

# *Mad Hatters*

## **Health and Safety Policy**

This policy has been formulated to include children, staff and visitors to the Nursery. The object of the policy is to provide a safe environment in which to learn or work.

The basic principles of the policy are as follows:

**Medicines** – Non-Prescription and Prescription medicines are to be clearly labelled and handed in to the Medical Needs Co-ordinator and a medical consent form signed by the parent or guardian giving the Nursery permission to administer the medicine. Prescription medicines must be prescribed for a child by a doctor, dentist, nurse or pharmacist. Staff medicines are to be signed in to the office on arrival to the Medical Needs Co-ordinator, where they will be kept in the medicine cabinet, and may be administered in the office.

**Illness or Accident** – We have several Trained First Aiders in the Nursery, who can deal with accidents. Minor accidents should be dealt with by the member of staff on duty. A medical box is located in the Office and should be fully stocked with plasters, triangular bandage, bandages, eye bandages, and disposable gloves. It is recommended that gloves are always worn when dealing with accidents involving any break in the skin. If a child becomes ill during the Nursery day, they should be made as comfortable as possible and their parents notified. It is desirable that such children are collected as soon as possible. Head wounds and bumps should always be reported to the Nursery Manager, Deputy OR supervisor and to the children's parents; they should always be accounted for on an accident form which is to be signed by the member of staff, manager on duty and parent. All accidents should be recorded on to an accident forms which is located in the office. A child whose illness requires that the child be sent home from the nursery should be given appropriate attention to his/her needs so long as this attention does not compromise the care of other children in the nursery, until the child parent or guardian arrives to take the child home.

**Staff** – Staff are requested to report any dangerous, structural defects to the office, and record them on the appropriate monitoring forms. This includes loose carpets, broken glass and missing lights. Children should not be left unsupervised at any time. Staff should check all play equipment throughout the day to ensure it is safe for the children and record their findings. Staff should be aware of the importance of the continued standard of hygiene. Report any changes in behaviour or appearance of a child. Any member of staff who administers medication should be trained to check for the name of the child, to read the label/prescription directions in relation to the measured dose, frequency and to document properly that the medication was administered. Staff need to be aware of what medication the child is receiving, who prescribed the medicine and when and what if any the known reactions or side effects that the child may suffer. Staff should be able to demonstrate the ability to locate and operate the fire extinguishers. A fire extinguisher may be used to put out a small fire or to clear an escape path (Cold water should be applied to burns immediately). Staff should supervise all water play activities. Smoking will be prohibited at all times on Nursery premises during working hours. Every day, upon entry or as soon as possible after entry and during continual observation of the child at play, a health assessment of each child should be observed by the staff member.

The assessment shall include:

- 1) Changes in behaviour or appearance from those observed during the previous day's attendance.
- 2) Skin rashes, itchy skin or itchy scalp.
- 3) Increase in body temperature.
- 4) A change in the child's behaviour or appearance.

# *Mad Hatters*

5) Complaints of pain or of not feeling well.

Information to complete the assessment may be obtained by direct observation of the child, by speaking to the parent or guardian and/or by conversation with the child. Assessment by querying the parent should take place at time of transfer of care of the child from parent to Nursery. Then appropriate action taken i.e. Itchy scalp could be head lice so needs treatment. Any reasons for concern should be reported to the Nursery Manager, who in turn can speak to the necessary parent/carer. This policy should be used in conjunction with the 'Sick Child' policy for the correct procedures when dealing with a child who has become ill whilst at nursery.

The Nursery can provide an opportunity for sleep and rest. For children who do not go to sleep, time and space shall be provided for quiet play. Most preschool children in all day care benefit from scheduled periods of rest. This rest may take the form of actual napping, a quiet time, or a change of pace between activities. In the very young child, favourable conditions for sleep and rest include being dry, well-fed and comfortable. No sharp objects should be taken out of the kitchen, if cutting knives need to be taken into the rooms, these should be the cutlery knives only, and nothing sharper. No hot drinks should be taken out of the kitchen or out of the staff room under any circumstances.

When entering the building no hot drinks should be brought into nursery, and under no circumstances should weapons of any sort be brought into nursery. Nappies worn by children should be able to contain urine and stool and minimise faecal contamination of the children, staff, environmental surfaces, and objects of the child care setting. The nappy should have an absorbent inner lining completely contained within an outer covering made of waterproof material that prevents the escape of stools and urine. The outer covering and inner lining to be changed together at the same time as a unit and shall not be reused unless both are cleaned and disinfected. Nappies should be checked for wetness or faeces at least hourly and whenever the child indicates discomfort or exhibits behaviour that suggests a soiled or wet nappy and needs to be changed when found wet or soiled. Children should have nappies or soiled underwear changed in special changing areas to prevent the spread of germs and contamination. If cloth nappies are used then the soiled nappies should be kept in a tight-fitting lid container or in a sealed plastic bag and be sent home with the child at the end of each day. The container or sealed plastic bag should not be accessible to the child. Disposable gloves must be used at all times and after use should be discarded immediately and hands washed. Sometimes children's hands stray into the nappy area during the changing process and this can in turn can transfer faecal organisms to the environment. So consequently, washing the child's hands will reduce the risk of infection.

Changing tables should be kept in good repair and be cleaned and disinfected after each use by cleaning to remove visible soil, followed by wiping with an approved disinfectant solution, whether or not disposable, non-absorbent paper is used so it can be discarded after each use. Many communicable diseases can be prevented through appropriate hygiene, sanitation and disinfection methods. Staff and children should wash their hands at least at the following times, and whenever hands are contaminated with body fluids.

