

EARLY YEARS STATUTORY SAFEGUARDING AND WELFARE REQUIREMENTS

Approving Body	Trust
Date of Last Review	September 2024
Statutory (Y/N)	Y
Responsible Officer	BMAT CEO for and on behalf of the Trust



Busy Beacons Nursery - Key Safeguarding Staff:

Designated Safeguarding Lead	Danielle Brown
Head of Nursery	Danielle Brown

1. Introduction

Busy Beacons Nursery is committed to promoting the welfare of children. We place high expectations on all staff and volunteers to share this commitment. The nursery is dedicated to ensuring that all children are valued, respected, listened to and taken seriously especially with regard to their safety and wellbeing. The nursery's overriding concern is the best interests of every child in its care. In meeting this concern, this policy will:

- a. Provide staff with a framework to promote and safeguard the wellbeing of children and ensure that they comply with their statutory responsibilities.
- b. Ensure consistent good practice across the nursery.
- c. Provide a caring, positive, safe, and stimulating environment that promotes high levels of well-being and involvement.
- d. Identify concerns early and action early intervention when needed.
- e. Ensure children who have unmet needs are supported appropriately.
- f. Educate children on how to keep themselves safe.

2. What is safeguarding and child protection

Busy Beacons is committed to safeguarding and promoting the welfare of children and expect all staff and volunteers to share this commitment.

Safeguarding is a term which is broader than 'child protection'.

Child Protection refers to the procedures we use for children at risk of significant harm or those who have been harmed.

Safeguarding relates to what we do for all children to promote their welfare, protect them from harm and address their needs.

Safeguarding is everyone's responsibility and is defined in 'Working Together to Safeguard Children' as:

- a. Providing help and support to meet the needs of children as soon as problems emerge
- b. Protecting children from maltreatment, whether that is within or outside the home, including online
- c. preventing impairment of children's health and development
- d. ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- e. acting to enable all children to have the best life chances

3. Legislation and statutory guidance

This policy is read alongside and based on the following legislation:

- a. The Department for Education's statutory guidance [Keeping children safe in education 2024 \(publishing.service.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/91222/Keeping_children_safe_in_education_2024.pdf)
- b. [Working Together to Safeguard Children 2023 \(publishing.service.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/88222/Working_together_to_safeguard_children_2023.pdf)
- c. [Statutory framework for the early years foundation stage \(publishing.service.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/88222/Statutory_framework_for_the_early_years_foundation_stage.pdf)

4. Guiding principles

All staff are aware that safeguarding incidents can happen at any time and anywhere and are required to be alert to any possible concerns. Further, they should understand that safeguarding issues are rarely a stand-alone event; multiple issues will overlap with one another.

Although referrals for Child Protection are usually passed to the Designated Safeguarding Lead (DSL), all staff at the nursery are aware that anyone can refer a child to the Multi Agency Safeguarding Hub (MASH) if necessary.

Equality statement

Staff should be alert to the potential need for early help for the following vulnerable groups:

- a. Looked after children
- b. Children who are disabled or have special educational needs or are young carers
- c. Parents who show signs of engaging in anti-social or criminal behaviour
- d. A family presenting challenges such as adult mental health issues or substance abuse
- e. Asylum seekers
- f. Have previously experienced any form of abuse.
- g. Have English as an additional language
- h. Are at risk of FGM
- i. Is frequently missing/goes missing from education, home or care
- j. Has a parent in prison

5. Noticeable injury

If a child arrives at the nursery with a noticeable bruise or injury the parent/carer is asked to explain the injury. The parent/carer is then required to send in a written account via the messaging system on Tapestry which is then transferred to the child's individual pre-existing injury record.

Parents/carers are also asked to explain any other changes in the child's appearance or changes in their emotional behaviour. Staff are required to share any concerns about any changes observed in a child's behaviour, physical condition, or appearance with the designated safeguarding lead (DSL). If required a specific and confidential record will be set up to monitor the situation.

The responsibility rests with the individual staff member and action should be taken as soon as possible on the day that any concern is identified. All staff and volunteers have a responsibility to identify any abuse that a child may be experiencing.

The four types of abuse and the signs and symptoms associated with them are given to all staff so they can refer to them if they are concerned. The four types of abuse are identified as:

- Physical Abuse
- Sexual Abuse
- Neglect
- Emotional Abuse

Staff also need to be alert to other types of abuse such as Domestic and financial abuse and the damage that this can have towards children.

