

GRAIGUECULLEN PARISH CHILDCARE CENTRE CLG

(GPCC)

SAC POLICIES AND PROCEDURES

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***GRAIGUECULLEN PARISH CHILDCARE SERVICE CLG***

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[The safety of the children attending our service is of paramount concern to all staff, students and volunteers. For this reason, GPCC operates a strict collection policy. 102](#_Toc189735311)

[Authorisation to Collect 102](#_Toc189735312)

[Upon enrolment Parents/Guardians must complete a registration form and provide details about individuals who are authorised to collect their child/children. These details are kept on file for each child. Children may only be collected by the authorised person(s) named on their registration form. 102](#_Toc189735313)

[Child Collection Procedures 102](#_Toc189735314)

[ Children may only be collected by the person(s) named on their registration form. 102](#_Toc189735315)

[ The parent/carer must notify staff in advance if another authorised collector (not parent/guardian) is to collect their child on a particular day. 102](#_Toc189735316)

[ If any person comes to collect a child/children who is not known to the staff even if the name they provide is on the authorised collection list they will be asked to confirm their identity by producing proof of identification i.e. driver’s license/passport. If they are unable to provide identification the parent will be phoned to confirm. 102](#_Toc189735317)

[ If written permission is provided by the parent on the enrolment form an older sibling may collect a child from the Service. 102](#_Toc189735318)

[ Children must always be collected on time, our service closes at 6 pm. 103](#_Toc189735319)

[ Children will not be released into the care of a person who appears to be incapable of caring for a child. 103](#_Toc189735320)

[ Parents/Guardians who are under the influence of drugs and/or alcohol will not be permitted to collect their child/children. 103](#_Toc189735321)

[ In these circumstances, management will contact an alternative authorised collector on the child’s registration form. 103](#_Toc189735322)

[ If an alternative person cannot be contacted to collect the child/children, a member of management will contact An Gardaí, as per our Child Protection Policy. 103](#_Toc189735323)

[Children collected by the service by foot 103](#_Toc189735324)

[GPCC is based in the grounds of St Fiacc’s Primary School. We provide a free collection service for Junior and Senior Infant children only at 2pm from St Fiacc’s Primary. 103](#_Toc189735325)

[We do not collect from any other school. 103](#_Toc189735326)

[GPPC staff leave the Service at 1.55pm and bring attendance sheets with the names of all the children who are booked to attend. There is 1 staff member to every 12 children plus the Supervisor on the rota every day. It takes approx. 1 minute to walk to the school door from the Service. 103](#_Toc189735327)

[GPCC staff have access to the school hallway and wait outside the door of the classrooms and coordinate with the class teacher about which children are going to Afterschool. 103](#_Toc189735328)

[Once all the children’s names are noted on the attendance sheets the children are escorted to the Afterschool Service. The Supervisor has a mobile phone at all times and can ring the office for assistance if necessary. 103](#_Toc189735329)

[Children from first to sixth class who are booked to attend walk over at 3pm. 103](#_Toc189735330)

[Staff record the time of arrival of the children into their designated rooms. The Supervisor and Assistant Supervisor monitor both entrance paths from the school to the Service to ensure children arrive in an orderly and safe manner. 103](#_Toc189735331)

[If a child is booked and does not attend the parent is contacted immediately. 103](#_Toc189735332)

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# ****INTRODUCTION****

# **POLICIES AND PROCEDURES**

Policies and procedures help to provide a consistent approach towards developing services and to minimise misunderstanding. These policies were developed by Graiguecullen Parish Childcare Centre CLG. based on HSE Policies for Childcare Services and reviewed and adopted by staff in conjunction with Laois County Childcare Committee. To maintain a high standard of good practice, policies and procedures are reviewed regularly and changed accordingly to incorporate any new developments in the childcare sector.

Policy **–** “A policy is a statement of principles, values or intent that guides, or usually determines, decisions and actions to achieve an organisation’s goals. Policies help to ensure that a consistent approach in line with the service’s values is adopted throughout the service. They provide the basis for agreed, consistent and well-thought-through decisions.” *(‘Practical Guide to developing Childcare Policies’, Barnardos, 2008.)*

Procedure**–** “Procedures spell out precisely what action is to be taken in line with the relevant policy and outline the steps to be followed or the way that a task is to be performed. Procedures can reduce the need to make decisions under pressure or to have to wait for a decision, they provide consistency and they allow everyone to know what is likely to happen in a given situation. (‘Practical Guide to developing Childcare Policies’, Barnardos, 2008.)

The following policies have been revised in conjunction with the guidelines set out under **The Child Care Act 1991 (Early Years Services) Regulations 2016.**

# ****ETHOS OF THE SERVICE****

GPCC CLG will ensure an inclusive culture, recognising that every child is an individual and has their own learning style. We believe that all children are unique, but share many similarities, thus promoting equality and diversity throughout the early childhood service. We will promote and nurture the identity of each child attending the service and ensure that their emotional and physical well-being is of paramount importance at all times.

**CURRICULUM**

The individuality of each child is respected and nurtured. A wide range of play and activities is provided in an environment free from prejudice and discrimination. The curriculum should present positive images of children and adults in society. Children are encouraged at all times to appreciate similarities and value differences. A range of materials (e.g. books) will be chosen to reflect cultures, gender and ability difference. Non-stereotypic intercultural materials and posters will be displayed in the service and those which are stereotypical will be removed.

# ****MISSION STATEMENT****

Our mission is to value the ability, individuality and cultural background of all children by providing each child with the opportunities they need to reach their full potential as active learners within an inclusive ethos/culture.

At GPCC CLG, we achieve care and inclusion in education by continually reviewing an anti-bias approach that is implemented by the early childhood service, and by working in partnership with families, children and the early childhood team, both individually through reflective practice, and in consultation with children and their families, so as to ensure that the education and care provided is fully inclusive of all children, families and agencies that attend and use our service.

# ****STATEMENT OF PURPOSE****

The name of the company is Graiguecullen Parish Childcare Centre CLG.

The main objectives for which the Company is established are:

1. To carry on the business of childcare services
2. To operate a community Preschool/Afterschool & Out of School Care Service
3. To promote childcare facilities and all related activities in order to

* free up time for local parents or guardians to participate in the workforce or undertake re-training with a view to re-entering the workforce.
* support families in breaking the cycle of disadvantage.
* support a co-ordinated approach to the delivery of childcare centred on the needs of the child by joining or co-operating with local or national childcare organisations.
* provide a proactive response to the development of quality childcare supports and services which are grounded in an understanding of local needs.
* increase the supply and improve the quality of early childhood care and education services, part-time and full day care, school-age childcare and child minding.

(a) To operate a Preschool service, Afterschool Club, Out of School Care Service and Breakfast Club - 50 weeks per year

(b) The hours of the service: 8 am to 6.00 pm,

(c) The age range of children catered for in the Preschool service: 2 years 6 months up to school going age

(d) The age range of children catered for in the Afterschool/Out of School Care service is Junior Infants up to sixth class.

1. 88 children that can be catered for in the Preschool service at one time.
2. 132 children that can be catered for in the Afterschool service at one time.

# ****Service Activities Policy and Procedure****

It is the policy of Graiguecullen Parish Childcare Centre CLG to ensure that at no time even where the staff: child ratio is not reached is a child/children left on their own with a single staff member including during all indoor and outdoor activities and at drop off and/or collection times. All rotas are to be designed to ensure two staff members are present with child/children at all times. Where it is necessary for a staff member to leave the room even for a short space of time i.e. to go to the toilet, then the office must be contacted, and the Manager, Supervisor or other available staff member will replace them for the duration of their absence. Where a child is brought outside by one member of staff for remedial /relaxation reasons the staff member and child must remain in view of the office at all times or request assistance.

# ****CODE OF ETHICS – WORKING WITH CHILDREN****

Young children develop best through close affectionate relationships and positive, responsive interaction with others, particularly adults but also with other children. Warm relationships are fundamental to meeting the young child’s need for love, security, recognition and encouragement.

## **Statement of Intent**

Graiguecullen Parish Childcare Centre will ensure staff are fully informed and knowledgeable about their critical role in the lives of the children in their care.

## **Policies and Procedures**

Adult/child interaction is a key element of working with children. Adults should in principle allow the children lead the activity. Adults can invite the child to participate, look and listen. Adults should adopt the following practices when interacting with children.

* Provide constant supervision to ensure children are safe
* Make strong eye contact.
* Be at the child’s level – focus on the child/children.
* Check the child is understood and understands.
* Give encouragement and positive feedback.
* Work with the child to develop their skills in relation to mediation and conflict resolution.
* Extend the child’s language.
* Use clear communication skills – questions, responses, discussion, leading to other subjects.
* Ask open ended questions – how did you do that? – tell me about that? how? why?
* Use props
* Be sensitive to the child’s needs and partnering play.
* Ensure the child is comfortable
* Use all occasions to engage children – greetings – lunch
* Repeat your message if something is not correct (not in negative way)
* Organise activities – that reflect children’s interests – enjoyable, accessible to child
* Allow children – freedom of choices, within reason
* Listen, encourage and praise – applies to adults, children, parents
* Be a positive role model. Remember children learn what they see and hear
* Encourage children to engage in activities which will calm or relax them
* Be aware that the weather can affect children – rain, wind, heat
* Follow the child’s lead

DON’T…

* Use mobile phones when supervising children
* Use abusive/threatening behaviour
* Use raised voices – speak in soft tones
* Isolate children

# ****GPCC Child Protection & Welfare Policy Statement****

Graiguecullen Parish Childcare Centre CLG is committed to safeguarding the children in our care and to providing a safe environment in which they can play, learn and develop.

We are committed to child centred practice in all our work with children and full compliance with *Children First*: *National Guidance for the Protection and Welfare of Children and Our Duty to Care - The Principles of Good Practice for the Protection of Children and Young People.*

We recognise the right of children to be protected from harm, treated with respect, listened to and have their views taken into consideration in matters that affect them.

Management, staff, students and volunteers in this service recognise that the welfare of children is paramount.

***Our service will endeavour to safeguard children by:***

Having procedures to recognise, respond to and report concerns about children’s protection and welfare

* Having a confidentiality policy
* Having a code of behaviour for management, staff, students and volunteers
* Having a safe recruitment procedure
* Having procedures for managing/supervising staff, students and volunteers
* Having a procedure to respond to accidents and incidents
* Having a procedure to respond to complaints
* Having a procedure to respond to allegations of abuse and neglect against staff members.

***As part of the policy, this service will:***

Appoint both a Designated Liaison Person for dealing with child protection concerns and a Deputy Designated Liaison Person

* Display in the Service, the name and contact details of the DLP/DDLP
* Display in the Service the contact numbers for Duty Social Work Team, Tusla and an Garda Sìochàna
* Provide induction training on the Child Protection and Welfare Policy to all staff, students and volunteers and members of the Board of Management
* Ensure that staff attend child protection training as appropriate
* Provide supervision and support for staff, students and volunteers in contact with children
* Share information about the Child Protection and Welfare Policy with families and children
* This policy will be shared with parents on enrolment with our service
* This policy will be reviewed by the Manager/BOM each time an incident is reported or every year if that is sooner
* Work and cooperate with the relevant statutory agencies as required

***We will ensure that all personnel:***

* Have been Garda Vetted
* Are aware of their responsibilities and their obligations under Children First
* Are aware of the responsibilities for reporting concerns and/or incidents regarding the safety or well-being of children to the Designated Liaison Person
* Attend child protection training as appropriate

***We will ensure this policy is observed by:***

* Board of Management
* Management
* Supervisors
* Childcare staff
* Special Needs Assistants
* Office staff
* Kitchen staff
* Students on placement
* Visitors to the service
* Parents/Guardians
* Volunteers

***This policy is applicable at all times when children are in the care of the service, including on trips and outings***

***For the purpose of this policy, a ‘child’ means anyone who is under 18 years of age***

# ****Designated Liaison Person****

*Children First* requires that every organisation providing services to children appoint a Designated Liaison Person (DLP) for reporting neglect and abuse. The DLP is responsible for dealing with child protection and welfare concerns in accordance with Children First and Our Duty to Care.

A Deputy DLP is appointed by the Manager to undertake the below duties when the DLP is on leave or is unavailable for a long period of time.

|  |  |
| --- | --- |
| **GPCC Designated Liaison Person** | **GPCC Deputy Designated Liaison Person** |
| Name: Diane Darcy  Post: Manager  Contact Details: 0599137105/0870536742 | Name Deirdre Kennedy  Post: Assistant Manager  Contact Details: 0599137105/0851155646 |

# ROLE OF DESIGNATED LIAISON PERSON

The designated liaison person is responsible for ensuring that reporting procedures within our organisation are followed, so that child welfare and protection concerns are referred promptly to Tusla. The designated liaison person will record all concerns or allegations of child abuse brought to his or her attention, and the actions taken in relation to a concern or allegation of child abuse.

If the designated liaison person, decides not to report a concern to Tusla, the following steps should be taken:

* The reasons for not reporting should be recorded
* Any actions taken as a result of the concern should be recorded
* The employee or volunteer who raised the concern should be given a clear written explanation of the reasons why the concern is not being reported to Tusla
* The employee or volunteer should be advised that if they remain concerned about the situation, they are free to make a report to Tusla or An Garda Síochána

***Other Roles of the DLP are to:***

* Provide information and advice on child protection and welfare concerns and issues to the staff of the service
* Be accessible to all staff
* Ensure that they are knowledgeable about child protection and welfare and that they undertake any training considered necessary to keep updated on new developments
* Ensure that the Child Protection and Welfare Policy and Procedures of the service are followed
* Be responsible for reporting concerns about the protection and welfare of children to TUSLA – Child & Family Agency or to An Garda Síochána
* Ensure that appropriate information is included in the reports to the Child & Family Agency and that the report is submitted in writing (under confidential cover) using the Tusla Child Protection and Welfare Report Form (Appendix I)
* Liaise with the TUSLA, An Garda Síochána and other agencies as appropriate
* Keep relevant people within the organisation informed of relevant issues, whilst maintaining confidentiality
* Ensure that an individual case record is maintained of the action taken by the service, the liaison with other agencies and the outcome
* Advise the organisation of child protection training needs
* Maintain a central log or record of all child protection and welfare concerns in the service.

## **Reasonable Grounds For Concern**

You should always inform Tusla when you have **reasonable grounds for concern** that a child may have been, is being, or is at risk of being abused or neglected. If you ignore what may be symptoms of abuse, it could result in ongoing harm to the child. It is not necessary for you to prove that abuse has occurred to report a concern to Tusla. All that is required is that you have reasonable grounds for concern. It is Tusla’s role to assess concerns that are reported to it. If you report a concern, you can be assured that your information will be carefully considered with any other information available and a child protection assessment will be carried out where sufficient risk is identified.

Reasonable grounds for a child protection or welfare concern include:

* Evidence, for example an injury or behaviour, 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
* An account from a person who saw the child being abused

The guiding principles on reporting child abuse or neglect may be summarised as follows:

1. The safety and well-being of the child must take priority over concerns about adults against whom an allegation may be made

2. Reports of concerns should be made without delay to Tusla

## **Types Of Child Abuse And How They May Be Recognised**

Child abuse can be categorised into four different types: neglect, emotional abuse, physical abuse and sexual abuse. A child may be subjected to one or more forms of abuse at any given time. Abuse and neglect can occur within the family, in the community or in an institutional setting. The abuser may be someone known to the child or a stranger and can be an adult or another child. In a situation where abuse is alleged to have been carried out by another child, you should consider it a child welfare and protection issue for both children and you should follow child protection procedures for both the victim and the alleged abuser.

The important factor in deciding whether the behaviour is abuse or neglect is the impact of that behaviour on the child rather than the intention of the parent/carer.

The definitions of neglect and abuse presented in this section are not legal definitions. They are intended to describe ways in which a child might experience abuse and how this abuse may be recognised.

## **Neglect**

Child neglect is the most frequently reported category of abuse, both in Ireland and internationally. Ongoing chronic neglect is recognised as being extremely harmful to the development and well-being of the child and may have serious long-term negative consequences.

Neglect occurs when a child does not receive adequate care or supervision to the extent that the child is harmed physically or developmentally. It is generally defined in terms of an omission of care, where a child’s health, development or welfare is impaired by being deprived of food, clothing, warmth, hygiene, medical care, intellectual stimulation or supervision and safety. Emotional neglect may also lead to the child having attachment difficulties. The extent of the damage to the child’s health, development or welfare is influenced by a range of factors. These factors include the extent, if any, of positive influence in the child’s life as well as the age of the child and the frequency and consistency of neglect.

Neglect is associated with poverty but not necessarily caused by it. It is strongly linked to parental substance misuse, domestic violence, and parental mental illness and disability.

A reasonable concern for the child’s welfare would exist when neglect becomes typical of the relationship between the child and the parent or carer. This may become apparent where you see the child over a period of time, or the effects of neglect may be obvious based on having seen the child once.

***The following are features of child neglect:***

Children being left alone without adequate care and supervision

Malnourishment, lacking food, unsuitable food or erratic feeding

Non-organic failure to thrive, i.e. a child not gaining weight due not only to malnutrition but also emotional deprivation

Failure to provide adequate care for the child’s medical and developmental needs, including intellectual stimulation

Inadequate living conditions – unhygienic conditions, environmental issues, including lack of adequate heating and furniture

Lack of adequate clothing

Inattention to basic hygiene

Lack of protection and exposure to danger, including moral danger, or lack of supervision appropriate to the child’s age

Persistent failure to attend school

Abandonment or desertion

## **Emotional Abuse**

Emotional abuse is the systematic emotional or psychological ill-treatment of a child as part of the overall relationship between a caregiver and a child. Once-off and occasional difficulties between a

parent/carer and child are not considered emotional abuse. Abuse occurs when a child’s basic need for attention, affection, approval, consistency and security are not met, due to incapacity or indifference from their parent or caregiver. Emotional abuse can also occur when adults responsible for taking care of children are unaware of and unable (for a range of reasons) to meet their children’s emotional and developmental needs. Emotional abuse is not easy to recognise because the effects are not easily seen.

A reasonable concern for the child’s welfare would exist when the behaviour becomes typical of the relationship between the child and the parent or carer.

***Emotional abuse may be seen in some of the following ways:***

* Rejection
* Lack of comfort and love
* Lack of attachment
* Lack of proper stimulation (e.g. fun and play)
* Lack of continuity of care (e.g. frequent moves, particularly unplanned)
* Continuous lack of praise and encouragement
* Persistent criticism, sarcasm, hostility or blaming of the child
* Bullying
* Conditional parenting in which care or affection of a child depends on his or her behaviours or actions
* Extreme overprotectiveness
* Inappropriate non-physical punishment (e.g. locking child in bedroom)
* Ongoing family conflicts and family violence
* Seriously inappropriate expectations of a child relative to his/her age and stage of development

There may be no physical signs of emotional abuse unless it occurs with another type of abuse. A child may show signs of emotional abuse through their actions or emotions in several ways. These include insecure attachment, unhappiness, low self-esteem, educational and developmental underachievement, risk taking and aggressive behaviour.

It should be noted that no one indicator is conclusive evidence of emotional abuse. Emotional abuse is more likely to impact negatively on a child where it is persistent over time and where there is a lack of other protective factors.

## **Physical Abuse**

Physical abuse is when someone deliberately hurts a child physically or puts them at risk of being physically hurt. It may occur as a single incident or as a pattern of incidents. A reasonable concern exists where the child’s health and/ or development is, may be, or has been damaged as a result of suspected physical abuse.

***Physical abuse can include the following:***

* Physical punishment
* Beating, slapping, hitting or kicking
* Pushing, shaking or throwing
* Pinching, biting, choking or hair-pulling
* Use of excessive force in handling
* Deliberate poisoning
* Suffocation
* Fabricated/induced illness
* Female genital mutilation

The Children First Act 2015 includes a provision that abolishes the common law defence of reasonable chastisement in court proceedings. This defence could previously be invoked by a parent or other person in authority who physically disciplined a child. The change in the legislation now means that in prosecutions relating to assault or physical cruelty, a person who administers such punishment to a child cannot rely on the defence of reasonable chastisement in the legal proceedings. The result of this is that the protections in law relating to assault now apply to a child in the same way as they do to an adult.

## **Sexual Abuse**

Sexual abuse occurs when a child is used by another person for his or her gratification or arousal, or for that of others. It includes the child being involved in sexual acts (masturbation, fondling, oral or penetrative sex) or exposing the child to sexual activity directly or through pornography.

