

**CONTENTS**

[**GOVERNANCE 4**](#_heading=h.30j0zll)

[**1.**](#_heading=h.1fob9te) **STATEMENT OF PURPOSE AND FUNCTION AND OTHER GENERAL INFORMATION 4**

[**2.**](#_heading=h.vx1227) **FEE PAYMENT POLICY**

[**3.**](#_heading=h.3znysh7) **COMPLAINTS POLICY 9**

[**4.**](#_heading=h.tyjcwt) **POLICY ON STAFF ABSENCES 12**

[**5.**](#_heading=h.3dy6vkm) **RECRUITMENT POLICY 13**

[**6.**](#_heading=h.1t3h5sf) **GARDA VETTING POLICY 15**

[**7.**](#_heading=h.4d34og8) **STAFF TRAINING POLICY 16**

[**8.**](#_heading=h.2s8eyo1) **SUPERVISION POLICY 18**

[**9.**](#_heading=h.17dp8vu) **CODE OF BEHAVIOUR 18**

[**HEALTH, WELFARE AND DEVELOPMENT 19**](#_heading=h.3fwokq0)

[**10.**](#_heading=h.3rdcrjn) **POLICY ON MANAGING BEHAVIOUR 19**

[**11.**](#_heading=h.26in1rg) **INCLUSION POLICY 21**

[**12.**](#_heading=h.lnxbz9) **POLICY ON FOOD AND HEALTHY EATING 22**

[**13.**](#_heading=h.35nkun2) **POLICY ON OUTDOOR PLAY 23**

[**14.**](#_heading=h.1ksv4uv) **SETTLING-IN AND TRANSITION POLICY 24**

[**15.**](#_heading=h.44sinio) **POLICY ON THE USE OF INTERNET, PHOTOGRAPHIC AND RECORDING DEVICES 26**

[**CHILD SAFEGUARDING AND PROTECTION 27**](#_heading=h.1v1yuxt)

[**16.**](#_heading=h.2jxsxqh) **CHILD SAFEGUARDING STATEMENT 27**

[**17.**](#_heading=h.z337ya) **CHILD PROTECTION POLICY 28**

[**SAFETY 32**](#_heading=h.4f1mdlm)

[**18.**](#_heading=h.1y810tw) **SAFETY STATEMENT 32**

[**19.**](#_heading=h.4i7ojhp) **HEALTH AND SAFETY POLICY 34**

[**20.**](#_heading=h.2xcytpi) **RISK MANAGEMENT POLICY 35**

[**21.**](#_heading=h.1ci93xb) **POLICY ON ADMINISTRATION OF MEDICATION 37**

[**22.**](#_heading=h.3whwml4) **POLICY ON INFECTION CONTROL and COVID-19 40**

[**23.**](#_heading=h.3as4poj) **FIRE SAFETY POLICY 49**

[**24.**](#_heading=h.1pxezwc) **POLICY ON ACCIDENTS AND INCIDENTS 51**

[**25.**](#_heading=h.49x2ik5) **POLICY ON AUTHORISATION TO COLLECT CHILDREN 53**

[**27.**](#_heading=h.2p2csry) **OUTINGS POLICY 55**

[**28.**](#_heading=h.147n2zr) **SECURITY AND CRITICAL INCIDENT POLICY 56**

[**29.**](#_heading=h.3o7alnk) **POLICY ON EMERGENCY CLOSURE 61**

[**30.**](#_heading=h.23ckvvd) **POLICY ON INCLEMENT WEATHER 62**

[**GDPR 63**](#_heading=h.2u6wntf)

[**31.**](#_heading=h.ihv636) **DATA PROTECTION STATEMENT 63**

[**32.**](#_heading=h.2grqrue) **DATA RETENTION POLICY 62**

[**33.**](#_heading=h.19c6y18) **DATA BREACH POLICY 64**

**Rationale and policy considerations**

The policies contained in this booklet have been developed in response to the requirements and recommendations of:

* Quality and Regulatory Framework (QRF) 2018 developed by the TUSLA Early Years Inspectorate
* Child Care Act 1991 (Early Years Services) Regulations 2016
* The Children First Act 2015 and the updated requirements of Children First: National Guidelines (2017) for the protection and Welfare of Children
* Safety, Health and Welfare at Work Act 2005
* Síolta: The National Quality Framework for Early Childhood Education
* Aistear: The Early Childhood Curriculum Framework
* Access and Inclusion Model (AIM)
* General Data Protection Regulation
* National Vetting Bureau (Children and Vulnerable Persons) Act 2012
* Protection for Persons reporting Child Abuse Act, 1998

**Who must observe these policies?**

The policies in this booklet apply to all children in our care, staff employed by our service parents and visitors in our service.

**Key persons:**

| **Manager** | ABI ACHESON |
| --- | --- |
| **Deputy Manager** | MELISSA POTTER |
| **Health and Safety Officer** | ABI ACHESON |
| **Fire Warden** | ABI ACHESON |
| **Safety Officer** | ABI ACHESON |
| **Designated Liaison Officer** | ABI ACHESON |
| **Deputy Designed Liaison Officer** | MELISSA POTTER |
| **Emergency response co-ordinator**  **COVID -19 REP** | ABI ACHESON  MELISSA POTTER |
|  |  |

**External contacts:**

| **TUSLA Early Years Inspection Team** | 045 907841 |
| --- | --- |
| **TUSLA Social Work Department** | 045 882400 |
| **Emergencies** | 999 |
| **Doctor** | Dr Alex Khourrie 01 4931038 |
| **Gas Emergency** | 1850 205 050 |
| **Electricity Emergency** | 1850 372 999 |
| **Water Leak**  **HAS**  **HSE Ballinteer** | 1850 278 778  01 6147000  01 2164500 |

# **GOVERNANCE**

1. **STATEMENT OF PURPOSE, FUNCTION AND OTHER GENERAL INFORMATION**

**STATEMENT OF PURPOSE:**

The aim of this service is to provide a safe, secure, stimulating environment which embraces and values children, treating them as individuals and appreciating their uniqueness; to support the learning and development of each individual child by providing an integrated, balanced, broad, stimulating and engaging curriculum.

To achieve this we work in partnership with parents, carers and children as a multidisciplinary team. We want to provide a secure learning environment, which enables children to be:

* Respectful of themselves and others
* Happy and confident
* Independent
* Compassionate and caring
* Tolerant and patient
* Curious and creative
* Appreciative and appreciated*.*

We endeavor to ensure that all staff receive appropriate training and maintain high levels of practice.

**STATEMENT OF FUNCTION:**

**Details of service:**

**Address:** Whitechurch Montessori Whitechurch Road Dublin 16 0874187031

**Email:** whitechurchmontessori@gmail.com

**Manager:** Abi Acheson

**Assistant Manager:** Melissa Potter

**Alternative Person in Charge:** Melissa Potter

**Details on the class of service provided and the age profile of children catered for:**

**Class of service provided:**The type of service provided by our service is a Sessional Montessori Preschool

**Opening hours:** 9 am -12 pm Monday to Friday

***Age profile of children catered for:***

The age of children in our service ranges from 3-5 years.

**Type of care of programme provided in the service:**

Our service is committed to developing a curriculum that creates a child centred, play-based environment, which empowers young children to actively pursue their own learning and adults who will provide appropriate, timely, balanced intervention as well as support, continuity and progression to encourage positive attitudes towards learning will facilitate this process.

Our service recognises that the establishment of daily routines is essential for all young children in our care. We strive to provide a programme of activities that encourage the physical, social, emotional, intellectual, creative and language development of the children who attend this service.

**Our Curriculum:**  Montessori Preschool

* Aistear Framework; and follows the standards of Siolta;
* Is flexible and open to new approaches and ideas, on how to promote and meet the growing needs of the children;
* Recognises that children are learning all the time, and that children learn best when they are actively involved and interested;
* Includes a variety of activities that provides for the physical development of the children;
* Includes stimulating sensory experiences (touch, taste, sight, sound, and smell) appropriate to the child’s age and stage of development;
* Encourages the children to think for themselves, helping them to make their own decisions and find their own answers to questions;
* Provides an atmosphere that offers children suitable challenges and stimulates problem-solving;
* Encourages feelings of safety, trust and emotional security to the children in our care;
* Helps the children to develop self-esteem by giving them the opportunity to be actively involved in their own learning;
* Encourages at all times, sociability, friendship and co-operation with others, through the provision of co-operative play and opportunities for the children to mix with siblings, same age peers, and younger and older children;
* Aims to match all tasks with each child’s age and stage of development;
* Includes a range of activities chosen to reflect various differences in cultures, gender and ability amongst the children in our care; and
* Encourages staff to work together within each area to discuss the needs of individual children.

**Observations:**

* At our service we recognise that our role is to support each child in developing their own potential at their own pace, to further their learning interest and to see how each child is progressing. We do this through observing the children and incorporating our findings into daily activities and weekly and monthly themes. Observations are conducted on a term basis. Observations are confidential to each child. Observations will be provided to parents/guardians by technology.

**How we observe?**

* Staff record factual information in our weekly record book and are encouraged not to make assumptions or interpretations.
* Photos of children at work or samples of their work may be used as part of an observation.
* Staff reflect on the information at hand and plan activities or incorporate changes needed.
* Programmes and activities are constantly reviewed by staff to ensure they meet the children’s current needs.

**Facilities available:**

Our service has the following facilities available:

* Age-specific rooms for all the children in our care, fully equipped with toys and learning equipment appropriate to that age group;
* Separate, fully equipped, kitchens;
* Outdoor area;
* Car parking.

**Opening hours and fees etc**

The opening hours of our service are as follows:

* Sessional Monday to Friday 9.00 am – 12:00 pm

The Ratios for the service are as follows:

* 22 children - Teacher Ratio 1:11 / 2:22

**Staff information:**

| **Name:** | **Position:** | **Qualification:** | **Experience:** |
| --- | --- | --- | --- |
| **Abi Acheson** | **Manager** | **BA (Hons)** | **3 years** |
| **Melissa Potter** | **Assistant Manager** | **QQI Level 6** | **15 Years** |

**Staff information (continued):**

| **Name:** | **Position:** | **Qualification:** | **Experience:** |
| --- | --- | --- | --- |
| **Bairbré Richmond** | **Assistant Teacher** | **BA (Hons)** | **10 Years** |
|  |  |  |  |

**Details of adult: child ratios in the service:**

| **Room:** | **No. of children:** | **No. of teachers:** | **Ratio:** |
| --- | --- | --- | --- |
| **Montessori Room** | **13** | **2** | **1:7** |

1. **COMPLAINTS POLICY**

This policy has been updated in line with current guidance the HSPC Infection Prevention and Control guidance for services providing childcare during the COVID-19 Pandemic, the DCYA’s Return to Work Safety Protocol and Tusla's Service Regulations Guidance Document for Early Years Services COVID-19.

Whitechurch Montessori is committed to providing a high-quality service to everyone that comes in contact with our service and we welcome feedback from children and parents. We understand that at times families may have a concern or feedback about the service and we are committed to giving careful attention and a courteous, timely response to your suggestions, comments or complaints so that we can learn from them and continuously improve our service. Complaints will be accepted and investigated irrespective of the nature of the complaint or who the person making the complaint is. It is recognised that there is a need to establish a clear pathway for communication of changes in policy and practice and any other relevant information for parents/guardian in relation to all matters and also in relation to the management of the risks, including risk of COVID-19, in our service.

***Complaints procedure:***

We will deal with any complaints in an impartial and open manner. The owner/manager will acknowledge receipt of the complaint in writing as soon as possible.

The following procedure will apply to any complaint:

**Stage 1**

* A complaint can be made in person, by phone, letter, email and/or text.
* The complaint may be made by the person directly affected or by a person acting on their behalf.
* Those who wish to make a complaint are encouraged to speak directly to the relevant member of staff in the first instance. However, if they prefer, they may speak with the owner/manager who will try to resolve the problem. This person is Abi Acheson.
* The complaint will be recorded by this person and only shared on a need-to-know basis.

Every attempt will be made to resolve the matter in a timely manner, as amicably as possible and to the person’s satisfaction at this level.

**Stage 2**

* Should agreement not be reached at stage 1 then the person making the complaint is encouraged to make a formal complaint in writing to the owner/manager as named above.

***Formal***

There are certain times when a complaint cannot be handled informally. In these circumstances the person will be directed to make a formal complaint in writing.

If you wish to make a formal complaint, we request that you follow the below steps:

You can make a formal complaint by:

* E-mail: [whitechurchmontessori@gmail.com](mailto:whitechurchmontessori@gmail.com) addressed to Abi Acheson

If you have difficulty with submitting a complaint in writing, please contact us by phone and we can support you with making the complaint.

Please include the following information when making a complaint to the Registered Provider:

* Name, address, a daytime telephone number and an email address if applicable.
* Full details of the complaint including relevant dates and times.
* Names of those involved (including staff).
* Be clear about what remedy you are seeking (apology, explanation etc).
* Copies of any relevant documentation.
* If the complaint relates to COVID19 protocols, please outline what measures or controls the complaint refers to.
* We aim to respond to formal complaints within 3 working days. We would expect the matter to be fully investigated within 5 working days.

A full investigation into the complaint will be carried out which may involve:

* Interviews with all relevant individuals.
* Minute taking of all meetings.
* If the owner/manager believes the situation has child protection implications, then the Child Protection Officer and the local TUSLA Duty Social Worker will be contacted in line with our Child Protection Policy.
* Should the complaint be deemed to relate to a criminal offence then An Garda Síochána will be informed.
* A formal response to the complaint will be sent from the service to the person who made the complaint and copied to all members of relevant staff if appropriate. The response will include recommendations for dealing with the complaint and any necessary amendments to the service’s policies and/or procedures and/or risk management procedures, arising from the investigation.

**Stage 3**

* If at this stage the person is not satisfied with the outcome, then they may make a written request to go to the third stage which involves an independent mediator (any person not directly involved in the complaint).
* The independent mediator will consider all relevant material and reach a decision. Recommendations will be made where necessary. All persons involved will then be informed of the outcome in writing, normally with 5 working days of receipt of the appeals notification.

***Record keeping:***

* An accurate and detailed record of each complaint is kept on site for 2 years from the date the complaint has been dealt with.
* All information relating to any complaint will be treated as confidential and shared only on a need-to-know basis.
* All records of complaints will be kept in full compliance with the Child Care Act 1991 (Early Years Services) Regulations 2016, Data Protection Act 2018 and Freedom of Information Act 2014. The Complaints Records File will be available to those authorised to inspect it, including the TUSLA Early Years Inspector.

***TUSLA Complaint Supports:***

If a person making a complaint is dissatisfied with the service’s response or feels for any reason that they cannot bring the concern directly to the manager/registered provider, they can contact TUSLA’s Early Years Inspectorate.

TUSLA’s Early Years Inspectorate does not investigate individual concerns or complaints. All information received is assessed to determine if any concerns relating to the health and welfare of children exists within the remit of the 2016 Regulations. The information determines the focus and timing of TUSLA’s inspections.

Where TUSLA Early Years Inspectorate considers that there is a potential risk to the health, safety and welfare of children in an Early Years Service, TUSLA Early Years Inspectorate will take appropriate actions with the service provider to ensure that the risk is addressed.

To contact TUSLA regarding a concern about this or any early years service you can contact in the following ways:

* Email: early.yearsui@TUSLA.ie
* Call: 061 461700
* Or download a complaints form at: [www.TUSLA.ie/services/preschool-services/concerned-about-the-operation-of-a-eys/](http://www.tusla.ie/services/preschool-services/concerned-about-the-operation-of-a-eys/)

*Send it to:* TUSLA Early Years Inspectorate, Unsolicited Information Office, 2nd Floor, Estuary House, Henry Street, Limerick.

