**HEALTH & SAFETY FOR CHILDREN POLICY**

**Rationale:** The health and wellbeing of all who attend the Early Childhood Centre/Service is of paramount importance.

**Purpose:** To comply with relevant legislation at all times to ensure we provide a safe and healthy environment for all staff, children and their parents. .

 **PROCEDURES**

## Cleaning Procedures (HS1)

* Contracted cleaners will be used to clean the Centre daily. A schedule of cleaning/job description will be provided to ensure standards are maintained.
* The cleaners will be responsible for general cleaning of the whole Centre, including all hard surfaces and bathroom areas. All cleaning materials used by the cleaners will be brought into the Centre on a daily basis or stored in the secure cleaners’ cupboard. General day-to-day cleaning products used by staff will be kept in a locked cupboard or out of reach of children.
* Staff will be expected to “clean as they go” ensuring spills and messes are cleaned up immediately.
* Wiping down of eating areas, art areas and tidying up of toys will be undertaken by staff.
* Separate cloths for bathroom, general and food areas will be identified by colour.
* A disinfectant solution that is 1 part disinfectant and 10 parts water will be used to wipe down tables and surfaces.
* The carpets will be cleaned twice a year (or as necessary).
* All equipment/furniture is to be cleaned weekly and will be listed on a cleaning roster. Toys will be on a roster and staff will ensure these are cleaned at least once a month. Toys mouthed by children will be cleaned weekly.

**Laundry (HS2)**

All laundry will be cleaned on site.

The following procedures will be followed to ensure all linen and resources used by adults and children are hygienically laundered:

* Separate coloured cloths will be used for washing floors, cleaning of equipment, and washing of children. These cloths will be washed separately at all times.
* All washing is separated into 1.Sheets; 2. Tea towels and dishcloths; 3. Flannels and bibs; 4. Floor rugs and outdoor towels; 5. Blankets … and washed separately.
* Soiled laundry will be soaked in a bleach solution (E.g. Napisan) prior to laundering.
* Children’s bed linen will be washed on a weekly basis. Each child’s linen will be kept separate and identified by name.
* The washing machine and clothes drier will not be able to be accessed by children at any time.
* All laundry will be dried by the clothes drier or other hygienic method, folded, and returned to storage areas as appropriate.

## Nappy Changing and Toileting Procedures (HS3)

## Parents are to provide disposable nappies for their child, as we do not have the facilities to store used cloth nappies.

## Parents are to provide wipes and any creams they want to be used on their child. These creams must be documented on the category i medicine form at enrolments. Any changes to creams during their time at the centre must be amended on this form.

## Children are expected to arrive in a clean nappy and will leave the centre in a clean nappy.

**Nappy Changing Routine**

Teachers will follow the procedures below when changing nappies:

Nappy changing will take place only in the designated area, which will be well ventilated at all times.

* Teachers will invite children in a positive, friendly manner respecting their dignity and privacy at all times and where possible promoting independent skills.
* Children are checked/changed on a regular 2 – 3 hour basis from arrival.
* Teachers also change any soiled/wet nappies as required outside these times. If a child’s nappy is soiled they are changed immediately.
* All nappy changes will be recorded on the daily chart provided, using the key identified on the chart.

This is as follows:

* + W = Wet
	+ D = Dry
	+ C = Checked but only a little wet and not needing to be changed
	+ S = soiled
	+ LM = Loose motion
	+ CA = cream applied
	+ B = bed (Child has gone to bed and will be checked/changed upon wake up)

*(Please note: 3 “loose” nappy changes in a day where diarrhoea is suspected, means a parents is phoned to pick up their child and they cannot return until 48hrs after the child’s last bout of diarrhoea.)*