Child sexual abuse may cover a wide spectrum of abusive activities. It rarely involves just a single incident and, in some instances, occurs over a number of years. Child sexual abuse most commonly happens within the family, including older siblings and extended family members.

Cases of sexual abuse mainly come to light through disclosure by the child or his or her siblings/friends, from the suspicions of an adult, and/or by physical symptoms.

***Examples of child sexual abuse include the following:***

* Any sexual act intentionally performed in the presence of a child
* An invitation to sexual touching or intentional touching or molesting of a child’s body whether by a person or object for the purpose of sexual arousal or gratification
* Masturbation in the presence of a child or the involvement of a child in an act of masturbation
* Sexual intercourse with a child, whether oral, vaginal or anal
* Sexual exploitation of a child, which includes:

» Inviting, inducing or coercing a child to engage in prostitution or the production of child pornography [for example, exhibition, modelling or posing for the purpose of sexual arousal, gratification or sexual act, including its recording (on film, videotape or other media) or the manipulation, for those purposes, of an image by computer or other means]

» Inviting, coercing or inducing a child to participate in, or to observe, any sexual, indecent or obscene act

» Showing sexually explicit material to children, which is often a feature of the ‘grooming’ process by perpetrators of abuse

* Exposing a child to inappropriate or abusive material through information and communication technology
* Consensual sexual activity involving an adult and an underage person

An Garda Síochána will deal with any criminal aspects of a sexual abuse case under the relevant criminal justice legislation. The prosecution of a sexual offence against a child will be considered within the wider objective of child welfare and protection. The safety of the child is paramount and at no stage should a child’s safety be compromised because of concern for the integrity of a criminal investigation.

In relation to child sexual abuse, it should be noted that in criminal law the age of consent to sexual intercourse is 17 years for both boys and girls. Any sexual relationship where one or both parties are under the age of 17 is illegal. However, it may not necessarily be regarded as child sexual abuse.

## **Circumstances Which May Make Children More Vulnerable To Harm**

If you are dealing with children, you need to be alert to the possibility that a welfare or protection concern may arise in relation to children you come in contact with. A child needs to have someone they can trust in order to feel able to disclose abuse they may be experiencing. They need to know that they will be believed and will get the help they need. Without these things, they may be vulnerable to continuing abuse.

Some children may be more vulnerable to abuse than others. Also, there may be particular times or circumstances when a child may be more vulnerable to abuse in their lives. In particular, children with disabilities, children with communication difficulties, children in care or living away from home, or children with a parent or parents with problems in their own lives may be more susceptible to harm.

The following list is intended to help you identify the range of issues in a child’s life that may place them at greater risk of abuse or neglect. *It is important for you to remember that the presence of any of these factors does not necessarily mean that a child in those circumstances or settings is being abused.*

Parent or carer factors***:***

» Drug and alcohol misuse

» Addiction, including gambling

» Mental health issues

» Parental disability issues, including learning or intellectual disability

» Conflictual relationships

» Domestic violence

» Adolescent parents

Child factors***:***

» Age

» Gender

» Sexuality

» Disability

» Mental health issues, including self-harm and suicide

» Communication difficulties

» Trafficked/Exploited

» Previous abuse

» Young carer

Community factors*:*

» Cultural, ethnic, religious or faith-based norms in the family or community which may not meet the standards of child welfare or protection required in this jurisdiction

» Culture-specific practices, including:

– Female genital mutilation

– Forced marriage

– Honour-based violence

– Radicalisation

Environmental factors***:***

» Housing issues

» Children who are out of home and not living with their parents, whether temporarily or permanently

» Poverty/Begging

» Bullying

» Internet and social media-related concerns

Poor motivation or willingness of parents/guardians to engage***:***

» Non-attendance at appointments

» Lack of insight or understanding of how the child is being affected » Lack of understanding about what needs to happen to bring about change

» Avoidance of contact and reluctance to work with services

» Inability or unwillingness to comply with agreed plans

You should consider these factors as part of being alert to the possibility that a child may be at risk of suffering abuse and in bringing reasonable concerns to the attention of Tusla.

## **Bullying**

It is recognised that bullying affects the lives of an increasing number of children and can be the cause of genuine concerns about a child’s welfare.

Bullying can be defined as repeated aggression – whether it is verbal, psychological or physical – that is conducted by an individual or group against others. It is behaviour that is intentionally aggravating and intimidating and occurs mainly among children in social environments such as schools. It includes behaviours such as physical aggression, cyberbullying, damage to property, intimidation, isolation/exclusion, name calling, malicious gossip and extortion. Bullying can also take the form of abuse based on gender identity, sexual preference, race, ethnicity and religious factors. With developments in modern technology, children can also be the victims of non-contact bullying, via mobile phones, the internet and other personal devices.

While bullying can happen to any child, some may be more vulnerable. These include: children with disabilities or special educational needs; those from ethnic minority and migrant groups; from the Traveller community; lesbian, gay, bisexual or transgender (LGBT) children and those perceived to be LGBT; and children of minority religious faiths.

There can be an increased vulnerability to bullying among children with special educational needs. This is particularly so among those who do not understand social cues and/or have difficulty communicating. Some children with complex needs may lack understanding of social situations and therefore trust everyone implicitly. Such children may be more vulnerable because they do not have the same social skills or capacity as others to recognise and defend themselves against bullying behaviour.

Bullying in schools is a particular problem due to the fact that children spend a significant portion of their time there and are in large social groups. In the first instance, the school authorities are responsible for dealing with such bullying. School management boards must have a code of behaviour and an antibullying policy in place. If you are a staff member of a school, you should also be aware of your school’s anti-bullying policy and of the relevant guidelines on how it is handled.

In cases of serious instances of bullying where the behaviour is regarded as possibly abusive, you may need to make a referral to Tusla and/or An Garda Síochána.

# Anti-Bullying Policy

Graiguecullen Parish Childcare Centre CLG is committed to being a safe and friendly place for all children. We expect all children and staff to be treated with respect and kindness at all times. Bullying is not tolerated and we have specific steps we follow in the event of bullying. GPCC seeks to identify, respond to and manage bullying in a timely and sensitive manner.

In accordance with the requirements of the Education (Welfare) Act 2000 and the code of behaviour guidelines issued by the National Educational Welfare Board, the Board of Management of Graiguecullen Parish Childcare Centre CLG has adopted the following anti-bullying policy within the framework of the Preschool’s and Afterschool’s overall code of behaviour.

This policy fully complies with the requirements of the Anti-Bullying Procedures for Primary and Post-Primary Schools which were published in September 2013. The Board of Management recognises the very serious nature of bullying and the negative impact that it can have on the lives of pupils and is therefore fully committed to the following key principles of best practice in preventing and tackling bullying behaviour:

* A positive school culture and climate which

• is welcoming of difference and diversity and is based on inclusivity.

• encourages pupils to disclose and discuss incidents of bullying behaviour in a non- threatening environment.

• promotes respectful relationships across the school community.

* Effective leadership.
* A school-wide approach.
* A shared understanding of what bullying is and its impact.
* Implementation of education and prevention strategies (including awareness raising measures) that-

• build empathy, respect and resilience in pupils.

• explicitly address the issues of cyber-bullying and identity-based bullying including in particular homophobic and transphobic bullying.

• effective supervision and monitoring of pupils.

* Effective supervision and monitoring of pupils
* Supports for staff.
* Consistent recording, investigation and follow up of bullying behaviour (including use of established intervention strategies).
* On-going evaluation of the effectiveness of the anti-bullying policy.

**Definition:**

Bullying can be defined as unwanted, negative behaviour that can be verbal, psychological or physical conducted by an individual or group among school aged children that involves a real or perceived power imbalance. The behaviour is repeated, or has the potential to be repeated, over time.

Bullying can include different types of actions:

* General behaviours which include harassment based on any of the nine grounds in the equality legislation, physical aggression, damage to property, offensive graffiti, extortion, intimidation, insulting or offensive gestures, invasion of personal space or a combination of all the above.
* Verbal bullying which includes name calling, slagging or insulting someone about their physical characteristics such as weight or height, or other attributes including race, sexuality, culture, or religion.
* Physical bullying which includes hitting or otherwise hurting someone, shoving or intimidating another person, or damaging or stealing their belongings
* Social bullying which includes consistently and deliberately excluding another person or sharing information, images or other digital content that will have a harmful effect on the other person.
* Cyber bullying is one or a group of children/teenagers using electronic means such as computers, tablets, mobile phones (emails, web sites, chat rooms instant messaging and texting) with the aim to embarrass, harm, alarm or distress. This includes:
  + spreading rumours, lies or gossip to hurt a person’s reputation.
  + continually sending vicious, mean or disturbing messages to an individual
  + posting offensive or aggressive messages under another person’s name
  + using inflammatory or vulgar words to provoke an online fight.
  + fooling someone into sharing personal information which you then post online.
  + posting or sharing confidential or compromising information or images
  + purposefully excluding someone from an online group
  + ongoing harassment that causes a person considerable fear for his/her safety
  + silent telephone/mobile phone call, abusive telephone/mobile phone calls, messages, email, communication on social networks e.g. Facebook/Ask.fm/ Twitter/You Tube or on games consoles.
  + abusive website comments/blogs/pictures
  + abusive posts on any form of communication technology.
* Identity-based bullying resides in the intersection of bullying and bias. It is defined as any form of bullying related to characteristics considered part of a person’s identity or perceived identity group, such as
  + Race (discrimination, prejudice, comments or insults about colour, nationality, culture, social class, religious beliefs, ethnic or traveller background and exclusion based on these)
  + Religion.
  + Disability (name calling, taunting, taking advantage of other children’s vulnerabilities, mimicking or setting children with disabilities up for ridicule)
  + Immigration status.
  + Sexual orientation and gender identity (spreading rumours about a person’s sexual orientation, name calling or physical intimidation).
  + physical appearance, etc.
* Relational bullying involves manipulating relationships as a means of exclusion such as malicious gossip, isolation/exclusion, ignoring, taking someone’s friends away and breaking confidence.

These behaviours alone don't define bullying. Repetition is not seen as a main characteristic of bullying. One instance of bullying and the implied threat of more instances can be perceived by a young person as equally harmful as several occurrences of bullying, whether this incident involves one or several perpetrators (UNESCO, 2020).

Isolated or once-off incidents of intentional negative behaviour, including a once-off offensive or hurtful text message or other private messaging, do not fall within the definition of bullying and should be dealt with, as appropriate, in accordance with the school’s code of behaviour.

However, in the context of this policy, placing a once-off offensive or hurtful public message, image or statement on a social network site or other public forum where that message, image or statement can be viewed and/or repeated by other people will be regarded as bullying behaviour.

Negative behaviour that does not meet this definition of bullying will be dealt with in accordance with our Code of Behaviour.

To prevent the children in our service being bullied, we at GPCC encourage children to participate in various activities such as kindness/anti-bullying week and encourage them to participate in our anti-bullying policy through multiple discussions. We also encourage children to develop appropriate conflict resolution skills, if/when disagreements occur.

We understand that it is our utmost responsibility in our organisation to reject bullying behaviour. We do these through various means of communication such as talk, discussion groups, meetings, electronic communication, display posters in public areas and online/in person sessions.

**Parental involvement:**

We encourage parental involvement to help them understand their role in preventing and addressing bullying behaviour. We do this by encouraging the parents to be involved with and read the anti-bullying policy through various means such as having our policies on our website, sending texts/emails, organising meetings between staff and parents, along with providing the necessary information in order for them to understand if their child is being bullied.

**Signs of children being bullied:**

* Not wanting to go to school.
* Declining school performance.
* Changes in mood or behaviour.
* Difficulty sleeping.
* Change in eating habits.
* Sudden disinterest in extracurricular activities, such as sports or clubs.
* Changes in friends or not hanging out with friends they used to enjoy.
* Physical injuries or destruction of property, including ripped clothing or damaged books or backpack.
* Frequent complaints of illness, such as upset stomach or headaches (these symptoms can stem from stress but are also common excuses to avoid school).
* Spontaneous out-of-character comments about either pupils or teachers
* Unexplained bruising or cuts or damaged clothing.
* Reluctance and/or refusal to say what is troubling him/her.

*There may be other signs depending on the individual and his/her circumstances. The above signs do not necessarily mean that a pupil is being bullied but if repeated or occurring in combination, these signs do warrant investigation in order to establish what is affecting the pupil.*

**Prevention of Bullying:**

At GPCC, we encourage parents to ensure that your child understands what bullying is through positive open communication. We understand that parents/caregivers may be the last to know if bullying is occurring, but you can break that trend by talking with your children every day about their social lives. We also encourage parents to know and understand the warning signs of bullying in their child listed above in this policy.

To prevent bullying occurring we:

* Teach kindness and empathy. When students are able to approach ideas and problems from multiple perspectives, they’re less likely to bully others.
* Create opportunities for connection.
* Identify ‘gateway behaviours.'
* Use the arts to create context.
* Offer support and guidance to all parties involved if bullying occurs.
* Continuously engage in CPD in relation to bullying
* Educate the children about the different types of bullying and how detrimental it can be.
* Create a safe, supportive environment.
* Use a school wide approach to teach the children about bullying, including introducing an anti-bullying coordinator and an anti-bullying committee consisting of the children in the service.
* Implement a buddy system.
* Continuous professional development for staff surrounding bullying.

**Reporting bullying behaviour:**

* Any child, parent/guardian or adult may bring a bullying incident to any teacher in the service.
* All reports, including anonymous reports of bullying, will be investigated and dealt with by all relevant staff.
* All adults within the service such as office administration, teachers, cleaners, caretakers and chefs must report any incidences of bullying to relevant to staff.
* Children will be encouraged to talk to staff if they have any worries or concerns at anytime.
* We encourage respectful relationships between staff and children.
* We allow for anonymous reporting by the children through passing notes to staff or our worry boxes in each room.
* Parents can contact the office directly if a child has a concern they wish to share with the staff members

**Intervention of Bullying:**

The Manager, Diane Darcy, will investigate any bullying allegations. This might involve speaking to the children involved, gathering information on who is involved and in the case of cyber-bullying, recording any posts online. All bullying investigations are handled sensitively. Parents are informed of any bullying investigation. On occasion, it may be necessary for GPCC to liaise with the child/children’s school. If bullying is also ongoing at school, GPCC and the school will communicate about the approach. While investigating any incidents of bullying:

* Staff will exercise their professional judgement to determine if bullying has occurred.
* Parents/guardians and children will be expected to cooperate with any investigation that takes place.
* All parties must remain calm and collected, using a positive problem-solving approach.
* Staff will ensure privacy for conversations with the children involved while talking about their concerns while not promising secrecy.
* If a group is involved, each person will be spoken to individually to see all sides of the incident.
* Parents/guardians will be contacted and informed of the incident.
* A plan will be put in place for the best way to approach and intervene with the bullying behaviour.
* All incidents of bullying must be recorded to assist in the efforts of reducing the incidents and reviewed often to see if there has been a decrease in bullying behaviour.

Following the identification of a bullying issue, GPCC will implement an intervention that is determined by the nature of the bullying and the children involved. We use different approaches such as “The No Blame” approach and recognise the needs of both the victim and the perpetrator. All staff are fully trained on the appropriate interventions. Interventions might include:

* Negotiating agreements between children.
* Working with parents and guardians.
* Mediation.
* Buddy/peer mentoring (pairing the target child with peers who can provide support and friendship).
* Reorganising groups of children to put distance between target and perpetrator.
* Ensure an adult is available close at hand to observe interactions and intervene if necessary.
* Incorporating strategies to build on resilience such as group activities, team bonding activities based on their interests.
* Use activities with children to support conflict resolution and resilience.
* Become familiar with each of the children’s needs.
* Ensure we are aware of any difficulties the child is experiencing in their home/school life.
* Aware of any diagnosis the child may have such as behavioural/additional needs.

***Serious instances of bullying, where the behaviour is regarded as possibly abusive, must be reported to Tusla or the Garda.***

**Cyber-Bullying:**

Cyber-bullying can be defined as bullying that occurs over the internet or via mobile phone. GPCC is committed to preventing cyber-bullying in our Service. The following guidelines are followed:

* The children in GPCC are not permitted to have a mobile phone switched on while on the premises and grounds.
* Children in GPCC have access to service tablets with supervision by staff that are protected by parental controls.
* Parents are requested to update GPCC of any potential cyber-bullying incidents they are aware of.
* Children/staff are required to report any incident of cyber-bullying to the service manager Diane Darcy.

**Available supports if bullying is reported:**

If you suspect your son or daughter is bullying another child, you need to take action, because young people who bully are in need of help just as their victims are. Parents can play an important role in helping their children understand the effects of bullying behaviour on others.

Students who bully are sometimes not aware of how their behaviour makes others feel, but they also may get pleasure and a sense of power from bullying. They often believe that bullying will gain them popularity. Young people who tend to bully may have leadership potential, which needs to be channelled in a more positive direction.

*Finding the base of the Problem*

Some young people who bully may have been bullied themselves either inside or outside the family. If they are witnessing violence in other areas of their lives, they may be imitating it, believing it to be acceptable. Sometimes teenagers may be reacting to family stresses by bullying others. Parents who have a very controlling style while showing little warmth for their children may unwittingly be creating a situation that fosters bullying. Equally, parents who are unclear about rules or boundaries may not be supplying enough support for their children to behave appropriately. Firm, consistent, warm parenting, with good communication is the happy medium.

**Storing Information:**

* All new staff will be informed of our confidentiality policy and procedures as part of their induction programme. The principles of confidentiality are raised by the Manager with all staff and it is impressed upon them that it is not acceptable to discuss matters relating to the children, the staff or the Services outside the setting.
* Information held in the service in relation to Child Protection concerns will be stored in a separate locked drawer and will be shared only on a need-to-know basis in line with our Child Protection Policy and with Data Protection Legislation.
* In a child protection situation observations/record in relation to children may have to be made available to TUSLA.
* Breaches of confidentiality will be dealt with by the BOM/Manager.
* The security of personal information relating to children and families is a very important consideration under the Data Protection Acts. Appropriate security measures will be taken by Graiguecullen Parish Childcare Centre against unauthorised access to this data and to the data it is collecting and storing on behalf of the DCYA.
* A minimum standard of security will include the following measures:
* Manual files will be stored in a lockable filing cabinet located away from public areas.
* Computerised data will be held under password protected files with a limited number of users.
* Any information which needs to be disposed of, will be done so carefully and thoroughly.
* Premises will be secured when unoccupied.

**What you can do**

Challenge any aggressive behaviour and insist that it is unacceptable. Explain what acceptable behaviour is and reward it with praise when you notice it. For example, you can discuss how to co-operate with others, ways of asking for things instead of taking them, turn-taking in activities and conversation and so on.

**Prevention of Harassment:**

The Board of Management confirms that the school will, in accordance with its obligations under equality legislation, take all such steps that are reasonably practicable to prevent the sexual harassment of pupils or staff or the harassment of pupils or staff on any of the nine grounds specified i.e. gender including transgender, civil status, family status, sexual orientation, religion, age, disability, race and membership of the Traveller community.

This policy was adopted by the Board of Management on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [date].

This Anti-Bullying Policy has been made available to all members of the setting (children, parents and staff), published on the Graiguecullen Parish Childcare Centre website, and provided to the board of management. A copy will be made available to the Department of Education and Skills if requested.

Management of Graiguecullen Parish Childcare Centre will review the policy once in every year using the checklist from Appendix 4 of the Department of Education and Skills *Anti-Bullying Procedures for Primary and Post-Primary Schools.* Management will inform members of the setting community that the review has been completed using the notification template from the Department of Education and Skills *Anti-Bullying Procedures for Primary and Post-Primary Schools*. A record of the review and its outcome will be made available, if requested, the Department.

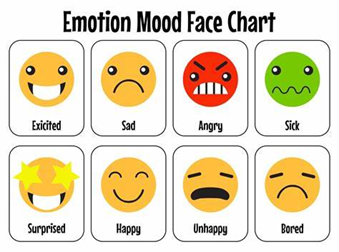
## GPCC CHILD FRIENDLY ANTI-BULLYING POLICY

*What is bullying?*

Bullying is being mean to someone on purpose, over and over again.

*How do we know if someone is being bullied?*

* If you notice someone is more quiet than normal.
* They could appear sad.
* If someone is always mean to them.
* If they’re always hurt
* If they are being left out on purpose.
* If someone keeps hurting them after being told to stop.



*How can we help someone that is being bullied?*

* Include them.
* Tell someone you trust.
* Protect them, tell them to STOP!
* Be kinder than usual.
* Sit with them.



If you feel:

Unhappy or sad about something happening in our Afterschool, someone you see there or feel like you are being bullied, Tell your Key Worker or another adult in the room.