The TUSLA form can also be posted on request.

***Raising concerns relating to management of COVID-19***

We are fully committed to minimise the risk of spread of COVID-19 in the service. To that end, updated information communicated to parents/guardians has been provided and includes the following:

* Drop off and collection procedures.
* Revised policies of the service.
* Advising parents/guardians to phone the registered provider if their child becomes unwell and cannot attend the service.
* Information for parents that any child displaying symptoms such as a cough, fever or breathing difficulties should not attend the service.
* The action to be taken should a child or staff member be diagnosed or suspected of having COVID-19.
* The action to be taken should a child, or a staff member display symptoms whilst in the service.
* The action to be taken should a child or staff member come into contact with a person with COVID-19.

If you have a concern in relation to the new measures, procedures or policies introduced on the management of the risk of COVID-19 in the service, please contact Abi Acheson by telephone.

Should that discussion not alleviate your concerns, you should make a complaint following the above complaints procedure.

1. **POLICY ON STAFF ABSENCES (Covid-19)**

Whitechurch Montessori understands that from time-to-time staff will be absent from work and specific arrangements need to be put in place in line with current guidelines for Covid-19.

The health, safety and welfare of children and staff is of paramount importance in our setting. The following policy is supplemental to our main policy on Staff Absences and in place, so both the employer and the staff are aware of arrangements regarding the sickness absence procedures in relation to coronavirus (COVID-19). It is our priority to have arrangements in place to ensure that the service is adequately staffed at all times and that adult: child ratios are maintained. Staff members will be required to cooperate to facilitate contact tracing in such circumstances. Staff exhibiting symptoms of Covid-19 should not attend for work. Arrangements must be put in place to provide relief cover while staff are on sick leave due to COVID-19 or where they start to exhibit symptoms whilst in the setting and the procedures in place for when they are returning to work. [The HSPC Infection Prevention and Control guidance for settings providing childcare during the COVID-19 Pandemic](https://first5.gov.ie/userfiles/files/download/8be9f2c0575d621e.pdf) and the [Return to Work Safely Protocol](https://first5.gov.ie/userfiles/files/download/588eb944b2e5a65a.pdf)

In the event of staff absences, a member of “relief staff” is obtained to cover the days required. The same staff vetting procedures in place for full-time staff are applied to relief staff.

The adult: child ratio is maintained at all times.

1. **RECRUITMENT POLICY**

The management of this service is committed to ensuring that our recruitment procedures are fair, open, transparent and comply with relevant employment legislation. Personal information received is dealt with in the strictest confidence.

***Job Descriptions***

A detailed job description is prepared before each post is advertised and is available to all applicants.

Each job description includes:

* Job title
* Location of the position
* Who the employee will report to
* Overall purpose of the job
* Duties and responsibilities
* Conditions of employment
* Person specification.

The person specification outlines:

* Qualifications
* Skills
* Experience
* Other attributes required to carry out the job satisfactorily.

***Advertising process and application process:***

Vacancies will be advertised both internally and externally as deemed necessary to find the most suitable employee.

Applications for vacancies should be sent by email or post or as outlined in the advertisement.

CVs and applications will be assessed by the service manager and the candidates deemed suitable for interview based on the job criteria will be requested to attend an interview.

***Interviews:***

* Interview panels consist of two management staff. A list of interview questions based on the job description is prepared in advance of the interviews. The panel decides in advance who will cover each area.
* Each candidate is asked the same questions. At the end of each interview the candidate is invited to ask questions or to give any additional information.
* The position will be offered to the candidate deemed most suitable by both interviewers.

***Validation of references:***

* Following the interview process, 2 written references (including one from the most recent employer) must be provided. References will be checked by the interviewer verbally.

***Verification of training and identity:***

* Photo ID in the form of a current driving licence or passport and accredited training must be provided by the candidate to the service manager before a contract will be offered.

***Unsuccessful candidates:***

* Unsuccessful candidates will be contacted within two weeks of the interview date.

***Garda Vetting***

* Garda Vetting is sought for all employees, volunteers, students and any adults who may come in contact with children in our service – see further details in our policy below.

***Police Vetting***

* International police vetting is sought for any employee where the person has lived in another State for a period of longer than 6 consecutive months.

***Probation period:***

* Staff will be deemed to be on a probationary period for the first 6 months in line with the contract issued to each staff member.

***Record retention:***

* Details with respect to references, Garda Vetting and Policy Vetting are maintained for at least 5 years after the person starts working in the service. This includes current staff and staff who are no longer working in the service.

1. **GARDA VETTING POLICY**

**Nominate Garda vetting contact person:**

Our service nominated Garda vetting contact person is Abi Acheson.

This person’s role is to manage all Garda vetting applications submitted by our service.

**Automatic disqualification**

The service has a list of categories of convictions that would automatically disqualify them from a position within our service. This list is not exhaustive and in line with our negative disclosure procedure below any negative disclosures returned by the Bureau will be considered individually.

**Negative disclosure**

Should a negative disclosure be returned by the National Vetting Bureau, the following policy will apply:

1. A decision maker will be appointed to assess the suitability of the candidate in line with the negative disclosure returned. The automatic disqualification list will be consulted and if not part of this list, the decision maker will take account of the nature of the disclosure, the circumstances surrounding it (to the extent that they are known) and an assessment of the risk factors (i.e. seriousness of the offence, length of time since the offence occurred, whether the offence was a one-off or part of a history of offences, the references received).
2. The decision maker will request the applicant to provide further details regarding the incident(s) noted where required.
3. The decision maker will then make a recommendation on whether or not the applicant should be appointed.
4. If appointment is approved this means the decision maker is confident that the applicant is able to work within our service. The normal recruitment process will apply from this point.
5. If the recommendation is “restricted appointed”, it means the decision maker is advising the candidate is suitable to work but should avoid any areas where there may be an opportunity to re-offend.
6. If the recommendation is “appointment denied” the applicant is deemed not suitable for the role and the applicant should be informed of this in writing.
7. Throughout this process, the applicant will be kept informed, and all information will be kept confidential.

**Commitment to fairness**

Our decision makers are committed to behaving fairly in all cases.

1. **STAFF TRAINING POLICY**

The responsibility of providing induction training, supervision and performing training needs analysis rests with management. Whitechurch Montessori is committed to the on-going training and development of all staff. Continued professional development is important for both the quality of the service and staff job satisfaction.

It is recognised that good communication/training will be essential to minimise risk, including risk of COVID-19 in our service. This policy should be read in conjunction with the main policy on staff training in line with COVID-19  [the HSPC Infection Prevention and Control guidance for services providing childcare during the COVID-19 Pandemic](https://first5.gov.ie/userfiles/files/download/8be9f2c0575d621e.pdf) and the [Return to Work Safely Protocol](https://first5.gov.ie/userfiles/files/download/588eb944b2e5a65a.pdf).

**Procedures**

* Every staff member (including unpaid workers) will receive information and training upon their return to the service for managing COVID-19, including:
* All policies of the service, including infection control policy, risk management policy, incident plan and all policies that have been changed and updated upon reopening.
* Correct procedures for handwashing.
* Revised drop off and collection procedures.
* Revised procedures for service up a play environment.
* Revised procedures for cleaning.
* Health and Safety Authority return to work protocol.
* The role of the lead worker representative (The appointed Lead Worker Representative will also receive specific training in relation to their role).
* A signed record of all this training will be maintained together with other training records.
* In line with the service’s supervision policy all staff will have regular meetings with their supervisor to identify and address their training needs in relation to management of Covid-19 in the service.
* The management team will undertake a training needs analysis to identify gaps that need to be filled in respect of training related to Covid-19. This analysis will be reviewed on a regular basis, to establish what type of training is required.
* Both manager and staff will carry out regular support and supervision meetings where any issues relating to the management of Covid-19 arising in the workplace can be addressed in a timely and supportive manner. Staff will be encouraged to put forward new ideas, make suggestions for changes or to request additional training to assist them in managing the risks of Covid-19 in Whitechurch Montessori.

Staff are also encouraged to discuss any concerns in relation to training for COVID-19

***Induction training for new staff members:***

All newly appointed staff/students/volunteers are provided with the information they need to settle into the job which includes providing them with a copy of the staff policy booklet which they are required to read to become familiar with the policies in place in this service.

The purpose of the induction process in place is to:

* Clarify the staff member’s roles and responsibilities including their requirements to manage and update records.
* Introduce them to the children, families and colleagues that they will be working with.
* Make them aware of specific needs relating to any child that will be in their care (i.e., individual care plans, allergies etc.).
* Ensure they are aware of the service’s policies and procedures including the service’s statement of purpose and function, safety statement, child safeguarding statement and child protection policy.
* Ensure they are familiar with relevant legislative requirements and other documentation which is relevant to their role in this service including:
  + The Child Care Act 1991 (Early Years Services) Regulations 2016.
  + Children First Act (2015).
  + Our Duty to Care (2002).
  + Part 12 of the Child and Family Agency Act 2013 (No. 40 of 2013).
  + Aistear: The Early Childhood Curriculum Framework;
  + Síolta: The National Quality Framework for Early Childhood Education.
* Explain the curriculum approach taken in the service and their role in planning, implementing and evaluating children’s learning experiences.

Staff must sign to acknowledge that they agree to adhere to the policies and procedures in place.

***Ongoing training:***

* Staff will have access to ongoing training to keep them up to date with developments relevant to their role and to further develop their childcare and education skills. External training and attendance at conferences/workshops/seminars is encouraged and supported.
* Where staff are required to attend training deemed relevant and required by the service management, the cost will be covered by the service.

***Supervision of students:***

* Students who work with the children in this service are supervised at all times by a qualified member of staff. Staff who are adequately qualified support and supervise the students in order to assist them in carrying out their duties to promote and protect the wellbeing, learning and development of the children.

***Training requirements:***

* A training needs analysis is carried out and reviewed on a regular basis, to establish what type of training is required, and if it is relevant to the work, the staff and the service.

***Records:***

* Training records for all staff members will be maintained in line with our data retention policy.

1. **SUPERVISION POLICY**

Employees are supported in this service in relation to their work practices in line with this policy.

The records will be kept in the employee’s personnel file and maintained in line with good practice and legislation requirements.

Meetings will be held on a monthly basis and informally as required and will consider specific areas of work, any issues emerging, training needs and personal development.

1. **CODE OF BEHAVIOUR**

* All staff in our service show respect and understanding for the rights, safety and welfare of the children in our care.
* All employees and volunteers of this service are required to review, understand and agree to our service policies and practices as part of their induction.
* Parents are advised of our policies and practices as part of our parents' handbook.
* We have appointed a Designated Liaison Person whose role is to deal with any complaints or issues which concern the safety or welfare of any child. This person is appropriately trained to effectively carry out this role.
* Our service has a strict anti-bullying policy. We will not tolerate any bullying behavior by children/young people or adults and will deal with any incidents immediately. If bullying amounts to any form of abuse, it will be dealt with in line with our allegations against an employee/volunteer as set out in our child protection policy.
* We have a complaints procedure in place.

# **HEALTH, WELFARE AND DEVELOPMENT POLICIES**

1. **MANAGING BEHAVIOR POLICY**

**Supporting Positive Behavior**

* A key element of supporting positive behavior in our service is teachers developing a relationship with each child to know what the child enjoys and some of the situations they find difficult. Each teacher will also develop a relationship with the child’s family to ensure that if what the child enjoys or finds difficult changes during the year that the parents feel comfortable approaching the teacher and informing them.
* Staff will at all times be role models in how they play, speak and interact with children.
* Staff will always use a calm tone of voice, use language to help children understand positive decisions, and go to the child’s eye level when explaining feelings.
* Rules in the classroom will be clear, age appropriate and simple.
* Children who are upset will always be comforted by staff.
* Role play activities will be used to encourage children to practice positive behavior strategies.
* Outdoor play will give children the opportunity to run and explore.
* No activity will involve children having to sit for long periods of time and children will always have the choice to move to a different activity if the current activity does not interest them.
* Play areas will be laid out in a way that supports children’s natural curiosity which will allow them to develop their interests and become engrossed in their play.

**Anticipating inappropriate behavior**

* As mentioned above, a key element of supporting positive behavior in our service is teachers developing a relationship with each child to know what the child enjoys and some of the situations they find difficult. This helps each teacher to anticipate inappropriate behavior and in so far as possible help the child avoid triggers. Documented observations on each child will also help the teacher develop an understanding of what the child likes and dislikes.

**Strategies for Supporting Children**

* While we recognize that all behavior exhibited by children has some meaning to the child, at times this behavior may pose a danger to the child or other children.
* Minor behavior issues (such as children fighting over a toy) will result in staff adhering to the following steps:
  + ***Calmly approach the situation*** – get down to the child’s eye level and try to put yourself in the child’s shoes.
  + ***Acknowledge feelings*** – help the child/children to explain how they are feeling as often children don’t have the language to explain their feelings which can lead to more frustration.
  + ***Remain neutral*** – give each child the opportunity to tell their side of the story. Be patient as children can often take some time to explain their side.
  + ***Acknowledge the issue*** – after listening to each side simply describe the problem so that the children can understand both sides.
  + ***Together come up with a solution (or for younger children simply suggest one)*** – for older children this will also encourage children to learn the art of compromising.
  + ***Follow up and ensure the solution is implemented*** – ensure the children adhere to what is agreed as this will give them confidence in the process for any future conflicts.

**Managing moderate behavior issues**

Moderate behaviour issues occur when inappropriate behaviour becomes more of a regular occurrence.

The following plan will be put in place for moderate behaviour issues:

* Having identified a moderate behavior issue staff will observe the child to identify any triggers of the behavior.
* When inappropriate behavior occurs the steps above will be used to resolve the issue.
* The matter will be discussed with the child’s parent/guardian.

**Managing challenging behavior issues**

* In the event of a child’s behavior being considered dangerous to themselves or others a staff member will remove the child from the room where necessary in order to protect all using the service. The child will be given adequate time to calm down and a staff member will discuss the behavior with the child calmly.
* The incident will be recorded by the relevant teacher and discussed with the child’s parent/guardian.
* If a child’s behavior is recurring or becomes severely challenging the service will implement the following strategies:
  + The child’s teachers will hold a meeting with the premises manager to discuss the behavior and develop a plan to help the child overcome the issues.
  + The teachers of the child will continue to observe the child to try to establish a trigger of the behavior. Observations will be discussed with the parent/guardian of the child.
  + Any behavior plan will be developed in collaboration with the parent/guardian of the child.
  + Parent/guardians will be supported if it is necessary to contact any relevant external professionals.
  + If the behavior is a child protection concern the Child Protection Policy will be implemented.
  + All conversations and information gathered are highly confidential and will be stored in line with our confidentiality policy.
  + Judgment will be used in every situation to ensure the plan is in the best interest of the child.

**The following practices are prohibited:**

* Physical or corporal punishment.
* Practices that are exploitative, intimidating, disrespectful, physically or emotionally harmful.
* The use of time out or “bold chairs”.

1. **INCLUSION POLICY**

Inclusive practice is actively promoted in our service and all children are welcome to attend our service regardless of need, ability, background, culture, gender, religion or economic circumstances. We promote positive attitudes to both the similarities and differences in each other. We actively engage with children, parents and other organisations as required. Our policy has been developed with reference to the *Diversity, Equality and Inclusion Charter and Guidelines for Early Childhood Care and Education 2016* issued by the DCYA.