* If a child has a two dry nappies in a row, staff are to report this to their Team Leader and ensure the child has intake of liquid.
* If a child’s nappy is checked but not changed at one nappy change time, it must be changed at the next nappy change time.
* Nappy change times are viewed as a time to engage and interact with children to strengthen trusting relationships of well-being and belonging.
* Older children are encouraged to use self-help skills in accessing the nappy changing table area to ensure staff are not lifting heavier children.
* Teachers must always ensure children are supported as they go and come down the stairs- to prevent falls.
* Teachers will wear disposable gloves when changing children. All gloves will be disposed of between each change.
* Teachers will thoroughly wash their hands between changes, with soap and water.
* When changing nappies, teachers will always ensure a child’s safety is paramount. Getting all necessary items for the child out onto the table before laying the child down- to ensure they NEVER take a hand off the child on the changing mat.
* Changing mats will be sprayed with 1 part disinfectant and 10 parts water after each change. Staff must ensure the mat is left dry, ready for the next nappy change.
* If a child has nappy rash and no cream has been provided for that day, the parents will be phoned.
* Nappies are disposed of in the designated receptacle provided.
* No child will be allowed in the nappy change area without a staff member present.
* The Changing Area is cleaned at the end of each day with a bleach solution (1part bleach, 10 parts water solutions) - including the change mat.

**Preschool Toilet Learning**

Our policy is to begin toilet learning when requested by parents (as long as the child meets the criteria below)

* + The child knows the difference between wet and dry nappies.
	+ The child is able to communicate to staff that they want to go to the toilet
	+ Toilet learning has already begun successfully at home, and teachers will continue to support the children and parents through this process at preschool.

**Our Expectations:**

* That parents and teachers work in collaboration throughout this process.
* That parents read through the toileting pack provided by the centre to be sure they know everything they need to know before this process is started.
* We encourage our parents to speak with teachers regarding the beginning of this process. Teachers also are able to offer other outside groups for support if needed. E.g. The Public Health Nurse, Plunket, The Queenstown Lakes Family Centre.
* Parents are expected to and will be encouraged to dress their child in clothing that is easy for the child to pull down etc. Trousers with buttons or braces or tights are too difficult for the average toilet training child to undo, especially in a hurry.
* Parents provide lots of changes of clothing and wipes.

**Toilet learning routine:**

When the child is toilet learning they will be encouraged to use the toilet at regular intervals throughout the day (between a 2 – 3hr time period).

* The times they were reminded and encouraged will be recorded on the Toileting chart in the locker room.
* Children will be encouraged to develop self-managing skills in going to the toilet and staff will be available to support them as necessary.
* Teachers and children wash their hands after toileting
* Liquid/Foam soap and disposable paper towels will be used in the toilet area. Rubbish bins are available for ease of use.
* This routine will continue until they are able to take themselves to the toilet without being reminded and without any accidents.
* Lots of praise will be used to encourage the child in this process, and at no point will a teacher ever force a child to go to the toilet or bathroom.
* Teachers will work in partnership parents to ensure this process is a positive learning experience for children.
* Children will be encouraged to change themselves if they wet, to foster a sense of responsibility with a teacher there to support as needed.
* When a child soils their clothing, Teachers will remove the soiled clothing and clean the child in the tub (if necessary) in the changing room, before putting on clean clothes.
* Teachers will use positive language throughout any accidents, to reassure children that it’s OK to have accidents, and that next time we’ll try get it on the toilet. At no point will teachers refer to bowel movements as being “yucky” as it is important for children not to feel they have done something wrong. It is simply something everyone’s body needs to do ☺.
* The soiled clothing will be put in a named plastic bag to be taken home.
* A supply of clean clothes and underwear are kept at Preschool in case of accidents.
* Any soiling or wet accidents are recorded on the toileting chart