NEVER KEEP IT TO YOURSELF

We will: always listen and help to resolve your concerns.



# ****GUIDANCE ON RESPONDING TO A DISCLOSURE****

Remember, a child may disclose abuse to you as a trusted adult at any time during your work with them. It is important that you are aware and prepared for this

• Be as calm and natural as possible.

• Remember that you have been approached because you are trusted and possibly liked. Do not panic.

• Be aware that disclosures can be very difficult for the child.

• Remember, the child may initially be testing your reactions and may only fully open up over a period of time.

• Listen to what the child has to say. Give them the time and opportunity to tell as much as they are able and wish to.

• Do not pressurise the child. Allow him or her to disclose at their own pace and in their own language.

• Conceal any signs of disgust, anger or disbelief.

• Accept what the child has to say – false disclosures are very rare.

• It is important to differentiate between the person who carried out the abuse and the act of abuse itself. The child quite possibly may love or strongly like the alleged abuser while also disliking what was done to them. It is important therefore to avoid expressing any judgement on, or anger towards, the alleged perpetrator while talking with the child.

• It may be necessary to reassure the child that your feelings towards him or her have not been affected in a negative way as a result of what they have disclosed. When asking questions.

• Questions should be supportive and for the purpose of clarification only.

• Avoid leading questions, such as asking whether a specific person carried out the abuse. Also, avoid asking about intimate details or suggesting that something else may have happened other than what you have been told. Such questions and suggestions could complicate the official investigation.

## **Confidentiality**

Do not promise to keep secrets. At the earliest opportunity, tell the child that:

• You acknowledge that they have come to you because they trust you.

• You will be sharing this information only with people who understand this area and who can help. There are secrets, which are not helpful and should not be kept because they make matters worse. Such secrets hide things that need to be known if people are to be helped and protected from further ongoing hurt. By refusing to make a commitment to secrecy to the child, you do run the risk that they may not tell you everything (or, indeed, anything) there and then.

However, it is better to do this than to tell a lie and ruin the child’s confidence in yet another adult. By being honest, it is more likely that the child will return to you at another time. Think before you promise anything – Do not make promises you cannot keep.

## **Ongoing Support**

Following a disclosure by a child, it is important that the staff member continues in a supportive relationship with the child. Disclosure is a huge step for a child. Staff should continue to offer support, particularly through:

• maintaining a positive relationship with the child;

• keeping lines of communication open by listening carefully to the child;

• continuing to include the child in the usual activities.

Any further disclosure should be treated as a first disclosure and responded to as indicated above.

Where necessary, immediate action should be taken to ensure the child’s safety.

## **Reporting A Concern/Disclosure To The DLP**

At the earliest possible opportunity:

• Record in writing, in factual manner, what the child has said, including, as far as possible, the exact words used by the child.

• Inform your DLP/Manager immediately and agree measures to protect the child, i.e. report the matter directly to the TUSLA.

• Maintain appropriate confidentiality.

Follow your organisation’s procedures for child protection issues. Further support regarding concerns is available from the TUSLA.

## **Gpcc DLP Reporting Procedures**

**Tusla will always be informed it there are reasonable grounds for concern that a child may have been or is at risk of being abused or neglected.** **Concerns will be reported either in person, by telephone or in writing — including by email — to the local social work duty service in the area where the child lives.**

**LAOIS**

Laois is located in a Tusla Area comprising of Laois, Offaly, Longford and Westmeath. The duty social work office covering Laois is located in Westmeath.

|  |  |  |
| --- | --- | --- |
| Duty Social Work Team, Tusla-  Child & Family Agency | An Garda Siochana |  |
| Names: |  |  |
| Posts:  Duty Social Worker |  |  |
| TUSLA, Athlone Health Centre, Coosan Road, Athlone, Co Westmeath  0906483106 | Contact Details:  0578674100 |  |

**CARLOW**

Carlow is located in a Tusla Area comprising of Carlow, Kilkenny and South Tipperary.  The duty social work office covering Carlow is located in Tipperary.

|  |  |  |
| --- | --- | --- |
| Duty Social Work Team, Tusla-  Child & Family Agency | An Garda Siochana |  |
| Names: |  |  |
| Posts:  Duty Social Worker |  |  |
| Contact Details:  TUSLA, Yellow House,  Wester Road, Clonmel, Co. Tipperary  E91 PR83  052 6177302 | Contact Details:  059 9136620 |  |

* All concerns/disclosures brought to the DLP will be documented.
* The DLP for GPCC may decide to:
  1. Discuss the concern with the parent/guardian and/or
  2. Continue to closely monitor the situation.
  3. If concerned about a child but unsure whether to report it to Tusla, the DLP may find it useful to contact Tusla to informally discuss the concern. This provides an opportunity to discuss the query in general and to decide whether a formal report of the concern to Tusla is appropriate at this stage. If the concern is below the threshold for reporting, Tusla may be able to provide advice in terms of keeping an eye on the child and other services that may be more suitable to meeting the needs of the child and/or family.
  4. In the case of verbal advice being sought from the TUSLA, where a decision is reached to make a referral, the Child Protection and Welfare Report Form will be sent to TUSLA immediately. A copy of the correspondence will be kept of file by the DLP. All records will be filed securely and confidentially with access only by the DLP or Deputy DLP for GPCC.
  5. Report the concerns to Tusla using the Child Protection and Welfare Report Form, at the earliest opportunity and also inform the parent/guardian that a referral is to be made (unless doing so would put the child at further risk). The name of the TUSLA designated officer who receives the report will be recorded together with the date. All documentation will be filed securely in the Manager’s office.
  6. Under no circumstances should a child be left in a situation that exposes him or her to harm pending Child & Family Agency intervention. In the event of an emergency and the unavailability of a Duty Social Worker, the DLP will contact An Garda Síochána
* The confidentiality of the child and family will be respected by all staff, but the service will not treat as confidential information which needs to be shared to protect children.
* The Chairperson of GPCC will be informed each time a referral or report is made under the Child

Protection and Welfare Policy and Procedures. In accordance with the confidentiality policy, no

identifying information is included when informing the Chairperson.

* The Service is committed to working collaboratively with all agencies and disciplines concerned with the protection and welfare of children.
* The staff member/Manager/DLP will not attempt to assume the responsibility of TUSLA by carrying out an investigation.

What information to include

To help Tusla staff assess your reasonable concern, they need as much information as possible. As much relevant information as you can about the child, his/her home circumstances and the grounds for concern should be provided.

*These could include:*

* The child’s name, address and age.
* Names and addresses of parents or guardians.
* Names, if known, of who is allegedly harming the child or not caring for them appropriately
* A detailed account of your grounds for concern (e.g. details of the allegation, dates of incidents, and description of injuries)
* Names of other children in the household
* Name of school the child attends
* Your name, contact details and relationship to the child

As much information as possible should be given to social workers at an early stage so that they can do a full check of their records. For instance, they can see if the child and/or a sibling have been the subject of a previous referral, or if an adult in the household had previous contact with the child protection services. It also helps social workers to prioritise cases for attention, as they are not in a position to respond immediately to all cases. However, they will always respond where a child is in immediate danger or at high risk of harm. It will also help Tusla to decide if another service would be more appropriate to help meet the needs of the child, i.e. a community or family support service rather than a social work service.

Informing parents about Child Protection and Welfare Concerns

Good communication with parents is very important in ensuring best outcomes for children and any concerns about the health and well-being of a child will always be discussed with parents from the outset.

When a child protection concern is being reported to the Child & Family Agency, good practice indicates that parents should be informed about the report unless doing so may put the child at further risk. The DLP may seek advice from the Child & Family Agency Social Work Department in relation to this.

Can a report be made anonymously?

While it is possible to report a concern without giving your name, it may make it difficult for Tusla to assess your concern. All information that you provide will be dealt with in a professional manner. While Tusla cannot guarantee confidentiality, in general it will not reveal the names of members of the public who report suspected child abuse without their permission.

Remember, if you are a mandated person, you cannot submit a report of a mandated concern anonymously, as to do so will mean you are not complying with your obligations under the Act.

What happens after a report is received by Tusla?

Tusla has the statutory responsibility to assess all reports of child welfare and protection concerns. Assessments are carried out by Tusla social workers. If concerns are found after the initial checks, further evaluation involving a detailed examination of the child and family’s circumstances will follow. If concerns about a child’s welfare are found, but do not involve a child protection issue, then the family may be referred to community or family support services. If no concerns are found, then the information gathered is recorded and kept on a confidential file where it will be examined if further concerns or more information comes to light.

If you make a report about a child, Tusla will normally acknowledge it, and may contact you for further information, if necessary. It is understandable that you would like to be assured that the matter is being followed up. However, to protect the privacy of the child and family, it may not be possible for Tusla to inform you of the progress or outcome of Tusla’s contact with the child or family, unless you are involved in discussions around family support or child protection plans. If you continue to have concerns about the child, or if additional information comes to light, you should contact Tusla.

## **Concerns About An Adult Who May Pose A Risk To Children**

While in most cases concerns for the welfare or safety of a child develop from your own observation or knowledge of the child or their family, sometimes concerns arise about whether an adult may pose a risk to children, even if there is no specific child named in relation to the concern. For example, based on known or suspected past behaviour, a concern could exist about the risk an individual may pose to children with whom they may have contact. You should report any such reasonable concerns to Tusla, who will try to establish whether or not any child is currently at risk from the individual in question.

While Tusla will make every effort to examine such cases, it is a very complex area involving the accused’s constitutional rights to their good name, privacy and the right to earn a living, as well as the requirements of natural justice. Tusla must work within the Constitution, the law, the legal system and the demands of natural justice to balance the conflicting rights of those involved. This may limit how much feedback Tusla can provide to you on the progress or outcome of the case. Tusla’s examination can be greatly improved if the alleged victim feels able to cooperate with Tusla in its assessment or investigation.

## **Responding To A Retrospective Disclosure By An Adult Of Abuse As A Child**

An increasing number of adults are disclosing abuse that took place during their childhood. If a staff member becomes aware of a retrospective concern, they should follow the reporting procedure (record the information) and speak with the DLP. If any risk is deemed to exist to a child who may be in contact with an alleged abuser, the service will report the concern to TUSLA without delay.

## **Procedures For Dealing With Allegations Of Abuse Or Neglect Against Employees And Volunteers**

The protection and welfare of the children in the service are paramount and their safety and well-being is the priority. The first priority will be to ensure that no child is exposed to unnecessary risk. The manager will, as a matter of urgency, take any necessary protective measures, proportionate to the level of risk.

However, the service also has a duty and responsibility, as an employer, in respect of its employees. It is important to note that there are two procedures to be followed when an allegation of abuse or neglect is made against an employee:

1. Reporting procedure in respect of any child protection and welfare concern

2. The procedure in respect to the allegation against the employee

Therefore, it is the policy of GPCC that two different people will be nominated to manage each procedure

1. The DLP will be responsible for reporting the matter to TUSLA (as per the reporting procedure) while

2. A member of the Board of Management (Employer) will be responsible for addressing the employment issues

Reporting the matter Tusla

To be reported to Tusla the allegation must meet the reasonable grounds for reporting of a concern.

Informal consultation with TUSLA may be used to determine if reasonable grounds are present

If the concern meets the reasonable grounds for reporting, then it will be referred without delay to Tusla

Procedure for dealing with the employee

Where the employer becomes aware of an allegation of abuse by the employee while executing their duties, the employer should privately inform the employee of the following

1. The fact that an allegation has been made against him/her

2. The nature of the allegation

The employee should be afforded the opportunity to respond; the response should be noted and passed on to TUSLA with the formal report.

Whether or not the matter is being reported to TUSLA, the employer is always informed of an allegation of abuse or neglect against an employee.

Written Records

If the disclosure is made by a child, a written record of the disclosure should be made as soon as possible by the person receiving it.

Where an allegation of abuse or neglect is made by an adult, a written record of the allegation should be made, and a written statement should be sought from this person.

All stages of the process should be recorded

Confidentiality

It is essential that at all times the matter is treated in the strictest confidence and that the identity of the employee is not disclosed, other than as required under the procedures within the policy.

Investigation

An investigation may be required, and the Board of Management will decide who will carry this out, the time involved and any appeal process. Independent external parties may be called upon.

GPCC will retain regular and close liaison with TUSLA and An Garda Sìochàna and ensure that no action by the service frustrates or undermines any investigation being conducted by them.

Protective measures

Protective measures may be required while the allegation is being investigated.

The principals of natural justice, the presumption of innocence and fair procedures will be adhered to. It is important to note protective measures are intended to be precautionary and not disciplinary

Further action will be guided by employment legislation, the contract of employment, the other policies and procedures of the service (including the disciplinary policy) and the advice of the investigating agencies.

The service may seek legal advice when dealing with allegations of abuse or neglect against an employee.

## **Parents And Allegations Of Abuse Or Neglect Against Employees**

Parents have the right to contact Tusla to report an allegation of abuse or neglect about an employee or the service.

Parents of children who are named in an allegation of abuse or neglect will be kept informed of actions planned and taken, having regard to the rights of others concerned.

If there is any concern that a child may have been harmed, their parents will be informed immediately.

# ****RELEVANT LEGISLATION****

There are a number of key pieces of legislation that relate to child welfare and protection. The information here gives a brief overview of relevant legislation. It is not intended as legal opinion or advice and, if in doubt, you should consult the original legislation.

## **Child Care Act 1991**

This is the key piece of legislation which regulates child care policy in Ireland. Under this Act, Tulsa has a statutory responsibility to promote the welfare of children who are not receiving adequate care and protection. If it is found that a child is not receiving adequate care and protection, Tusla has a duty to take appropriate action to promote the welfare of the child. This may include supporting families in need of assistance in providing care and protection to their children. The Child Care Act also sets out the statutory framework for taking children into care, if necessary.

## **Protections For Persons Reporting Child Abuse Act 1998**

This Act protects you if you make a report of suspected child abuse to designated officers of Tusla, the Health Service Executive (HSE) or to members of the Gardaí as long as the report is made in good faith and is not malicious. Designated officers also include persons authorised by the Chief Executive Officer of Tusla to receive and acknowledge reports of mandated concerns about a child from mandated persons under the Children First Act 2015.

This legal protection means that even if you report a case of suspected child abuse and it proves unfounded, a plaintiff who took an action would have to prove that you had not acted reasonably and in good faith in making the report. If you make a report in good faith and in the child’s best interests, you may also be protected under common law by the defence of qualified privilege.

You can find the full list of persons in Tusla and the HSE who are designated officers under the 1998 Act, on the website of each agency (www.tusla.ie and [www.hse.ie](http://www.hse.ie)).

## **Criminal Justice Act 2006**

Section 176 of this Act created an offence of reckless endangerment of children. This offence may be committed by a person who has authority or control over a child or abuser who intentionally or recklessly endangers a child by: 1. Causing or permitting the child to be placed or left in a situation that creates a substantial risk to the child of being a victim of serious harm or sexual abuse; or 2. Failing to take reasonable steps to protect a child from such a risk while knowing that the child is in such a situation.

## **Criminal Justice (Withholding Of Information On Offences Against Children And Vulnerable Persons) Act 2012**

Under this Act, it is a criminal offence to withhold information about a serious offence, including a sexual offence, against a person under 18 years or a vulnerable person. The offence arises where a person knows or believes that a specified offence has been committed against a child or vulnerable person and he or she has information which would help arrest, prosecute or convict another person for that offence, but fails without reasonable excuse to disclose that information, as soon as it is practicable to do so, to a member of An Garda Síochána.

The provisions of the Withholding legislation are in addition to any reporting requirements under the Children First Act 2015.

## **National Vetting Bureau (Children And Vulnerable Persons) Acts 2012–2016**

Under these Acts, it is compulsory for employers to obtain vetting disclosures in relation to anyone who is carrying out relevant work with children or vulnerable adults. The Acts create offences and penalties for persons who fail to comply with their provisions. Statutory obligations on employers in relation to Garda vetting requirements for persons working with children and vulnerable adults are set out in the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012–2016.

## **Children First Act 2015**

The Children First Act 2015 is an important addition to the child welfare and protection system as it will help to ensure that child protection concerns are brought to the attention of Tusla without delay.

The Act provides for mandatory reporting of child welfare and protection concerns by key professionals; comprehensive risk assessment and planning for a strong organisational culture of safeguarding in all services provided to children; a provision for a register of non-compliance; and the statutory underpinning of the existing Children First Interdepartmental Implementation Group which promotes and oversees cross-sectoral implementation and compliance with Children First.

## **Law (Sexual Offences) Act 2017**

This Act addresses the sexual exploitation of children and targets those who engage in this criminal activity. It creates offences relating to the obtaining or providing of children for the purposes of sexual exploitation. It also creates offences of the types of activity which may occur during the early stages of the predatory process prior to the actual exploitation of a child, for example, using modern technology to prey on children and making arrangements to meet with a child where the intention is to sexually exploit the child. The Act also recognises the existence of underage, consensual peer relationships where any sexual activity falls within strictly defined age limits and the relationship is not intimidatory or exploitative.

# ****MANDATED PERSONS****

Mandated persons are people who have contact with children and/or families and who, because of their qualifications, training and/or employment role, are in a key position to help protect children from harm. Mandated persons include professionals working with children in the education, health, justice, youth and childcare sectors.

## **The Legal Obligations Of A Mandated Person**

Mandated persons have two main legal obligations under the Children First Act 2015.

These are:

1. To report the harm of children above a defined threshold to Tusla;

2. To assist Tusla, if requested, in assessing a concern which has been the subject of a mandated report.

## **Reporting Mandated Concerns**

Criteria for reporting: definitions and thresholds

As a mandated person, under the legislation you are required to report any knowledge, belief or reasonable suspicion that a child has been harmed, is being harmed, or is at risk of being harmed. The Act defines harm as assault, ill-treatment, neglect or sexual abuse, and covers single and multiple instances.

The threshold of harm for each category of abuse at which mandated persons have a legal obligation to report concerns is outlined below.

If you are in doubt about whether your concern reaches the legal definition of harm for making a mandated report, Tusla can provide advice in this regard. You can find details of who to contact to discuss your concern on the Tusla website (www.Tusla.ie). If your concern does not reach the threshold for mandated reporting, but you feel it is a reasonable concern about the welfare or protection of a child, you should report it to Tusla under this Guidance.

## **Neglect**

Neglect is defined as ‘to deprive a child of adequate food, warmth, clothing, hygiene, supervision, safety or medical care’. The threshold of harm, at which you must report to Tusla under the Children First Act 2015, is reached when you know, believe or have reasonable grounds to suspect that a child’s needs have been neglected, are being neglected, or are at risk of being neglected to the point where the child’s health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.

## **Emotional Abuse/Ill-Treatment**

Ill-treatment is defined as ‘to abandon or cruelly treat the child, or to cause or procure or allow the child to be abandoned or cruelly treated’. Emotional abuse is covered in the definition of ill-treatment used in the Children First Act 2015.

The threshold of harm, at which you must report to Tusla under the Children First Act 2015, is reached when you know, believe or have reasonable grounds to suspect that a child has been, is being, or is at risk of being ill-treated to the point where the child’s health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.

## **Physical Abuse**

Physical abuse is covered in the references to assault in the Children First Act 2015. The threshold of harm, at which you must report to Tusla under the Children First Act 2015, is reached when you know, believe or have reasonable grounds to suspect that a child has been, is being, or is at risk of being assaulted and that as a result the child’s health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.

## **Sexual Abuse**

If, as a mandated person, you know, believe or have reasonable grounds to suspect that a child has been, is being, or is at risk of being sexually abused, then you must report this to Tusla under the Children First Act 2015.

Sexual abuse to be reported under the Children First Act 2015 [as amended by section 55 of the Criminal Law (Sexual Offences) Act 2017] is defined as an offence against the child, as listed in Schedule 3 of the Children First Act 2015.

A full list of relevant offences against the child which are considered sexual abuse is set out in Appendix ii.

As all sexual abuse falls within the category of seriously affecting a child’s health, welfare or development, you must submit all concerns about sexual abuse as a mandated report to Tusla. There is one exception, which deals with certain consensual sexual activity between teenagers which is outlined below

## **Disclosures Of Abuse From A Child**

If, as a mandated person, you receive a disclosure of harm from a child, which is above the thresholds set out above, you must make a mandated report of the concern to Tusla. You are not required to judge the truth of the claims or the credibility of the child. If the concern does not meet the threshold to be reported as a mandated concern you should report it to Tusla as a reasonable concern.