*Admissions*

* In order to provide an open and accessible service for all children and families, when places are available admissions are accepted on a first come first served basis where the child is eligible to attend based on the age profiles set for each classroom. Every child who meets the age criteria, regardless of religious affiliation, political background, race, linguistic needs, culture or disability has access to this service.

*Equal opportunities procedures*

* A range of activities is chosen to reflect various differences in cultures, gender and ability.
* We regularly check out books, posters and other materials to ensure that they challenge stereotyping and that they positively and accurately reflect cultural and racial diversity and differences in ability.
* Special dietary needs of children and adults are catered for where possible.
* We will challenge any statement or behaviour by anyone in the service, which are racist, or sexist or which reinforce stereotypes, or which are in any other way derogatory to an individual.

*Valuing Diversity in Families*

* Staff regularly engage with parents to ensure they work together in planning for their child’s learning and development.
* Parents and staff communicate daily, and more formal meetings are scheduled where required.
* Parents are encouraged to provide information or resources illustrating aspects of their culture, lives or community in order to educate staff and enable them to provide an inclusive service.

*Accessibility, Flexibility and the AIM programme*

* We utilise the AIM programme to meet the needs of children and recognise that not all children with disabilities will require additional support.
* We differentiate activities for children who have additional needs to allow for full participation and integration.
* We understand that the needs of each family and child can vary and will therefore respond to individual needs whenever possible.

*Representation and Participation*

* The curriculum in place as well as activities engaged in, and books read on the premises will be used to reflect the diversity of the children in the service.
* Staff will actively discourage stereotyping of gender, culture, background or ability by facilitating non stereotypical play, and through the use of non-stereotypical resources and images.

*Staff*

* In addition to inclusion with respect to the children, the inclusion policy also forms an important aspect of the recruitment of staff. Applicants will not be excluded from being considered for a position based on their need, background, culture, religion, gender or economic circumstances.
* Positions will be offered based on competency, qualifications and enthusiasm for the position. Upon commencement of employment, staff will be given a period of induction to the service. All staff will be made aware of inclusive practice within our service and its importance.
* Where possible, staff will attend training pertaining to inclusion, for example, behaviour management, equality and diversity, language development or special needs.

1. **POLICY ON FOOD AND HEALTHY EATING**

We believe that good nutrition in the early years helps to safeguard children’s well-being throughout their lives.

*General:*

* A refrigerator located in the kitchen will be used for the children’s lunch where required. **Parents are asked to label their child’s lunch box if their food contains meat/dairy/refrigerator products**. Perishable items should be in a ziplock bag with the child's name on it, this will be stored in a refrigerator until snack time.
* Drinking water is available throughout the day in their own drinks bottle which is left at the setting.
* Staff will sit with children while they eat and encourage good eating habits. Children are supervised when eating and drinking.
* To minimise choking hazards, no popcorn should be sent as a snack and all fruit and vegetables must be quartered or halved. Parents are advised to supply a healthy packed lunch for their child.
* Parents will be advised if their child is not eating well.

*Vitamin D:* Children will be encouraged to play outside every day, weather permitting, to ensure they receive sunlight which helps their bodies to make vitamin D.

*Children with specific allergies:*

* When a child attends our service with additional allergies, a notice is sent to all parents of children attending the class in which the child with allergies attends outlining the allergies the child has and requesting their cooperation with minimising the risk through preventing their own children from bringing foods to the classroom which may cause a reaction where possible.
* When providing food to children, great care is taken to ensure no allergic food type will come into contact with other foods.
* In the event of severe allergic reactions, the use of an injectable adrenaline aka Epi-pen/Anapen/Jext may be required.Children who are prescribed injectable adrenaline must provide the service with a pen.
* Staff are trained in their use and what to do in the event of anaphylactic shock. See our accident and incident policy and our critical incident response plan.

1. **POLICY ON OUTDOOR PLAY**

We recognise the importance of outdoor play for all children. Outdoor play gives children the ability to explore nature and enjoy physical exercise in a safe secure environment.

Weather permitting, outdoor play will form part of the daily schedule.

Children will wear suitable clothing outside depending on the weather (ie hats and sunscreen in summer, and coats/hats in winter). Teachers will accompany children to and from the play area and supervision will be provided at all times. Appropriate staff ratios are maintained in the play area at all times.

Children are given the opportunity to choose what they are interested in and to take ownership of their learning in the outdoor area. The opportunities presented are appropriately challenging and risk-taking in play is considered in planning.

The outdoor area will be visibly checked to ensure it is free of hazards prior to every outdoor play session by a member of staff. The outdoor area will be well maintained, and any equipment deemed to pose a risk to children (e.g., due to being damaged) will be removed and replaced.

* The route to and from the outdoor area is checked daily to ensure there are no hazards. The boundary of the outdoor area is secure to ensure that no child can leave the area without supervision and no adult can enter the premises without permission.
* Time spent outdoors should be maximised where possible.
* All staff and children must wash their hands on re-entering the premises after outdoor play.

1. **SETTLING-IN AND TRANSITION POLICY**

Every effort is made at our service to ensure that the settling in period is as easy and pleasant as possible for the children and their parents/guardians. We recognise that this can be an emotional time for both the child and parents/guardians and all staff at our service will be patient throughout this period.

This policy has been updated in line with current guidance the HSPC Infection Prevention an Control guidance for services providing childcare during the COVID-19 Pandemic, the DCYA’s Return to Work Safety Protocol and Tusla’s Childrens Service Regulations Guidance Document for Early Years Services COVID-19.

**Settling in procedures:**

* Before starting at our service parents/guardians will be invited to a coffee morning with their child. They will be given general information pack etc.
* While parents/guardians are encouraged to stay with their child until they feel comfortable in their new surroundings, we would ask parents to leave once their child is comfortable to prevent any upset to other children.
* Activities during the settling in period and in general will not be mandatory and children can participate as they wish and when they feel comfortable to.

**Within the service settling:**

* Our service will follow a flexible but predictable daily routine which will help the child to settle and become familiar with the routine and become comfortable in their surroundings. Children settle into preschool in lots of different ways. Some children will confidently move into their new pre-school as soon as they come in. Other children may be nervous and anxious about leaving their parent. Most children will be somewhere in between. Please try not to worry if your child experiences difficulties – it is a very normal part of a child’s development to be anxious, nervous or angry about starting Montessori/preschool. We also recognise that many parents will find this a difficult and sometimes upsetting process. We hope that we can use our experience to support you and your child in whatever way suits you. Please remember that we require all parents and carers to help their children settle in. In our experience, all children benefit greatly when the pre-school works closely with the family on settling in.
* Families are welcomed to share information about their child’s interests and experiences outside of the setting.
* Families are included in decision making about their child’s day at the setting.
* Informal and formal meetings between families and Staff can be arranged to discuss children’s learning and development, and to express any concerns that may arise at home or at the setting.
* When families from diverse cultural and linguistic backgrounds are enrolled at the setting, the manager will make every effort to provide translations of policies and procedures.
* Staff participate in a range of professional development relating to effective communication and relationships with families.
* Any family involvement is welcome and appreciated. We encourage families to get involved in the curriculum and share their knowledge and/or skills where appropriate. Families also have the option of not being involved (beyond a minimum level of communication with staff each day) if that is their preference.
* Staff create a welcoming environment where the diversity of families and communities, and the aspirations they hold for their children, are respected.
* Family photos and other aspects of children’s home life are incorporated into the environment and the curriculum.
* Staff will ensure that all transitions and progressions within the setting adhere to the settling in procedure.
* Links are made with the local primary schools to ensure smooth transitions for all children.

1. **POLICY ON THE USE OF INTERNET, PHOTOGRAPHIC AND RECORDING DEVICES**

**Use of photographs:**

Photographs and cameras may be used in our service for the following:

* Assessment, planning and recording.
* Observation tools.
* Occasion cards (such as group Christmas cards, graduations cards etc.).

Parents must provide consent for the use of photographic and recording devices. This consent will be requested on the child’s record form. Images will not be used for any purpose other than those agreed.

A photograph of a child will not be taken if the child objects to having their photo taken.

Should the use of a photograph, video or sample of a child’s work be required to be displayed outside our service (e.g. research, newspaper article etc.), we will seek parental permission in advance for this to happen.

**Storage of photographs/videos:**

* Electronic photographs and/or videos will not be stored for extended periods of time. If they are no longer required, they will be securely erased.
* Physical photographs printed by our service or provided by parents will be disposed of as confidential waste should the parent not wish to have the photo returned to them.

**Email and internet usage:**

* Children will not have access to email or internet access while on the service premises.

**Social networking site and social media tools:**

* No digital imagery, photos or videos of children or families will be published on social media sites under any circumstances.
* Employees are not permitted to be “friends” with or engaged with parents of children attending the service.
* Staff are advised to be mindful of their association with the service when commenting on blogs or in public forums.

# **CHILD SAFEGUARDING AND PROTECTION POLICIES**

1. **CHILD SAFEGUARDING STATEMENT**

**Our commitment to safeguard children from harm:**

We are committed to safeguarding the children in our care and to provide a safe environment in which they can learn, play and develop. The welfare of all children in our service is paramount.

We will commit to upholding each child’s right to be protected from harm and kept safe, listened to, and heard.

This policy has been developed with reference to Children First: National Guidance for the Protection and Welfare of Children 2017, the TUSLA Children First – Child Safeguarding Guide 2017, and the Children First Act 2015.

As with all policies contained within this booklet, this policy declaration applies to all staff, volunteers, members and students on work placement in our service.

Our appointed Designated Liaison Person is Abi Acheson

The deputy Designated Liaison Person is Melissa Potter

**Risk assessment:**

In accordance with the Children First Act 2015, our service has carried out an assessment of any potential harm to a child while attending the service or participating in service activities. This assessment is available on request.

**Child safeguarding policies and procedures:**

* + - We have appointed a designated liaison person and a deputy designated liaison person.
    - We have a child protection and welfare reporting policy in place (see our **Child Protection Policy –** see below), which includes:
      * our policy for dealing with allegations of abuse or neglect against employees.
      * our procedure for managing child protection records.
      * our confidentiality policy with respect to the safeguarding of children; and
      * relevant aspects of our recruitment policy with respect to child protection.
    - We have a **recruitment policy** and **garda vetting policy** (*see policies above*) in place.
    - We have a code of behaviour in place (*see above).*
    - All staff have completed the TUSLA eLearning module – *Introduction to Children First* and relevant staff have attended Always Children First Child Protection Training.
    - As part of our induction policy, staff are required to review, understand and agree to all policies included in this booklet, including this safeguarding statement.
    - We have the following other relevant policies in place:
      * **Complaints policy** (see above)
      * **Outings policy** (see below)
      * **Policy on accidents and incidents** (see below)

1. **CHILD PROTECTION POLICY**

**Overview of policy:**

* We ensure that all employees, students and volunteers at our service are aware of and familiar with our services child protection policy by sharing the policy with staff when they first join and requiring a statement of acknowledgment that they have read and understood the policy.
* We have a Designated Liaison Person who acts as a liaison with outside agencies and a resource person to any employee, student or volunteer who has a child protection concern. The Designated Liaison Person is responsible for reporting allegations or suspicions to the Child and Family Agency, TUSLA or the Gardaí.
* Our service has put in place a standard reporting procedure for dealing with disclosures, concerns or allegations of child abuse which is outlined below.

**Designated liaison person and deputy liaison person:**

Our appointed Designated Liaison Person is Abi Acheson

The deputy Designated Liaison Person is Melissa Potter

**Role of the Designated Liaison Person**

The Designated Liaison Person (“DLP”) in our service is responsible for ensuring that the child protection and welfare policy is promoted and implemented.

The duties and role of the DLP include:

* To be familiar with “Children First”, National Guidance for the Protection and Welfare of Children and our child protection policy. They are also responsible for the implementation and monitoring of the child protection and welfare policy.
* The DLP provides support to staff members who are dealing with/have dealt with a child protection concern or disclosure.
* To receive reports of alleged/suspected or actual child abuse and act on these in accordance with the guidelines.
* To build a working relationship with the Child and family Agency TUSLA, An Garda Síochána and other agencies, as appropriate.
* To keep up to date and undertake relevant training on child protection policy and practice, in order to ensure the relevance and appropriateness of the services’ policy and procedures in this area.
* To ensure that systems are in place for recording and retaining all relevant documentation in relation to child protection issues.

**Reporting procedure for dealing with disclosures, concerns or allegations of child abuse:**

* If an employee, student or volunteer has concerns about a child or has received a disclosure of child abuse then the DLP should be informed immediately (refer to section “How to handle a report of abuse”).
* Where the DLP considers that the concern meets the reasonable grounds for the criteria outlined below then TUSLA must be informed immediately.
* If an employee, student or volunteer feels that leaving the child in the situation would expose them to harm or risk of harm then the child should not be left in that situation pending an investigation by TUSLA. If TUSLA cannot be contacted and the event is an emergency, then the Gardaí should be contacted immediately.
* If the DLP is uncertain then they should contact TUSLA for informal advice relating to the allegation, concern or disclosure.
* The DLP will arrange a meeting with the parents to inform them that a report has been made to TUSLA unless to do so would be likely to endanger the child.
* Should the service decide not to report a concern raised to TUSLA or the Gardaí then the employee, student or volunteer should be given a clear written statement of the reasons why the childcare service is not reporting the concern. The employee, student or volunteer, if they remain concerned about the situation, are free as individuals to consult with, or report to, TUSLA or the Gardaí. The provisions of the Protections for Persons Reporting Child Abuse Act 1998 (revised 1 October 2015) apply once they communicate ‘reasonably and in good faith’.

**Reasonable grounds for a child protection or welfare concern (in line with** [**www.TUSLA.ie**](http://www.tusla.ie)**) include:**

* Evidence, for example an injury or behavior, that is consistent with abuse and is unlikely to have been caused in any other way.
* Any concern about possible sexual abuse.
* Consistent signs that a child is suffering from emotional or physical neglect.
* A child saying or indicating by other means that he or she has been abused.
* Admission or indication by an adult or a child of an alleged abuse they committed.

**How to Handle a Report of Abuse:**

If a child discloses an incident of abuse, then this must be dealt with sensitively and professionally by the staff member. The staff member should:

* Listen carefully and take the child’s report seriously.
* Always react calmly.
* Reassure them that they have done the right thing by mentioning it to you.
* Never promise to keep anything a secret.
* Ask clarifying questions only (i.e. no leading questions) as it is important it is a disclosure from the child and not an interview.
* Repeat back what the child said so that you make sure what you have heard is correct and understood.
* Do not express any opinions about the alleged abuser.
* Record the disclosure in as much detail as possible and sign and date the record.
* Alert the DLP immediately and treat all information with respect to the disclosure confidentially. The information should only be shared on a ‘need to know’ basis which means sharing information with persons who have a need to know in order to safeguard a child/young person and is not a breach of confidentiality and the number of people that need to be informed should be kept to a minimum.

**Protections for Persons Reporting Child Abuse Act, 1998 (revised 1 October 2015):**

* We wish to draw the attention of the staff and volunteers that the Act ‘Protection for Persons Reporting Child Abuse Act, 1998’ provides immunity from civil liability to persons who report child abuse “reasonably and in good faith” to the HSE or An Garda Síochána. Section 3(1) of the Act states:

“A person who, apart from this section, would be so liable shall not be liable in damages in respect of the communication, whether in writing or otherwise, by him or her to an appropriate person of his or her opinion that— a child has been or is being assaulted, ill-treated, neglected or sexually abused, or a child’s health, development or welfare has been or is being avoidably impaired or neglected, unless it is proved that he or she has not acted reasonably and in good faith in forming that opinion and communicating it to the appropriate person”. This protection applies to childcare services and to individuals.

