reflect only those hours which the child attends. At the end of the four week period, if the child has not been able to return to their original session lengths, families can choose to either pay to retain their child's session space, or reduce their session hours, for which we will waive our notice period.

We recognise that on occasion families may choose not to engage with us regarding their child's development. We will always seek to understand why families may opt out of engagement and act with sensitivity, giving families time and space to make decisions. Should we feel children are struggling within the setting and families continue to decline to engage, we will ask our Designated Safeguarding Lead to review the actions taken, and involve outside services if necessary.

Policy revised July 2024 Lisa Gray



STAFF ABSENCE

At Amberley we encourage all our employees to maximise their attendance at work while recognising that employees will, from time to time, be unable to come to work due to sickness. By implementing this policy, we aim to strike a reasonable balance between the pursuit of our business needs and the genuine needs of employees to take occasional periods of time off work because of sickness.

We aim to provide a healthy working environment and demonstrate commitment to health, safety and the welfare of staff in order to maximise attendance. The management team are responsible for monitoring and taking appropriate action in connection with sickness and other unplanned absence.

Exclusion periods for contagious illnesses

We take the health of children and staff very seriously, recognising that working with children means there are times employees will be in contact with contagious illnesses; employees must adhere to the same exclusion periods as children (see 'Ill Child' policy), ensuring time to recover and prevent transmission.

Sickness absence reporting procedure

Employees needing to report a sickness absence should follow these guidelines; failure to do so could delay any sick pay due to you and/or result in disciplinary action.

When staff are unable to attend work they must contact a member of the management team by phonecall, before 7am, giving brief details of the illness and expected length of absence. Unless there are exceptional circumstances, staff members are expected to make this phone call themselves, not a relative or friend. **Text messages**, emails or similar are not an acceptable form of communication for this purpose.

- Call Jess first on 07985688168
- If no response- Mark on 07919275116

Staff members must then call the nursery landline (01424 212 472) by 3.30 of each day to confirm if they will be in attendance the next working day. (For longer periods of absence, staff may agree with the manager when they will need to update the nursery).

Returning to Work

- 1. On returning to work the nursery manager should give the employee a 'Sickness/Absence Self-Certification' form for completion.
- 2. For absences of more than seven consecutive days, you must provide a 'fit note', completed by a qualified medical practitioner, for the period of absence.
- 3. After returning to work from any absence, a member of management will 'check in' with the employee to ensure they are feeling fit and well to return to work.
- 4. Where there are concerns about an employee's return to work, consider:
 - Whether adjustments to the role (on a temporary or more permanent basis) are required and what they are. These might include adjusted work patterns, start and finish times and changes of duties
 - Future requirements and expectations, e.g. improved attendance

The return to work conversation should be noted on the self-certification form.

Long-term sickness absence

Where an absences has lasted over 10 working days, the manager should contact the member of staff concerned to obtain an initial assessment of the problem and to offer any further help or assistance.



Following this initial contact, the manager may deem it appropriate to arrange a face-to-face meeting or telephone conference between themselves and the member of staff. The meeting should:

- Seek to confirm the reasons and nature of the absence and its likely duration
- Ensure that the member of staff is aware of the nursery's concern regarding their health and necessary absence from work
- Consider offering alternative duties or a shorter working week if this would enable a quicker return to work, subject to medical advice
- Give consideration to any personal problems being encountered and discuss possible ways of helping the individual resolve these
- Advise the member of staff that in their best interests they may be asked to see a registered medical
 practitioner or occupational health provider, appointed by the nursery to enable a medical report to be
 prepared
- Alternatively, and if appropriate, gain agreement from the member of staff to contact their doctor or specialist in order to establish the likely length of absence and the long-term effect on capability in relation to job performance and attendance at work.

If all other avenues have been investigated, the absence continues or, following return to work, the attendance record does not improve, a subsequent meeting should be arranged. At this point, unless there are reasonable grounds to believe there will be an improvement in the foreseeable future, the manager should inform the member of staff that long-term sickness absence due to ill health may put their employment at risk and the possibility of termination by reason of capability or suitability to work with children might have to be considered, taking into account any medical information available.