If you receive a disclosure of harm from a child, you may feel reluctant to report this for a number of reasons. For example, the child may say that they do not want the disclosure to be reported, or you may take the view that the child is now safe and that the involvement of Tusla may not be desired by either the child or their family. However, you need to inform Tusla of all risks to children above the threshold, as the removal of a risk to one child does not necessarily mean that there are no other children at risk. The information contained in a disclosure may be critical to Tusla’s assessment of risk to another child either now or in the future.

You should deal with disclosures of abuse sensitively and professionally. The following approach is suggested as best practice for dealing with these disclosures.

* React calmly
* Listen carefully and attentively
* Take the child seriously
* Reassure the child that they have taken the right action in talking to you
* Do not promise to keep anything secret
* Ask questions for clarification only. Do not ask leading questions
* Check back with the child that what you have heard is correct and understood
* Do not express any opinions about the alleged abuser
* Ensure that the child understands the procedures that will follow
* Make a written record of the conversation as soon as possible, in as much detail as possible
* Treat the information confidentially, subject to the requirements of Children First National Guidance and legislation

## **Exemptions From Requirements To Report**

Underage consensual sexual activity

Under the Criminal Law (Sexual Offences) Act 2006 the legal age of consent is 17 years. While a sexual relationship where one or both parties is under 17 years of age is illegal, when making a mandated report to Tusla, it might not be regarded as child sexual abuse.

There are certain exemptions from reporting underage consensual sexual activity under section 14(3) of the Children First Act 2015.

If you are satisfied that **all** of the following criteria are met, you are not required to make a report to Tusla:

* The young person(s) concerned are between 15 and 17 years old
* The age difference between them is not more than 24 months
* There is no material difference in their maturity or capacity to consent
* The relationship between the people engaged in the sexual activity does not involve intimidation or exploitation of either person
* The young persons concerned state clearly that they do not want any information about the activity to be disclosed to Tusla

In effect, this means that if **all** of the above criteria are met, you as a mandated person do not have to report consensual sexual activity between older teenagers as sexual abuse to Tusla.

## **Concerns Developed Outside Of Professional Duties**

The legal obligation to report under the Act applies only to information that you acquire in the course of your professional work or employment. It does not apply to information you acquire outside your work, or information given to you on the basis of a personal rather than a professional relationship. While the legal obligation to report only arises for employment or professional duties, you should comply with the requirement of Children First National Guidance to report all reasonable concerns to Tusla.

## **Making A Mandated Report**

Section 14 of the Children First Act 2015 requires mandated persons to report a mandated concern to Tusla ‘as soon as practicable’. You should submit a report of a mandated concern to Tusla using the required report form, on which you should indicate that you are a mandated person and that your report is about a mandated concern. You should include as much relevant information as possible in the report as this will aid effective and early intervention for the child and may reduce the likelihood of Tusla needing to contact you for further information. You can find the report form (Appendix 1)

and contact details on the Tusla website ([www.Tusla.ie](http://www.tusla.ie))

The Children First Act 2015 requires the CEO of Tusla to appoint authorised persons to receive mandated reports. A mandated person who makes a report to an authorised person is protected from civil liability under the Protections for Persons Reporting Child Abuse Act 1998. The mandated report form can either be posted or submitted electronically to Tusla. You can find details of how to access relevant Tusla authorised staff on the Tusla website. Authorised persons are obliged to acknowledge in writing all mandated reports they receive.

If you feel the concern may require urgent intervention to make the child safe, section 14(7) of the Children First Act 2015 allows you to alert Tusla of the concern in advance of submitting a written report. You must then submit a mandated report to Tusla on the report form within three days.

Under no circumstances should a child be left in a situation that exposes him or her to harm or risk of harm pending intervention by Tusla. If you think the child is in immediate danger and you cannot contact Tusla, you should contact the Gardaí.

You should be aware that Tusla may be unable to provide feedback to you on the progress or outcome of the case. However, the information which you have provided will be carefully considered with any other information available to Tusla, and a child protection assessment will take place if sufficient risk is identified.

You are not required to report the same concern more than once. However, if you become aware of any additional information, a further report should be made to Tusla. In addition, you are not required to make a report where the sole basis for your knowledge, belief or suspicion of harm is as a result of becoming aware that another mandated person has made a report to Tusla about the child.

## **Joint Reporting**

As a mandated person, you may make a report jointly with any other person, whether that person is also a mandated person or not. For example, this could arise in situations where a child is admitted to the hospital emergency department and could be seen by a number of health professionals, or in a school where the teacher, the special needs assistant (SNA) and the principal all have concerns about the same child and wish to make a joint report to Tusla.

## **Informing The Family That A Report Is Being Made**

The Children First Act 2015 does not require you to inform the family that a report under the legislation is being made to Tusla. However, it is good practice to tell the family that a report is being made and the reasons for the decision.

It is not necessary to inform the family that a report is being made if by doing so the child will be placed at further risk or where the family’s knowledge of the report could impair Tusla’s ability to carry out a risk assessment. Also, you do not need to inform the family if you reasonably believe that by doing so it may place you at risk of harm from the family.

## **Informing The Employer Or Designated Liaison Person**

As part of their child protection reporting procedures or internal human resources (HR) policy, employers may require mandated persons to inform them if a mandated report has been made and to provide a copy of the report. You should be familiar with your employer’s procedures and follow them.

Also, many organisations providing services to children have a designated liaison person, who acts as a resource to any staff member who has a child protection concern. Designated liaison persons are responsible for ensuring that reporting procedures are followed correctly and promptly and they act as liaison person with other agencies.

As a mandated person, you have a statutory obligation to report concerns of harm which meet or exceed the threshold set out in the Children First Act 2015 directly to Tusla. However, there is nothing in the Act to prevent you from either making a mandated report jointly with a designated liaison person or providing a copy of the mandated report you have submitted to Tusla for the information of the designated liaison person.

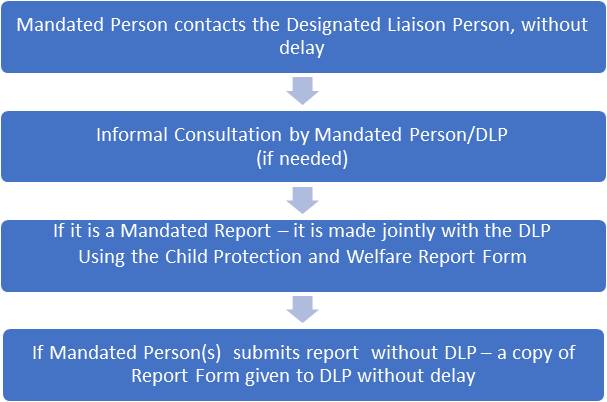
## **Designated Liaison Persons And Mandated Persons**

As our designated liaison persons is working in an organisation where mandated persons are also employed it is important to note that the statutory obligation of mandated persons to report under the Children First Act 2015 must be discharged by the mandated person and cannot be discharged by the designated liaison person on their behalf.

The mandated person who is also designated liaison person in our organisation, must fulfil the statutory obligations of a mandated person This means that if, as a designated liaison person, you are made aware of a concern about a child that meets or exceeds the thresholds of harm for mandated reporting, you have a statutory obligation to make a report to Tusla arising from your position as a mandated person.

While mandated persons have statutory obligations to report mandated concerns, they may make a report jointly with another person, whether the other person is a mandated person or not. In effect, this means that a mandated person can make a joint report with a designated liaison person.

## **When A Mandated Person Has A Concern About A Child**



## **Consequences Of Non-Reporting**

The Children First Act 2015 does not impose criminal sanctions on mandated persons who fail to make a report to Tusla. However, you should be aware that there are possible consequences for a failure to report. There are a number of administrative actions that Tusla could take if, after an investigation, it emerges that you did not make a mandated report and a child was subsequently left at risk or harmed.

Tusla may:

* Make a complaint to the Fitness to Practise Committee of a regulatory body of which you are a member
* Pass information about your failure to make a report to the National Vetting Bureau of An Garda Síochána. This information could therefore be disclosed to your current or future employers when you are next vetted

In general, many employers consider a failure to report a child protection concern to be a disciplinary matter. Employers are encouraged to include references to obligations in relation to mandated reporting in codes of conduct and contracts of employment for relevant persons.

The Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 requires that any person who has information about a serious offence against a child, which may result in charges or prosecution, must report this to An Garda Síochána. Failure to report under the Act is a criminal offence under that legislation. This obligation is **in addition to** any obligations under the Children First Act 2015.

*As a mandated person, you should be aware that the legal obligations under the Children First Act 2015 to report mandated concerns rest with you and not with the designated liaison person.*

## **Mandated Assisting**

When Tusla receives a report of harm to a child, the information in the report is used to assess the risk of harm to that child, or any other child. Written reports from mandated persons should improve the quality of information available to Tusla and therefore improve the assessment process, although in some instances Tusla will need further information from the person making the report. The better the quality of the initial report, and the more comprehensive and relevant the information given at that stage, the more likely Tusla can make an early and effective decision about how to deal with the reported concern.

It is usual practice for professionals, who have ongoing contact with a child and where there is concern about possible abuse, to continue to engage with Tusla’s social work team to assist in the protection of the child. To support and reinforce this practice, the Children First Act 2015 provides that all mandated persons can be asked by Tusla to provide any necessary and proportionate assistance to aid Tusla in assessing the risk to a child arising from a mandated report. You must comply with this request, regardless of who made the report. Tusla accepts the time limitations and pressures on other professionals and will use mandated assisting only when necessary and only to the extent needed in each specific case. Mandated assistance may include a request to supply further information over the phone, produce a verbal or written report or attend a meeting. You can find the Tusla Children First – Protocol for Mandated Assisting on the Tusla website ([www.Tusla.ie](http://www.tusla.ie)).

Tusla is committed to promoting the welfare of children. Its ability to do so is greatly improved if all professionals involved with the child work together in the child’s interests. Tusla’s ability to make good-quality evidence-based decisions about a child’s welfare and/or protection is enhanced by cooperation and information-sharing about a child.

Sharing information

The Data Protection Acts 1988 and 2003 do not prevent the sharing of information on a reasonable and proportionate basis for the purposes of child protection. Tusla has the authority to share information concerning a child who is the subject of a risk assessment with a mandated person who has been asked to provide assistance. Tusla must only share what is necessary and proportionate in the circumstances of each individual case.

Information that Tusla shares with you, if you are assisting it to carry out an assessment, must not be shared with a third party, unless Tusla considers it appropriate and authorises in writing that the information may be shared. This is in keeping with the principles of data protection, which recognise that in certain circumstances information can be shared in the interests of child protection, but that such sharing must be necessary and proportionate.

Section 17 of the Children First Act 2015 makes it an offence for you to disclose information to a third party which has been shared by Tusla during the course of an assessment, unless Tusla has given you written authorisation to do so. If you fail to comply with this section, you may be liable to a fine or imprisonment for up to six months or both. This offence can also be applied to an organisation.

Protection from civil liability

If you are required to share information with Tusla when assisting in the assessment of risk to a child, you are protected from civil liability. Section 16(3) of the Children First Act 2015 states:

‘ If a mandated person furnishes any information (including a report), document or thing to the Agency pursuant to a request made under subsection (1), the furnishing of that information, document or thing shall not give rise to any civil liability in contract, tort or otherwise and nor shall the information, document or thing be admissible as evidence against that person in any civil or criminal proceedings.’

# RIGHTS OF THE CHILD

Young children rely on responsible adults to care and protect them. Our staff members at Graiguecullen Parish Childcare Centre are in a relationship of special trust – one that is powerful and important. We recognise that our role is multi-faceted and we have developed this code of ethics to assist us provide the best quality service possible.

Policy and Procedure

This Code of Ethics is underpinned by the following principles.

• The wellbeing of the individual child is of fundamental importance.

• We acknowledge the individuality of each child attending the service.

• We consider the needs of the child within the context of the family and culture, as the family is a major influence on the young child.

• We take into account the critical impact of self- esteem on the individual child’s development.

• We base our practice on sound knowledge, research and theories, while at the same time recognising the limitations and uncertainties of these.

• We work to fulfil the right of all children and their families for access to services of high quality.

Procedure

Based on the above principles The Graiguecullen Parish Childcare Centre has developed the following Children’s Charter.

# ****CHILDREN’S CHARTER****

Children’s welfare and their rights to secure, healthy and happy childhood are paramount.

The experiences children receive in their early years are critically important in terms of future development.

Children are entitled to expect that all adults will respect, uphold and preserve their rights and to ensure that their feelings and wishes are taken into account.

Children should have the opportunity to make choices and develop a sense of responsibility for their own actions appropriate to their age.

Children, parents and carers should not be discriminated against, particularly in relation to colour, age, race, religion, gender, disability medical conditions or background.

Parents should be recognised and respected as children’s first and continuing educators.

# ****CONFIDENTIALITY STATEMENT****

The provision of information to the statutory agencies for the protection of a child is not a breach of confidentiality or data protection.

All information regarding concerns will be shared on a need to know basis

No undertakings regarding secrecy can be given

# **Statement Of Intent**

Graiguecullen Parish Childcare Centre respects the right for all information, records and observations to be treated with respect and with due attention to confidentiality and privacy.

## **Confidentiality & Data Protection Policy**

It is our policy to keep confidential all personal information about the children, families, staff and volunteers involved in our service.

Personal information about families in relation to Child Protection concerns will be shared on a need to know basis in line with our Child Protection & Data Protection Policies.

Confidentiality & Procedures for Managing Child Protection Records

* Parents will have access to records kept in the service, but only in relation to their own child.
* Parents are made aware of the necessity of keeping records in relation to the children in order to comply with the Child Care Services Regulations 1996.
* All new staff will be informed of our confidentiality policy and procedures as part of their induction programme. The principles of confidentiality are raised by the Manager with all staff and it is impressed upon them that it is not acceptable to discuss matters relating to the children, the staff or the Services outside the setting.
* Information held in the service in relation to Child Protection concerns will be stored in a separate locked drawer and will be shared only on a need to know basis in line with our Child Protection Policy and with Data Protection Legislation.
* In a child protection situation observations/records in relation to children may have to be made available to TUSLA.
* Breaches of confidentiality will be dealt with by the BOM/Manager.
* It is not acceptable to discuss matters relating to children or their families outside of school, except in notification procedures to the Tusla of child protection issues
* A designated officer will be appointed to deal with confidential matters relating to child protection matters, and it is to this person that any queries or concerns should be addressed.
* The importance of total confidentiality has been made clear to all our staff and volunteers. Everyone within the service must understand that anything relating to the children or staff must not be discussed outside the school setting.
* The parent’s confidence in our service is very important to us and parents can be assured any discussion they may have will be treated in the strictest of confidence.

# ****DATA PROTECTION****

## **Policy And Procedure**

Graiguecullen Parish Childcare Centre will follow the following principles in relation to keeping data:

• Obtain and process information fairly.

• Ensure that the data subjects know what information is being held about them and for what purpose.

• Keep information for lawful purposes.

• Process information in ways compatible with the purpose for which it was given originally.

• Ensure that the information is adequate, relevant and not excessive.

• Retain the information no longer than is necessary.

• Give a copy of personal information to the individual concerned on request.

• Amend information held on employees if the employee indicates that the information is incorrect.

* Adhere to the ‘need to know principle’ – only personal data necessary for the purpose should be collected and staff should only be able to access the personal data that they need to carry out their functions.

• Have adequate access controls, firewalls and virus protection and do not forget manual files.

• Have retention policies for the various categories of data.

• Ensure that data maintained is securely and confidentially stored.

## Informing Staff on Data Protection Acts

Graiguecullen Parish Childcare Centre and its member’s management will ensure that:

• The basic principles of data protection are explained to staff and parents. This will be done during staff induction, staff meetings and through our parent handbook.

• There are regular updates to data protection awareness, so that data protection is a “living” process aligned to the way the GPCC CLG conducts its business.

• The Data Controller will periodically check data held with regard to accuracy and have complete regular security reviews.

• Non- compliance of the data protection and other policies of the GPCC CLG may invoke the disciplinary procedure.

• Confidential and personal information about our children/parents will only be shared by the data Controllers and Designated Liaison Person in relation to child safety, in line with this our Child Protection Policy. Any breach of confidentiality by any member of staff will lead to disciplinary action.

## **Employee Responsibilities**

As an employee you are responsible for:

• Any breach of the data protection policy, either deliberate or through negligence, may lead to disciplinary action being taken

• Checking that any information that you provide in connection with your employment is accurate and up to date

• Notifying the childcare facility of any changes to information you have provided, for example changes of address

• Ensuring that you are familiar with and follow the data protection policy.

Any breach of the data protection policy, either deliberate or through negligence, may lead to disciplinary action being taken and could in some cases result in a criminal prosecution.

## **Data Security**

Employees are responsible for ensuring that:

• Any personal data that you hold, whether in electronic or paper format, is kept securely.

• Personal information relating to children or their families is not disclosed either verbally or in writing, accidentally or otherwise, to any unauthorized third party

## **Storage Of Data**

The security of personal information relating to children and families is a very important consideration under the Data Protection Acts. Appropriate security measures will be taken by Graiguecullen Parish Childcare Centre against unauthorised access to this data and to the data it is collecting and storing on behalf of the DCYA.

A minimum standard of security will include the following measures:

• Access to the information should be restricted to authorised staff on a “need-to-know” basis.

• Manual files will be stored in a lockable filing cabinet located away from public areas.

• Computerised data will be held under password protected files with a limited number of users.

• Any information which needs to be disposed of, will be done so carefully and thoroughly.

• Premises will be secured when unoccupied.

## Data collected on behalf of DCYA for ECCE

The personal information which parents will be required to provide on application forms for the above scheme including their Personal Public Service Number (PPSN) are protected by the Data Protection legislation.

The following principles should be observed to ensure that the information supplied by parents meets the required levels of data protection.

* Obtain and process information fairly
* To fairly obtain the data, the data subject must, at the time the personal data is being collected, be made aware of the identity of the data controller/the purpose in collecting the data, and the persons or categories of persons to whom the data may be disclosed. To fairly process the data, it must have been fairly obtained and in this case, the data subject must have consented to the processing.
* Parents who return completed forms to a service provider for the purpose of the ECCE scheme should be aware of and consent to the transmission of the information to the DCYA.
* PPS Numbers
* PPSN information may be transmitted electronically through the PIP online system operated by Pobal. The system can electronically check and validate the PPSN number against the name, DOB and PPSN details
* Where a parent’s declaration is not verified by the DCYA’s checks, a letter will be issued to inform them that the subvention (ECCE funding) applied for does not apply. We will correct our register of the subventions due to parents, and supply the parent with the letter, stating that as a result we will not receive grant aid to reduce the fee charged. We will not retain this letter, or a copy of it, for more than 1 month.
* If in the verification of information, a parent disputes the outcome, they should contact the DCYA directly.

\*The Programmes Implementation Platform (PIP) is a new online system which will streamline the administrative processes across the three national childcare funding programmes (ECCE, TEC and CCS).

* Keep it only for one or more specified, explicit and lawful purposes and use and disclose it only in ways compatible with these purposes
* Under data protection legislation, the GPCC CLG will only keep data for specific, lawful and clearly stated purposes and the data will only be processed in a manner compatible with the purpose(s).
* In this case, only information required on the ECCE official form is to be requested from parents for the purposes of the scheme.
* The information on PIP Parental Declaration Forms completed by parents is input onto the PIP system and then the form is destroyed confidentially. A form is then generated on the PIP system with a unique reference number and a copy will be given to the parent and copy kept on site for the purposes of compliance visits to show that the child has been registered in accordance with the parent’s childcare requirements. Information is held confidentially and securely.

# ****ADMINISTRATION OF MEDICINE POLICY & PROCEDURE****

GPCC is committed to support each child’s wellbeing. In order to facilitate this, we will work in consultation with parents and school aged children to ensure the safe administration of medication.

All parents/guardians are informed of the policy and procedures regarding the administration of medication on enrolment. Staff members will check with parents that they have read and understood the policy and provide any assistance needed.

## Legislation and regulatory requirements

* Having a clear, written policy and procedure to ensure the safe storage of medication and the safe administration of medication to a child attending the service is a requirement under Child Care Act 1991 (Early Years Services) (Registration of School Age Services) Regulations 2018.
* Parent/guardian consent for the administration of medication is required.
* Under the [Safety Health and Welfare at Work Acts 2005 and 2010](http://www.hsa.ie/eng/Legislation/Acts/Safety_Health_and_Welfare_at_Work/) and the [Safety, Health and Welfare at Work (General Application) Regulations 2007](http://www.irishstatutebook.ie/eli/2007/si/299/made/en/print), employers have a duty to ensure the employees’ safety, health and welfare at work as far as is reasonably practicable and to carry out risk assessments and provide safety statements

## Children’s needs

Children need:

* This policy to ensure that staff responsible for their care have the information and guidance required for the safe storage and administration of medication.
* Their parents to be kept fully informed of any administration of medication to them and any issues relating to it.