**Confidentiality**

* In matters of child abuse, employees and volunteers in our service will never promise to keep secret any information which is divulged to them by a child. The employee or volunteer will explain to the child that the information cannot be kept secret, but the information will only be told to those who need to be told (i.e. in the first instance the Designated Liaison Person).
* The principle of confidentiality will apply, and information will only be shared on a need-to-know basis. The Designated Liaison Person will consult with any employee who is in doubt as to whether a report should be made.

**Record Keeping**

* We will ensure that all data in relation to child protection records will be stored in a safe and confidential manner in a secure locked cabinet. For information on our processing of personal and sensitive data and the rights of the data subject please see our data protection statement.

**Child protection and recruitment**

* In line with our recruitment policy above, we will not employ, contract or involve as a volunteer, any person to work with children or young adults who has a criminal conviction for violent crime, sexual crime, drugs related offences, or any other offences deemed inappropriate in relation to work with children.
* Garda vetting will be undertaken for all staff. Police vetting will also be undertaken where applicable.

**Allegations Against an Employee/Volunteer**

* If an allegation is received with respect to an employee or volunteer, the DLP will notify the manager /owner immediately. If the allegation relates to the Manager/Owner, then the DLP will notify Tulsa immediately. The safety of the child is the first priority at our service.

With respect to allegations against employees or volunteers the following process will be followed:

* The DLP and Manager/Owner will work with each other and TUSLA and the Gardaí where required.
* If a formal report is made, then the employee will be notified that the allegation has been made and the nature of the allegation. At this stage the employee has the right to respond, and any response should be documented and retained. “Natural justice” will apply whereby a person is considered innocent until proven otherwise.
* While the allegation is being investigated the employee will be suspended with pay (where appropriate) or asked to work with increased supervision (where possible and appropriate).

# **SAFETY POLICIES**

1. **SAFETY STATEMENT**

Our service policy is to comply with the Safety, Health and Welfare at Work Act 2005, which sets out how the prevention of ill-health and accidents at work is to be achieved.

We have prepared this safety statement and the policies that follow to protect all children in our care, their parent(s)/guardians, staff who are employed by this service and all visitors to our service.

***Management structure and responsibilities:***

* The safety officer in our service is Abi Acheson.
* The safety officer is responsible for ensuring, so far as is reasonably practical, the health and safety of persons working, being cared for or visiting our service. In particular, they are responsible for:
* Ensuring the service has a safety statement relevant to our operations which complies with Section 20 of the Safety, Health and Welfare at Work Act.
* The safety statement is reviewed at annually and available for inspection upon request. A copy can also be provided if desired. Ensuring that all hazards are identified and risks controlled. A copy of the saftey statement will be displayed on the notice board in the classroom at all times.
* Ensuring that safety inspections/audits are carried out to monitor compliance with the Safety Statement and legal requirements and to ensure appropriate follow-up action is taken.
* Investigating all accidents/incidents which occur to identify the root cause and what can be done to prevent this type of accident/incident re-occurring.
* Ensuring that there are evacuation procedures in place in the event of a fire.
* Ensuring that there are adequate First Aid personnel available.
* Ensuring that staff are appropriately trained to carry out their duties safety and to ensure staff attend designated training courses where appropriate.
* Ensuring that children are supervised at all times.
* Based on risk assessment, providing adequate and appropriate personal protective equipment for employees.

***Roles and responsibilities of all employees:***

* To read and understand the safety statement and related policies.
* Co-operate with management to enable them to comply with the statutory provisions.
* Take reasonable care of their own safety, health and welfare and that of all others.
* Make proper use of all equipment appropriate to your work.
* Make proper use of personal protective equipment and care of the same.
* Report immediately to the safety officer any defects in equipment, place of work, systems of work, which might endanger the safety, health, welfare of persons working, being cared for or visiting our service which he/she becomes aware of.
* Act in line with the code of behaviour at all times.
* Report any injury to the safety officer, which occurs at work even if the injury does not stop him/her from working.
* Suggest safer methods of work.

***Welfare arrangements:***

* *Toilet facilities –* adequate toilet facilities for both staff and children are available in our service.
* *Eating facilities –* our policy on food and healthy eating and our infection control policy provides details on the food services available in our service and the safety and hygiene practices followed.
* *Drinking water –* fresh drinking water is available in all classrooms daily.

***Safety measures and policies in place:***

* In all classrooms and public areas we display relevant emergency telephone numbers, the names of our occupational first aiders and the location of the fully stocked first aid boxes on the premises.

Relevant information contained in this policy booklet:

| Health and Safety policy | Policy number 19 |
| --- | --- |
| Risk Management policy | Policy number 20 |
| Security and Critical Incident policy | Policy number 24 |
| Fire safety policy | Policy number 23 |
| Policy on Accidents and Incidents | Policy number 24 |
| Use of personal protective equipment (i.e. gloves, aprons etc). | See the use of protective clothing section of the Infection Control policy number 22. |

Other relevant items available separate to this policy booklet:

| Risk assessment schedule and results of our risk assessment | Available on request |
| --- | --- |
| Training records | Available on request |

***Consultation with staff and parents:***

* We are committed to engaging with staff and parent(s)/guardian(s) to assess hazards and our proposed response in respect to the identified hazards. This safety statement and all related policies is available to all employees and parents with children in our service and to Inspectors of the Health & Safety Authority.

1. **HEALTH AND SAFETY POLICY**

We are committed to working in accordance with the provisions of the Safety, Health and Welfare at Work Act 2005 and other associated legislation. We are fulfilling our statutory obligations to manage and co-ordinate workplace safety and health and, as far as is reasonably practicable, commit ourselves to ensuring that this policy has been updated in line with current guidance the HSPC Infection Prevention and Control guidance for services providing childcare during the COVID-19 Pandemic, the DCYA’s Return to Work Safety Protocol and Tusla’s Children's Service Regulations Guidance Document for Early Years Services COVID-19.

Work activities are managed to ensure the safety, health and welfare of our employees.

* Our Safety Statement is maintained and updated.
* Written risk assessments are carried out and reviewed as required and brought to the attention of employees at least annually.
* Identified protective and preventative measures are implemented and maintained.
* Improper conduct likely to put an employee’s safety and health at risk is prevented.
* A safe place of work is provided that is adequately designed and maintained.
* A safe means of access and egress is provided.
* Safe plant and equipment are provided.
* Safe systems of work are provided.
* Risks to health from any article or substance are prevented.
* Appropriate information, instruction, training and supervision are provided.
* Where hazards cannot be eliminated suitable protective clothing and equipment are provided.
* Welfare facilities are provided and adequately maintained.
* Competent personnel who can advise and assist in securing the safety, health and welfare of our employees are employed when required.

1. **RISK MANAGEMENT POLICY**

Regular risk assessments are carried out to identify risks to any child attending the service, their parents while accessing the service, any adult working in the service or any visitors to the service in relation to:

* The governance of the service.
* The health, safety and welfare of each individual.
* The safety of the service; and
* The premises being safe, suitable and appropriate for care and education of children.

Each risk assessment details:

* the potential risk being assessed.
* the current controls in place to address the risk.
* any additional controls needed to reduce the risk; and
* those responsible for implementing the additional controls, where appropriate.

Risk assessments are carried out involving all relevant parties (including children and their parents/guardians if appropriate) and the risk assessment records show who is involved. Risk assessments are available to view at any time on request.

As part of our risk management policy we ensure that staff and parents are aware of all policies we have in place to ensure the safety of children at all times. This includes providing the policies in this booklet to parents when a child starts at the service.

The following policies are key to minimising risk at our service: (Please find in our parent’s booklet)

* Complaints Policy
* Confidentiality Policy
* Administration of medication
* Policy on Infection control
* Policy on managing behavior
* Child protection policy
* COVID-19 Policy
* Fire safety policy
* Inclusion policy
* Policy on accidents and incidents
* Policy on Authorisation to collect children
* Policy on Healthy Eating
* Policy on Outdoor play
* Policy on staff absences
* Outings policy
* Policy on the internet and photographic and recording devices
* Recruitment policy
* Settling-in policy
* Staff training policy
* Supervision policy
* Security and critical incident preparedness policy and related plans.

**Individual risk assessment**

* An individual risk assessment for a child will be developed where required and all relevant parties will be involved.

1. **POLICY ON ADMINISTRATION OF MEDICATION**

Whitechurch Montessori is committed to supporting each child’s health and well-being.

Whitechurch Montessoriwill work in consultation with parents/guardians to ensure the safe storage and administration of medication if:

* a child is taking prescribed medication, with the prior written permission of their parent(s) or guardian(s)
* a child is taking non-prescribed medication, with the prior written permission of their parent(s) or guardian(s)
* a child becomes unwell while attending the setting and, only with the prior written permission of their parent(s) or guardian(s) Parental Consent to Administer Medication Form’ (*available on request from the service manager* is given pain relief or temperature reducing medication and the service will implement where necessary the service measures for managing cases where symptoms of COVID-19 are exhibited.

In general, this service tries to avoid administering medicines wherever possible and to encourage parents/carers to ensure medicines are administered to children before arrival at the centre and after they have left.

**Prescribed medication:**

* All prescribed medications will be administered by authorised staff members only, as necessary and post receipt of a signed consent to administer medication form. All room leaders are deemed to be authorised staff members for this purpose.
* We will only accept medicines that have been prescribed by a doctor, dentist or nurse prescriber. The service reserves the right to contact a health care professional if staff/carers are unsure about administering medication to a child, even if the parent/carer has requested the medication to be administered.

**Management of medication:**

* All medication will be stored safely in **school cupboard** away from children’s reach and refrigerated if required. The storage of medications will be adhered to in line with the manufacturer’s instructions. The medication will be labelled with the child’s name and other details.
* All medication administered will be fully and accurately recorded.

**Medical emergencies including administration of anti-febrile medication and allergic reactions:**

* The critical incident plan will apply to all medical emergencies where applicable.

**Anti-febrile (temperature reducing) medication:**

**Owing to the COVID-19 Pandemic, children with fevers should not attend Whitechurch Montessori and if a child develops a fever whilst in our care, we will follow the procedure for suspected COVID-19 cases as outlined in our Infection Control Policy and will only administer anti-febrile medications upon medical advice to do so.**

* Whitechurch Montessori has a supply of anti-febrile medication (such as Paracetamol or Ibuprofen for Children) in liquid suspension form, in child-proof containers and with the appropriate measuring devices. These medications are stored in accordance with manufacturer’s instructions in a safe location that is not accessible to children.
* The date the medication is opened will be clearly labelled on the container.
* Medications with illegible labels or medications which have been opened over 6 months ago will be discarded.
* Medication in tablet form will never be administered to children under 5 years of age.
* Parents/guardians provide written consent on enrolment for anti-febrile medication to be given to their child in the event of a high temperature.
* Parents will be contacted by telephone before these medications are administered, to ensure that the correct time frame is adhered to between doses.
* If a child has a suspected temperature, their temperature will be taken using an infrared, non-contact thermometer. The child’s temperature will be recorded and if the body temperature of the child rises beyond a safe limit (38 degrees Celsius or higher), an anti-febrile medication will be administered by staff.
* The child’s record form will be checked before administration of anti-febrile medication to ensure that there is parental consent and there are no recorded allergies to anti-febrile medication for the child.
* There is a system in place to identify children who regularly require anti-febrile medication.

A healthcare professional such as a GP can write a standing order for a commonly used non-prescription medication that defines when the medication should be used for any child in the service. For example, “With parent’s/guardian’s consent, children who are older than four months of age may receive Calpol when their body temperature exceeds 38°C, (101°F), per the dose schedule and instructions provided by the manufacturer”. Medication that is on the premises is checked monthly, once opening, date of opening is written on the box.

**Emergency:**

**Recording of the administration of medication and the outcome:**

* Whether the medication was administered as a result of it being prescribed or in the event of an emergency (e.g., administration of antifebrile medication), the following records will be kept:
  + - Child’s name.
    - Dosage amount.
    - Dosage time.
    - Name of medication.
    - Whether the medication was prescribed or administered in the event of a deemed emergency.
    - The time of each call is the child’s parents/guardians and emergency contact person where applicable.

The above information will be held together with a copy of the parental consent to administer medication form where applicable (i.e. non-emergency situations).

These records will be kept for 2 years from the date on which the child stops attending the service in line with the Pre-School Service Regulation 16(2)(b).

**Individual care plans:**

* In respect of those children who have long-term medical needs such as chronic conditions (e.g., asthma, epilepsy), individual care plans will be developed and renewed monthly to ensure they are up to date and correctly reflect the needs of the child. Additional training will be arranged for staff where required in line with the child’s individual care plan.

1. **POLICY ON INFECTION CONTROL**

It is the priority of Whitechurch Montessori to protect all children attending our service and all persons working in our service from the transmission of infections. The health and well-being of all children, staff and visitors to our service is paramount and our aim is to prevent and manage any infection which may be present in the service. This policy is available and communicated to all parents, children and staff.

This policy has been updated in line with current guidance the HSPC Infection Prevention and Control guidance for services providing childcare during the COVID-19 Pandemic, the DCYA’s Return to Work Safety Protocol and Tusla’s Childrens Service Regulations Guidance Document for Early Years Services COVID-19.

* Following standard infection control precautions including hand washing at every opportunity.
* Requiring that all children that attend our service are immunised.
* Excluding any unwell staff member or child in line with our exclusion schedule.

**Rationale**

* Infection can lead to serious ill-health among children. Infection control procedures seek to reduce the risk of children getting sick in a service by ensuring good hygiene is followed and the risk of infection is minimised. This will be communicated with parents, so good hygiene and infection control practices will be carried over from the service to home and vice versa.

**Risk Assessments**

* Risk assessments will always be undertaken by staff to assess if activities, actions or environments post risks from an infection control standpoint to the children and staff of Whitechurch Montessori.

**Standard precautions:**

Staff apply standard precautions when they have contact with:

* + - Blood.
    - All body fluids, secretions (nasal secretions) and excretions (urine, faeces, vomit) except sweat, regardless of whether or not they contain visible blood.
    - Non-intact skin (broken skin, sores); and
    - Mucous membranes (eyes and mouth).

**Standard precautions are:**

* + - Handwashing and skin care
    - Use of protective clothing
    - Management of spillages, i.e., blood and other body fluids
    - Management of cuts, bites and needle-stick injuries
    - Coughing and sneezing etiquette
    - Environmental hygiene
    - Safe handling of laundry
    - Safe handling and disposal of waste
    - Food hygiene

1. **Hand washing and skin care**

* Whitechurch Montessori has a hand washing policy which all staff promote and model for children, after using the toilet, before eating/preparing food, after outdoor play, after wiping noses, waste disposal and mopping up spills.
* Staff must wash their hands, before preparing or serving food, before eating or drinking, after going to the toilet, assisting children going to the toilet, dealing with bodily fluids, cleaning procedures, caring for sick children, handling soiled clothing, dealing with waste and after removing disposable gloves.
* Hot (no greater than 43c) and cold running water, liquid anti-bacterial soap and paper towels are provided in both bathrooms. Children will be encouraged to wash their hands with warm water and liquid soap **under supervision**, **before** **eating**, after visiting the toilet and after outside play and activities. Clear guidance on handwashing is outlined for children and staff alike in our service.
* Staff will supervise and assist children to encourage effective handwashing, appropriate to their age.