6. Training

Training is given to all staff employed at the nursery to enable them to recognise the signs of abuse and what to do if concerns arise about possible abuse, exploitation or neglect.

We refer to Redbridge Local Safeguarding Children Board for support and guidance and where we believe a child is at risk of harm, we will complete a MASH referral. Please see details of MASH below. This referral is the responsibility of the designated safeguarding lead.

MASH contact details

Redbridge Multi Agency Safeguarding Hub (MASH)

Telephone: 0208 8708 3885.

Email: cpat.referrals@redbridge.gov.uk

Website: <https://www.redbridge.gov.uk/>

7. Allegations of abuse against a parent or carer

If a child makes a disclosure to a member of staff that suggests abuse, neglect or exploitation may be taking place, then it is the duty of the staff member to report this to the DSL. The procedure is as follows:

- Listen to the child and record exactly what they have said
- Where possible encourage another staff member to come and witness the conversation
- Don't make promises to the child regarding keeping a secret
- Don't ask the child to repeat what they have said
- Don't ask leading questions
- Immediately share written disclosure with DSL

8. Allegations of abuse against a member of staff

If there is a disclosure made regarding alleged abuse from a member of staff, it is the duty of the DSLs to conduct a full investigation and refer to LADO (Local Authority Designated Officer) if necessary.

LADO contact details

Telephone: 020 8708 5350

Email: helen.curtis@redbridge.gov.uk

When the member of staff under investigation is not a DSL the investigation will be carried out by the DSL.

Where the allegation is against the DSL then this is reported to the DSL for BMAT who will then conduct a full investigation with support from the LADO.

If the allegation concerns a member of staff, a volunteer, or a student they would normally be informed as soon as possible after the result of any initial investigation authorised or conducted by the LADO is known. However, advice will always be sought from the LADO before this happens.

If the LADO or any of the statutory child protection authorities decide to take the case further, any staff member concerned may be suspended if this is felt appropriate. The reasons and justification for suspension will be recorded and the staff member informed of them. In the case of staff, the matter will be dealt with in accordance with the nursery's Disciplinary Procedure.

We will inform Ofsted 0300 123 4666 within 14 days of any allegations of serious harm or abuse by any person living, working, or looking after children at the premises (whether that allegation relates to harm or abuse committed on the premises or elsewhere) or any other abuse which is alleged to have taken place on the premises, and of the action taken in respect of these allegations.

During the investigation the nursery, in consultation with the LADO, will decide what information should be given to parents and staff and how press enquiries are to be dealt with.

9. Attendance

It is understood that a child going missing from nursery or has any unexplainable and/or persistent absences from nursery is a potential indicator of abuse, neglect, FGM or radicalisation which is why we follow the procedure outlined here:

- a. If a child does not attend nursery as expected, we make a phone call to the parent/carer to find out why the child is not attending that day. If there is no reply from the parent/carer after 24 hours, we try to establish contact with any of the other named contacts on registration form. If there are no replies within 72 hours, the head of nursery or deputy will visit home, accompanied by another staff member.
- b. Where a child has a consistent pattern of non-attendance, the head of nursery will speak to parents/carers about the reasons for this. Support is offered where necessary to help the family/child improve their attendance at the nursery. The DSL will monitor the situation and make any referrals if appropriate.

10. Child on child abuse

This is most likely to manifest itself in bullying. Due to the age and developmental stage of the children in a nursery setting incidents between children would not usually be deemed as child-on-child abuse/bullying.

As in line with the British Values, children in the setting are given lots of opportunity to learn about the importance of being respectful and kind to one another. Through games and role-play they learn how to share, take turns, deal with conflict and to self-regulate in an age-appropriate way.

11. Female genital mutilation (FGM)

Staff are aware of the importance of identifying and acting regarding concerns about Female Genital Mutilation (FGM).

There is a mandatory reporting duty placed upon practitioners in England and Wales to personally report to the police where they discover, either through disclosure by the victim or visual evidence that Female Genital Mutilation appears to have been carried out on a girl under 18. Those failing to report such cases will face disciplinary sanctions.