## Parents/Families’ needs

Parents and families need:

* To be confident that procedures are in place in the service that ensure that the service is a safe place for their child and their child’s medication needs will be properly met.
* To clearly understand the service’s role and responsibilities regarding administration and storage of medication including the need for sharing information.
* To clearly understand their own role and responsibilities in relation to the administration of medication for their child, including the need for sharing information.
* To know that should any incident relating to the administration of medication involving their child occur in the service, they will be contacted at the earliest possible time and appropriate action will be taken by staff to ensure their child’s wellbeing, for example calling the emergency services if required.
* To know that, following any investigation, all relevant information will be shared with them.

## Staff needs

The staff members need:

* Absolute clarity on the service’s approach to dealing with the administration and storage of any medications
* To be competent (have the knowledge, skills, experience) to administer and safely store medication.
* To know that they will receive appropriate training if required. This may be from a professional (nurse, doctor, pharmacist) if necessary to ensure their confidence and ability to store and administer medications safely,
* To be clear on:
* what consent must be obtained;
* the information to be recorded;
* how this information is to be recorded (in what format); and
* who must be informed/notified of any matter relating to administration of medication, what information must be notified, when and in what way.

## Management needs

Management needs:

* To know that this policy provides the information and clarity that both staff members and parents/guardians need in order to ensure that medication is stored and administered correctly thereby maintaining the safety, health and welfare of the children while in the care of the service.
* To ensure that any safety issues and/or notifications of any incidents related to the storage or administration of any medications are brought to their attention, that all required reporting and notifications are carried out appropriately and efficiently.

## Definitions/Glossary

|  |  |
| --- | --- |
| **Medication (or medicine)** | A medication is a substance that is taken into or placed on the body to cure or treat a disease or condition, to relieve symptoms of an illness or to prevent diseases. |
| **Anti-febrile Medication** | Medication used to reduce a raised body temperature. The most common anti-febrile medications used are Paracetamol and Ibuprofen. |
| **Health Care Professional** | Can include the child’s general practitioner (GP), dentist, Public Health Nurse (PHN) or an allied health professional such as a pharmacist. |

## 3. Policy Statement

Parents have the prime responsibility for their child’s health and should provide the service with information about their child’s medical needs including information on medicines their child needs as well as contact information for their child’s GP. In general, GPCC advises parents/guardians to ensure medicines are administered to children before arrival at the centre and after they have left.

The service manager will discuss and agree with the parents/guardians on what is to be the service’s role in relation to meeting the child’s medication needs, in accordance with this policy.

The **written** consent of the parent(s)/guardian(s) must be obtained in all cases using only our medication form, copy attached to this policy*.* The consent form must be completed in full.

Both prescription and non-prescription medicines (such as Paracetamol) can only be administered where specific written consent has been obtained from the child’s parent/guardian. Only medications suitable for children will be given to a child. Where a parent requests any other medication, the service will seek written confirmation from a registered medical practitioner.

All medications will be administered by a staff member competent and authorised to do so. All medications will be stored safely away from children’s reach and according to manufacturer’s instructions including refrigeration if required.

In respect of those children who have long-term medical needs such as chronic conditions (e.g. asthma, epilepsy, diabetes, severe allergic reactions), written consent of parents/guardians must be renewed when any change to the administration of the medication is made.

Any child who may require emergency medication will always be in the care of a staff member who has received the required specific training.

Parents remain responsible for ensuring that the service has adequate supplies of the medication their child needs (prescription and non-prescription) and renewing any medication for chronic conditions.

In some cases, an **Individual Care Plan** may have been developed and the service ensures that the medication required in the plan is given as detailed. The Individual Care Plan may be drawn up by the relevant health care professional in conjunction with the service if appropriate. Such a plan will include details of any chronic diseases or health issues the child is currently receiving treatment and care for, such as diabetes, allergies or asthma. The plan documents current medications, medical treatments and other therapeutic interventions and specifies how the service will meet the child’s needs.

The service will only accept prescribed medicines that have been provided in the original container marked with the date, name of the dispensing pharmacist, expiry date and clear directions. The service will only administer medications as prescribed and will not change this at the request of parents without a registered medical practitioner’s written direction. The service reserves the right to contact a health care professional if authorised staff members are unsure about administering medication to a child, even if the parent/guardian has requested the medication to be administered.

## 4. Procedures & Practices

**Parents’/Guardians’ role and responsibilities**

* The parent/guardian must provide the following details on the child’s enrolment to the service:
  + Details of any medical condition
  + Emergency contact numbers
  + GP details – name, address and phone number
  + Written details of any medication required (instructions on dosage and times and written consent for staff to administer the medication – see below for further details)
  + Information on any allergies
  + Special dietary needs
* Parents/guardians must make every possible effort to ensure that the child’s medication needs are met before arriving at the service and after returning home.
* Parents/guardians must complete in full the Consent Form for Administration of Medication and provide all of the information the service will need to:
* safely store medicines
* administer the necessary medication to their child
* deal with any issues or incidents arising relating to their child’s condition or the administration of the medication
  + Medication must be provided by parents/guardians in its original labelled container as dispensed by a pharmacist including the child’s full name, prescriber’s instructions for administration, clear storage instructions, the date it was dispensed and the expiry date.
  + Medicines must never be transferred from their original container as dispensed by a pharmacist which includes the prescriber’s instructions for administration.
  + Where a recipient needs two or more prescribed medicines, each should be in its own separate container and clearly labelled as above
  + Parents must sign the completed medication administration form to acknowledge notification for each day that medication is required.
  + Parents must ensure that they drop the medication to the school age service on a daily basis or as it is needed.

## Staff members’ responsibilities

Parents must be informed of the policy and procedures on the administration of medications in the service.

Where informed consent has been obtained for the administration of medicines from at least one of the child’s parents/guardians then the following will apply:

* The child must have received the medication for at least 24 hours prior to it being given in the service.
* All medications will be administered by a staff member competent to do so.
* All medications will be stored safely away from children’s reach and according to manufacturer’s instructions.
* Staff members can only administer medication to a child that has been prescribed for that particular child.
  + A list of those staff members authorised to administer medications is displayed

## Administering Medication

**General points of note:**

* + Only staff members authorised by the manager to do so, and appropriately trained for the specific medications, are to administer medication.
  + **Medication must not be added to a child’s food/drink unless the registered prescriber has directed that this is how it should be administered.**
  + The staff members may administer non-prescription medicines according to the written directions but only with prior written informed parental/guardian consent, and supply of the medication.
  + No anti-febrile medicationsare given without the daily approval and notification of the child’s parent/guardian, unless not doing so would put the child’s health at risk.
  + When a child’s body temperature rises beyond a safe limit it is important that an anti-febrile agent is administered quickly. Staff members involved must keep records each time they administer medication using the Record of Medication Administration Form.
  + Instructions which state that a prescribed medication may be used whenever needed must be reviewed with the parent at least at the beginning of each term.
  + ‘As needed’ medications for example an inhaler must be labelled with the child’s name and in their original container labelled with the required information. Prescription or non-prescription medications are accepted for use only when they are within date.
  + Medication must not be used beyond the date of expiration on the container or beyond any expiration of the instructions provided by the health care professional.
  + All staff members should follow hygiene procedures for example hand washing and drying.

## Before administration of medication

A second staff member must be present when medications are administered.

* Both staff members must confirm:
  + - That appropriate consent has been given
    - That the child’s identification is in accordance with the medication to be administered
    - The date and time the medication was last given
    - Recipient’s name
    - Prescribed dose
    - Expiry date
    - Written instructions provided by the prescriber on the label/container as dispensed by the pharmacist
    - Any possible side effects
  + If there is any doubt about any of the procedures, the authorised member of staff should check with parents/guardians and/or a health professional before taking further action.
  + It must be checked that the medicine has previously been administered without adverse effect to the child and that parents have confirmed this is the case – a note to this effect should be recorded in the written parental agreement for the setting to administer medicine.

## On administration of medication

Both staff members must confirm:

* + The correct medication
  + Medication is given to the correct child.
  + The medication is given at the correct time and date.
  + The correct dose is given.
  + The correct route of administration.
  + Appropriate equipment is used to administer the medication dose – for liquids the correct measuring tool provided with the medication.
  + The dignity and privacy of the child is ensured as appropriate – for example when medication is required to be administered by a route other than the oral route.

## After administration of medication

* Observe child for any possible side effects.
* Where appropriate observe their response to medication – for example where an anti-febrile agent is administered.
* Medication returned to appropriate storage.
* Appropriate management or disposal of any equipment used in administration.

## Accidents and Incidents Involving Medications

* Where a child refuses to take the medication prescribed for them, they must not be forced to do so but parents/guardians must be informed as a matter of urgency. If the child not taking the medication leads to an emergency situation, the emergency services and the parents must be called.
* Failure to administer medication at the time prescribed as requested by a health care professional or parent/guardian should be noted on the Medication Administration Form with a written explanation of why the medication was not given.
* If a child is mistakenly given another child’s medication, a doctor must be called immediately and the advice given must be followed. The parents of the child who mistakenly received the medication must be called as soon as possible.
* The poisons information line number, GP, Pharmacist and other emergency numbers must be readily available at all times.

## Dealing with Emergencies

* Where medication is administered in the case of an anaphylaxis or asthma emergency, both the emergency services and the child’s parents/guardians must be notified as soon as possible.
  + All relevant staff members need to know where to obtain First Aid and how to summon the emergency services.
  + Where a child is taken to hospital by ambulance, they must be accompanied by a member of staff who is to remain with them until a parent/guardian arrives.
  + All required information is shared with the emergency services and the child’s parents/guardians.
  + Staff support is essential following any such incident.

## Medications Records

Staff members involved must keep records each time they administer medication using the Record of Medication Administration Form*.*

* A medication record must be created and kept for each child to whom medication is, or is to be, administered.
  + The record for both prescription and non-prescription medications must include:
    - The name of the child
    - A consent signed by the parent(s)/guardian(s) to administer each medication
    - A medication administration log detailing the checks completed prior to administration of medication to the child including:
    - Check of the child’s identification
    - Whether consent was received
    - When the medication was last administered (either at home or in the service)
    - Check of the administration instructions, including the name of the medication, the method and times for administration and the required dose
    - Check to ensure the medication is within expiry date
    - The time and date the medication was administered
    - The route and dose of medication administrated
    - The signature of the person who administered the medication and the signature of the witness
    - The time and date, or the circumstances under which, the medication is scheduled to be next administered
    - Any side-effects noted after the medication was given or if the dose was not retained because of the child vomiting or spitting out the medication.
    - The number of attempts to give medications that were refused by the child is also documented

*Examples of prescription medication that may be given include:*

* + Antihistamines/Epi-pen
  + Inhalers

*All medications will be stored:*

* + Inaccessible to children
  + Under proper temperature control.
  + Medications requiring refrigeration will be stored in the refrigerator in the main kitchen. All other medications are stored in filing cabinet 2 in Managers office.
  + Records of all medications given to a child are completed in ink and are signed by the staff designated to give the medication and the witness.
  + Medicines will not be stored in the first aid box.

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  + Records of all medications given to a child are completed in ink and are signed by the staff designated to give the medication and the witness.
  + Medicines will not be stored in the first aid box.

## Storage of Medications

* All medications brought into the setting are stored according to the manufacturers’ instructions paying particular note to temperature, sources of moisture, light and sources of contamination and safely out of the reach of children.
* Medicines are stored safely in a secure container, accessible to authorised persons.
  + - Emergency medication such as asthma inhalers and adrenaline pens, must be readily accessible to authorised staff members in case of an emergency when time is of the essence. A copy of the consent form for administration of medication and clear, precise details of the action to be taken should be immediately accessible.
    - Sunscreen, special soaps, lotion and nappy creams do not need to be in a locked container but must not be accessible to children.
* Medications requiring refrigeration should be clearly marked and separated from food in an airtight container marked ‘Medications’. Access to the fridge should be restricted.
* Medications that are applied to skin should be kept separate from medications that are injected into the body or taken by mouth.
* Medicines must never be transferred from their original container as dispensed by a pharmacist which includes the prescriber’s instructions for administration.
* Non-prescription medications should be labelled with the child’s full name and the expiry date must be visible and monitored.

Staff members should only bring their own medication to work when it is absolutely necessary. They must ensure that these medications are stored securely in their personal locked lockers so that others (including children and adult service users) do not have access to these medications.

## Disposal of Medications

* Medication should be returned to the child's parents whenever:
  + - The course of treatment is complete
    - Labels become detached or unreadable
    - Instructions are changed by a health care professional
    - The expiry date has been reached
    - When the child ceases to attend in the service
* To ensure a complete record all medication returned, even empty bottles, should be recorded.
* If a parent has not picked up unused medication by 14 days after the required use or it is not possible to return a medicine to the parent, then it should be taken to a community pharmacy for disposal. No medicine should be disposed of into the sewerage system or in the refuse.

## ANTI-FEBRILE MEDICATION

A service provider can administer an anti-febrile agent within the service. When the body temperature in a child rises beyond a safe limit (38 C or higher) an anti-febrile agent will be administered. All parents will be asked to give pre-signed consent for administration of an anti-febrile agent on starting in the service. As with all other medications, the amount, time, date and signature is recorded.

This consent form will be kept with a copy of the child’s enrolment form in the child’s preschool room. The child’s temperature will also be recorded.

## SUN PROTECTION

Written consent is required from the parent/guardian for sun creams supplied and applied by the service. This consent form will be kept with a copy of the child’s enrolment form in the child’s preschool room.

## MANAGEMENT OF CHRONIC ILLNESS

Where the administration of medications requires technical skills e.g. injections or suppositories which are beyond the scope of the staff in the service, the provider should seek guidance/training from the relevant professional in consultation with the parent.

## PARENTS’ ADMINISTRATION OF MEDICATION IN THE HOME

* Parents are advised that the first dose of any medication should always be given at home and with sufficient time before the child returns to care to observe the child’s response to the medication.
* Parents must inform staff if a child has been given any type of medication at home.
* When a child is ill due to a communicable disease that requires medication as treatment, the health care provider may require that the child be on a particular medication for 24 hours before returning to the service. This is for the protection of the child who is ill as well as the other children attending the service. Parents should advise the service of the nature of the illness.

**ADMINISTRATION OF THE MEDICATION:**

* A Second member of staff must double check the dosage and time and be present during the administration of the medication.
* Expiry date to be checked before administration of the medication.
* Written consent from the parent/guardian to be checked before administration of the medication.
* Both members of staff must sign the administration of medication form. This will be kept for two years.
* **NOTE: Students or volunteers may not administer medicines**

**RECORDING THE ADMINISTRATION OF MEDICATION**

* Written consent has been obtained by parent/guardian
* Type of medication to be given
* Date medication has been given
* Time medication has been given
* Dosage and frequency of medication
* Expiry date of medication
* Record of medication when refused, vomited back or if child has an adverse reaction
* Record of action taken (e.g. parent’s contacted, medical advice/assistance sought) when medication is refused, vomited back or the child has an adverse reaction.

## Managing medicines on trips and outings

* If children are going on outings, staff accompanying the children must include the key person for the child with a risk assessment, or another member of staff who is fully informed about the child’s needs and/or medication.
* Medication for a child is taken in a sealed plastic box clearly labelled with the child’s name and the name of the medication. Inside the box is a copy of the consent form and a card to record when it has been given, with the details as given above.
* On returning to the setting the card is stapled to the medicine record book and the parent signs it.

**All records kept by childcare service are kept secure and confidential**

# ****ANAPHYLAXIS POLICY****

**Anaphylaxis is a sudden and severe allergic reaction, which can be fatal, requiring immediate medical emergency measures be taken.**

## Statement of Intent

The purpose of this policy is to minimise the risk to children with severe allergies to potentially life-threatening allergens without depriving the severely allergic child of normal peer interactions or placing unreasonable restrictions on the activities of other children in the service.

This policy is designed to ensure that children at risk are identified, strategies are in place to minimize the potential for accidental exposure, and staff and key volunteers are trained in an emergency situation

## Policy

While Graiguecullen Parish Childcare Centre cannot guarantee an allergen-free environment, the management will take reasonable steps to provide an allergy-safe and allergy-aware environment for a child with life-threatening allergies.

Graiguecullen Parish Childcare Centre will implement the following steps:

* A process for identifying an anaphylactic child.
* Keeping a record with information relating to the specific allergies for each identified anaphylactic child to form part of the child’s Permanent Child Record.
* A process for establishing an emergency procedure plan, to be reviewed annually, for each identified anaphylactic child to form part of the child’s child record.
* Procedures for storage and administering medications, including procedures for obtaining preauthorization for employees to administer medication to an anaphylactic child.
* All incidents will be recorded and the process reviewed

**Anaphylaxis Procedures**

## Description of Anaphylaxis

Signs and symptoms of a severe allergic reaction can occur within minutes of exposure to an offending substance. Reactions usually occur within two hours of exposure, but in rare cases can develop hours later. Specific warning signs as well as the severity and intensity of symptoms can vary from person to person and sometimes from reaction to reaction in the same persons.

An anaphylactic reaction can involve any of the following symptoms, which may appear alone or in any combination, regardless of the triggering allergen:

* Skin: hives, swelling, itching, warmth, redness, rash
* Respiratory (breathing): wheezing, shortness of breath, throat tightness, cough, hoarse voice, chest pain/tightness, nasal congestion or hay fever-like symptoms (runny itchy nose and watery eyes, sneezing), trouble swallowing
* Gastrointestinal (stomach): nausea, pain/cramps, vomiting, diarrhoea
* Cardiovascular (heart): pale/blue colour, weak pulse, passing out, dizzy/light-headed, shock
* Other: anxiety, feeling of “impending doom”, headache, uterine cramps in females

Because of the unpredictability of reactions, early symptoms should never be ignored, especially if the person has suffered an anaphylactic reaction in the past.

It is important to note that anaphylaxis can occur without hives.

If an allergic child expresses any concern that a reaction might be starting, the child should always be taken seriously. When a reaction begins, it is important to respond immediately, following instructions in the child’s Child Emergency Procedure Plan. The cause of the reaction can be investigated later.

**The following symptoms may lead to death if untreated:**

* Breathing difficulties caused by swelling of the airways; and/or
* A drop in blood pressure indicated by dizziness, light-headedness or feeling faint/weak.

## Identifying Individuals at Risk

At the time of registration, parents are asked to report on their child’s medical conditions, including whether their child has a medical diagnosis of anaphylaxis. Information on a child’s life-threatening conditions will be recorded and updated on the child’s Permanent Child Record annually.

**It is the responsibility of the parent/guardian to:**

* Inform the Manager when their child is diagnosed as being at risk for anaphylaxis.
* In a timely manner, complete medical forms and the Child Emergency Procedure Plan which includes a photograph, description of the child’s allergy, emergency procedures, contact information, and consent to administer medication. The Child Emergency Procedure Plan should be posted in key areas such as in the child’s playroom, the office, the room diary etc., Parental permission is required to post or distribute the plan.
* Provide the service with updated medical information at the beginning of each year, and whenever there is a significant change related to their child.

## Record Keeping – Monitoring and Reporting

For each identified child, the Manager will keep a Child Emergency Procedure Plan on file.

## Emergency Procedure Plans

a) Child Level Emergency Procedure Plan

The Manager must ensure that the parents and child (where appropriate), are provided with an opportunity to meet with designated staff, prior to the beginning of each year or as soon as possible to develop/update an individual Child Emergency Procedure Plan. The Child Emergency Procedure Plan must be signed by the child’s parents and the child’s GP. A copy of the plan will be placed in readily accessible, designated areas such as the playroom and office.

The Child Emergency Procedure Plan **will include at minimum:**

* The diagnosis.
* The current treatment regime.
* Who within the service is to be informed about the plan – e.g. childcare workers, volunteers, playmates.
* Current emergency contact information for the child’s parents/guardian.
* A requirement for those exposed to the plan to maintain the confidentiality of the child’s personal health information.
* Information regarding the child, is parent’s responsibility to advise the service about any change/s in the child’s condition; and
* It is the service’s responsibility for updating the child’s records.

## Emergency Plans

Management will consult with parent’s staff and the insurance company to decide on an appropriate emergency plan on a case by case basis to ensure that an appropriate course of action is taken for the child. Parents will be required to sign a declaration that they are happy for the staff to follow the decided emergency plan. In the event of an emergency designated staff will follow the plans as decided by parents and management.