- 1) Before food preparation, handling or serving.
- 2) After toileting or changing nappies.
- 3) After assisting a child with toilet use.
- 4) Before handling food.
- 5) Before any food service activity (including setting the table).
- 6) Before and after eating meals or snacks.
- 7) After handling pets or other animals.
- 8) After Outside play

Thorough hand washing with soap for at least 10 seconds using warm running water, which lifts the organisms off the skin and allows them to be rinsed away, has been effective in preventing

# *Mad Hatters*

disease transmission. Washing hands after eating is especially important for children (who eat with their hands) in order to decrease the amount of saliva which may contain bacteria on the hands. Warm running water in sinks is optimal to promote hand washing. Soap does not have to be antibacterial. Bar soap and liquid soap are both equally effective. It is the physical action of hand washing not the type of soap, that removes bacteria. Bar soap does not transmit bacteria. The education of staff regarding hand washing and other cleaning procedures can reduce the occurrence of illness in the group of children with whom they work, and reduce the risk of infection. Noses should be blown or wiped with disposable one use tissues that are discarded in a plastic, covered container. This container should be sterilized daily. Hands should be washed after using soiled tissues. Staff should avoid contact with blood or blood containing body fluids. They should use disposable gloves and these then discarded and hands washed after use.

Spills of body fluids i.e. urine, faeces, blood, saliva, nasal discharge, eye discharge, and injury or tissue discharge should be cleaned up immediately as follows:

- 1) For spills of vomit, urine and faeces floors, walls, bathrooms, table tops, toys, kitchen counter tops, and nappy changing tables should be cleaned using paper towels, and disinfected.
- 2) For spills of blood or blood containing body fluids and injury and tissue discharges, the area should be cleaned with paper towels, and disinfected.
- 3) Persons involved in cleaning contaminated surfaces should avoid exposure of open skin sores or mucus membranes to blood or blood containing body fluids and injury or tissue discharges by using gloves to protect hands when cleaning contaminated surfaces.
- 4) Mops should be cleaned, rinsed in sanitising solution and then wrung as dry as possible.
- 5) Blood contaminated material and nappies should be disposed of in a plastic bag with a secure tie.

Illnesses may be spread in a variety of ways such as coughing, sneezing, direct skin to skin contact. Since many infected people carry communicable diseases without having the symptoms and many are contagious before they experience a symptom, staff need to protect themselves and the children they serve by carrying out routine hygiene standards to help prevent the spread of disease and reduce the risk of illness. Toilet rooms, toilet training equipment and fixtures should be cleaned and sanitised at least daily and should be in good repair. If potties are used they should be emptied into a toilet, and sanitised after each use and stored in the toilet room. Utility gloves and equipment designated for cleaning and sanitising toilet training equipment and flush toilets should be used for each cleaning and should not be used for other cleaning purposes. Toilet and bathroom odours should be controlled by ventilation and sanitation. Chemical air fresheners should not be used. Chemical air fresheners may cause nausea or an allergic response in some children. Ventilation and sanitation help control and prevent the spread of disease and contamination. Hand washing sinks should be cleaned and sanitised at least daily and when soiled. Indoor environmental surfaces associated with children's activities such as table tops should be cleaned and disinfected when they are soiled or at least once weekly. However, continuously maintained table tops and toys free of contamination from respiratory secretions is an unrealistic goal. Walls, ceiling, floors and other surfaces should be maintained free from visible soil and in a clean condition. One way to measure compliance is to wipe the surface with a mop and then insert it in a cold rinse water, if the surface is clean, no residue will appear in the rinse water.

Toys that are placed in the children's mouths or otherwise contaminated by body secretions or excretions should be set aside to be cleaned with water and detergent, disinfectant and rinsed before been handled by another child. Machine washable cloth toys can be used and should be machine washed when soiled. Ideally, this cleaning of toys can be accomplished by having a

# *Mad Hatters*

bucket labelled soiled toys into which mouthed toys can be dropped for later cleaning. This bucket can contain soapy water to start to remove bacteria or can be a container used to bring the soiled toys to a toy cleaning area later in the day. Having enough toys to rotate through the cleaning makes this method possible. Toys in rooms with older children should be cleaned weekly unless soiled then immediately.

Staff should check all play equipment throughout the day to ensure it is safe for children. Each bed, mattress, cot and mat and all bedding should be cleaned and sanitised prior to assignment to another child. Lice infestation, hand foot and mouth, scabies and ringworm are among the most common infectious diseases in child care. These diseases are transmitted by direct skin to skin contact or by sharing of personal articles such as combs, brushes, towels and bedding. Prohibiting people from sharing personal articles helps prevent the spread of these diseases. All bedding i.e. sheets, blankets should be cleaned and sanitised when soiled or wet, infant bedding should be changed daily. All linens/blankets should be cleaned and sanitised weekly or more often if soiled and to be kept in individual bed bags throughout the week and laundered on the last day of their week. Cot mattresses should be cleaned and sanitised at least weekly and when soiled or wet.

Carpets and floors should be maintained in good repair. Poorly maintained carpets and floors may cause people to trip or slip. Carpets should be maintained free from visible soil. Carpeted areas should be vacuumed daily and shampooed at least every six months or as often as necessary to remain visibly free of soil that only can be removed by shampooing. Carpets should be cleaned when children are not present. Only products warranted by the manufacture to be non-hypoallergenic products may be used for cleaning. The use of carpet deodorisers should be prohibited unless they are approved as safe by the local health authority. Mops should be cleaned thoroughly in fresh water and soap and rinsed in a sanitising dilution of bleach before and after a day of use. Mops should be wrung as dry as possible.