12. Breast ironing

Breast ironing is a form of child abuse. Breast ironing, also known as breast flattening, is the pounding and massaging of a pubescent girl's breasts, using hard or heated objects. The purpose is to make them disappear.

Staff are fully aware of their duty to report any concerns that this practise may be occurring and are valiant to the signs and symptoms, such as:

- The child displaying an embarrassment about their body
- The child not wanting to change in front of people
- The child mentioning pain in their breast
- Parents' behaviour changing

Although children are very young at the nursery and therefore some of the above may not be applicable, staff understand their responsibility towards all children including siblings of nursery children.

13. Witchcraft

Witchcraft is a practice where an abuser believes a child is possessed by an evil spirit and will therefore use this reason as a way to abuse the child.

The child may be at risk of harm as the abuser will expose the child to a form of punishment and/or as part of a process that supposedly exorcises or expels the evil spirit from the child. The parent may make comments about the child being 'evil' or po-cessed and this must not be ignored as it can lead to significant harm of a child.

Staff are aware of their duty to recognise the signs that a child may be at risk of abuse because of the parent/carer's views of the child's behaviour. In cases where staff have concerns, they must report to the DSL.

14. County Lines

County lines is a form of criminal exploitation in which criminals groom and manipulate children into drug dealing. The 'lines' refer to mobile phones that are used to control a young person who is delivering drugs, often towns outside their home county.

Although older children are predominately targeted, staff at the nursery understand their duty to protect nursery children from any risks associated with siblings involved in county line gangs.

They are alert to signs that family members have changed their behaviour. Staff also listen to conversations between parents/carers and will challenge any conversations that cause concern.

15. Prevent Duty

From the 1st July 2015, all schools, registered early years childcare providers and registered later years childcare providers are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015, in the exercise of their functions, to have "due regard to the need to prevent people from being drawn into terrorism" This is duty is known as the Prevent Duty. The nursery will also have due regard to The Prevent Duty Guidance (December 2023)

To fulfil the requirements under the PREVENT duty staff must adhere to the following:

- Attend training to enable them to identify children who are potentially at risk of being radicalised.
- Build the children's resilience by promoting fundamental British values and enable them to challenge extremist views.
- Assess the risk, by means of formal risk assessment, of children being drawn into terrorism, including support for extremist ideas that are part of the terrorist ideology.
- Head of nursery ensure staff understand the risks, so they can respond in an appropriate and proportionate way.
- Be aware of the online risk of radicalisation using social media and the internet.

As with managing our safeguarding risks, our staff will be alerted to changes in children's behaviour which could indicate that they may need help or protection (children at risk of radicalisation may display different behaviour or may seek to hide their views). We will also be alert to changes in parent/carers behaviour, such as the sharing of extreme views.

The key person approach means we already know our children well and so we will notice any changes in behaviour or personality quickly.

We will not carry out unnecessary intrusion into family life, but we will act when we observe behaviour of concern.

16. British Values

In 2014, the UK Government created four fundamental values that it proclaimed were the unifying values that were fundamental to British society and cohesion. The values were designed to balance freedom of thought, expression, and choice in a liberal society with the need to maintain a safe and secure society.

To fulfil the requirements under the British values, staff must include the following in their teaching:

a. *Democracy: Making decisions together:*

Leaders and staff will encourage children to see their role in the bigger picture, encouraging children to know their views count, value each other's views and talk about their feelings, for example when they do or do not need help. When appropriate, they demonstrate democracy in action, for example, children sharing views on what the theme of their role play area could be with a show of hands and using their opinions during circle time to decide on child-initiated activities. Staff will support the decisions that children make and provide activities that involve turn taking, sharing, and working together in friendship groups. Children should be given opportunities to develop in an atmosphere where questions are valued, and opinions are sought.

b. *Rule of Law: Understanding rules matter:*

Leaders and staff will ensure that children understand their own and other's behaviours and its consequences, and to distinguish right from wrong. Staff will collaborate with children to create the rules and codes of expected behaviour, for example, to agree the rules about tidying up and to ensure all children understand that the rules apply to everybody.

c. *Individual Liberty: Freedom for all*

Children should develop a positive sense of themselves. Staff will provide opportunities for children to develop their self-knowledge, self-esteem and increase their confidence in their own abilities, for example, allowing children to take risks on an obstacle course, mixing colours, talking about their experiences, and learning.