**WASHING HANDS POLICY**

* Whitechurch Montessori aims to keep children happy and healthy by supporting the children to understand the importance of hand washing. This policy is underpinned by the Childcare (Preschool Services) Regulations 2016.
* Good hand hygiene is the most effective way of preventing transmission of Infection, and staff will support children in using the proper technique for hand washing.
* Children can avail of the hand washing facilities when they need, and they will be encouraged and supported to practice this new skill.
* Wash hand basins have hot and cold mixer taps that are thermostatically controlled to ensure that hot water is no hotter than 43° to avoid scalding and facilitate hygienic hand washing.
* Staff will encourage children to wash their hands after using the toilet, before eating any food and after playing outside.
* Guidelines on hand washing are displayed in the Service.
* These guidelines incorporate visual images that are appropriate for staff and children.
* Staff must wash their hands appropriately after the following;
  + Using the toilet or helping a child to use the toilet.
  + Playing, or handling items, in the playground – e.g., toys, sand, water
  + Handling secretions e.g., from a child’s nose or mouth, from sores or cuts, blood or body fluids (faeces, vomit, spit, pus and urine); • Handling or dealing with waste or rubbish.
  + The removal of disposable gloves and/or aprons;
  + Cleaning the Service;
  + Washing/handling of soiled clothes;
  + Coughing or sneezing;
  + When hands are dirty.
* Staff should ensure;
  + Hands are washed with warm water and liquid soap.
  + Cuts are covered with waterproof plasters.
  + Nails are clean and short and no jewellery.
  + Alcohol hand rubs are useful, but they will not kill germs that cause diarrhoea.
  + Liquid soap dispensers are utilised within the Service.
  + Hands are dried properly with paper towels.

1. **Use of protective clothing:**

Disposal gloves are available to staff at all times and required for the following activities: cleaning spills of blood and body fluids, Management of cuts, bites and needle-stick injuries.

1. **Management of spillages:**

* Spillages of blood, faeces, urine and vomit are cleaned immediately using disposable cloths and disposed of in a closed bin. Mops are never used for cleaning blood, urine, vomit or faeces.
* Children are kept away from any spillage until the area has been cleaned and disinfected.
* While due care and caution is important in handling potentially infectious fluids, fear of infection will never prevent First Aid being given.

The following procedure applies for spillages of body fluids:

* Put on disposable plastic aprons and gloves.
* Use absorbent disposable paper towels or kitchen towel roll to soak up the spillage.
* Clean the area using warm water and a general-purpose neutral detergent, use a disposal cloth.
* Apply a chlorine-based disinfectant (diluted to a concentration of 1000 ppm available chlorine) to the affected surface.
* Dry the surface thoroughly using disposable paper towels.
* Dispose of the surface thoroughly using disposable paper towels.
* Dispose of soiled/sodden paper towels, gloves, apron and cloths in a manner that prevents any other person coming in contact with these items e.g. bag separately prior to disposal into a general domestic waste bag.
* Change clothing that is soiled immediately.
* Wash and dry hands thoroughly.

The following procedure applies for spillages of blood spillages:

* Put on disposable plastic aprons and gloves.
* Use absorbent disposable paper towels or kitchen towel roll to soak up the spillage.
* Apply a chlorine-based disinfectant (diluted to a concentration of 1000 ppm available chlorine) to the affected surface. Leave for at least two minutes (check manufacturer’s instructions).
* Wash the area thoroughly with warm water and a general-purpose neutral detergent and dry using disposable paper towels.
* Dispose of the surface thoroughly using disposable paper towels.
* Dispose of soiled/sodden paper towels, gloves, apron and cloths in a manner that prevents any other person coming in contact with these items e.g., bag separately prior to disposal into a general domestic waste bag.
* Wash and dry hands thoroughly.
* Change clothing that is soiled immediately.

1. **Management of cuts, bites and needle-stick injuries:**

* Where a child has a cut, bite or needle-stick injury the staff member with first-aid training will be called upon depending on the severity of the injury.

The following procedure applies when dealing with cuts:

* When dealing with cuts the following general procedures will apply:

1. Put on disposable gloves.
2. Stop the bleeding by applying pressure to the wound with a dry clean absorbent dressing.
3. Place a clean dressing on the wound and refer the child for medical treatment if needed, e.g., stitches required or bleeding that cannot be controlled.
4. Once bleeding has stopped, dispose of the gloves safely immediately in a manner that prevents another person coming in contact with the blood, i.e. bag separately prior to disposing into a general domestic waste bag.
5. Wash and dry hands.

The following procedure applies when dealing with bites:

* If a child is bitten by another child, the bite will be cleaned with soap and water and no further action is needed if the bite does not break the skin.

If the bite by another child breaks the skin and bleeds, the following procedure will apply:

* + - Encourage the wound to bleed if not bleeding freely (apply pressure to the sides of the wound).
    - Wash the wound thoroughly with warm running water.
    - Cover it with waterproof dressing.
    - Record the incident in the accident book.
    - If the biter has blood in the mouth, they should swill it out with tap water.
    - Children who may have been exposed should be medically evaluated by a GP or in a hospital emergency department.

1. **Coughing and sneezing etiquette:**

* All staff will cover their mouths and nose with a tissue/or cough into elbow when coughing or sneezing. Children will be encouraged to do the same.
* Tissue boxes will be available in all classrooms for quick access for both staff and children for use when required.

*Environmental hygiene:*

General:

* + - Staff ensure that they observe any specified health and safety precautions.
    - Washing up is done thoroughly in hot water with detergent, using gloves. Where there has been an outbreak of infection, toys or been soiled with blood or body fluids then a chlorine-based disinfectant at a concentration of 1,000ppm available chlorine is used. Each item is rinsed and dried thoroughly in line with the manufacturer's instructions.
    - All chemicals are stored in a cool, dry, well-ventilated place. Children do not have access to the store of chemicals.
    - All cleaning equipment is stored clean and dry to prevent the growth of germs.
    - Any cleaning routine which poses a safety risk does take place when children are on the premises.

Frequency of cleaning:

* + - All areas are cleaned regularly. Classroom, bathroom and the kitchen are cleaned daily. Toys and equipment are cleaned as needed and periodically (Monthly). Cleaning is monitored and recorded after completion.
    - All toilets, surrounding walls and wash hand basins are cleaned and disinfected daily/or as required.
    - Dressing up clothes/imaginative play materials are washed after each day if used.
    - When not in use the sandpit (where available) is covered, and the water tray (where available) is emptied between sessions or daily.

Toileting of children:

* + - Children’s hands are washed and dried with disposable paper towels.

Safe handling of laundry:

* Where the child’s clothing is soiled, staff will use gloves when handling the clothing and place it in a sealed plastic bag. The sealed bag will then be provided to the parent/guardian at collection time.

Safe handling and disposal of waste:

* Where possible, waste is recycled.
* Foot operated pedal bins are available for staff to dispose of gloves, aprons and soiled dressings. External bins are stored away from the children’s access.
* Waste is removed from the building on a daily basis and all bins are maintained in good condition.

**Immunisations:**

* Parents/guardians are encouraged to ensure that their child is fully up to date with their immunisations and are required to inform the service if their child has not received any of the standard vaccinations.

**Sickness exclusion:**

**In general, parents/guardians are asked to keep their child or staff away from the service, FOR at least 48 hours or until they have seen their GP if any of the following are evident:**

* Any child displaying symptoms such as a cough, fever or breathing difficulties should not attend the service (COVID-19).
* Diarrhoea vomiting.
* A temperature of 101°F / 38°C or above.
* Eye discharge.
* Rash or skin disorder.
* Strep throat.
* An earache or a bad cough.

**When a person is ‘infectious’ it means they are able to pass their infection on to others. You’re usually no longer infectious 24 hours after starting a course of antibiotics, although this period can sometimes vary.**

* Specific exclusion periods are necessary, and are applied, for particular diagnosed illnesses as outlined in **Appendix 1**. Parents/guardians must inform the service of any known infectious illness in their child. This is of particular importance if the illness might affect others in the service, for example, if a child develops chickenpox or measles or other such contagious illnesses. Incidences of head lice are also brought to the attention of all parents/guardians immediately.

The department of public health will be contacted in the following circumstances:

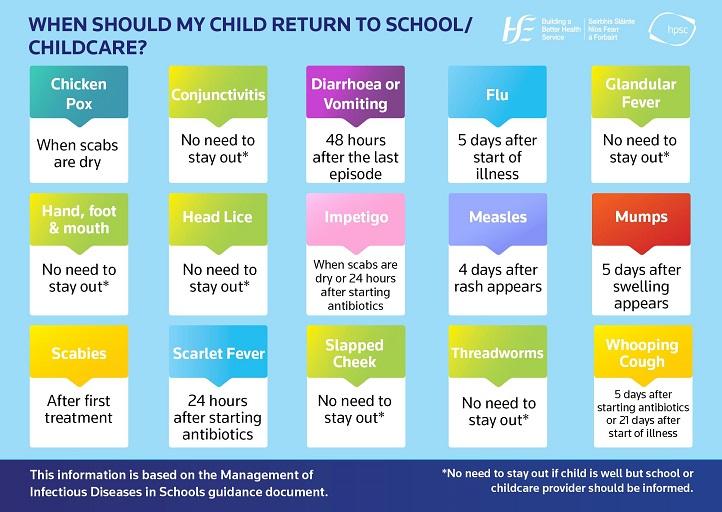
* + - If there is a concern about a communicable disease or infection or advice is needed on controlling them.
    - If there is a concern that the number of children who have developed similar symptoms is higher than normal.
    - If there is an outbreak of an infectious disease (within the meaning of the Infectious Disease Regulations 1981(SI No 390 of 1981) and amendments – See: [www.hpsc.ie/NotifiableDiseases/ListofNotifiableDiseases/](http://www.hpsc.ie/NotifiableDiseases/ListofNotifiableDiseases/)) in the service.
    - To check whether to exclude a child or member of staff.

**Dealing with suspected COVID19 cases in Whitechurch Montessori:**

* If a child develops any symptoms of acute respiratory infection including cough, fever, or shortness of breath while in Whitechurch Montessori, a staff member will take the child to an allocated area for isolation.
* Parents/guardians will be called and asked to collect their child as soon as possible.
* A staff member will remain with the child at all times until parent/ guardian arrives. Due to the nature of COVID-19 physical distance will be needed to be retained as much as possible please, and the staff member will need to wear a facemask and gloves from our PPE.
* If a staff member develops symptoms of acute respiratory infection including cough, fever or shortness of breath while in Whitechurch Montessori. They will be asked to go home without delay and contact their GP by telephone. They will be located 2m away from others as much as possible. They will be asked to avoid touching people, surfaces and objects and be advised to cover their mouth and nose with disposable tissue when they cough or sneeze and put tissue in a disposable bag into a bin with a lid on it. They will be asked to wear a mask immediately.
* If there is an emergency, staff will call an ambulance and explain that the child or staff member is unwell with symptoms of COVID-19.
* Any rooms where children staff will need to be isolated and cleaned.

**Emergency:**

If a child becomes ill while in the service, the procedure as outlined in the policy on the administration of medication policy for medical emergencies will be followed.



1. ***COVID-19 Policy - During an outbreak.***

*Whitechurch Montessori is committed to providing a safe and healthy setting for all our children, families and staff. To ensure that, we have developed the following COVID-19 Setting Plan. All managers, supervisors and staff are responsible for the implementation of this plan with the commitment of parents and guardians. A combined effort will help contain the spread of the virus.*

***COVID-19 Setting Plan;***

* *Support at Risk/Vulnerable Workers: If an at risk or vulnerable worker cannot work from home and must be in the workplace, employers will make sure that they are preferentially supported to maintain a physical distance of 2 metres. It is recognised that, by its very nature, setting based childcare does not lend itself to remote working arrangements;*
* *Continue to monitor our COVID-19 response and amend this plan in consultation with worker representative (s)*
* *Update staff and parents/guardians on this plan*
* *Provide up to date information to our staff on the Public Health advice issued by the HSE and Gov.ie*
* *Display information on the signs and symptoms of COVID-19 and correct hand-washing techniques within the setting*
* *A lead worker representative will be appointed and trained a reporting system will be put in place*
* *A structured framework to be followed by management and worker representative (s) within the organisation to be put in place*
* *Inform all staff of essential hygiene and respiratory etiquette and physical distancing requirements • adapt the setting to facilitate physical distancing between adults*
* *All staff will attend an induction / familiarisation briefing (virtually where possible)*
* *Update our pre-existing infection control policy to establish a procedure to be followed in the event of someone showing symptoms of COVID-19 while in the setting*
* *Provide instructions for staff to follow if they develop signs and symptoms of COVID-19 during*
* *An isolation room/ area will be identified*
* *Intensify cleaning in line with government advice*
* *In circumstances where changes to workplace policies work patterns are required.*

***23. Environmental cleaning Note:COVID-19***

* *The service will be cleaned before it reopens.*
* *There will be a cleaning and Disinfection Checklist documentation put in place daily*

*Increase the frequency and extent of cleaning regimes and ensure that they include:*

* *Cleaning regularly touched objects and surfaces using a household cleaning product*
* *Paying particular attention to high-contact areas such as door handles, grab rails/ handrails in corridors/stairwells, plastic-coated or laminated worktops, desks, access touch pads, telephones/keyboards in offices, and toilets/taps/sanitary fittings*
* *Wearing rubber gloves when cleaning surfaces. Wash the gloves while still wearing them, then wash your hands after you take them off*
* *The service should be cleaned thoroughly throughout the morning at designated times. When employing dedicated cleaning staff, they should work outside service opening hours. When cleaning, the cleaning staff will wear gloves and aprons.*
* *Warm water and a general-purpose detergent (used according to the manufacturer's instructions) is adequate for general cleaning purposes.*
* *High contact areas such as tables, counters, door handles, switches and handrails should be cleaned frequently with disinfectants. If the surface is visibly dirty, household detergent and warm water should be used prior to disinfecting the surface. See www.hpsc.ie for updated details.*

***Waste management:***

* *All personal waste, including used tissues and all cleaning waste, should be placed in a plastic rubbish bag.*
* *The bag should be tied when it is almost full and then place it into a second bin bag and tied. Once the bag has been tied securely, it should be left somewhere safe.*
* *Foot-operated bins should be available in all rooms and accessible to staff and children.*

*In the event of a suspected case or confirmed case of COVID-19 occurring at the service, the following waste management system is recommended:*

* *There is a supply of refuse bags available for the double bagging and disposal of contaminated waste to be used only if a case of COVID-19 is suspected in the designated area for the storage of possible contaminated COVID-19 waste for 3 days must be available after which time it can be placed with normal waste.*

***Personal protective equipment (PPE):***

* *Strict attention to personal hygiene is important to reduce the spread of the virus. You must ensure that a supply of PPE is available and used when required by staff in the service.*
* *Staff should wear personal protective equipment which must include disposable single-use plastic aprons, and non-powdered, non-permeable gloves when there is a risk of coming into contact with body fluids*
* *Have an adequate supply of surgical masks available for anyone that develops symptoms of COVID-19 or if a staff member chooses to use one when caring for a sick child.*
* *While cleaning agents and PPE must be accessible to staff, safe storage of these items must be in place to avoid poisoning or injury to children.*

***Ventilation:***

* *Rooms must be kept well-ventilated by keeping windows open where possible at intervals throughout the day or by using effective mechanical ventilation.*

***Toys and play materials/activities:***

* *Toys that can be cleaned according to the instructions should not be used during this time*
* *Materials not in use should be removed from the room and used in rotation.(traffic light system is in use)*
* *The use of certain types of toys (e.g. soft toys, stuffed toys, play dough) needs to be considered carefully. If their use is considered important for the children it is important to avoid sharing of items between children in so far as is practical.*
* *Playdough should be replaced daily, and soft toys should be washed regularly.*

***Outdoor play and activities***

* *Time spent outdoors should be maximised where possible.*
* *Outings away from the service may be undertaken in accordance with public health guidance Where a service routinely utilises public space, the service can continue to do so following a review of any potential risks.*
* *All staff and children must wash their hands/sanatize on re-entering the premises after outdoor play.*

1. **FIRE SAFETY POLICY**

Our fire warden is Abi Acheson

An assembly point location has been identified.