## Injury Prevention Strategies

* All doors to adult-only areas will be closed at all times, to ensure children do not have access to these areas.
* Cupboards such as the teachers’ cupboards, art cupboards and kitchen doors will be inaccessible to children at all times.
* All chemicals will be stored in marked containers and be kept out of the reach of children at all times. This will include cleaning agents. Staff will constantly be aware of the potential danger of things such as water spills, and clean them up immediately.
* Hot drinks will be consumed away from where they could potentially spill on children.
* Children will be encouraged not to sit on tables, nor jump off furniture and chairs.
* Children will remain seated while eating and be supervised by a staff member.
* Staff will wear gloves at all times when blood is present.
* The environment is checked daily to identify, minimize and isolate hazards for children using the same procedures as for health and safety of Adults.
* The playground is checked for vandalism dangerous objects and animal droppings
* The indoors is checked to ensure children do not have access to chemicals and that exits are clear.
* Daily checks are signed on the “Inside Daily Hazard” form and “Outside Playground Check” form, by the persons responsible for those roles each day.
* Hazards are recorded on the Hazard Identification Record Form and followed up by management and/or Health and Safety Officer.
* It is Team Leaders responsibility to ensure these checks are being carried out.

**Poisonous Plants**

* Regular checks will be made by staff through their daily and weekly hazard checklists.
* Before new plants are purchased, they will be checked against current guidelines concerning New Zealand poisonous plants. All plants given as gifts will also be checked.
* Information is available to staff and parents regarding classification of poisonous plants.
* Staff talk with children about not eating seeds, leaves and plants unless approved by an adult. All plants that are of educational benefit, i.e. swan plants, will be allowed into the Centre provided they are supervised at all times.

## Physical Environment (HS 13, 14, 15, 24)

* All noise will be kept at a level so as not to unduly cause any child distress or harm.
* The Centre will be maintained at a comfortable temperature no lower than 16 degrees (500 mm above floor level) while children are in attendance.
* All air conditioning and heating units will be regularly inspected and serviced. Documentation will be kept by the Manager/Supervisor.
* The water temperature for children’s use will be maintained at 40 degrees C. or less and for adult use at 60 degrees C.
* Regular safety checks of equipment and the indoor/outdoor environment will be monitored by the Manager/Supervisor and recorded appropriately.
* Washing facilities will be available for sick or soiled children.

**Care of Animals (HS16)**

## All animals at the Centre will be restrained as necessary.

## All staff will follow safe and hygienic handling practices before, during and after the handling of animals.

## Children will be taught safe practice in regard to the handling of animals.

## During holiday periods and weekends, the safety and health of any animals at the Centre will be provided for at all times.

## Preparation and Eating of Food (HS 19, 20, 21, 22)

* One teachers will be rostered to supervise children while eating.
* Allergies for individual children will be displayed in the kitchen area, with a photo of the child for easy identification.
* Parents MUST update their enrolment from with the office in regards to any newly developed allergies.
* Teachers will ensure all children are provided with water at kai times and that they have access to water throughout the day. **When eating, children will always be seated and supervised by a teacher.**
* At kai/meal times, staff will ensure that each child receives their own lunch box and sharing of items is discouraged.
* **We view kai times as a positive, social time for children to come together, share a chat and enjoy eating alongside one another. However, flexible eating routines will be encouraged along with the development of self-help skills.**
* **Kai karakia is said before meal times to bless the food.**
* **Children are required to wash their hands prior to eating or handling food. For infants who are not mobile, individual wet facecloths will be used for wiping their hands once they are seated.**
* **It is the responsibility of the Centre Manager to ensure that staff are adequately trained in the safe preparation and handling of food.**
* **All kitchen surfaces must be kept meticulously clean.**
* **All tables where children are to eat must be wiped with a BLUE cloth and disinfected spray (1part disinfect, 10 parts water solution) before and after any eating occurs. Picnic mats are wiped clean as necessary. Highchairs and trays are wiped down after the child has left the highchair.**
* **PINK cloths are available to use for any floor spills that do not require moping.**
* **All food utensils, table and drinkware provided by the centre are thoroughly washed and put through the sterilizer. We ask that parents take their child’s water bottle home daily for cleaning.**
* **Staff allocated to the Kitchen role check and ensure food that need refrigerating is placed in the fridge.**
* **Any food heated, must be checked by staff by stirring the food and testing the spoon on the inside of the staff members wrist, to ensure it is not too hot before handing out to children.**
* **Any food provided by the Centre, including baking, will be recorded in the Food Diary in the kitchen or Food Diary in the Moa’s.**
* **In the Nursery, meal times and bottle times are recorded on the “Meal Chart” whiteboard using the key at the top of the board.**
* **Infants and toddlers are supported and encouraged to eat by staff at meal times as necessary. At NO time will staff force a child to eat.**