Staff will encourage a range of experiences that allow children to explore the language of feelings and responsibility, reflect on their differences and understand we are free to have different opinions, for example, in a small group discuss how they feel about the transition from nursery to school.

d. *Mutual Respect and Tolerance: treat others as you want to be treated:*

Leaders and staff will create an ethos of inclusivity and tolerance where views, faiths, cultures, and race are valued, and children are engaged with the wider community. Children should demonstrate a tolerance and appreciation and respect their own and other cultures: know about similarities and differences between themselves and others among families, faiths, communities, cultures, and traditions and share practices, celebrations, and experiences. Staff will encourage and explain the importance of good behaviours such as sharing and respecting other people's opinions. Staff will promote diverse attitudes and challenge stereotypes, for example, sharing stories that reflect and value diversity of children's experiences and providing resources and activities that challenge gender, cultural and racial stereotyping.

What is not acceptable?

- Actively promoting intolerance of other faiths, cultures, and races within the community
- Failure to challenge gender stereotypes and routinely segregating boys and girls.
- Isolating children from the wider community.
- Failure to challenge behaviours (whether this is staff, children, or parents) that are not in line with the fundamental British values and tolerance for those with different faiths and beliefs

17. E-Safety

Being online is an integral part of children's lives. Social media, online games, websites, and apps can be accessed through mobile phones, computers, laptops, and tablets – all of which forms part of a child's online world.

E-Safety must form a fundamental part of a nursery's safeguarding and child protection measures.

To ensure children begin to understand the dangers associated with the online world, staff have a responsibility to:

- a. Through age-appropriate conversations, teach children about the dangers of the online world and show them ways that they can keep themselves safe.
- b. Use cartoons and other resources to help children understand.
- c. Talk about e-safety informally when children talk about their devices at home or when they are using nursery devices.
- d. Educate parents on what is appropriate for children, such as kids YouTube as opposed to just YouTube and making sure their settings at home are appropriate for young children.
- e. Educate parents on what is considered to be a suitable amount of time on a device, drawing attention to the need for children to be playing with toys and using language at home.

The nursery will use the following resources to educate staff, children and parents on how to stay safe online:

- a. National Crime Agencies CEOP - <https://www.thinkuknow.co.uk/>
- b. DFE advice for schools - [Teaching online safety in schools - GOV.UK \(www.gov.uk\)](https://www.gov.uk/teaching-online-safety-in-schools)

18. Suitable People

Busy Beacons Nursery follows the Government's recommendations for the safer recruitment and employment of staff who work with children and acts in compliance with the Ofsted regulations. We have a duty to ensure that people looking after children are suitable to fulfil the requirements of their role.

All staff working or volunteering at the nursery will not have unsupervised contact with children until all relevant checks have been completed. These checks include a completion of a criminal records check and barred list check and additional checks for anyone who has lived or worked abroad.

All staff are expected to disclose any convictions, cautions, court orders, reprimands, and warnings that may affect their suitability to work with children. This is discussed during induction training and at termly supervision. It is made clear to applicants for posts within the nursery, that the position is exempt from the provisions of the Rehabilitation of Offenders Act 1974.

We have made written records of all checks carried out.

19. Confidentiality

The nursery's work with children and families will sometimes bring us into contact with confidential 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:

- a. Parents will have ready access to any records that we hold of their own children but will not have access to information about any other child.
- b. When the nursery is not in session, these records are stored confidentially in a locked filing cabinet in a locked office.
- c. Information given by parents/carers to the nursery, head of nursery or key person will be treated in the strictest of confidence within the nursery team. In some cases, particularly child protection cases, only limited info will be shared across with the rest of the staff.
- d. Issues to do with the employment of staff, whether paid or unpaid, will remain confidential to the people directly involved with making personnel decisions.
- e. All staff, including volunteers and students are required to keep information about the nursery, children, or families confidential and must not discuss any aspects of the work of the nursery with people outside of the nursery, e.g., family members or friends.

20. Uncollected Child

In the event of a child not being collected at the end of a session, our policy is as follows:

- a. After 10 minutes try to contact the child's parents/carers by phone.
- b. If no contact can be made with the parents/carer, try to contact any of the other authorised persons for the child (see child's records).
- c. After a further 15 minutes, try to establish contact again with the parents/carer or any other authorised persons.
- d. If no contact can be made with any authorised person within 1 hour after collection time, contact MASH team.
- e. Two members of staff must stay at nursery with the child until situation is resolved.