* The location is the church Steps. Our designated routes out of the building are on display and available on request.

**Fire drill:**

* Fire drills will be carried out monthly to simulate fire conditions. The day and time will vary monthly to ensure that all children will be given the opportunity to experience a fire drill. Specific staff will be given advance warning to avoid a false call being made to the fire service:

The following Fire Drill Procedure will be carried out.

* The alarm will be set off manually or the smoke detectors will raise the alarm.
* The staff and children will make their way to the assembly point location.
* Staff will bring the child attendance record.
* The fire officer will collect the staff/guest sign in book.
* The fire officer will check each room to ensure no person is left in the building.
* At the assembly point all children and staff will be accounted for using the attendance records.
* A record of the fire drill will be maintained including the following details:
* The date of the drill.
* Time of the drill.
* The number of children/staff in attendance at the fire drill.
* The length of time it took to evacuate.
* Any deficiencies noted and actions to be taken as a result.

**Procedure in the event of a fire:**

* **Raise the alarm** – all staff members should be familiar with how to raise the alarm.
* **Call the fire brigade** – the fire brigade should be called in the event of a fire no matter how small the fire is.

The following clear information will need to be given:

* Name of the building.
* Address of the building.
* Eircode.
* Directions to the building.
* Type of fire situation (if available), for example, fire location, fire size, materials involved.
* **Evacuation procedure** – the evacuation procedure should be initiated **once** the alarm has been sounded.
* **Meet at the assembly point and perform a roll call procedure** – perform a roll call procedure at the assembly point to ensure all occupants are accounted for.
* **Fight the fire (where safe to do so)** – using the fire extinguisher or the fire blanket (where it is safe to do so), to control or extinguish a very small fire incident may be possible but this intervention should be secondary to the evacuation procedure and calling the fire brigade.
* **Assist the fire brigade**–when the fire brigade arrives give as much information as possible.
* **Perform file drills frequently** in line with the steps outlined above.

**Staff training:**

* A staff member is appointed as a Fire Warden each year and receives training from a registered provided.

**All** *staff are* aware of the procedures to be followed in the case of a fire in the service.

**All** staff will be familiar with the location of any firefighting equipment and trained in the use of such equipment.

**Fire safety equipment:**

* The fire safety equipment is checked annually by a competent service company. The records of the equipment check are kept for 5 years after they have been checked in line with legislation requirements.

**Record keeping:**

* The fire drill records will be maintained for 5 years after they have been created in line with legislation requirements.
* Records will be kept in the manager’s office and are available for inspection on request.

**Risk assessment:**

* We perform risk assessment procedures quarterly to identify any specific risks with respect to fire safety. This risk assessment includes an assessment of fire hazards and people at risk and identifies risks we need to evaluate, remove or reduce in response to our findings.

1. **POLICY ON ACCIDENTS AND INCIDENTS**

**Accident/incident prevention and risk management:**

* The service aims to minimise the risk of accidents and incidents by performing frequent risk management assessments throughout the premise to identify any potential hazards that could pose a risk to children. See our risk management policy for more information.

In addition to our risk management procedures, the following measures help to prevent accidents and injuries in our service:

* Children are properly supervised at all times.
* The service ensures adequate staff-ratios are maintained at all times.
* The staff have a clear understanding of each child’s age and staff of development; and
* Equipment and materials used in the service are appropriate for the children’s age and stage of development.

**When an accident/incident occurs, the following steps will be followed:**

* When an incident occurs the premises manager will be alerted and informed of the incident (i.e., a child has fallen, or a child has bitten another child).
* The First Aid Officer will be requested to administer treatment if required.
* The premises manager will call the doctor on call or an ambulance if necessary.
* The injured child will be supervised at all times.
* The emergency services will be provided with the child’s name, contact number and any known allergies and relevant medical records by the premises manager.
* The child’s parents/guardians will be contacted and informed of the incident.
* The remaining children in the service will be reassured and the accident will be explained to other parents if necessary.
* If a GP or ambulance is not required, then the First Aid Officer will treat the injury.
* An accident report form will be completed by the staff who witnessed the accident and the First Aid Officer if the accident is treated on the premises. The form will be read and signed by the manager and the child’s parent/guardians. This form will be stored in the child’s file in line with our confidentiality policy and stored for 2 years post the child attending our service.
* All accidents must be reported to the insurance company and TUSLA will be informed where required.
* A risk assessment will be completed post any accident/incident to identify if the accident or incident could have been avoided and what measures can be taken to reduce the likelihood of recurrence.

**General policies with respect to accidents and incidents:**

* The First Aid Box is stored in the kitchen on the wall with key at the side on a hook. The box will be fully equipped and easily identifiable.
* A First Aid Certificate will be held by at least one member of staff on the premises at all times.
* In the case of an emergency, child records will be accessible to all relevant staff.
* The service has an arrangement with the local surgery in case of an accident or sudden illness.

1. **POLICY ON AUTHORISATION TO COLLECT CHILDREN**

**Procedures for Drop Off at 9.00a.m.**

* Parents/guardians are asked to bring children to the front entrance each morning for drop-off. The child will be greeted by the room leader or assistant and their attendance will be recorded including their arrival time.
* It is a requirement that the child must be brought to the room and left with a staff member to ensure the child is adequately supervised at all times.
* **Drive slowly** at all times and respect the grounds. Please Park at the front of the church where possible. Please comply with the parish’s Eco-Congregation (Environmental) Policy that **car engines should not be left running within the church grounds.**

**Procedures for Collection at 12.00p.m.**

* Please collect your child from front door entrance
* The children will be brought out to parents/guardians on arrival.

**Collections for children exhibiting symptoms of COVID-19**

* Should a child at Whitechurch Montessori exhibit symptoms of COVID-19, their parents/guardians will be called and be asked to collect them immediately.
* If a parent/guardian cannot be reached and their provided phone their emergency contacts will be called and asked to collect the child.

**Authorisation to collect children:**

* Children may only be collected by the person(s) named on the child registration form. If an alternative named person is to collect the child, the parent/guardian must notify the staff in advance, and the use of a ‘password’ will be used.
* Exceptionally, if the situation should arise, whereby someone arrives to collect the child and no written authorisation has been obtained, the following steps will apply:
  + Staff will request the person to provide their name and the child’s parents, or emergency contact numbers will be contacted for verbal approval.
  + If the parents or emergency contacts cannot be contacted, the child will not be allowed to go with this person. This procedure is established to protect the child and their family.
* Should a parent/guardian arrive in a state deemed to be unfit by staff, the child will be retained on the premises and the Child Protection Policy procedures will apply.
* Where a parent/guardian is late, the parent/guardian will be contacted by staff to estimate their time of arrival and if they cannot be contacted the emergency contact(s) provided on the child’s record form will be contacted. A member of staff will supervise the child at all times until the parent/guardian or emergency contact picks the child up.

**Record keeping:**

* All records relating to the child’s record of attendance will be retained for 2 years following the date of departure from the service in line with legislative requirement.

1. **OUTINGS POLICY**

**Before the outing:**

A risk assessment will be undertaken before each outline including:

* A review of the staff required for the outing will take place to ensure that adequate staff levels will be in place for the day of the outing to adhere to ratio requirements.
* Ensuring there will be at least one member of staff with current First Aid training.
* Ensuring the service has adequate insurance required for the outing.
* Any children requiring additional needs will be catered for.
* Details of the outing will be shared with parents and guardians in advance of the outing date and signed permission will be required from all parents/guardians in order for the outing to go ahead.
* Parents will be asked if they wish to attend the outing. Garda Vetting is not required for parents attending an outing.

**The day of the outing:**

* Children will be safely escorted from the childcare premises to the outing location.
* Ratios as outlined in the regulations will be adhered to at all times by paid staff.
* Parents attending the outing will not have unsupervised access to other people’s children.
* A well-stocked first aid box and a charged and working mobile phone will be taken on the outing.
* Details of all children attending the outing including at least one mobile phone emergency contact number for each child will be taken by the outing lead teacher.
* Individual care plans (where applicable) and a copy of the service’s critical incident procedures will be taken on the outing.
* If a vehicle is being used to transport the children, the driver's name and insurance cover will be documented. Buses must have appropriate child seat belt restraints.
* General infection control measures and the procedures responding to accidents and incidents as outlined in this policy booklet will be adhered to on the outing.

**After the outing:**

* Children will be given the opportunity to discuss their experiences at the outing at circle time in the days following the outing.

1. **SECURITY AND CRITICAL INCIDENT POLICY**

The purpose of this policy is to outline our basic emergency planning and response for a range of childcare emergencies. Our emergency preparedness plan has been developed in line with the Critical Incident Policy

**General security procedures:**

Every reasonable precaution is taken in terms of the provision of the premises and equipment.

* Every reasonable precaution is taken in terms of the upkeep of premises and equipment.
* There is an adequate ratio of staff to children.
* All staff are aware of the Department of Health & Children - Children First National Guidance for the Protection and Welfare of Children and the Child Protection Policy of the service.
* The entrances and exits are clearly marked and kept clear of furniture and equipment.
* Any person gaining admission to the building either to collect children or on any other business has limited access and is monitored.
* There is a clear policy on procedures to be undertaken in the event of an accident / fire in the service and this is known to staff and children.
* An effective fire drill routine is established and practiced on a regular basis.
* At least one member of staff trained in First Aid procedures is on duty at all times.
* A suitably equipped first-aid box is on the premises.
* The materials contained in bedding and the internal furnishing of the premises have adequate fire-retardant properties and have low levels of toxicity when on fire.
* All heat emitting surfaces are protected by a fixed guard or are thermostatically controlled to ensure safe surface temperatures.
* The hot water provided for use by preschool children is thermostatically controlled to ensure a safe temperature. It should not exceed 43˚.
* Adequate arrangements are in place to summon medical assistance promptly in an emergency.
* Records up to date on staff and children.
* Parents are requested not to admit anyone else into the service whilst entering or leaving unless they know them.
* We ask all parents and staff to check that all doors are securely closed behind them, at all times.
* Staff will know what children are present at all times and they will be adequately supervised in accordance with the recommended ratios.
* Safety checks are done regularly to ensure that no child can leave the premises undetected.
* Children may only be collected by the person(s) named on the service registration form. If an alternative named person is to collect the child, the parent/guardian must notify the staff in advance.
* In the event of a parent collecting other children's prior arrangements must be made.
* Regular exchange of information with parents is important, parents must inform management of a change of personal details(e.g.) new house, job, phone number.
* All closures/door bolts are placed out of reach of children.

**Critical incident procedures:**

**Emergency response co-ordinator:**

* The designated emergency response coordinator in our facility is Abi Acheson or Melissa Potter.

This person is response for:

* Training staff and children in the provisions of the emergency preparedness plan.
* Assigning emergency responsibilities to staff members as required.
* Conducting drills and revising plans based on drill evaluations.
* Ensuring parents and staff are informed of the latest emergency preparedness plan where changes are made.

**Critical incident procedures:**

* When an incident occurs, staff will immediately alert the facility manager or designated person. It is the responsibility of the manager to determine whether the incident is deemed to be critical. The facility manager or designated person will lead the emergency response.

Below outlines a high-level overview of our critical incident responses:

**Immediate response (within 24 hours):**

* Identify the nature of the critical incident.
* Implement the appropriate emergency preparedness plan.
* Contact emergency services.
* Delegate immediate first aid to trained staff.
* If applicable, secure the area.
* Ensure safety and welfare of children and staff.
* Notify the critical incident team leader if not on site.
* Liaise with emergency services, hospital and medical services.
* Contact and inform parents and family members.
* Identify children and staff members most closely involved and at risk.
* Manage media and publicity.
* Maintain Emergency Operational Procedure & Time Log (Appendix F of [CIP document](https://www.tusla.ie/uploads/content/Critical_Incident_Plan_English_Feb2012.pdf)).

**Secondary response (24 to 72 hours):**

* Assess the need for support and counselling for those directly and indirectly involved.
* Provide staff, parents and the wider community with factual information as appropriate.
* Arrange debriefing for all parents, children and staff most closely involved and at risk.
* Restore the facility to regular routine, program delivery, and community life as soon as practicable.
* Complete critical incident report.

**Ongoing follow-up response:**

* Identify any other persons who may be affected by the critical incident and provide access to support services for community members.
* Provide accurate information to parents and staff.
* Arrange a memorial service and occasional worship as appropriate.
* Maintain contact with any injured and affected parties to provide support and to monitor progress.
* Monitor staff and children for signs of delayed stress and the onset of post traumatic stress disorder, providing specialized treatment as necessary.
* Evaluate critical incident and emergency management plans.
* Be sensitive to anniversaries.
* Manage any possible longer-term disturbances e.g. inquests, legal proceedings.

**Specific emergency situations:**

We have addressed the following emergency situations in other policies contained in this booklet:

* Fire/smoke emergencies – see Fire Safety policy.
* Outbreaks of infectious diseases – see our Infection Control policy.
* Medical emergencies – see our Accident and Incident and Infection Control policies.
* Inclement weather – see our Policy on Inclement Weather policy.

In addition to the emergency situations covered above, the following additional emergency situations are covered in this policy:

* Missing child
* Gas leak
* Hazardous material/chemical spills
* Unauthorized person/intruder/bomb threat

**Missing child:**

Our intention is to keep children safe at all times and we have implemented the following procedures to avoid a situation whereby a child is missing:

* Children are supervised at all times both in the indoor and outdoor areas.
* Parents are requested to bring their child directly to the front entrance and handover only to a member of staff. At collection time, parents are again asked to collect the child directly from the front entrance. The child’s arrival and departure times are logged to ensure that all children are accounted for and supervised.
* Staff: Child ratios are adhered to at all times. Where there are two staff members in a classroom and one is required to leave to bring a child to the toilet etc., the other staff member will remain in the classroom to ensure that there is no period of time where the group are unsupervised.
* In single teacher classrooms, where this teacher needs to use the bathroom or assist a child., they will ring a bell for a member of staff from another classroom to supervise their class for the period they need to leave.
* The outdoor area is secured and checked daily to ensure there is no damage which could lead to an opportunity for children to leave the premises unauthorized.
* All visitors are required to log their visit.
* We have a policy in place with respect to authorization to collect children which has been developed to prevent a child leaving with an unauthorized person.

*Procedure in the event that staff are unable to locate a child on the premises:*

* Staff in the relevant classroom will alert the service manager.
* The premises will be immediately searched thoroughly.
* The register will be called to determine which child or children are missing.
* Where the child is not located on the premises, the grounds surrounding the service will be searched.
* The parents/guardians of the child or children will be informed.
* The emergency services will be contacted and where required the critical incident procedures as outlined above will apply.
* An accident/incident form will be completed and appropriately signed.
* After the incident, a thorough investigation of procedures and practices will take place to determine how the incident occurs and what changes could be implemented to prevent the re-occurrence of the incident.