**When Parents provide food for children**

* The Centre will promote safe and hygienic food handling practices.
* Parents are asked to bring lunches and food snacks/lunch for their children and are encouraged to include foods that promote healthy eating for children.
* Information on healthy eating ideas are available in the foyer and upon request. We encourage parents to speak with teachers if they have any concerns around the eating of their child.
* Children's lunch boxes and all containers are to be named and placed in the assigned area or refrigerator upon arrival.
* We have a strict NO NUTS or NO EGG policy, due to children with severe life threatening allergies. This includes pine nuts commonly found in pesto. Items that state “May contain nuts” is accepted. Baking items containing egg is also allowed.
* The Centre welcomes children to celebrate occasions in their cultures with appropriate foods and drinks to share. Such occasions may include (but are not limited to) birthdays, Easter, Christmas, Matariki.
* On these occasions, Parents must provide the ingredients of any items brought in to share, which will be recorded in one of the food diaries.
* For children who have allergies and cannot eat these foods, we encourage Parents to keep some acceptable party foods here at the centre for their child. So on occasions where others are eating, for example birthday cake, we can offer them some of their own party foods.
* Any incidents where a child has digested food that they are known to have an allergy to, staff will
	+ Report the incident to management immediately
	+ Follow the child’s action plan displayed in the Kitchen.
	+ Supervise the child until the parent arrives.
	+ Provide the parent with a copy of the written incident form.

## Bottle Feeding Procedures (HS23)

* All children under the age of 6 months and other children unable to drink independently will be held semi-upright while drinking their bottle.
* When teachers are feeding infants their bottles (under 15 months old) the child will be supported or supervised as necessary.
* Bottles for children under the age of 6 months will be heated by being placed in hot water in the kitchen. For children over the age of 6 months, bottles will be heated in the microwave unless the milk is breast milk, or as requested otherwise by a parent or caregiver.
* Staff are to follow Bottle heating guidelines as recommended by the Ministry of Health. See attached and also found on the side of the Kitchen fridge.

## Accident Procedures (HS 25)

* At least two staff will hold a current First Aid Certificate at all times.
* Copies of First Aid Certificates held by staff will be kept in the Centre.
* Management will ensure that all children's records have both parents’ current contact numbers and two emergency contacts.
* In the event of an accident the priority will be to administer first aid immediately then inform the Team Leader.
* Any accident will be recorded in the Accident Register/Form and staff will ensure parents are informed. Parents will be phoned and informed of any serious accident.
* The staff member who performs first aid will record in the Accident Register/Form what happened, i.e., a description of the incident, the action taken, and the day and time it occurred and a space for parents to sign that they have knowledge of the incident. They will then write the child’s name on the allocated Parent Communication whiteboard in each room.
* If deemed necessary, a registered staff member or management will take the child to the local medical centre and the child's parents/emergency contact person will be called. The staff member will stay with child while at the medical centre until parents arrive. If more serious, an ambulance will be called and the parents will be contacted immediately. If the parents cannot reach the Centre by the time the ambulance arrives, a staff member will ride to the hospital with the child and meet the parents there.
* If blood and body fluids are present as a result of the accident, staff will clean and disinfect the area using gloves and a bleach solution straight away.