21. Missing Child

To ensure that a child doesn't go missing from nursery once they have arrived and are handed to staff, the following procedure is always in place:

- a. Locks on doors are always secure
- b. Children are marked in and out of the register
- c. Children are regularly counted, and the numbers of children recorded inside and outside on the attendance sheet

In the unlikely event that we cannot find a child then a member of staff must do the following:

- a. First thoroughly search all rooms. The adult will check all cupboards and hiding areas that a child may be able to squeeze into.
- b. Discussions with staff are conducted to establish which member of staff was in contact with the child last. The time will also be noted.

- c. If the child is not found within 5 mins, then a designated person will leave the nursery and search the immediate outside area, including all forest areas.
- d. If the designated person does not return with the child, then the police are called immediately. The head of nursery will then inform parents/guardians if advised to do so by Police.

22. Outings and Missing Child

We pride ourselves on giving children the best experiences that we can and sometimes this involves taking them out of the setting to explore the local area.

When doing this we fully risk assess the outing and ensure that we meet all legal requirements regarding PFA, ratio requirements and qualifications of staff.

In the unlikely event of a child going missing whilst on an outing, this is the procedure that we follow:

- a. If a child is identified as being missing, the rest of the children are sat down in a group and supervised by staff.
- b. The member of staff who is in charge on the visit, would make an immediate search for the missing child in the immediate and surrounding areas.
- c. If the child is not found after the appropriate search time (up to 15 minutes – shorter if in a busy area) then the Police are called. Parents are also contacted at this point.

Following any missing child incident, whether at nursery or on an offsite visit this procedure must be followed:

An investigation conducted with a written report outlining the following things:

- How the child escaped
- Why child could not be found
- The date and time of the incident
- When the child was last seen
- The estimated time that the child went missing
- A conclusion is drawn as to how the breach of safeguarding happened.

23. Oral Health

All nursery providers must promote good health, including the oral health of children in the setting. At Busy Beacons, we do this by:

- a. Arranging for a dental nurse to visit the nursery.
- b. Talk to the children about the importance of cleaning their teeth.
- c. Provide brushes and a tooth model for the children to brush as part of their activities.
- d. Refer parents to a health visitor/dentist if we have concerns about a child's teeth.

24. Medication

Where a child has a medical condition that requires medicines to be regularly administered at the nursery, then a healthcare plan is completed with parents.

When deciding what information should be recorded on individual healthcare plans, staff will consider the following:

- a. The medical condition, its triggers, signs, symptoms, and treatments
- b. The child's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements, and environmental issues
- c. Specific support for the child's educational, social, and emotional needs
- d. Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable
- e. Which staff need to be aware of the child's condition and the support required
- f. What to do in an emergency, including whom to contact, and contingency arrangements.
Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

When a child needs medicine administered for a short amount of time e.g., antibiotics then a care plan is not needed but parents need to complete relevant paperwork ('Administering prescribed medications' form located in the locked filing cabinet).

Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that medicine has been obtained from the child's parent and/or carer. Providers must keep a written record (on Tapestry) each time a medicine is administered to a child and inform the child's parents and/or carers on the same day, or as soon as reasonably practicable.'
Quote from the 'Statutory Framework for the Early Years Foundation Stage, 2021'

Storing medication

All medication is kept in the medicine cupboard or the fridge depending on the requirements of each medicine. The kitchen is locked so children can't access these medicines. All prescribed medication must have a doctor's label on which has the child's name and date of birth otherwise it cannot be administered at nursery.

Record keeping

We will ensure that written records are kept of all medicines administered to children. Records offer protection to staff and children and provide evidence that agreed procedures have been followed.

25. Accident or Injury

The EYFS statutory requirement is that at least one member of staff with a current paediatric first aid certificate must be on the premises at all times otherwise the nursery cannot remain open. If staff are taking children off site at least one member of staff must hold a PFA certificate.

A first aid kit must be accessible on the premises and must be taken on any visits. The first aid kit is:

- a. Regularly checked and restocked as necessary.

- b. Easily accessible to adults.
- c. Kept out of reach of children.

A written record is kept of all accidents and injuries and the first aid treatment that was administered on Tapestry. Parents are informed as soon as the treatment has been given.