## Provision and Storage of Medication

The location(s) of child auto-injectors must be known to all staff members

**Parents will be informed that it is the parents’ responsibility:**

* To provide the appropriate medication (e.g. single dose epinephrine auto-injectors) for their anaphylactic child.
* To inform the staff where the anaphylactic child’s medication should be kept (i.e. with the child, in the child’s playroom, and/or other locations).
* To inform the staff when they deem the child competent to carry their own medication/s), and it is their duty to ensure their child understands they must carry their medication on their person at all times.
* To provide a second auto-injector to be stored in a central, accessible, safe but unlocked location.
* To ensure anaphylaxis medications have not expired; and
* To ensure that they replace expired medications.

## Allergy Awareness, Prevention and Avoidance Strategies

a) Awareness

The Manager should ensure:

* That all staff and persons reasonably expected to have supervisory responsibility of children receive training, in the recognition of a severe allergic reaction and the use of single dose auto-injectors and standard emergency procedure plans.
* That all members of staff including substitute employees, employees on call, and volunteers have appropriate information about severe allergies including background information on allergies, anaphylaxis and safety procedures.
* With the consent of the parent, the Manager and the staff must ensure that the child’s playmates are provided with information on severe allergies in a manner that is appropriate for the age and maturity level of the child, and that strategies to reduce teasing and bullying are incorporated into this information.

Posters which describe signs and symptoms of anaphylaxis and how to administer a single dose auto-injector should be placed in relevant areas. These areas may include playrooms, office, staff room, lunchroom etc.

b) Avoidance/Prevention

Individuals at risk of anaphylaxis must learn to avoid specific triggers. While the key responsibility lies with the child’s family the service must participate in creating an “allergy-aware” environment. Special care is taken to avoid exposure to allergy-causing substances. Parents are asked to consult with the childcare worker before sending in food to playrooms where there are food allergies. The risk of accidental exposure to a food allergen can be significantly diminished by means of such measures.

Non-food allergens (e.g. medications, latex) will be identified and restricted from preschool rooms and common areas where a child with a related allergy may encounter that substance.

## Training Strategy

A training session on anaphylaxis and anaphylactic shock will be given to relevant staff.

Efforts shall be made to include the parents, and children (where appropriate), in the training. Experts (e.g. public health nurses, trained occupational health and safety staff) will be consulted in the development of training policies and the implementation of training. Training will be provided by individuals trained to teach anaphylaxis management. The training sessions will include:

* Signs and symptoms of anaphylaxis.
* Common allergens.
* Avoidance strategies.
* Emergency protocols.
* Use of single dose epinephrine auto-injectors.
* Identification of at-risk children (as outlined in the individual Child Emergency Procedure Plan).
* Emergency plans; and
* Method of communication with and strategies to educate and raise awareness of parents, children, employees and volunteers about anaphylaxis

Additional Best Practice:

* Distinction between the needs of younger and older anaphylactic children.

Participants will have an opportunity to practice using an auto-injector trainer (i.e. device used for training purposes) and are encouraged to practice with the auto-injector trainers throughout the year, especially if they have a child at risk in their care. Children will learn about anaphylaxis as part of the curriculum

# ****ADMISSIONS POLICY****

It is the policy of the Graiguecullen Parish Childcare Centre to offer equal access to all children from the community and surrounding areas, including children with a disability or special requirements irrespective of their cultural, religious or economic background.

Parents/guardians seeking a childcare place must complete an Enrolment Form which is filed on the waiting list and places are allocated on a first come first served basis.

Admissions Procedure:

• Each child must be at least 2 years and 6 months when starting at the service.

• Parents seeking to secure a place for their child must complete an enrolment form.

• A completed Enrolment form must be returned to the booking officer prior to the child attending the service.

• Children will be admitted on a ‘first come first served’ basis following the submission of the enrolment form.

• If there are no remaining places a waiting list will be drawn up and the booking officer will endeavour to place all children as soon as possible.

• Referrals from family support services will be accepted provided there is a place available.

Refusal of Admission

Management reserve the right to refuse admission, cancel a confirmed placement or discontinue with a current placement if the behaviour of a parent/guardian is deemed by management to be verbally or physically abusive to a member of staff or any of the centres’ clients.

# ****FEE PAYMENT POLICY****

The management of parental fees in the Graiguecullen Parish Childcare Centre endeavours to reflect best practice with regard to the forecasting of the budget costs for the provision of a quality child pre-school service and to ensure the long-term sustainability of the service.

Upon request of information the family will be made aware of the following:

• Opening/closing times of the service/sessions per week/holiday closures/cost per session depending on service provided. Times can also be found on our website.

• Fees are paid weekly/monthly in advance.

• Fees are payable regardless of absenteeism. This includes absence due to illness, holidays or public holidays.

• Fees can be subject to an annual increase.

• Early/late collection fees will apply unless with prior agreement with the manager.

• If your fees are underpaid and/or overdue for two consecutive weeks you will forfeit your child’s place in the centre until full payment is received.

• On exiting your child from the centre, you must give two weeks’ notice and complete an exit form. If no notice is given a further two weeks will be applied to your account.

• Parents will be asked to sign a contract agreeing to the terms of the fee payment policy.

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## FINANCIAL PROCEDURE

1. Your account is expected to be paid on a Monday for that current week.

2. If your payment is not received by Thursday evening, your account will show in arrears for that week.

Should your account show in arrears the following procedure will apply:

Step 1: One-week arrears – you will receive a text on the following Monday stating same. (Please only reply to phone number 0599137105 with your full name and which centre your child/children attends)

Step 2: Two weeks’ arrears – a text plus a letter

Step 3: Three weeks’ arrears – a text plus a meeting with the Manager

Payments can be made by cash using the payment envelopes provided by the centre.

# ****RECORD KEEPING****

## **Statement of Intent**

• We aim to ensure that all records are factual and written impartially.

• Under the Data Protection Act 1998 And Data Protection (amendments) Act 2003 parents will have access to all records pertaining to their child only unless appropriate consent has been sought.

• Staff members will only have access to records of children in their care and will be used to inform staff on how best to meet the needs of each child and plan for further learning.

• GPCC will only share information with other professionals or agencies, with consent from parents or without their consent in terms of legal responsibility in relation to a Child Protection issues.

• Staff use the guided approach of Aistear and Síolta, The National Quality Frameworks for Early Childhood Education in relation to various aspects of record keeping within the service.

Procedures

## **Register of Pre-School Children**

• A register is kept of every child attending the service.

• The information on the register will be updated on an ongoing basis.

## **Health and Safety**

• Records will be kept in relation to medical administration and accident report forms which will be co-signed by parents / guardians, staff and the Preschool supervisor/manager.

• Written parental consent is kept to allow the service to seek medical assistance for a child in case of an emergency.

• Information on children’s allergies will be kept in a folder in the kitchen and all rooms so that all staff are aware of allergies.

• The daily arrival and departure time of each child and staff is recorded

Programme Planning

• A record of the planned programme / activities is clearly documented through short, medium- and long-term plans

• An Individual Educational Plan (IEP) may be used to support the individual needs of children with additional needs. These will be regularly shared with parents and relevant professionals working with a child.

Records of each child are available on the premises for inspection by

(a) A child’s parent or guardian but only in respect of information concerning their child.

(b)Staff members with whom the information is relevant

(c) An authorised person

## **Staff Records**

• A recruitment policy and procedure is in place and written evidence will be kept in relation to recruitment procedures for all staff positions.

• Records outlining the name, position, qualification and experience of each staff member, volunteer and student are maintained.

• Records are kept in relation to all documents and records relating to Garda vetting and references from previous employers for all staff members.

• Staff monitoring notes are kept relating to staff appraisals and supervision.

• The daily arrival, departure and meal break times of each staff member is recorded.

• All staff records are strictly confidential (see confidentiality policy).

Records Related to the Running of the Service

• Details of the maximum number of children catered for at any one time.

• Details of the type of service and age range of children using the service.

• Staff/Child ratios within the service.

• An outline of the type of programme under which the service operates.

• Opening hours and fees.

• Policies and procedures currently in place.

• Daily attendance of all children present in the facility.

• Staff roster.

• Details of any accident, injury or incident involving any of the children attending the service.

Fire Safety:

A written record will be kept of:

(a) All fire drills which take place on the premises

(b) The number, type and maintenance record of fire- fighting equipment and smoke alarms in the premises.

Hygiene

• A cleaning programme and schedule for furniture, work and play equipment is in place.

• Food hygiene practices are guided and recorded under the principles of Hazard Analysis Critical Control Point (HACCP) and the Food Hygiene Regulations 1950 – 89 and the European Communities (Hygiene of Foodstuffs) Regulations 2000.

• Record of pest control measures.

## **Equipment**

• A record of portable electrical equipment

• A record of equipment checks

## **Outings**

• A record of risk assessments carried out.

• Outing Authorisation.

# 

# ****PARENT COMPLAINTS POLICY & PROCEDURE****

Graiguecullen Parish Childcare Centre CLG welcomes children, parents and staff’s view in the development of the Service. It is the policy of this Service to give careful attention and a prompt and courteous response to any suggestions, comments, or complaints, thereby ensuring the development of a high-quality Child Care Service which meets the needs of children and parents and staff.

1. Parents Complaints Procedure
2. Staff Complaints Procedure
3. GPCC Child Friendly Version Complaints Policy
4. Zero Tolerance Procedure

Any complaints made about the service will be dealt with in an open and impartial manner and will be strictly confidential. The following procedures will be followed:

## **PARENTS COMPLAINTS PROCEDURE**

* Any comments or complaints should be referred directly to the Manager of Graiguecullen Parish Childcare Centre Clg
* An informal attempt is made to resolve the matter as amicably as possible and to everyone’s satisfaction
* If agreement cannot be reached the parent may make a formal complaint in writing to the Manager of Graiguecullen Parish Childcare Centre CLG.
* The Manager may decide to escalate this complaint directly to stage 2, the Board of Management of GPCC (in certain circumstances).

Otherwise the complaint is dealt with in the following manner:

* + The complaint is recorded and kept in a secure file only accessed by the Manager and Board of Management. This will be kept for two years from the date of the outcome of the complaint
  + If the complaint is made against a member of staff, the staff member must be informed that a formal complaint has been made and be given full details.
  + If a complaint against a parent involves a child protection concern a second separate reporting procedure will be followed in line with our child protection procedures.
  + The parent is sent an acknowledgement that the complaint has been received and told how it will be dealt with, by whom, and within what time limit. The person investigating the formal complaint will keep dated records summarising what has been said and done by those involved.
  + If the parent is not satisfied with the outcome, he or she may make a written request to go to the second stage of the procedure, which involves the complaint being passed to the Board of Management of GPCC.
* The Board of Management of GPCC will then review all documentation.
  + The Board of Management of GPCC will consider all the relevant material and talk with all those concerned and will reach a decision and if necessary, make recommendations.
  + The complainant and other people involved will be informed of the outcome.
* If the parent is still not satisfied with the outcome, he or she may make a written request to go to the third stage of the procedure, which involves an independent mediator or panel.
  + The panel will include an external mediator.
  + This panel will not include any person directly involved in the complaint or related to the complainant or staff member.
  + The panel, having considered all the relevant material and talked with all those concerned, will reach a decision and if necessary, make recommendations.
  + The complainant and other people involved will be informed of the outcome.

# ****STAFF COMPLAINTS POLICY & PROCEDURE****

Graiguecullen Parish Childcare Centre CLG welcomes children, parents and staff’s view in the development of the Service. It is the policy of this Service to give careful attention and a prompt and courteous response to any suggestions, comments, or complaints, thereby ensuring the development of a high-quality Child Care Service which meets the needs of children and parents and staff.

Any complaints made about the service will be dealt with in an open and impartial manner and will be strictly confidential. The following procedures will be followed:

## **STAFF COMPLAINTS PROCEDURE**

* Any comments or complaints should be referred directly to the Manager of Graiguecullen Parish Childcare Centre Clg
* An informal attempt is made to resolve the matter as amicably as possible and to everyone’s satisfaction
* If agreement cannot be reached the staff member may make a formal complaint in writing to the Manager of Graiguecullen Parish Childcare Centre CLG.
* The Manager may decide to escalate this complaint directly to stage 2, the Board of Management of GPCC (in certain circumstances).

Otherwise, the complaint is dealt with in the following manner:

* + The complaint is recorded and kept in a secure file only accessed by the Manager and Board of Management. This will be kept for two years from the date of the outcome of the complaint
  + If the complaint is made against a parent, the parent must be informed that a formal complaint has been made and be given full details.
  + If a complaint against a parent involves a child protection concern a second separate reporting procedure will be followed in line with our child protection procedures.
  + The staff member is sent an acknowledgement that the complaint has been received and told how it will be dealt with, by whom, and within what time limit. The person investigating the formal complaint will keep dated records summarising what has been said and done by those involved.
  + If the staff member is not satisfied with the outcome, he or she may make a written request to go to the second stage of the procedure, which involves the complaint being passed to the Board of Management of GPCC.
* The Board of Management of GPCC will then review all documentation.
  + The Board of Management of GPCC will consider all the relevant material and talk with all those concerned and will reach a decision and if necessary, make recommendations.
  + The complainant and other people involved will be informed of the outcome.
* If the staff member is still not satisfied with the outcome, he or she may make a written request to go to the third stage of the procedure, which involves an independent mediator or panel.
  + The panel will include an external mediator.
  + This panel will not include any person directly involved in the complaint or related to the complainant or staff member.
  + The panel, having considered all the relevant material and talked with all those concerned, will reach a decision and if necessary, make recommendations.
  + The complainant and other people involved will be informed of the outcome.

# ****GPCC CHILD FRIENDLY COMPLAINTS POLICY AND PRODEDURE****

**If you feel:**

**Unhappy or sad about something happening in our School Aged Childcare or**

**Unhappy or sad about someone you see there**



**Tell your Room Leader**

**NEVER KEEP IT TO YOURSELF**

**We will: always listen, provide advice and help to resolve you concerns**

A picture containing clipart

Description automatically generated

**ZERO TOLERANCE POLICY**

Our staff come to work to care for your child/children, and it is important for our staff to be treated with courtesy and respect.

Therefore, we have a Zero Tolerance policy. This means that aggressive or violent behaviour towards our staff will not be tolerated under any circumstances.

Anyone giving verbal abuse to members of staff, either in person or over the telephone, will be initially approached by the Manager advising that this behaviour will not be tolerated. Any future violation of this policy will result in:

1. The parent in question being asked to no longer collect their child from the room where that staff member is working
2. If this is not possible, in order to minimise interactions then:
   1. The child/children are moved to another room

and/or

* 1. The staff member moves to another room

1. Any further violation of this policy will result in
   1. A letter sent from the Board of Management/Manager advising that this behaviour will not be tolerated and you being asked to remove your child/children from the Service

and/or

* 1. The Gardaí being called and the matter being reported.

If you are feeling upset, please do not approach staff directly, especially when children are present. Contact the Manager/Assistant Manager/Supervisor in the office or call 059 9137105.

# ****INFECTION CONTROL POLICY & PROCEDURE****

**INFECTION CONTROL POLICY & PROCEDURE**

Graiguecullen Parish Childcare Centre CLG aims to minimise the spread of infection for staff and school age children through the implementation of controls which reduce the transmission and spread of germs. We aim to promote and maintain the health of children and staff through the control of infectious illnesses.

A copy of our Infection Control Policies and Procedures is available in the office to all Parents, Staff in the Service.

Our Infection Control Policy will be explained to the children in age-appropriate language.

Child friendly posters showing correct hand washing techniques will be displayed throughout the Service.

* We aim to control infection by providing on-going infection control training for staff (hand washing, food hygiene, cleaning).
* Staff should be vigilant in ensuring hand washing by children especially after toileting.
* Exclusion guidelines as recommended by the H.S.E. apply in the case of all suspected infectious conditions. These guidelines are distributed to all parents and staff and displayed on the Parent’s Notice Board.
* A paper copy of children’s immunisation records are maintained with their enrolment form.

**Hand Hygiene:**

Hand Washing is the single most effective way of preventing the spread of infection; its purpose is to remove or destroy germs that are picked up on the hands.

**Hand washing signs will be on display at all wash-hand basins**

**Children’s hand washing will always be supervised by staff**

**Staff are required to follow proper hand washing and drying techniques, and this will form part of induction and on-going training**

Staff model good hand hygiene at all times and must wash their hands:

**Before:**

* The start of the work shift.
* Eating, smoking, handling/preparing food or assisting/feeding a child.
* Preparing meals, snacks and drinks (including babies’ bottles).
* Personal care.

**After:**

* Using the toilet or helping a child to use the toilet.
* Playing with 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.
* Cleaning up vomit or faeces.
* Handling or dealing with waste.
* Removing disposable gloves and/or aprons.
* Handling pets/pet litter, animals/cages/animal soil, etc.
* Cleaning the service
* Washing/Handling of soiled clothes
* Coughing and sneezing
* When hands are dirty

***Children should hand wash and be supervised doing so:***

**Before:**

* Eating

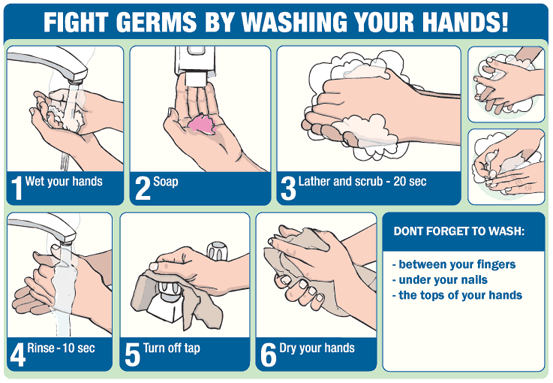
**After:**

* Using the toilet
* Playing with or handling items in the playground
* Handling secretions
* Handling or dealing with waste.
* Handling pets/pet litter, animals/cages/animal soil, etc. [if applicable]
* Coughing and sneezing
* When hands are dirty

**HAND WASHING TECHNIQUE**

***Hand washing should be performed as follows*:**

* Wet hands under warm running water to wrist level.
* Apply liquid soap. Lather it evenly covering all areas of the hands for at least 10 seconds. Include the thumbs, fingertips, palms and in between the fingers, rubbing backwards and forwards at every stroke (see hand washing technique).
* Rinse hands off thoroughly under warm running water.
* Dry with paper towel using a patting motion to reduce friction, taking special care between the fingers.
* Use the disposable paper towel that has been used to dry the hands to turn off taps.
* Dispose of the disposable paper towel in a waste bin using the foot pedal to avoid contaminating hands that have just been washed.
* Staff should provide assistance with hand washing at a sink for infants who can be safely cradled in one arm and for children who can stand but not wash their hands independently.
* A child who can stand should either use a child-size sink or stand on a safety step at a height at which the child's hands can hang freely under the running water.
* After assisting the child with hand washing, the employee should wash his or her own hands.



***Facilities for Hand Washing:***

***We provide the following:***

* Wash hand basins with hot and cold running water. The hot water is controlled at a maximum of 43 degrees C.
* Paper hand towels and liquid soap.

***Alcohol-based Hand Rub/Gels:***

When soap and running water are not readily available, for example on a field trip or excursion, an alcohol-based hand rub/gel may be used (the alcohol content should be at least 60%). The alcohol-based hand rub must be applied vigorously over all hand surfaces. Alcohol based hand rubs are only effective if hands are not visibly dirty, if hands are visibly dirty then liquid soap and water should be used. It is safe to let children use alcohol-based hand rubs/gels, but it is important to let children know that it should not be swallowed. Supervision is vital. It is also important to store it safely so children cannot get access to it without an adult. The alcohol content of the product generally evaporates in 15 seconds so after the alcohol evaporates it is safe for children to touch their mouth or eyes. Water is not required when using an alcohol rub/gel.

**Alcohol based hand rubs/gels are not a substitute for hand washing with soap and running water.**

**INFECTION CONTROL PROCEDURE – Exclusion from Service**

Parents are asked to notify this Childcare Service if their child has been diagnosed with or exposed to a Notifiable Infectious Disease.

In the event of an outbreak of any notifiable infectious disease, the GPCC contingency plan will be implemented as follows.

* An up-to-date database of all children attending GPCC containing the following information – name , address, date of birth, parent name and contact number, will be forwarded to the Department of Public Health and Tusla immediately ,who will in turn contact the parents.
* Staff, visitors, volunteers and students will be informed of the outbreak by the Manager/Supervisor.
* Public Health Doctors are responsible for the prevention and control of Notifiable Infectious Diseases.