**Serious Harm or Illness to a Child Procedure (HS 27)**

All practicable steps will be taken to get immediate assistance for a child who is badly hurt in an accident or becomes seriously ill, and to inform the parents or caregivers of what has occurred.

In the event of a serious accident or illness to a child, a teacher shall immediately ensure the following steps are taken:

1. Attend to the child.
2. Seek support from another teacher/s.
3. Call appropriate medical assistance.
4. Advise the parents/whānau/caregiver.
5. If the child is taken to hospital the staff member who had been closest to the incident should accompany them.
6. A Serious Harm/Illness Form will be completed.
7. An incident investigation will be completed.

The Serious Harm/Illness Form will include:

* The child’s name.
* The date, time and description of the incident.
* Actions taken and by whom.
* A space for parents to sign that they have been informed of the incident (see Forms).

## Incident Investigation

In the event that an investigation is required, the following process will be followed:

* The staff member closest to the incident will document what occurred.
* Any other staff involved will document their role.
* The Health and Safety Officer and/or management will go over the report with the teacher to:
1. Identify key triggers to the incident.
2. Minimise the hazard.
3. Add to the Hazard Identification Register if required.
4. Evaluate the effectiveness of the procedure and make changes if required.
5. Store all information in the Incident File in the Mangers/Supervisors Office

**Illness Procedures (HS 26)**

* The Centre will ensure that all children/ staff / parents / visitors to the Centre are protected from contracting infectious diseases.
* Children and adults who are sick are not to be present at the Centre. Sickness includes vomiting, diarrhea, high temperatures, a green runny nose along with any other flu like symptoms, conjunctivitis, impetigo and any other contagious illness.
* If a child has vomiting and diarrhea they must remain absent from the Centre until 48 hours after their last symptom.
* There must be a period of 24hr absence if a child is diagnosed with having a viral infection.
* If a child arrives at the Centre and is clearly not well, staff and Management reserve the right not to allow that child to be left at the Centre. This is for the wellness of other children and staff.
* If parents are called to collect their child due to illness, they must do so as soon as possible. If parents are unable to do so they must then organise someone else to collect their child.
* A current list of infectious diseases consistent with Infectious Diseases for Criterion HS26 will be displayed in the Centre, enabling parents to access the information at all times (see link below).
* If a child has an illness not covered in this policy, teachers will refer to the infectious disease chart to determine the infection period, which will determine how long a child must stay away from the Centre. If the illness is not listed on the infectious disease chart the local Public Health Nurse will be consulted.
* If a child becomes unwell while at the Centre they will be isolated from other children and watched over by a staff member until collected by a parent/caregiver.

## Administration of Medicine (HS28)

* There are three categories of medicine that require different authorisations from parents:
	1. **Category 1:** non-prescription, provided by the Centre, and kept in the First Aid Kit. (Written authority upon enrolment.)
	2. **Category 2:** prescription and non-prescription (used for a specific period of time, short term- this includes Bonjela or teething powders).

Written authority is required at the beginning of each day and will include the name of the medication, the method for administering, the dose, and the time medication is to be given.)

* 1. **Category 3:** prescription and non-prescription (used for the ongoing treatment of pre-diagnosed conditions). (Written authority is required upon enrolment as part of an Individual Health Plan which will include name of the medication, the method for administering, the dose, the time the medication is to be given, and the specific symptoms/circumstances in which it should be given.)
* All medicine bottles must be correctly labelled with the child's name and expiry date.
* All Category 2 or 3 medication must be handed directly to a staff member, who will place it up high out of the reach of children (or in the refrigerator).
* Medication will not be given if it is out of date, or has been prescribed to someone different than the child.
* All permanent staff are able to administer medication.
* All medication administered must be recorded including written authority from the parent to administer the medicine consistent with the medication category, the name of the medication, the child’s name, the amount of medicine given, the date and time medication was administered and by whom, and evidence of parent acknowledgement that the medication was administered (see Forms).
* Staff will be given appropriate training in the administration of specific medications as required. Details of this training will be kept in the Centre Professional Learning filing system