26. Promoting Positive Behaviour

Physical Contact with Children

There are occasions when it is entirely appropriate for staff to have physical contact with children, but it is crucial that they only do so in ways appropriate to their professional role.

Staff must ensure that their behaviour does not inadvertently lay them open to allegations of abuse. Any physical contact should be the minimum required for care, instruction, or restraint.

Staff must not have unnecessary physical contact with children and should be alert to the fact that minor forms of friendly physical contact can be misconstrued by children or onlookers.

Physical contact must never be secretive or of the gratification of the adult or represent a misuse of authority. If a member of staff believes that an action could be misinterpreted, the incident and circumstances should be recorded as soon as possible, and the DSL informed.

Physical Restraint

Any use of physical intervention should be consistent with the principle of reasonable minimal force. Where it is judged that restrictive physical intervention is necessary, staff should:

- Aim for side-by-side contact with the child. Avoid positioning themselves in front (to reduce the risk of being kicked) or behind (to reduce the risk of allegations of sexual misconduct)
- Aim for no gap between the adults and child's body, where they are side by side. This minimises the risk of impact and damage
- Aim to keep the adults back as straight as possible.
- Beware in particular of head positioning, to avoid head butts from the child
- Hold children by "long" bones, i.e. avoid grasping at joints where pain and damage are most likely.
- Ensure that there is no restriction to the child's ability to breathe. This means avoiding holding a child around the chest cavity or stomach.
- Avoid lifting mobile children where possible

Physical intervention should only be used when any of the following is occurring:

- Someone is injuring themselves or others
- Someone is damaging property
- There is suspicion that although injury or damage has not yet happened, it is at immediate risk of occurring.

Biting

Biting is a toddler habit that can cause distress to both the child who has been bitten and the biter.

Biting usually occurs between one to two and half years old, although it can occur in slightly older children as well. Biting usually offers some gratification either from teething, frustration or anger. When toddlers bite, they just sink their teeth into flesh unaware of the pain their action may cause.

When biting occurs staff will:

1. Comfort the child who has been bitten.
2. Apply first aid as required. If the skin has broken, there may be a risk of infection so parent must be contacted and encouraged to take their child to visit the GP.
3. The name of the biter must be kept confidential.
4. The biter must also be supported as they may feel very distressed as well. Staff should use developmentally appropriate strategies (e.g. role play) to help the child to understand that biting is not acceptable.

Shouting

Sometimes it is necessary for adults to change the tone of their voice, so children understand that their behaviour is not acceptable. However, shouting is not permitted unless any of the following is occurring:

- Someone is injuring themselves or others
- Someone is damaging property
- There is suspicion that although injury or damage has not yet happened, it is at immediate risk of occurring.

We place a huge emphasis on children learning to resolve conflict at Busy Beacons as this is an important skill that children need to take forward as they progress through their lives.

Children learn best when they understand what they've done wrong. Staff will encourage children to talk about their actions and whether their behaviour is acceptable. Where children are less developed, role-play should be used and lots of focus on emotions and enabling them to understand what has happened.

Being a good role model

It is really important that staff model to children what they expect from them. A good example could be eating healthy foods at lunch time. When children see adults eating healthy food and hear adults talking about the benefits of healthy eating, it encourages them to do the same. We encourage our staff to be a good role model to children and also encourage you to do the same at home.

Other examples of being a good role model are:

- putting on wellies in the garden as children are putting on their wellies
- apologising to a child for interrupting their conversation
- saying 'well done' to another member of staff for something they have done well
- thanking a child for teaching you something new (even if you already knew it)
- wearing gloves and hats in the cold whether
- putting a toy away when you're finished playing with it (Look Jonny I'm going to put this block away)
- saying hello and goodbye to children

27. Caring for babies/toddlers

At Busy Beacons, we understand that the needs of babies and toddlers is often greater than it is for older children. This is what we do to ensure we are meeting all safeguarding and welfare requirements for this age group:

- a. Children under the age of two have a separate room and are cared for in a smaller group of children.
- b. If dummies are used, they are cleaned and sterilised. This also applies to dummies which have been dropped. All dummies are stored in separate labelled containers to ensure no cross-contamination occurs.
- c. We ensure babies and younger children have opportunities to have contact with older children whilst at nursery. We also bring a small group of children to the baby room to play and interact with the babies during nursery sessions. This gives our older children the opportunity to learn about babies and their vulnerabilities but also gives our babies/younger children a model to learn from. If we feel safe to do so we do allow children under the age of two to mix with older children in their room, but they are supervised at all times.
- d. Children transfer to the older age group when assessed as appropriate for their age/stage following our agreed transition and settling procedures.
- e. Risk assessments are conducted to ensure that babies and toddlers do not have access to activities containing small pieces which may be swallowed or pose as a choking hazard.
- f. The baby room is checked daily using the written daily checklist to ensure that all equipment is intact and correct working order. The area and resources are also checked to make sure they are clean, ready for babies/toddlers to use. (Please see separate daily check lists)
- g. All doors are fitted with door finger guards to ensure the safety of children.

Nappies

- a. Although we have nappy changing times of 10:30am/2:30pm/4:30pm, all children have their nappies changed according to their individual needs by their key person. In the event that their key person is not available, then another adult who is known to the child will change their nappy.
- b. A written record is kept on Tapestry when a child's nappy is changed, and parents can view this record at any time.
- c. No child is ever left unattended during nappy changing time.

Toileting

- a. Potties are washed and disinfected after every use. Changing mats are wiped with anti-bacterial cleanser before and after each nappy change.

Sleeping

We have created the procedure below using the guidance on the NHS website for sudden infant death syndrome (SIDS).

[Sudden infant death syndrome \(SIDS\) - NHS \(www.nhs.uk\)](http://www.nhs.uk)

- a. Each baby/child must have their own bedding which is washed at least weekly and at other times if necessary.
- b. Children under two years are not given pillows, cot bumpers or any soft furnishings when sleeping in order to prevent risk of suffocation.
- c. Children sleep only in a sleeping pod or on a sleep mat. Children do not sleep in bouncer chairs or rockers.

- d. We follow all cot death prevention/safety guidelines and advise parents of this information. Babies are always laid to sleep on their back, with their feet touching the foot of the cot.
- e. Children's individual sleeping bags may be used in consultation with parents. These are washed at least weekly and when necessary.
- f. Cots are checked before use to ensure no items are within reach i.e., hanging over or beside the cot (e.g., fly nets, cables)
- g. Sleeping children are always checked every 15 minutes. Checks are documented with the time and staff initials on the sleep check form.

Eating and drinking

- a. All highchairs used for feeding are fitted with restraints and these are always used. Children are never left unattended in highchairs. Restraints are removed and washed as needed. If a baby falls to sleep-in reclining highchair, staff must check child's mouth is free from food and they are then moved to appropriate sleep arrangements.
- b. Babies are never left propped up with bottles as it is both dangerous and inappropriate.
- c. Bottles of formula milk are only made up as the child needs them. These should be cooled to body temperature, which means they should feel warm or cool, but not hot, and should be tested with a sterilised thermometer to ensure they are an appropriate temperature for the child to drink safely (20.5°C).
- d. Following the Department of Health guidelines, we only use recently boiled water to make formula bottles (left for no longer than 30 minutes to cool). We do not use cooled boiled water that is reheated.
- e. Bottles and teats are thoroughly cleaned with hot soapy water and sterilised after use (they will not be washed in the dishwasher)
- f. Contents of bottles are disposed of after one hour.
- g. A designated area is available for mothers who wish to breastfeed their babies or express milk.
- h. Labelled mothers' breast milk is stored in the fridge or freezer.
- i. Sterilisers are washed out and cleaned daily.

28. Equality

We are committed to equal treatment for children regardless of sex, sexuality, gender, race, disability, religion, or belief. We keep a record of any incidents that breach this code of conduct. Discriminatory and derogatory language is not tolerated.

We aim to create a friendly, caring, and perceptive environment in which every individual is valued. We endeavour to contribute positively towards the growing autonomy, self-esteem, and safety of each child.

The nine characteristics that are protected by the Equality Act 2010 are:

- age
- disability
- gender reassignment
- marriage or civil partnership (in employment only)
- pregnancy and maternity
- race
- religion or belief
- sex
- sexual orientation

29. Review of this policy

These policies have been shared with all staff and time is allocated for regular revision. It will be reviewed on a two-yearly basis to ensure the information is up to date.