**SICKNESS EXCLUSION**

Children are not accepted into the Service if they have any symptoms of illness. This includes children who attend the Service directly from Primary School. Sick children are returned to the school/ not collected from the school.

* Children or adults with heavy colds or coughs should not attend the service.
* Parents are advised that a child who has been sick during the night should not attend the service the next day.
* Parents are advised that children who have attended a doctors/hospital/clinic appointment and have been administered medication (injections/eye drops/oral medication) should not attend the Service unless they have been observed by the parent for a minimum of 2 hours
* Children who have not attended Primary School are not permitted to attend Afterschool without prior arrangement
* Children of staff working in the service should not accompany their parents to work if they are ill.
* In the event that a child becomes ill we will contact the parent/guardian to pick the child up.

Children with infectious diseases should not attend the service. Information on childhood infectious disease e.g. measles, mumps, rubella, chicken pox is available from the H.S.E. Children that are unwell/sick will not be admitted to the service as per the H.S.E Guidelines (Management of Infectious Disease in Childcare Facilities and other Childcare settings, Part 2: Infectious Disease Exclusion Recommendations for the Childcare Setting p.78 - 80)

* All parents including those of children who are not immunised are informed if a child attending the service has an infectious disease.
* A doctor’s certificate may be required for certain conditions to ensure they are no longer contagious before children return to the service.
* Children should remain at home if they are suffering general diarrhoea or vomiting until 48 hours after being symptom free.

**APPENDIX G: EXCLUSIONS**

**These are minimum exclusion periods as recommended by the HSE. The Service may impose longer periods if it has a concern**

|  |  |
| --- | --- |
| Chickenpox: | Until scabs are dry; this is usually 5-7 days after the appearance of the rash. |
| Conjunctivitis: | Exclusion of affected children until they recover, or until they have had antibiotics for 48 hours. |
| Diarrhoea: | 48 hours from last episode. |
| Diphtheria: | Very specific exclusion criteria apply and will be advised on by the Department of Public Health. |
| Food poisoning: | Until authorised by GP. |
| Glandular Fever: | Exclusion is not necessary. |
| Haemophilus Influenzae Type B: (Hib) | Children with the disease will be too ill to attend the service. Contacts do not need to be excluded. |
| Hand, Foot and Mouth  Disease: | While the child is unwell, he/she should be kept away from Service. If evidence exists of transmission within the day centre exclusion of children until the spots have gone from their hands may be necessary. |
| Head Lice: | Exclusion is not necessary [if treated] |
| Hepatitis A:  (Yellow Jaundice,  Infectious Hepatitis): | Recommended while the child feels unwell, or until 7 days after onset of jaundice, whichever is later. |
| Hepatitis B:  (Serum Hepatitis) | Children will be too ill to attend the Service and families will be given specific advice about when their child is well enough to return. |
| Impetigo: | Until lesions are crusted and healed, or 24 hours after commencing antibiotics. |
| Influenza and Influenza-like Illness:  (Flu and ILI) | Remain at home for 7 days from when their symptoms began. Children should not re-attend the Service until they are feeling better and their temperature has returned to normal. |
| Living with HIV/AIDS: | Exclusion is not necessary. |
| Measles: | Exclude the child while infectious i.e. up to 4 days after the rash appears. |
| Meningitis: | Children with the disease will be too ill to attend the Service. Contacts do not need to be excluded. |
| Meningococcal  Disease: | Children with the disease will be too ill to attend the Service. Contacts do not need to be excluded. |
| Molluscum Contagiosum: | Exclusion is not necessary. |
| MRSA:  (Meticillin-Resistant Staphylococcus aureus) | Children/infants known to carry staphylococcus aureus (including MRSA) on the skin or in the nose do not need to be excluded from the Child Care setting. Children who have draining wounds or skin sores producing pus will only need to be excluded from a Child Care setting if the wounds cannot be covered or contained by a dressing and/or the dressing cannot be kept dry and intact. |
| Mumps: | The child should be excluded for 5 days after the onset of swelling. |
| Pediculosis (lice): | Until appropriate treatment has been given |
| Pharyngitis/Tonsillitis: | If the disease is known to be caused by a streptococcal (bacterial) infection, the child or member of staff should be kept away from the Service until 24 hours after the start of treatment. Otherwise a child or member of staff should stay at home while they feel unwell. |
| Polio: | Very specific exclusion criteria apply and will be advised on by the Department of Public Health. |
| Poliomyelitis: | Until declared free from infection by GP |
| Pneumococcus: | Children with the disease will be too ill to attend the Service. Contacts do not need to be excluded. |
| Respiratory Syncytial Virus: | Children who have RSV should be excluded until they have no symptoms and their temperature has returned to normal. Contacts do not need to be excluded. |
| Ringworm: | Children need not be excluded from Service once they commence treatment. |
| Rubella:  (German Measles) | For 7 days after onset of the rash and whilst unwell. |
| Scabies: | Not necessarily once treatment has commenced. |
| Scarlet fever: | Once a patient has been on antibiotic treatment for 24 hours they can return to the Service, provided they feel well enough. |
| Shingles: | Until scabs are dry. |
| Slapped Cheek Syndrome: | An affected child need not be excluded because he/ she is no longer infectious by the time the rash occurs. |
| Temperature: | Over 38 degrees |
| Tetanus:  (Lockjaw) | Children with the disease will be too ill to attend the Service. Contacts do not need to be excluded. |
| Tuberculosis (TB): | Recommendations on exclusion depend on the particulars of each case, e.g. whether the case is “infectious” or not. The Department of Public Health will advise on each individual case. |
| Typhoid and Paratyphoid: | Very specific exclusion criteria apply; the local Department of Public Health will advise. |
| Viral Meningitis: | Children with the disease will usually be too ill to attend the Service. Contacts do not need to be excluded. |
| Vomiting: | 48 hours from last episode of vomiting |
| Whooping Cough:  (Pertussis) | The child is likely to be too ill to attend the Service and should stay at home until he/she has had 5 days of antibiotic treatment or for 21 days from onset of illness if no antibiotic treatment. |
| Worms: | Exclusion is not necessary. |
| Verrucae: | Exclusion is not necessary. |

**Immunisation**

* Our immunisation policy is followed at all times with all children and staff.
* Children’s immunisation records are obtained when children begin in Graiguecullen Parish Childcare Centre.
* Parents are asked to update GPC when children receive additional immunisations.
* If a child is not immunised, for their own safety they may be excluded from GPC if an infectious disease that they are not immunised against is circulating. Parents will always be consulted on this. We always work in the best interests of children’s health.
* We provide information leaflets on immunisation schedules, oral hygiene and prevention of infection to parents.

**TOILETING**

It is the policy of our service and in the interest of the children's health and safety, that a

high standard of hygiene is promoted at all times.

**TOILETING PROCEDURES**

* To create an awareness and understanding of good hygiene practice, staff members discuss with the children about the importance of self-care for example: flushing the toilet, washing hands etc.
* Anti-bacterial soap and disposable paper towels are used for washing and drying hands.
* A cleaning schedule is in place to ensure that children's toilets are kept in a clean and hygienic condition at all times.
* The staff should treat accidents sensitively. If required, another staff member is always available to provide assistance.
* The child's privacy is always respected.

**CLEANING & HYGIENE POLICY & PROCEDURE**

Graiguecullen Parish Childcare Centre CLG. is committed to promoting a healthy environment and a high standard of personal hygiene for adults and children. It is our policy to comply with current regulations including.

* The Child Care (Pre-School Services) (No 2) Regulations 2006.
* Hygiene Regulations.

**TOILETS**

Toilet areas, including toilet handles, doors, toilet seats and wash hand basins are cleaned frequently throughout the day in accordance with the cleaning schedule and immediately if soiled.

**BODILY FLUID SPILLAGE**

* Spills of blood, vomit, urine or excreta will be cleaned up as quickly as possible.
* The area will be sectioned off until the spill has been dealt with.
* Disposable plastic gloves are worn when cleaning up any bodily fluid spillage.
* Disposable paper towels are used to clean up spillages and placed directly into a plastic bag for disposal.

**WIPEABLE FLOOR SURFACES**

* Ordinary household bleach freshly diluted (1 to 10 parts water), is used for cleaning and disinfection of bodily fluid spillages. (This solution should not make contact with skin. If accidental contact does occur, the skin, eyes or mouth should be flushed with cold water.
* If possible and safe to do so, diluted bleach will be poured directly over the spill, it will then be covered and mopped up with disposable paper towels.
* Disposable paper towels and gloves are disposed of in a plastic bag and sealed.
* A supply of bleach and plastic bags are kept together in a secure place in each room in case of such an incident

**Carpeted Mats:**

* Banish Powder formula is applied directly to the carpeted area.
* Once it has soaked up the bodily fluid, it should be swept up using a dustpan and hand-brush and placed into a plastic bag.
* The plastic bag should be tied in a knot and immediately disposed of in the waste bin located in the bin shed.
* An antibacterial wipe should then be used to clean any excess on the carpet and the carpet should be steamed thoroughly.
* Mats are replaced weekly by Initial Hygiene.

**PEST CONTROL**

* The building is adequately pest proofed and regular checks are undertaken by Rentokil
* Records are kept of all such checks.
* Pest proofing is carried out in a manner which does not compromise the safety of the children.

**HYGIENE PROCEDURES**

All new staff/students are informed of the hygiene procedures as part of their induction programme

* Hand washing must be carried out after using the toilet, after outdoor play, before and after handling food.
* Cuts and sores must be covered with suitable dressings.

**CLEANING PROCEDURES**

* Mops for general floor washing will be disinfected using rubber gloves and left to dry, mop head up, and replaced regularly. Mops for general floor washing are clearly labelled.
* All toilets, surrounding walls and sinks are cleaned and disinfected every day and between sessions when there is more than one session. Toilet mops are clearly labelled.
* Floors, tables and equipment, where necessary, are cleaned and disinfected daily.
* The service has a daily and weekly cleaning routine in respect of floors, tables, playroom and outdoor equipment, toys and frequently mouthed objects. Room Leaders are responsible for completing the cleaning schedule form each week.
* Only paper towels are used in the Service. Disposable wipes only are used to clean bathrooms.
* Washing up to be done in the dishwasher, small unsuitable items will be washed thoroughly in hot water with Milton, using rubber gloves.

**HEAD LICE POLICY & PROCEDURE**

Unfortunately, it is always possible to catch head lice, no matter how careful we are. Children can pick up head lice just by coming into close contact with someone who is infected. It is important to know how to recognise the problem early and to know how to cope with it.

**HEAD LICE PROCEDURES**

* Staff will inform parents in writing in the event of an outbreak of Head Lice. Staff will be tactful and maintain confidentiality.
* A letter is sent out to all parents advising them of the outbreak and information on Head Lice from the Health Promotion Unit will also be provided.
* Staff should inform parents to check their child's hair carefully and regularly, and to use the treatment recommended by the public health nurse, chemist, doctor or local health clinic.
* The importance of not sharing other people's combs, hats etc. is stressed to parents and children.
* The letter must be signed and dated and returned by the parent/guardian, confirming that their child has been treated.
* If more advice is needed, the service will contact the public health nurse.

**Meningitis and Meningococcal Policy**

Both these diseases are most common in children, there are over 150 cases reported per year in this age group in Ireland (Meningitis Trust). Although relatively rare, the speed at which children become ill, and the dramatic and sometimes devastating course of events make it a terrifying disease. Having a good knowledge and understanding of meningitis and being able to recognise the signs and symptoms early as well as getting medical attention quickly, may save lives. Although cases can occur throughout the year, the majority of cases occur during the winter months.

**Meningitis** is an inflammation of the membranes that surround and protect the brain and spinal cord.

The most common germs associated with meningitis are viruses and bacteria.

**Viral Meningitis** is rarely life threatening, although it can make people very unwell. Most people make a full recovery, but sufferers can be left with after effects such as headaches, tiredness and memory loss.

Bacterial Meningitis can be life threatening and needs urgent medical attention. Most people who suffer from bacterial meningitis recover but many can be left with a variety of after effects and one in ten will die.

Signs and Symptoms

**Meningitis and septicaemia** (blood poisoning) are not always easy to recognise, and symptoms can appear in any order. Some may not appear at all. In the early stages, the signs and symptoms can be similar to many other more common illnesses, for example flu. Trust your instincts. If you suspect meningitis or septicaemia, get medical help immediately. Early symptoms can include fever, headache, nausea (feeling sick), vomiting (being sick), and muscle pain, with cold hands and feet. A rash that does not fade under pressure) is a sign of meningococcal septicaemia. This rash may begin as a few small spots anywhere on the body and can spread quickly to look like fresh bruises.

The spots or rash are caused by blood leaking into the tissues under the skin. They are more difficult to see on darker skin, so look on paler areas of the skin and under the eyelids. The spots or rash may fade at first, so keep checking. However, if someone is ill or is obviously getting worse, do not wait for spots or a rash to appear. They may appear late or may not appear at all

Spots or a rash will still be seen when the side of a clear drinking glass is pressed firmly against the skin. A fever, together with spots or a rash that do not fade under pressure, is a medical emergency. Trust your instincts. If you suspect meningitis or septicaemia, get medical help immediately.

Procedure for Managing a Suspected Case of Meningitis

* If a member of staff suspects that a child is displaying the signs and symptoms of meningitis the child’s doctor or our doctor on call will be contacted immediately and the child’s parents called.
* If a GP is not available, the child will be taken straight to the nearest A and E department. A member of staff will escort the child to hospital if the parent is unavailable.

Procedure when a case of Meningococcal Disease (Meningitis and /or Septicaemia) Occurs within an Early Years’ Service

* The public health team will usually issue a letter to other parents to inform them of the situation. The aim of this letter is to give information about, reduce anxiety and prevent uninformed rumours.
* Meningitis literature (out-lining signs and symptoms) will be provided for parents by the public health team. The Meningitis Trust can provide further information and support free of charge.
* Antibiotics will be offered to persons considered to be ‘close contacts’. These are usually immediate family members or ‘household’ contacts. Antibiotics are given to kill off the bacteria that may be carried in the back of the nose and throat: this reduces the risk of passing the bacteria on to others. In certain situations, a vaccine may also be offered. These actions are coordinated by the public health team.
* There is no reason to close the Childcare Service.
* There is no need to disinfect or destroy any equipment or toys that the child has touched.

The likelihood of a second case of meningococcal disease is extremely small. However, it two or more suspected cases occur within four weeks in the same childcare facility, then antibiotics may be offered to all children and staff, on the advice from the public health doctor. During this time staff and parent s should remain vigilant. Parents are advised to contact their GP if they are concerned or worried that their child is unwell.

For more information, [www.meningitis-trust.ie](http://www.meningitis-trust.ie/) or 24-hour helpline 1800 523196

## Hand, Foot and Mouth

Hand, Foot and Mouth (HFMD) is a viral illness that causes fever, painful blisters in the throat and mouth, and sometimes on the hands, feet and bottom. HFMD is often confused with foot-and-mouth (also called hoof-and-mouth) disease, a disease of cattle, sheep, and swine; however, the two diseases are not related—they are caused by different viruses. Humans do not get the animal disease, and animals do not get the human disease.

The viruses that cause it is called Coxsackie viruses that live in the human digestive tract. Several types of this family of viruses can cause Hand, Foot and Mouth so unfortunately you can get it more than once. These viruses are usually passed from person to person through unwashed hands and via surfaces which have viruses on them. They can also be spread by coughing. It is more common to catch them from someone when they are in the early stages of their illness. Although anyone is at risk of becoming infected, children are generally more susceptible. HFMD is more common in summer and autumn and there is no immunisation.

Symptoms

* The disease usually begins with a fever, poor appetite, malaise (feeling vaguely unwell), and often with a sore throat.
* One or 2 days after fever onset, painful sores usually develop in the mouth. They begin as small red spots that blister and then often become ulcers. The sores are usually located on the tongue, gums, and inside of the cheeks.
* A non-itchy skin rash develops over 1–2 days. The rash has flat or raised red spots, sometimes with blisters. The rash is usually located on the palms of the hands and soles of the feet; it may also appear on the buttocks and/or genitalia.
* A person with HFMD may have only the rash or only the mouth sores.

How Hand, Foot, and Mouth Disease Is Spread

* Infection is spread from person to person by direct contact with infectious virus. Infectious virus is found in the nose and throat secretions, saliva, blister fluid, and stool of infected persons. The virus is most often spread by persons with unwashed, virus-contaminated hands and by contact with virus-contaminated surfaces.
* Infected persons are most contagious during the first week of the illness.
* The viruses that cause HFMD can remain in the body for weeks after a patient’s symptoms have gone away. This means that the infected person can still pass the infection to other people even though he/she appears well. Also, some persons who are infected and excreting the virus, including most adults, may have no symptoms.
* HFMD is not transmitted to or from pets or other animals.

## Treatment of HFMD

There is no specific treatment and antibiotics are not effective as it is a viral infection. Most children with HFMD recover completely after a few days resting at home. Plenty of fluids help. Any fever or discomfort can be helped with a children’s pain relief such as Calpol.

## Prevention of HFMD

A specific preventive for HFMD is not available, but the risk of infection can be lowered by following good hygiene practices.

* Hand washing is the mainstay of prevention of transmission and control of outbreaks. Children and carers should wash their hands before eating or preparing food, after using the toilet or especially after changing nappies, after contact with an ill child, after contact with animals and whenever hands are visibly soiled. (see Hand Washing and Infection control policies)
* Cleaning dirty surfaces and soiled items, including toys, first with soap and water and then disinfecting them by cleansing with a solution of chlorine bleach (made by adding 1 part of bleach to 4 parts water)
* Avoiding close contact (kissing, hugging, sharing eating utensils or cups, etc.) with persons with HFMD
* Children should be kept away from the service whilst unwell. If evidence exists of transmission within the service, exclusion of children until the spots have gone from their hands may be necessary.

Note HFMD is communicable immediately before and during the acute stage of the illness, and perhaps longer as the virus may be present in the faeces for weeks.

The incubation period is 3 to 6 days and the condition may last from 7 to 10 days.

**Exclusion:**

*The prevention of a person from attending the childcare centre. A child should be excluded if he/she is not well enough to participate in activities as usual and/or has any symptoms requiring exclusion from the childcare centre. Sick children must be isolated in a separate room or space until they can be picked up by their parents.*

# ****PEST CONTROL POLICY****

The Manager of the Childcare Facility is the person designated to act as a liaison between the service and a pest control company if required.

## Procedure

* Regular inspections will be performed by the Manager or a pest management professional (who is knowledgeable about pest control) or another person who is knowledgeable about pest biology and habits.
* Staff should report to the Manager immediately if they have any concerns regarding pests of any kind. Staff should be alert to the possibility of infestation on discovery of any of the following:  
   Direct sightings of vermin/pests  
  ⎫ Droppings near food source  
  ⎫ Evidence of nesting  
  ⎫ Evidence of gnawing
* Food should be kept covered or stored in airtight pest proof containers.
* Spillages should be promptly cleaned up.
* Proper sanitation will be maintained and correct disposal of rubbish and food waste will be maintained to prevent conditions for pests.
* Water leaks will be repaired and standing water will be eliminated whenever possible.
* Repairs will be performed as needed to prevent pest access to buildings or to hiding spaces in walls and equipment.
* Pest management decisions will be based on the results of regular inspections.
* If a pesticide is needed, the least hazardous pesticide is selected that will effectively control the pest problem.
* Pesticides will not be applied when children are present in Preschool. Toys and other items mouthed or handled by the children will be removed from the area before pesticides are applied. Children will not return to the treated area within two hours of a pesticide application or as specified on the pesticide label, whichever time is greater.
* In the event of an emergency where pests pose an immediate health threat to children and staff (e.g. wasps) and pesticides are applied, ensure that children will not return to the treated area within two hours of a pesticide application or as specified on the pesticide label, whichever time is greater.
* At least two days but not more than 30 days’ advance notice of pesticide application will be given to parents and staff except in emergencies where pests pose an immediate health threat to children or staff (e.g. wasps).
* Parents and staff will be notified as soon as possible when advance notice is not provided and include an explanation of the emergency, the reason for the late notice and the name of pesticide applied.
* Access to bait boxes and other forms of pest control will never be accessible to children at the childcare facility.
* A record of pest control measures will be kept

# ****CLEANING & HYGIENE POLICY & PROCEDURE****

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* The Child Care (Pre-School Services) (No 2) Regulations 2006.
* Hygiene Regulations.

## HYGIENE PROCEDURES

All new staff and volunteers are informed of the hygiene procedures as part of their induction programme

* Hand washing must be carried out after using the toilet, after outdoor play, before and after handling food.
* Cuts and sores must be covered with suitable dressings.