The position will be reviewed periodically and ultimately it may become necessary from a business perspective to consider termination of employment. Any decision to terminate employment will be taken by Jess Hammond, Lisa Gray and/or Clare Ryalls, making sure the capability procedure has been exhausted.

Occupational health

The nursery reserves the right to request employees to attend an appointment with an Occupational Health Advisor (e.g. consultant, GP) during their employment, if it is reasonably deemed necessary due to sickness absence, changes in health or the role, or where it is necessary to seek an expert medical opinion as to whether or not the employee can fulfil their job role or whether any reasonable adjustments should be made to the employee's role.

The nursery will seek to engage the services of an independent Occupational Health Advisor in situations where expert medical opinion is required and work with them to identify the best course of action in circumstances of sickness absence.

Access to medical records

The Access to Medical Records Act 1988 gives individuals the right of access to medical records relating to themselves which have been prepared by a medical practitioner for employment purposes. The Act provides that:

- Employers must gain the consent of employees before requesting reports from medical practitioners
- Employers must inform employees of their rights in respect of medical reports
- The employee has the right of access to the report before the employer sees it, provided appropriate notification is given



- The employer is responsible for notifying the medical practitioner that the employee wishes to have access
- The employee may ask for a report to be amended or may attach a statement to the report
- Having seen the report, the employee may wish to withhold consent to it being supplied.

Where the nursery requests further medical information about the health of staff from an individual's General Practitioner or Specialist, or its own occupational health provider, the provisions of the Act will be followed.

Throughout any interviews regarding sickness absence, staff are entitled to the support of and/or representation by a work colleague or recognised trade union representative.

Serious illness/injury of an employee's immediate family

This will be looked at on an individual basis and your manager will agree with you a reasonable period of leave. You need to also consider taking holiday/TOIL and working flexibly i.e. making adjustments to the length of the working day, changes in hours/days worked etc.

Death of a member of an employee's immediate family

This leave applies on the death of an employee's spouse, life partner, parent, brother, sister, grandparent, dependant or other relative for whom the employee has special responsibility or has had special ties. The amount of time off required will be at the manager's discretion and will depend on individual circumstances.

Monitoring of Attendance Levels

We operate a system to monitor all absence. This is referred as the 'Bradford Factor'. This works on a points system and any employee with a score of above 100 points in any twelve month period may be subject to disciplinary action. The absence score system gives higher scores for frequent short absences than for longer continuous periods of absence.

Staff whose absence score is above 100 in any twelve month period may be required to attend a disciplinary hearing.

The formula for counting this score is calculated by: Number of times absent squared, multiplied by the total number of days absent.

(i) Example 1

One Continuous absence of three months.

1st absence - 91 days

 $1 \times 1 \times 91 = 91 \text{ points.}$

91 days continuous absence in twelve months = 91 points

(ii) Example 2

Frequent short absences varying in duration.

1st absence - 3 days



 $1 \times 1 \times 3 = 3 \text{ points}$ 2 nd absence - 4 days $2 \times 2 \times 7 = 28 \text{ points}$ 3 rd absence - 2 days $3 \times 3 \times 9 = 81 \text{ points}$ 4 th absence - 1 day $4 \times 4 \times 10 = 160 \text{ points}$

10 days absence in twelve months = 160 points

(iii) Example 3

1st absence - 1 day $1 \times 1 \times 1 = 1$ point 2nd absence - 1 day $2 \times 2 \times 2 = 8$ points 3rd absence - 1 day $3 \times 3 \times 3 = 27$ points 4th absence - 1 day $4 \times 4 \times 4 = 64$ points 5th absence - 1 day $5 \times 5 \times 5 = 125$ points