**Gas leak:**

In the event of an odor of gas being noted by any staff member or visitor, the following procedure will apply:

* The staff member/visitor should immediately inform the manager of the suspected gas leak.
* The manager should then switch off the gas supply at the mains to reduce the risk. The location of cut-off switches is known to the manager and deputy manager and held on a list in the office.
* No light switches should be turned ON or OFF while evacuating.
* Children should be evacuated to the designated evacuation location.
* Gas Networks Ireland should be contacted by the manager on 1850 20 50 50.
* A roll call should be taken to ensure that all children are accounted for.
* The **emergency closure** policy below may also apply.

**Hazardous material/chemical spills:**

* Any dangerous chemicals kept on the premises of this service will be kept in a locked cabinet which is located away from classrooms. Children do not have access to the area where the chemicals are kept.

In the event of a hazardous chemical spill the following procedure will apply:

* The area surrounding the hazardous chemical will be immediately evacuated.
* No electrical switches are to be switched ON or OFF when exiting the room. Open flames should be contained where possible using the fire blanket. Where it is not safe to eliminate the flame, the fire safety procedure will also apply.
* The emergency services will be contacted on 999 and they will be notified that there has been a “hazardous materials spill”.
* No person should try to contain, touch or identify the hazardous materials.
* The **emergency closure** policy below may also apply.

**Unauthorized person/intruder/bomb threat:**

* If there is a dangerous person identified inside or immediately outside the facility or there is a known bomb threat, the following procedure will apply:

Lockdown procedures:

* All interior doors will be immediately locked to protect staff and children in their rooms.
* A lockdown codeword has been agreed so that staff can be informed that they are required to take immediate action in a quiet and orderly fashion.
* Staff are trained to recognize the signal as part of induction training and reminded of the procedure at least annually.
* Children should be kept inside the room and away from any doors or windows where they can be seen where possible.
* An Garda Síochaná should be contacted as soon as possible.
* Where lockdown has been initiated due to a dangerous person(s), efforts to get the dangerous person(s) to leave the facility should only be taken if it is safe to do so.
* Staff should only unlock the doors to their rooms if they heard a previously agreed “stand down” signal.
* If the lockdown procedure has been initiated because it is unsafe for occupants of the service to go outside, then staff should make every effort to find “shelter” in the facility. Protected spaces may be:
* interior hallways, toilets/bathrooms or other enclosed small areas away from large glassed-in areas or open rooms. These areas are known to staff.
* If the danger outside involves smoke or toxins, then all air intake and opening should be closed to protect the atmosphere inside.

1. **POLICY ON EMERGENCY CLOSURE**

Where disruption is unavoidable, all involved in the service will be informed as soon as is practicable and the service will reopen at the earliest possible opportunity. The safety of children in our care and staff employed by our service is our first priority.

**What emergencies would lead to the service being closed?**

Emergency closure will be implemented in the following circumstances:

* If an outbreak of illness requires closure in line with TUSLA recommendations.
* If the building is deemed unusable due to accidental or malicious damage.
* When illness levels among staff lead to it being impossible to maintain the required Staff: Child ratios required by the Child Care Act 1991 (Early Years Services) Regulations 2016.
* When an emergency (see critical incident policy above) occurs during the opening hours which requires the service to close.
* Inclement weather (see the policy on inclement weather).
* No heating available

**Where the closure is known in advance:**

* We will inform parents as soon as possible to enable alternative arrangements to be made.
* Staff will also be informed promptly to avoid unnecessary travel of both parents and staff.
* Our communication will include our reason for closure (i.e., risk assessment has deemed it unsafe for the service to remain open etc.).
* Parents will be kept informed as to when the service will re-open.

**Where the closure requirements occur after a session has started:**

* Parents/guardians will be informed by telephone that they are required to collect their child as soon as possible.
* If the closure is due to sickness, the children and all staff who are unaffected will remain on the premises until all the children can be collected.
* If the closure is due to an emergency which requires the building to be evacuated or there is a loss of heating, the children will be supervised until they can be collected by their parents/guardians. If parents cannot be reached, the emergency contact persons on their child record form will be contacted.
* A record of the incident will be kept and reported to TUSLA as required.

1. **POLICY ON INCLEMENT WEATHER**

In the event of adverse weather, our first priority is the safety and welfare of the children.

**How do we make our decision to open or close our service?**

We make the decision to open or close our service in the event of adverse weather based on a careful analysis of all relevant factors, including:

* Information on road conditions from transportation staff and from local law enforcement and road crews.
* Amount of snow and/or ice accumulated.
* Whether precipitation will continue throughout the day.
* Temperature and wind chill.
* Weather predictions (including those from a weather alert service).
* Storm timing, trajectory and projection.
* Building conditions (such as whether our building’s electricity and/**or heat service** is disrupted).

**Communication of closure**

* Should closure of our service be required, we will inform parents as soon as possible to enable alternative arrangements to be made.
* Staff will also be informed promptly to avoid unnecessary travel of both parents and staff.
* Our communication will include our reason for closure (i.e., risk assessment has deemed it unsafe for the service to remain open, government has issued a notice advising all early year's services to close etc.).
* No refunds will be issued should the service be required to close due to adverse weather.

**Management of staff absences**

* If the service has made a decision to close and staff were advised not to come in or leave early, then employees will be paid as normal for that day.

Where a service remains open but an employee is unable to attend work due to safety concerns then one of the following scenarios will apply and staff will be informed which option:

* Pay employee as normal.
* We note that where a staff member is unable to work because their child’s school or crèche is closed this is an emergency leave situation. However, this does not fall under the legal definition of force majeure leave. Where the staff member is unable to arrange alternative childcare annual leave or unpaid leave should be considered on a case-by-case basis.

# **GDPR POLICIES**

1. **DATA PROTECTION STATEMENT**

This data protection statement explains the personal information we collect from parents and employees, why we collect it, how we will use it and how we protect it. The reference to personal data in this privacy policy where in the context of information collected from parents refers to information about both the parent and their child.

**Definitions:**

Personal Data:

* Any information relating to an identified or identifiable natural person ("Data Subject") who can be identified, directly or indirectly, in particular by reference to an identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of that natural person.

Sensitive Personal Data:

* Personal data which are, by their nature, particularly sensitive in relation to fundamental rights and freedoms merit specific protection as the context of their processing could create significant risks to the fundamental rights and freedoms. That personal data includes data revealing racial or ethnic origin, political opinions, religious or philosophical beliefs, or trade union membership, genetic data, biometric data for the purpose of uniquely identifying a natural person, data concerning health or sexual orientation.

Data Controller:

* The natural or legal person, public authority, agency or any other body, which alone or jointly with others, determines the purposes and means of the processing of personal data.

Data Processor:

* A natural or legal person, public authority, agency or any other body which processes personal data on behalf of a Data Controller.

Processing:

* An operation or set of operations which is performed on personal data or on sets of personal data, whether or not by automated means, such as collection, recording, organisation, structuring, storage, adaptation or alteration, retrieval, consultation, use, disclosure by transmission, dissemination or otherwise making available, alignment or combination, restriction, erasure or destruction of the data.

**What personal data do we collect?**

Parents & their children:

* We collect personal data about parents and their children in order to provide a care and education service to their children. By registering a child for our services parents agree to the use of their and their children’s personal information as described in this Statement.
* We are a Controller of the personal data provided to us. We collect the following types of personal data from parents, about parents and their children:

| **Information type** | **Example of how we use it** |
| --- | --- |
| Address, email address, telephone numbers | We use this information to send you information about your child and our services. |
| Name, date of birth, PPSN of child and their parent/guardian. | We use this information to obtain payments or subsidies from government schemes including the Affordable Childcare Scheme or the ECCE Scheme and to comply with our obligations under the Child Care Act 1991 (Early Years Services) Regulations 2016. |
| The Name and Address of the parent/guardian of the child, a telephone number where that parent/guardian or a relative or a friend of the child can be contacted during the hours of operation of the service: authorization for collection of the child. | We use this information to comply with our obligations under the Child Care Act 1991 (Early Years Services) Regulations 2016. |
| Details of any illness, disability, allergy or special needs of the child together with all of the information relevant to the provision of special care or attention: the name and telephone number of the child’s registered medical practitioner, record of immunizations, if any received by the child, written consent for appropriate medical treatment of the child in the event of an emergency. | We use this information in order to comply with our obligations under Child Care Act 1991 (Early Years Services) Regulations 2016. |
| Interactions with our staff including notes of calls with our staff. | We use this information to keep a record of your interactions with us and to monitor and train our staff |
| Information about incidents which have involved the child. | We use this information in order to advise you of any incidents or events which have involved your child while in attendance at our facilities and to investigate complaints. |

Employees:

* Personal data means any information about an individual from which that person can be identified. It does not include data where the identity has been removed (that is, anonymous data).
* We will collect, store, and use certain categories of personal information about employees which is in the context of their employment and their job tasks, including: personal contact details such as name, title, addresses, telephone numbers and personal email addresses; date of birth; emergency contact information; PPS number; bank account details, payroll records and tax status information; salary, annual leave; or other identification documents; recruitment information (including copies of right to work documentation, references and other information included in a CV or cover letter or as part of the application process), employment records (including job titles, work history, working hours, holidays, training records and professional memberships); compensation history; disciplinary and grievance information;
* We may also collect, store and use certain "special categories" of more sensitive personal information where permitted by local law. Those special categories are set out in Article 9 of GDPR and, among others, include: information about your health, including any medical condition, health and sickness records, including details of any absences from work (other than holidays), including time on statutory parental leave and sick leave, and where you leave employment and the reason for leaving is related to your health, information about that condition needed for pensions and permanent health insurance purposes.

**Why We Collect Personal Data?**

Parents & their children:

* We are required to process parent and their child’s personal information to comply with certain legal obligations to which we are subject, including the Child Care Act 1991 (Early Years Services) Regulations 2016.
* We will also ask for information about who has parental responsibility for the child and any court orders pertaining to this. We will also request information on adults authorised to collect the child. This is required to ensure the safety of the child while they are attending our service.
* Sensitive personal data includes medical information/instructions about the child, this would be required in case of emergency or if medication needs to be administered. Sensitive personal data also includes religious beliefs, we collect this information so we can respect religious festivals, days and events.

Employees:

* Our service may process personal data for legitimate purposes which include but are not limited to: *Compliance with local and EU Member State Law.* This purpose refers to the processing of personal data as necessary to fulfil a legal obligation to which our service is subject. Its purpose is to ensure compliance with the law by our service including but not limited to the prevention of crimes and the disclosure of personal data to government institutions and supervisory authorities, including tax and labour authorities, in relation there to.
* Business Operations:This purpose addresses activities such as travel and expenses,, IT services, information security, conducting internal audits and investigations, legal or business consulting, and preparing for or engaging in dispute resolution.

**Consent**

* Whilst the majority of the personal data provided to our service is required for us to comply with our legal obligations, some of that information is provided on a voluntary basis through parental consent (namely, a parent’s/carer’s/legal guardian’s express agreement). Where we need consent, our service will provide the parent with a specific and clear notice which explains the reasons why the data is being collected and how the data will be used.
* Parents are made aware that if they do not consent to our collection of this type of data, this will not affect the standard of education we deliver to their child.
* If we ask for parental consent to use personal information, parents are informed that they can take back this consent at any time. Parents are advised to contact the Owner/Manager to withdraw consent if desired.

**Information provided about others:**

Parents & their children:

* If a parent gives us personal information about somebody else, with their consent, (for example information about a spouse or co-guardian of the child or other relative or friend) we may add it to any personal information we already hold about the parent and their child and we will use it in the ways described in this data protection statement.
* Before a parent discloses information to us about another person, parents are asked to be sure they have their agreement to do so. They are also asked to show them this data protection statement. They need to ensure that they confirm the person knows they are sharing information about them with us for the purposes described in this data protection statement.

**When do we share your personal information with other organisations?**

Parents & their children:

* We strive to keep parents and their children’s personal data safe and only share it when necessary. We recognise that parents have a right to know that the information they share with us is maintained confidentially. We only disclose parent and child information as authorised in this Statement. We do not rent or sell Personal Information to anyone. We may share parent and child personal information with the third parties listed below.

Who We May Share Personal Information With:

* TUSLA Early Years Inspectorate
* Health & Safety Authority
* Department of Children & Youth Affairs (DCYA)
* Pobal PIP System &Pobal Compliance Officers
* An Garda Síochána
* National Employment Rights Authority
* The Revenue Commissioners
* TUSLA - Child and Family Agency

Employees:

* When we need to disclose employee personal data to a supplier or other third party (accountant for example) we will seek to ensure that the supplier or other third party will provide security measures to safeguard employee personal data that are appropriate.
* We will require the third party to provide the same level of data protection as our service by contract or agreement.

**Transferring data outside the EU**

* We will not transfer the personal information we collect about parents and their children or employees to any country outside the EU without telling the data subject in advance that we intend to do so and what steps we have taken to ensure adequate protection for their personal information in those circumstances.

**Protection of our service & others and Disclosures for Law Enforcement**

* Under certain circumstances we may be required to disclose your Personal Information in response to valid requests by public authorities to meet law enforcement requirements.

**Data security**

* We have put in place appropriate security measures to prevent personal information from being accidentally lost, used or accessed in an unauthorised way, altered or disclosed. In addition, we limit access to your personal information to those employees, agents, contractors and other third parties who have a need to know. They will only process personal information on our instructions, and they are subject to a duty of confidentiality.
* We have put in place procedures to deal with any suspected data security breach and will notify the data subject and any applicable regulator of a suspected breach where we are legally required to do so.

**How long we keep your personal data?**

Parents & their children:

* We are required to keep records relating to the child for a period of 2 years after the child has left our service. There may be a circumstance where data relating to the child is required to be held for a longer period of time. This will be outlined to you. In the event of an accident/incident personal data relating to the child will be held on file until the child is 21 years of age. After this period, your personal data will be irreversibly destroyed.

Employees:

* The Employee’s Personal data will be stored for no longer than necessary considering the purposes of the processing activities. Please refer to the Data Retention Schedule in the Data Retention Policy.

**What are your rights?**

* We use appropriate technical, organisational and administrative security measures to protect all personal data we hold in our records and keep it secure. Unfortunately, no organisation can guarantee complete security.

Right of Access:

* Individuals have the right to access their personal data and supplementary information. Parents and employees are advised to use the **Subject Access Request Form** (see **data subject access request procedure below**) and contact the Manager/Owner in writing or via email. The request will be acknowledged and responded to within 1 month.

Right to Rectification:

* Employees and parents are advised to inform our service of any changes in personal information as soon as possible. If employees or parents feel that the information held is incomplete or incorrect, they have the right to request to see this information and have it rectified.

Right to Erasure:

* In certain circumstances, data subjects have the right to erasure of their data. Parents and employees are advised to contact the Manager/Owner in writing or via email. The request will be acknowledged and responded to within 1 month. This is not an absolute right and only applies in certain circumstances.

Right to Restrict Processing:

* Individuals have the right to request the restriction or suppression of their personal data. data. Parents and employees are advised to contact the Manager/Owner in writing or via email. The request will be acknowledged and responded to within 1 month. This is not an absolute right and only applies in certain circumstances.

Right to Object:

* Parents and employees have the right to object and be removed from any direct marketing emails.

Right to be Informed:

* The privacy policy included in the parents' handbook and staff handbook explains what information we need to collect and how we use it.

Right to Portability:

* Data subjects can ask that their personal data be transferred to them or a third party in machine readable format (Word, PDF, etc.). However, such requests can only be fulfilled if the data in question is: 1) provided by the data subject to the service, 2) is processed automatically and 3) is processed based on consent or fulfilment of a contract. An example of this would be if a parent wanted their child’s file sent to a new service.