**Sick and/or Soiled Children Procedures (HS 30)**

**Universal Precautions for Infection Control**

In the event of an accident, spillage or contact with any body fluids or discharge, the following universal precautions will be followed:

* All broken skin areas (fresh, unhealed cuts or burns) must be covered with a water-proof, adhesive dressing.
* Gloves will be used when contact with mucous membranes (eyes, mouth), broken skin or moist body substances is likely to occur.
* Plastic aprons will be used when it is likely that moist body substances will soil clothing.
* Hands must be washed immediately with soap and water if they are potentially contaminated with moist body substances.
* Articles, furniture and floors soiled with moist body substances will be cleaned and appropriately disinfected using household bleach (e.g., Janola) 1:10 (10mls in 90mls of water). This will be left on the area for 10 minutes (where possible) and the spill wiped up with a cloth soaked in the solution.
* Soiled children will be taken to the nappy changing area to be cleaned and changed. Staff will follow the nappy changing and toileting procedures.

**Immunisation Procedures**

The Health (Immunisation) Regulations 1995 require that accurate immunisation records are kept of all children on the roll.

* The Ministry of Health requires all licensed Early Childhood Centres to sight and record every child’s immunisation history on enrolment, or in the case of a child under 15 months old, once that child reaches the required age.
* These records will be maintained on the Centre computer file and will remain confidential. The Office Administrator is responsible for recording this information.
* In the case of an outbreak, any child who is not immunised must be removed from the Centre until the incubation period of the disease is past and no further cases are reported.

## Supervision of Children Procedures

* Management will ensure adequate staff are present at all times to meet licensing requirements, and to adequately supervise all children in attendance.
* Staff will be rostered to ensure both indoors (including the toileting area) and outdoors have adequate supervision.
* Staff or adults visiting or working in the Centre will be well supervised and visible at all times.
* All visitors will be required to sign the designated book stating the time of arrival and departure and purpose of visit and the Hazard register
* When staff leave for morning/afternoon tea breaks and lunches, they must not leave until another staff member has covered their position.
* Staff involved in supervision must not leave children unsupervised under any circumstances unless relieved by another staff member.
* The Person Responsible is the Team Leader; if this person is not present then an alternative staff member will be asked to undertake this role on a temporary basis.

**Sunsmart**

* On a designated ‘Sunsmart’ day, children and staff will wear hats (for a minimum this would be during the months of daylight saving, October to March). Children not wearing hats will be asked to play indoors or in shaded areas.
* Parents will be required to provide a hat for their child, and staff will be responsible for checking bags for a hat if they are not being worn.
* An emergency supply of hats will be available at the Centre. These will be washed after each use.
* Children and adults will be encouraged to wear ‘Sunsmart’ clothes, i.e., a suns safe hat, t-shirts rather than singlet tops.
* Sunscreen will be applied to the children a minimum of two times a day, and any other time as required.
* If a child is excluded from using the Centre’s sunscreen then their parent/caregiver/whānau will be required to provide a named sunscreen for their child.
* Staff and Management will work together to provide a ‘Sunsafe’ environment.

Under 2’s: Sunscreen is applied mid-morning and again at mid-afternoon (around 4 hours from first application), and at any other times as required.

Over 2’s: It is the parent’s responsibility to apply sunscreen before arriving in the mornings, teachers will re-apply after lunch for those children not sleeping or after a child wakes from their sleep. Then again in the afternoon as necessary, and any other times required.

***Licensing Criteria HS1 – HS30.***

* ***Supporting Legislation: Regulation 46 Health and Safety Practices Standard: General.
Supporting Document to meet HS26 Infectious Illnesses Chart can be downloaded from***
* [***https://www.healthed.govt.nz/resource/infectious-diseases***](https://www.healthed.govt.nz/resource/infectious-diseases)

**Reviewed: October 2018**

**Next Review Date: September 2019**