5 days absence in twelve months = 125 points

- 2) In all instances of absenteeism a Return to Work Interview will take place. The aim of this meeting will be to allow an informal discussion to take place to discuss the absences, which have occurred. It is the Company's policy that this meeting should be handled in an understanding and compassionate manner. It is not intended in any way to be a disciplinary interview.
- 3) Should the situation arise where the employee's attendance at work is deemed to be at an unacceptable level, the Company may, after considering all factors including any medical evidence and the employee's own views or opinions, decide to implement the Company's Absenteeism Warning Procedure.
- 4) Whilst each situation will be treated on its merits and with sensitivity, it should be recognised that frequent and persistent short-term absence may lead to disciplinary action which could eventually result in termination of employment.
- The Absenteeism Warning Procedure is intended to promote consistency and fairness in the way the company controls, reviews and deals with absence/non-attendance. This system is not intended to be punitive. Its aim is to help employees to be aware of the levels of their absenteeism, and the effect that their non-attendance is having on their colleagues and upon the Company.
- Once an employee's scoring is approaching 100 his/her Line Manager at the employee's return to work interview, will advise the employee that they are reaching the unaccepted level of absence.

7) The Warning Procedure

Stage 1

When the target of 100 "points" has accumulated, an investigation into the cause of the absenteeism will take place, and may result in the employee being asked to attend a formal disciplinary hearing.

Stage 2 - First Formal Hearing - Possible Verbal Warning



Once the Procedure has commenced and a verbal warning issued, it is in force for three months.

Stage 3 - Second Formal Hearing - Possible Written Warning

In the event a further absence occurs in the rolling twelve-month period following stage 2 then a formal written warning may be issued. This warning remains in force for a period of six months. The employee will be informed at all stages that their overall attendance record is unacceptable, and in the event that no improvement is made, this could eventually lead to termination of employment.

Stage 4 - Third Formal Hearing - Final Written Warning

In the event that a further absence occurs in the rolling twelve months period following stage 3 then a formal written warning may be issued. This warning remains in force for a period of twelve months. Any further absence after this stage could result in the company terminating employment by reason of unacceptable attendance record.



STAFF WORKING WITH THEIR OWN CHILDREN OR CHILDREN OF CLOSE FRIENDS/RELATIVES (INCLUDING BREAST FEEDING AND EXPRESSING OF BREAST MILK) POLICY

Where possible staff will not work within the age group their child is in. If this is not practical the following will apply:

When staff are working with their own children they must remain neutral and treat all children with the same regard.

During their time at nursery, children of staff are in the care of the nursery and all policies and procedures must be followed- the same as for any other child.

Where problems arise with staff and their children working together, this will be discussed between the staff member and a member of the management team. Consideration may be given to changing the staff members group or hours of work to move them away from their child, whilst allowing the child to stay in the appropriate age group with their peers.

When a parent and child are in two separate groups but the parent wants to 'pop in' and see their child this must be agreed with a member of management, giving consideration to the care of the children which the staff member is responsible for, and whether this could be unsettling for their child.

When staff return to work after a pregnancy if they are breast-feeding or expressing milk and wish to request longer/extra breaks or flexible working, a discussion will be held between themselves and a member of management. In addition to the benefit to the child and parent, consideration will be given to the impact this may have on their job role and the nursery.

If staff members wish to breast feed or express milk during lunch breaks, or on other pre-arranged breaks then we will provide an area for their use which is private and hygienic.

Staff caring for a colleague's child are to treat them as they would any other child/family. No special treatment shall be offered and all policies and procedures are to be followed at all times, as for any other child.

Keyworkers will not have in their groups their own children or children of a close friend or relative as this may prevent them from making neutral decisions, particularly with regard to safeguarding. We appreciate that on rare occasions this may not be possible, (for example where the family are known to more than one practitioner in a group), then the keyperson and co-keyperson are to work closely together to care for the child and discuss any concerns with their line manager.

If you have any queries or concerns in relation to this policy, please speak to a member of the management team.

Policy revised August 2024 Lisa Gray



STUDENTS, VOLUNTEERS & APPRENTICES POLICY

At Amberley, we are committed to sharing good practice with those wishing to pursue a career in childcare. We welcome students to join our staff team and gain work experience within our nursery. We accept a maximum of two students at a time, any more students than this places undue pressure on staff. We will only offer placements to students or apprentices who are associated with a recognised child-related course, or pupils from local secondary schools on work experience. We offer placements only following contact with the appropriate tutors and the establishment of close links with the college, training providers or school. We expect all students to attend an induction and nursery tour. At the induction students will be given the nursery policies to read and safeguarding, health and safety information will be discussed with them. Those applying for an apprenticeship will go through the same safe recruitment processes as all our staff, they will be invited for an interview and a trail day, and will need to provide two references. The successful applicant then attends a full staff induction, covering all our policies and procedures.