In the event, that a data subject wishes to complain about how we have handled their personal data, they have been advised to contact the Manager/Owner in writing or via email. The Manager/Owner will then investigate the complaint and work with them to resolve the matter.

If data subjects feel that personal data has not been handled appropriately according to the law, they have been advised they can contact the Irish Data Protection Authority and file a complaint with them.

**Data subject access request procedure:**

* A Data Subject Access Request (DSAR) is any request made by an individual (e.g. by a parent or by a parent on behalf of their child) for information relating to them held by our service.
* A DSAR must be made in writing, either electronically or by post. Therefore, verbal requests for information held about an individual will be categorised as invalid requests. A Data Subject Access Request Form can be provided to an individual who intends to make a Data Subject Access Request.

*DSAR process:*

**Step 1:** Request for information

To facilitate our service to respond to Data Subject Access Requests in a timely manner, the data subject /parent/guardian is required to:

* Submit his/her request using a Data Subject Access Request Form.
* Provide our service with sufficient information to validate his/her identity (to confirm that the person requesting the information is the data subject or an authorized person).
* Subject to the exemptions referred to in this procedure, our service will provide information to data subjects where requests are made in writing and are received from an individual whose identity can be confirmed by our service.
* However, our service may not provide data where the resources required to identify and gather the requested data would be excessively difficult or time-consuming. For example, if the data subject is asking for all data that the Service has ever collected about this individual, this might require too much time and resources to fulfil the request. Our service will invite the data subject to request more specific information if the initial request is excessively onerous.
* Requests are more likely to be successful where they are specific and seek particular information.
* Factors that can assist in refining the scope of a search include identifying the likely holder of the information, the time period in which the information was processed and being specific about the nature of the data being requested (e.g. a copy of a particular form or email records).

**Step 2:** Identity Verification

The Manager/Owner must check the identity of anyone submitting a DSAR to confirm information is only given to the person who is entitled to receive it. If the identity of the requestor has not already been provided, the Manager/Owner will ask the requestor to provide two forms of identification, one of which must be photo identification and the other confirmation of current address.

If the requestor is not the data subject, it is necessary to obtain written confirmation that the requestor is authorised to act on behalf of the data subject.

**Note:** While the right of access by the data subject under Article 15 of GDPR applies to a person’s own personal data, it would also be acceptable to comply with an access request submitted on a person’s behalf in the case of a child, by a parent or guardian. In this case, the Manager/Owner should be satisfied that the requestor is legitimately acting on behalf of, and in the best interests of the child whose data is being requested.

**Step 3:** Information for the Data Subject Access Request

Where the Manager/Owner is reasonably satisfied with the information submitted by the requestor (i.e. a completed data subject access request form and identification verification if necessary) the Manager/Owner will inform the requester that his/her DSAR will be responded to within 30 calendar days. The 30-day response window begins from the date that all necessary documents are received from the requestor.

**Step 4:** Review of Information

The Manager/Owner will gather all the information as set out in the DSAR and will make sure that the information is reviewed by the imposed deadline to ensure the 30-calendar day response timeframe is complied with.

**Step 5:** Response to the Access Request

The Manager/Owner will ensure that a written response is provided to the requestor. The response will be made via email, unless the requestor has specified another method by which they wish to receive the response (e.g. post). Our service will only issue information via communication channels that are secure. When hard copies of information are posted, they will be sealed securely and sent by recorded post. Where documents are emailed, they will be password protected (encrypted) and the password sent to the requester through a separate channel (e.g. text message).

**Step 6:** Archiving

Following the submission of the response to the requestor, the DSAR will be considered closed and is archived by the Manager/Owner.

**Exemptions**

* An individual is not entitled to access information recorded about someone else, unless they are an authorised representative of that individual, or have parental responsibility for that individual. Our service is not expected to respond to requests for information unless it is provided with sufficient details to enable the location of the information to be identified and can be assured of the identity of the data subject making the request.

In principle, our service will not normally disclose the following types of information in response to a Data Subject Access Request:

* **Information about other people** – A Data Subject Access Request may cover information which relates to an individual or individuals other than the data subject. Access to data of this type will not be permitted unless the individuals involved confirm their consent to the disclosure of their data. Information relating to other individuals will be redacted if necessary to guarantee anonymity.
* **Repeat requests** – Where a similar or identical request relating to the same data subject has previously been received and responded to within a reasonable time period, and where there is no significant change to the personal data held in relation to that data subject, any additional request made within a 3-month period of the original request will be considered a repeat request, and the service will not normally provide an additional copy of the same data.
* **Publicly available information** – The service is not required to provide copies of documents which are accessible in the public domain.
* **Opinions given in confidence or protected by copyright law** – The service is not expected to disclose personal data held regarding a data subject that is in the form of an opinion given in confidence or protected by copyright law.

**Data Subject Access Request Refusals**

* In certain circumstances individuals do not have a right to see information relating to them. For example:
* If the information is retained solely for the purpose of statistical analysis or research, and where the results of the statistical work or research are not made available in a form that identifies any of the individuals that are subject to the analysis or research.
* Requests made for other, non-data protection purposes can be rejected.
* If the Manager/Owner refuses to honour a Data Subject Access Request on behalf of our service, the reasons for the rejection will be clearly set out in writing. Any individual that is not satisfied with the outcome of his/her Data Subject Access Request is entitled to submit a request for the outcome to be reviewed.

1. **DATA RETENTION POLICY**

This policy applies to all data used at our service. Examples of data include:

* Emails
* Hard copy documents (child record forms, attendance records etc.)
* Soft copy documents (scanned enrolment form etc.)
* Video, audio and photographs
* Data generated by physical access control systems (Keypads, Fob systems etc.)

**Retention Schedule:**

* The Manager/Owner sets out the time period for which documents and electronic records shall be retained through the Data Retention Schedule. These retention timeframes are predominantly derived from statutory obligations.

Retention periods within the Data Retention Schedule will be prolonged in certain cases such as:

* Ongoing investigations being conducted by Irish authorities, if there is a possibility records of personal data are needed by our service to prove compliance with any legal requirements; or
* When exercising legal rights as part of legal cases or similar court proceedings recognised under Irish law.

**Safeguarding of Data during Retention Period:**

* If personal data is physically retained in hard copy format this personal data may quickly become obsolete and this will be considered by the Manager/Owner. If personal data is stored on electronic storage media (hard drive, server) or in the cloud, the Owner/ Manager will ensure that backup copies of the information are also available. The 3-2-1 backup methodology will be deployed: 3 copies in total, 2 local copies and 1 offsite. Responsibility for the storage of data rests with the Manager/Owner.

**Destruction of Data**

* Our service and its employees will review all data on a timely basis, whether held electronically or in hard copy format, to decide whether to destroy or delete any data once the purpose for which those documents were created is satisfied. The Manager/Owner has overall responsibility for the destruction of data.
* Once the decision is made to dispose of personal data in line with the Data Retention Schedule, the data will be deleted, shredded or otherwise destroyed as appropriate.
* There are various destruction methods that are dependent upon the nature of the document. For example, any documents that contain sensitive or confidential information (and particularly sensitive personal data) will be disposed of as confidential waste and be subject to secure electronic deletion procedures. The Document Disposal Schedule section below defines the method of disposal.
* The specific deletion or destruction process may be executed either by an employee or by an internal or external service provider that the Owner/ Manager subcontracts for this specific purpose. Destruction of data is always approved by the Manager/Owner and the details recorded. During this process, any applicable general provisions under relevant data protection laws and our service’s Personal Data Protection Policy shall be complied with.
* Appropriate controls are in operation to prevent the permanent loss of essential information for our service as a result of malicious or unintentional information destruction. Such controls include restricting access to the filing cabinet to only those who are permitted to access the data and password protected access to the IT equipment on which such data is stored.

**Breach, Enforcement and Compliance:**

* The person assigned with responsibility for Data Protection, the Manager/Owner, ensures that each employee complies with this policy. It is also the responsibility of the Owner/ Manager to assist any local office with enquiries from any local data protection or governmental authority.
* Any actual or suspected breach of this Policy must be reported immediately to the Manager/Owner. All instances of suspected breaches of the Policy shall be investigated, documented and action taken as appropriate.
* Failure to comply with this Policy may trigger adverse consequences, including, but not limited to, loss of customer confidence and possibly litigation, financial loss and damage to our service reputation, personal injury, harm or loss. Non-compliance with this Policy by employees, or any third parties, who have been granted access to our service premises or data, may therefore result in disciplinary actions or termination of their employment or contract. Such non-compliance may also result in legal action being taken against the parties involved in such activities.

**Routine Disposal Schedule:**

* Records (only those containing personal data) which may be routinely destroyed unless subject to an on-going legal or regulatory inquiry are as follows:
* Announcements and notices of day-to-day activities.
* Message slips.
* Outing reminder slips.
* Newsletters.
* The Manager/Owner will decide what documents can be routinely destroyed.
* Where a court case or legal proceedings are currently ongoing, all documents will be retained. Advice shall be obtained before disposing of documentation that may be subject to legal proceedings.

**Destruction Method:**

* Documents that include any personal data shall be disposed of confidentially (cross-cut shredded) and shall be subject to secure electronic deletion procedures if stored electronically.

**Data Breach Response Procedure:**

* All data breaches shall be reported to the Manager/Owner as soon as possible. Once a personal data breach is reported to, or detected by, the Manager/Owner, the Data Breach Response Procedure is commenced.

**Data Breach Response Procedure:**

**Step 1:** Identify and confirm that a breach has occurred. The Manager/Owner has responsibility for concluding whether the breach should be considered a breach affecting personal data.

**Step 2**: Take immediate action to stop the breach if it is ongoing or to reduce the affected data.

**Step 3:** Ensure a proper and unbiased investigation is initiated, performed, documented, and concluded. The Data Breach Register will be used to record this information. The Manager/Owner is responsible for documenting all decisions and actions regarding the breach. This register may be reviewed by the Irish Data Protection Commissioners Office and therefore will be written as accurately and comprehensively as possible to ensure traceability and accountability.

**Step 4:** Identify remediation requirements and document the remediation actions carried out.

**Step 5:** Inform the Irish Data Protection Commissioners office if required. Not all personal data breaches need to be notified to the supervisory authority. The notification obligations under the GDPR are only triggered when there is a breach of personal data which will likely result in a risk to the rights and freedoms of individuals. The Manager/Owner will determine whether the personal data breach should be reported to the Supervisory Authority.

* In order to determine the risk to the rights and freedoms of the data subject(s) affected and therefore conclude whether the breach should be reported to the Supervisory Authority, the Manager/Owner will consider the following:
* The type of breach
* The nature, sensitivity and volume of the personal data affected.
* The ease of identification of individuals from the data.
* The severity of consequences for individuals.
* The special characteristics of the individual (s) – e.g., a breach affecting vulnerable individuals may place them at a great risk of harm.
* The number of affected individuals.
* If the personal data breach is not likely to result in a risk to the rights and freedoms of the affected data subjects, a notification will not be required. However, the data breach will be recorded in the Data Breach Register.
* If the Manager/Owner concludes that the breach should be notified to the Supervisory Authority, then the Supervisory Authority will be informed without delay but no later than 72 hours after the breach has been brought to the attention of the Manager/Owner. Any possible reasons for delay beyond 72 hours will be communicated to the Supervisory Authority.

**Step 6:** Coordinate internal and external communications. The Manager/Owner will assess if the personal data breach is likely to result in high risk to the rights and freedoms of the data subject, as a result of the Data Protection Impact Assessment.

* If the personal data breach is likely to result in a risk to the rights and freedoms of the affected data subjects, the Manager/Owner owner will inform the affected data subjects without delay. The notification to the data subjects must be written in clear and plain language and the Data Breach Notification Form – Data Subject will be used for this communication process.
* If, due to the number of affected data subjects, it is excessively difficult to notify each affected data subject individually, the Manager/Owner will take the necessary actions to ensure that the affected data subjects are notified using appropriate, publicly available channels.

**Note:** If an encrypted mobile phone/laptop is lost, a breach has occurred, however, as it is encrypted, no personal data is at risk of being exposed and therefore there is no requirement to report the incident to the authorities or to parents.

**If a data processor (i.e., third party) is responsible for a breach:**

* Our service, as the data controller, will ensure that an agreement (Supplier Data Processing Agreement) is in place between all third-party processors (i.e. payroll provider etc.) to ensure personal data is adequately protected. If a personal data breach or suspected breach occurs within the third party, the third party will report this to our service without undue delay.

The third party should send notification to the Manager/Owner that will include the following details:

* A description of the nature of the breach.
* Categories of personal data affected.
* Approximate number of data subjects affected.
* Name and contact details of the Data Protection Officer.
* Consequences of the personal data breach.
* Measures taken to address the personal data breach.
* Any information relating to the data breach.
* The Manager/Owner will record the data breach in the Data Breach Register. The Manager/Owner will then notify the data subjects affected by the breach.

**Accountability:**

* Any individual who breaches this procedure may be subject to internal disciplinary procedures (up to and including termination of their employment); and may also face civil or criminal liability if their actions are in violation of the law.

**Appendix 1 – Illness exclusion period list**

| **Illnesses** | **Early Symptoms** | **Incubation Period** | **Period when Infectious** |
| --- | --- | --- | --- |
| Measles | Cold, Cough, Fever or Chill, Sore Eyes, white spots In mouth (1 or 2 days), rash after 2 or 3 days on face, weak chest. | 8-15 days, minimum 7 days from appearance of rash | From a few days before the running nose and head cold to 7 days after rash appears |
| German Measles | May have fever, sore throat, stiff neck, rash after 1-2 days usually starts on face | 14-21 days usually 12 days, minimum 4 days from appearance of rash | From 7 days before to at least 4 days after rash appears |
| Whooping Cough | Fevers and Catarrh for approx. 1 week before cough develops. | 7-14 days, minimum 4 days from appearance of rash | From 7 days before to at least 4 days after rash appears |
| Mumps | Fever, sore throat, dry mouth, pain when chewing. | 12-25 days, 9 days from appearance of swelling | From 7 days before swelling appears to 9 days afterwards. |
| Chicken pox | May be a slight fever, headache, nausea, spots appear on the 2nd day starting on the back. | 11-21 days, minimum 6 days from appearance | From 5 days before until 6 days after the last lot of blisters |
| Hand, Foot and Mouth disease | Mild illness. Child develops a fever and rash with blisters, which appear especially in the mouth and on the hands and feet. | Until the spots have gone, minimum while the child is unwell. | From 5 days before until after the last lot of spots. |
| Conjunctivitis | Sore eyes, inflamed discharge or watering | 1-3 days, minimum until treated and cleared. | Contagious until treated. |
| Impetigo | Blisters, spreading the edges which are raised, thick yellow crust when blisters break. | NA, until skin is completely healed. | Contagious, spread by hands and by objects. |
| Ringworm | (Body) Round red areas with a raised border. | 10-11 days, minimum until treated. | Contagious spread by scratching and material under finger nails. |
| Scabies | Intense itching, blistering, pin point blood crusts. | Several days, minimum until treatment has commenced. | Mites spread rapidly by contact from clothing or bedding. |
| Bad Cold | Coughing or sneezing | NA | While child is coughing or sneezing |
| Gastroenteritis | Diarrhea and vomiting | Varies dependent on organism, minimum until 48 hours after normal bowel have returned and/or vomiting has stopped. | Varies |

| Policies Reviewed and updated on: | 25th July 2023 |
| --- | --- |
| Reviewed By: | Abi Acheson |
| Signed: |  |