All students, apprentices and volunteers must agree to abide by the following:

- To have an enhanced Disclosure and Barring service(DBS). Apprentice employees must also sign up to the DBS update service.
- Having an assigned member of staff to act as their 'buddy', who they can approach with any questions.
- Excluding apprentices- To be supervised at all times, and not be left alone with the children. Only participating in changing nappies if required by their early years training, with parental consent, and under staff supervision.
- To read and learn nursery policies and procedures, asking for clarification where they are unsure.
- To keep all information gained within their time at Amberley confidential, in line with our confidentiality policy.
- Agree to and participate in tutor visits, and understand Amberley will communicate with their training provider about their personal progress.
- Support and guidance throughout their placement and being given constructive, respectful and honest feedback in respect of their performance, in line with their individual needs and abilities.
- To adhere to the same codes of conduct as permanent staff including time-keeping and dress codes
- To contribute fully to the nursery routine and to spend some time in every area- this includes being outside in all weathers!
- To arrive for placement prepared, with clothing and footwear suitable for the weather.
- In some instances we may include volunteers and students on long term placements (aged 17 and over) in our staff: child ratios. This will be the discretion of the manager and only will occur when the manager is satisfied the student/apprentice is competent and responsible.
- Excluding apprentices- refrain from picking up or carrying the children

Volunteers

- Volunteers who are attending nursery regularly are required to have a DBS check and provide two
 references.
- Volunteers will be offered training in the same manner as paid staff, aiming to complete a minimum of four per year.



SUN PROTECTION POLICY

We recognise the importance of both sun safety and ensuring children access enough sunlight to maintain their levels of vitamin D. We work in partnership with families to give children the opportunity to enjoy the sun safely. Although this advice often refers to 'children' we also advise all adults within the nursery to follow these guidelines.

When the weather is warm:

- We will encourage the children to seek shade between 11am and 3pm.
- Sunhats must be worn, we will have a selection of spare hats available if anyone forgets theirs. We recommend sunhats which cover the ears and neck, such as a wide-brimmed, or legionnaire's style.
- Sunhats will help to protect the eyes, however sunglasses with wraparound lenses or wide arms can also be worn.
- Children will be encouraged not to look directly at the sun.
- Appropriate clothing must be worn-loose fitting clothes in a light material which fully covers the child's chest, back, arms and legs. As a minimum children must wear a tshirt which covers their shoulders. Vest style tops/dresses will not be permitted during warmer weather.
- Sandals may be worn, however to prevent accidents they must have straps which secure them to the child's feet- for example crocs with the back strap up are fine, flip flops are not.
- When a child arrives at nursery dressed unsuitably for the warmer weather, their parent/carer will be asked to change their clothing/footwear before they can begin their session.
- Drinking water will always be accessible to the children.
- Children will be encouraged to drink more and have periods of rest throughout the day.
- Parents/carers must apply a suitable, all day sun cream to their child before they come into nursery. The NHS currently recommends this is cream with an SPF of 30 or above, and a minimum 4-star UVA protection. Practitioners are unable to apply sun cream to children within the nursery day*. If for any reason a parent/carer has been unable to do this they should alert a staff member, who will ensure the child does not have access to any outdoor areas for that session.
- *If a child has a medical reason as to why they cannot have all day sun cream, please discuss their needs with a member of the management team and we may be able to reapply their suncream throughout the day.
- We will use this opportunity to discuss sun safety with the children.



TRANSITION POLICY

Our aim is for every child to make the best possible start to their early education and we value the importance of supporting children's emotional wellbeing. We recognise that transition between groups can be challenging for children and this can impact upon their learning and wellbeing. We encourage communication between the child, their family and keyperson to help prepare a child for a transition.

Our setting uses a continuous method of planning which is familiar to all adults across the nursery. Children will have the opportunity to visit their new group, meeting key practitioners and peers; as all children are different, the length and amount of these sessions will vary according to the needs of individual children. Keypeople will share information about the child's current learning, interests and needs; as well as pass on their Learning Journals, including their current PLOD (Possible Line of Direction), ensuring the child's needs are consistently provided for. Children will have a welcome pack when they transition between rooms with information on each staff member.

With the permission of parent/carers, we will always seek to share information where a child attends a second setting.

Transition into school

We display information for parents provided by local schools of dates of open days, or closing dates for school applications. We recommend families visit a variety schools to give preference for the school that they feel will be best suited to the needs of their child.

School applications are usually required by mid-January, with allocations announced in April; school teachers often book in visits to nursery to meet children and gain information from practitioners. Most schools offer a home visit and have a number of sessions for children to attend before they start. Practitioners will strive to build relationships with our local schools, sharing both written and verbal information to support the child's move to reception. Where necessary for a child's SEN/D, we participate in transition meetings, alongside ISEND.



UNCOLLECTED CHILD - PROCEDURE

We expect children will be picked up at the end of their session, if this should not occur we will assume an emergency has caused the delay and will instigate our procedure, unless parents contact us to let us know they will be delayed.

Parents of children collected up to 30 minutes later than expected will be advised this contravenes our registration and may leave us without insurance cover, the parents will also have to pay additional charges as two members of staff will have remained at the nursery- our current prices are on our website. If the lateness continues to happen, especially when there appears no genuine reason, parents will be advised they risk losing their child's place.

When a child is not collected within 15 minutes of the expected time, and no contact has been made with the nursery by the parent or carer, the person in charge will:

- Call the parents on given contact numbers
- Call the additional emergency contact numbers

After 30 minutes:

• Lastly, after no reply, contact SPOA (contact details can be found in the hallway, kitchen and safeguarding noticeboard) to request collection of the child

At all times, two members of staff will be present and they and the child will remain on the settings premises until the child is collected.



WHISTLE BLOWING POLICY

People responsible for Whistle Blowing: Jess Hammond and Lisa Gray

Whistle Blowing Advice Line for Professionals: 0800 028 0285

The safety of children is our paramount objective and we encourage all adults in our setting to disclose information that suggests a child may be at risk at the earliest opportunity.

The Public Interest Disclosure Act 1998 provides protection for employees who raise legitimate concerns, this includes a reasonable belief that:

- o A criminal offence
- A miscarriage of justice
- o An act creating risk to health and safety
- o An act causing damage to the environment
- o A breech of any legal obligation
- o Concealment of any of the above
- o Any other unethical conduct
- An act that may be deemed as radicalised or a threat to national security is being, has been, or is likely to be committed.

Practitioners must believe a disclosure to be substantially true, not make malicious or false allegations, nor make a disclosure to seek personal gain. It is not necessary to have proof that such an act has been, or is likely to be, committed; a reasonable belief is sufficient. Failure to report serious matters may be investigated and potentially lead to disciplinary action, including the possibility of dismissal.

PROCEDURE FOR MAKING A DISCLOSURE

- Safeguarding policies to be followed where the information relates to child protection/safeguarding.
- Initially employees should speak to Jess H or Lisa to discuss their concerns. If they feel that this may be inappropriate, e.g. because the disclosure relates to Jess/Lisa, or they are away from the setting and uncontactable, the disclosure can be discussed with any other member of management (including section leaders, deputy manager, manager or managing directors).
- The person making the disclosure will suffer no detriment for making a disclosure in line with this procedure.
- Any disclosures received with be treated seriously and dealt with confidentially.
- Any employee who is involved in victimising employees, who makes a malicious or false disclosure will be subject to disciplinary action, which may result in dismissal.
- Any member of management who inappropriately deals with a whistle-blowing disclosure will be subject to disciplinary action, which may result in dismissal.
- Contact numbers for Ofsted, SPOA, the whistle blowing helpline and any others as deemed appropriate will be easily accessible for staff. They are currently displayed in the hallway, kitchen and safeguarding noticeboard.
- If the member of staff is not satisfied their concern has been handled in an appropriate manner, they can call the Whistle Blowing Helpline (details above), all calls will be treated in confidence.