## CLEANING PROCEDURES

* Mops for general floor washing will be disinfected using rubber gloves and left to dry, mop head up, and replaced regularly. Mops for general floor washing are clearly labelled.
* All toilets, surrounding walls and sinks are cleaned and disinfected every day and between sessions when there is more than one session. Toilet mops are clearly labelled.
* Floors, tables and equipment, where necessary, are cleaned and disinfected daily.
* The service has a daily and weekly cleaning routine in respect of floors, tables, playroom and outdoor equipment, toys and frequently mouthed objects. Room Leaders are responsible for completing the cleaning schedule form each week.
* Sand is always covered when not in use and changed regularly.
* All left over food is properly disposed of.
* All cleaning cloths, towels etc. are changed every day and between sessions. Disposable wipes only are used to clean bathrooms.
* Washing up to be done in the dishwasher, small unsuitable items will be washed thoroughly in hot water with detergent, using rubber gloves.
* The Preschool will be maintained in a clean, hygienic state throughout the day and a cleaning record is kept.
* Our staff are responsible for the materials and equipment used and ensures they are clean, hygienic and safe at all times.
* Children will be encouraged to care for their environment.
* Children will be encouraged to develop their own personal hygiene routine, self-care and independence will be taught.
* Disposal tissues will be available in the children’s rooms.
* In the event where there is a spillage (e.g.) blood, vomit, urine (etc.) it will be cleaned up very promptly.
* All cleaning products are stored safely and out of children’s reach.

## Cleaning Routines for Toys

Toys may be implicated in the transmission of potentially harmful germs and the development of infection in young children. Steps must be taken to ensure toys are maintained in a safe and usable state by regular inspection, scheduled cleaning and appropriate storage.

## Bins and Recycling

The room should have two bins; one for green bin recycling and one for everything else. Children will be encouraged to use the appropriate bins. Staff should ensure that bins are never allowed to overflow. If it is full empty it. The bins should be emptied and rinsed out at the end of every day. If a bin has a lid, the lid must be closed at all times.

## Staff Hygiene

It is imperative to wash hands after handling bins, changing nappies, cleaning up vomit or urine, cleaning children’s noses, before handling food, after handling food etc. This will help in the battle against infections.

## Hand Sanitizers

As most common germs are transmitted through hand contact we have placed hand sanitizers inside the front door for all visitors to use to help reduce the risk of spreading infection.

# ****TOXIC MATERIALS POLICY****

It is the policy of Graiguecullen Parish Childcare Centre to be committed to the promotion of a safe environment by ensuring the safe handling of toxic materials for adults and children. All cleaning chemicals, unsafe, toxic or dangerous or hazardous materials and substances are stores safely.

**The service of Graiguecullen Parish Childcare Centre will:**

1. State the different areas of storage within the service ensure all chemicals are away from the food area
2. Storage facilities for chemicals are in accordance with the manufacturer’ instructions, an identified, cool, dry and well-ventilated place
3. Ensure all chemicals are properly labelled and stored in their original, correctly labelled containers
4. Ensure Chemicals are used as directed by manufacturers.
5. State procedure for dilution storage and labelling for diluted sprays for daily use
6. Store chemicals in a place that is locked and inaccessible to children
7. At induction and team meetings, staff will be given instructions on the safe use of chemical cleaners and first aid measures required in the case of accidental ingestion, inhalation or contact with skin or eyes
8. Ensure the immediate kitchen/utility is TOTALLY inaccessible and is locked at all times. The only other access is by staff entrance which requires a security code.

# ****ENVIRONMENTAL CARE and RECYCLING POLICY****

Graiguecullen Parish Childcare Centre will conduct its activities and operations to reflect best environmental practice in order to control and reduce our direct impacts on the environment. Graiguecullen Parish Childcare Centre aim to:

* Reduce the amount of rubbish we send to landfill.
* Increase the amount of rubbish we recycle
* Reduce our energy usage

## Procedure

* We will ensure that every main room in the service is provided with a highly visible and convenient recycling bin. This will be emptied daily into the main recycling bins.
* We will ensure staff have ready access to recycling bins and are trained to dispose of food packaging appropriately.
* We will purchase recycled office paper and stationery, closing the loop on the paper recycled by the service.
* Lights and taps will be turned off when not in use.
* We will use low energy light bulbs where possible.
* **We will encourage the children to be environmentally friendly by providing activities that promote recycling.**

# ****SAFETY and SECURITY****

## Principle

Graiguecullen Parish Childcare Centre will ensure that it takes all reasonable procedures in relation to the security of the service, employees working in the service and children in attendance. The security practices are applicable to all staff working in Graiguecullen Parish Childcare Centre.

## Policy and Procedure

* It is crucial in the provision of a childcare service to provide a service that is safe for the children and the staff

**A service is most likely to be safe when:**

* 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 and 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 have limited access and are 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 practised once a month.
* 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.
* We ask that all potential collectors be introduced to the staff and manager in advance
* If a child is being collected by anyone other than the parents or usual designated person, the staff must be informed and the name will be added to the enrolment form.
* Please inform the person collecting your child that they will be required to provide identification, to confirm who they are. This is to ensure our children’s safety.
* Regular exchange of information with parents is important, parents must inform the service of change of personal details (e.g.) new house, job, and phone number.
* All TV’s, DVD players, cameras, computers and laptops are stored securely when not in use.
* The main entrance door is locked and can only be opened by a member of staff after they have identified who the visitor is.
* Visitors are required to sign in and out.
* Staff have access to a telephone on the premises. Emergency numbers are displayed beside the phone.
* Parents emergency numbers are easily accessible to staff.

# ****SPILLAGES and HAZARDS POLICY****

## Spillages

In the interests of health and safety the following procedures must be used when cleaning up spillages:

* Disposable gloves are provided by Graiguecullen Parish Childcare Centre and must be used by staff to clean up any body spillages or faeces. When changing nappies or any clothing, which has urine or faeces on it, this procedure should also be observed
* Warning notices should be displayed where appropriate
* Any vomit or blood should be dealt with immediately by wearing disposable gloves and applying Milton/Dettol directly on to the spillage, before cleaning up
* All spillages should be reported to a member of staff and cleared up immediately. Tea/coffee spillages should be cleaned up using the paper towels provided. The area should then be cleaned using hand spray (Dettol) and a cloth. Dry the area with a paper towel. Every member of staff has the responsibility to clear these types of spillages. For spillages of bodily fluids, please see the First Aid policy – a qualified first aider is responsible for dealing with these types of spillages.

## Hazards

If you discover anything, which may be a potential hazard to you, the children, other staff or members of the public who may be using the Preschool you must take immediate remedial action. Report the hazard to the Manager who will record the hazard and take the appropriate action to rectify the hazard

## UNIVERSAL PRECAUTIONS

The purpose of Universal Precautions or Infection Control Guidelines is to protect workers and School users from contact with any infectious organisms.

The basic principle is to treat all body substances (i.e. urine, faeces, vomit, mucus and blood) as potentially infected and if workers are in contact with same to ensure that they are informed and protected.

## Guidelines

* Latex gloves must be available at all times.
* If handling any soiled dressings, latex gloves must be worn and all waste materials placed in disposable bags provided for infectious waste.
* If cleaning up blood spills or any bodily fluid substances, latex gloves must be worn.
* Before cleaning up any spillage make sure that there is no broken glass, syringe needles, or blades present that could cut or pierce you.
* The spillage should be mopped up and the area cleaned thoroughly with a solution of one- part bleach to ten parts water. Any household bleach is adequate.
* If a child or staff member vomits on site, cover the vomit thoroughly with paper towels. A member of staff wearing household rubber gloves should clean the area into a plastic bag and then wash the area thoroughly with hot water and disinfectant.

## Needle Stick Injury Guidelines

Should a needle stick injury accidentally occur the following procedures should be followed:

* Squeeze the area to encourage bleeding and to expel any contaminated blood and wash area thoroughly with soap and water.
* Inform the Manager and get medical attention as soon as possible.
* Record the incident in the accident report book or form

# ****HEAD LICE POLICY & PROCEDURE****

Unfortunately, it's always possible to catch head lice, no matter how careful we are. Children can pick up head lice just by coming into close contact with someone who is infected. It is important to know how to recognise the problem early and to know how to cope with it.

## HEAD LICE PROCEDURES

* All cases must be reported to staff. Parents must state when appropriate treatment was commenced.
* Staff will inform parents in writing in the event of an outbreak of Head Lice. Staff will be tactful and maintain confidentiality.
* A letter is sent out to all parents advising them of the outbreak and information on Head Lice from the Health Promotion Unit will also be provided.
* Parents will be asked to fill out a form to say that they have checked their child’s hair.
* Staff should inform parents to check their child's hair carefully and regularly, and to use the treatment recommended by the public health nurse, chemist, doctor or local health clinic.
* The importance of not sharing other people's combs, hats etc. is stressed to parents and children.
* The letter must be signed and dated and returned by the parent/guardian, confirming that their child has been treated.
* If more advice is needed, the service will contact the public health nurse.

# ****TOILETING POLICY & PROCEDURE****

It is the policy of our service and in the interest of the children's health and safety, that a high standard of hygiene is promoted at all times, when children are learning to use the toilet.

## TOILETING PROCEDURES

* To create an awareness and understanding of good hygiene practice, staff members discuss with the children about the importance of self-care for example: flushing the toilet, washing hands etc.
* Anti-bacterial soap and disposable paper towels are used for washing and drying hands.
* A cleaning schedule is in place to ensure that children's toilets are kept in a clean and hygienic condition at all times.
* The staff should treat accidents sensitively. If required, another staff member is always available to provide assistance.
* The child's privacy is always respected.

# ****INTIMATE and PERSONAL CARE****

## Principle

Graiguecullen Parish Childcare Centre believes that the intimate care of children cannot be separated from other aspects of their learning and development. We do not discriminate against children who have not reached a stage where they can manage their own personal hygiene and as such welcome all children to participate in the service and provide appropriate support for each on an individual basis

## Statement of intent

* To safeguard the rights and promote the welfare of children and young people.
* To assure parents and carers that staff are knowledgeable about personal care and that their individual concerns are taken into account.

## Definitions

‘Intimate Care’ can be defined as care tasks of an intimate nature, associated with bodily functions, bodily products and personal hygiene, which demand direct or indirect contact with, or exposure of, the sexual parts of the body.  
‘Personal Care’ generally carries more positive perceptions than intimate care. Although it may often involve touching another person, the nature of this touching is more socially acceptable, as it is less intimate and usually has the function of helping with personal presentation and hence is regarded as social functioning.

These tasks do not invade conventional personal, private or social space to the same extent as intimate care and are certainly more valued as they can lead to positive social outcomes for people.

Children may require help with eating, drinking, washing, dressing and toileting.

## Procedure

* Staff will work with parents and children to establish a preferred procedure for supporting the children in our care with their personal and intimate care.
* Where possible the child’s key person is responsible for undertaking the care of an individual child. When this is not possible a staff member who is known to the child will take on that responsibility.
* Children are always asked by the member of staff caring for them, for permission to assist them, and children who want to perform their own care are encouraged to do so with adult support when appropriate.
* Children will be cared for with dignity and respect for their privacy.

# ****CODE OF BEHAVIOUR****

GPCCrecognises the importance of a Code of Behaviour between staff and children as recommended in Our Duty to Care. Our Code of Behaviour is kept under regular review.

The Code of Behaviour supports all staff and volunteers to have a clear understanding of what is acceptable with respect to their behaviour with children.

We recognise that children have an equal right to our service provision in line with the *Equal Status Act* and the *National Disability Strategy*

We are committed to

• Valuing and respecting all children as individuals

• Listening to children

• Involving children in decision making as appropriate

• Encouraging children to express themselves

• Working in partnership with parents

• Promoting positive behaviour

• Valuing difference

• Implementing and adhering to all relevant policies to keep children safe

The Code of Behaviour is given to all staff at induction and it is expected that all staff are familiar with the code and that they will raise any questions arising with their line manager.

All employees have a duty to adhere to the Code of the Behaviour and to bring breaches of the code to the attention of their line manager. Breaches of the Code of Behaviour are dealt with through the disciplinary procedure

# MANAGING BEHAVIOUR POLICY

The Child Care Act 1991 (Early Years Services) (Registration of School Age Services) Regulations 2018, require School Age services to have a policy that supports children’s positive behaviour.

To achieve this, we strive to ensure that the emotional, social and general wellbeing of all of the children attending our service are positively supported in a happy, safe, well-planned and controlled environment.

Our service aims to support children to be able to: relate well to other children and adults; make friends and get on with others; feel secure and valued; explore and learn confidently and feel good about themselves. All children regardless of race, religion, family background, culture, gender or ability are treated with respect at all times.

All limits are clearly related to the safety, welfare and protection of the children and staff in the service. It is age appropriate to discuss these rules and boundaries with children in order for them to self-regulate behaviours within the service. A group contract is drawn up between the children and staff at the beginning of the year and is revisited every term or more frequently if needed.

Corporal punishment is prohibited as are any practices or the threat of any practices that are disrespectful, degrading, exploitative, intimidating, emotionally or physically harmful or neglectful. Children are never humiliated, segregated or have food withheld.

**Legislation and regulatory requirements**

* The Child Care Act 1991 (Early Years Services) (Registration of School Age Services) Regulations 2018, require that a policy relating to supporting children with their behaviour skills is written and implemented.

**Children’s needs**

Children need to have the freedom and scope to learn through hands-on exploration and experimentation in a well-planned, well-resourced and well-ordered age appropriate environment.

**Parents’/Families’ needs**

We ensure that parents/guardians know that their afterschool child’s needs are appropriately met and that their child will be safe and happy. We provide open channels of communication between parents/guardians and the service. It is essential that families inform the service if there is an event that may be impacting negatively on a child behaviour. Likewise, if there is an event or issue observed in the service staff have a duty of care to inform families.

**Staff**

Staff members are clear on all policies and procedures in supporting afterschool children with their social, emotional and behavioural development.

**Management**

Management ensure that parents are clearly informed about the service’s approach to supporting each children’s social, emotional and behavioural development. Management ensure that they are compliant with regulation by implementing a policy on managing behaviour.

**Policy Statement**

On enrolment we inform parents/guardians about this policy and the procedure which we implement to support positive behavioural management.

**Procedures & Practices**

Minor Incidents

* Staff will assess the behaviour and where it is deemed to be minor, they will support the children by allowing them to resolve the conflict on their own.
* Staff will stay near the children but will not intervene only if the situation escalates.
* Most minor incidents when resolved by children will promote positive co-operative relationships and self-discipline

More Serious Incidents

Staff will assess the behaviour and where it is deemed to be more serious and it is observed that children are not resolving the issue they may have to intervene.

* Staff will approach the situation calmly and remain neutral not taking sides.
* Children will be encouraged to explain the situation and express how they are feeling
* Staff will explain the reasons behind why something cannot happen or why some behaviour is inappropriate.
* They will remind the children of the rules they agreed to and encourage them to look at the consequences of their actions and think about what they can do to make things better.
* Dependent on the behaviours or if it is ongoing repeated behaviour staff will complete an incident report, which must be signed by families/service.
* Follow up support may be required with families

Serious Incident

* When a child becomes so angry, anxious or frustrated to the extent that they themselves and others have been unsettled, staff will remain calm and settle the situation for this child and the others around.
* Staff will stop a child’s aggressive or destructive behaviour such as kicking or hitting and give a reason for their action such as ‘hitting must stop, hitting hurts’.
* Staff will model positive behaviour to the child and will never mirror the child’s behaviour by raising their tone of voice or acting inappropriately.
* Staff will complete an incident report which will be signed by the service/families
* Follow up support may be required with families.
* An observational plan may be required if behaviours are repetitive

Persistent Serious Behavioural Issues

When a child’s serious behaviour issues are causing disruption and problems for the

other children in the group, the following approaches will be considered:

* Reviewing the programme to ensure that it is meeting the child’s care, learning and development needs
* Reviewing the service’s approaches to addressing the child’s behaviour
* Discussing with the child’s parents/guardians to help to develop a specific plan for that child. The purpose of the plan will be to help ensure that the reason the child is having difficulty with regulating their behaviour, is identified if possible and addressed. It is also to provide whatever support they need to be able to relate well to other children and adults, make friends, feel secure and valued, explore and learn confidently and feel good about themselves.

An individualised plan that takes a positive, learning approach, will be developed. This plan will include:

* Observing and recording the behaviour
* Identifying the triggers for the challenging behaviour
* Considering ways to make the events/interactions that the child seems to find difficult, easier to manage (e.g. less difficult, less confusing, more engaging)
* Skills to teach the child to be able to deal with the situation without resorting to the problem behaviour
* Ways in which the adults will respond when the problem behaviour occurs - to ensure a consistent response
* Ways that parents can help the child at home
* Ways to review and evaluate the plan.

Recurring problems are dealt with in an inclusive manner following observations and involving the child’s parents/guardians and, where necessary, other appropriate adults (with parents’/guardians’ consent).

Holding or restraining a child to prevent harm

* Physical holding as prevention will only be used:
* To prevent an accident such as a child running across a road.
* To prevent injury.
* No matter what age the child is, physical restraint will only ever be used for immediate safety reasons, with the minimum force and for the minimum amount of time. The purpose of this intervention is to prevent injury to the child, another child or to an adult, or to prevent serious damage to property.
* Where a child is expressing feelings of anger, anxiety or frustration, in a way which is unsafe for themselves and others and where reasoning has not stopped the behaviour, a staff member may assist the child in re-establishing control by holding them, to contain their feelings safely, as a last resort and for the minimum length of time.

# ****SUPPORTING POSITIVE BEHAVIOUR POLICY & PROCEDURE****

The Management and Staff of Graiguecullen Parish Childcare Centre CLG believe that children should be encouraged to grow and develop to their full potential in a suitably planned environment, where they know what is expected of them, and where clear limits are set, appropriate to their age and stage of development and any special needs they may have. GPCC CLG’S aim is to support and guide all children to manage their own behaviour and learn to resolve conflicts if they arise. Children attending the service are here for new learning experiences which may test their own coping strategies. All staff will support the children to regulate their behaviour and will have a number of strategies to deal with both positive and challenging behaviour.

## SUPPORTING POSITIVE BEHAVIOUR PROCEDURE

* Children’s efforts, achievements and feelings will always be acknowledged so as to promote the growth of self-esteem and self-discipline.
* The key to promoting positive behaviour is consistency. The Service will strive to manage behaviour consistently in order that children have the security of knowing what to expect and can build up good patterns of self-discipline.
* Adults working in the service must be good role models by following codes of behaviour and showing respect for each other and the children.
* The routine in the setting is based around children’s interests.
* It is recognised that the key to promoting positive behaviour is good observation skills by the adults.
* On-going discussion, training and practice will be availed of to train staff in the skills of promoting positive behaviour.
  + - Physical punishments are never used or threatened. Children are never shaken, smacked, humiliated, shouted at, intimidated or shamed.
    - Verbal or emotional punishments are never used. These include, for example, punishments that humiliate, frighten or threaten a child.
    - Children are never excluded, ignored, neglected or isolated.
    - Staff do not use any form of physical intervention, for example, holding, to manage a child’s behaviour unless it is necessary in order to prevent injury to the child, to another child or to an adult or serious damage to property. Any such incident is recorded and the parents or guardians are informed of the incident on the day.

## MANAGING MODERATE BEHAVIOUR ISSUES

This type of behaviour can be recognised when inappropriate the behaviour is becoming a more regular occurrence.

* The staff team will discuss the reoccurring behaviour and put a plan in place
* Staff will observe the child to identify any triggers of the behaviour
* When the behaviour happens the steps above will be used with the child
* The matter will be discussed in detail with the child’s family

## MANAGING CHALLENGING BEHAVIOUR ISSUES

If a child’s behaviour is considered dangerous to themselves or others a staff member will carefully remove either the child or the other children from the room. This is in order to protect all using the service. The child will be given time to become calm and a staff member will help guide them with their behaviour. The key worker will record the incident and discuss with the family.

If a child’s behaviour is ongoing or becomes severely challenging the service will implement the following strategies:

* The staff team will carry out a meeting to discuss the behaviour and plan out going forward to help the child overcome the issues.
* The child’s key worker will carry out a number of observations to try establishing a trigger of the behaviour.
* All observations will be discussed with the family.
* A plan will be drawn up in collaboration with the staff team and family of the child.
* If necessary, the family will be supported to contact any relevant external professionals.
* If the behaviour is a child protection concern the Child Protection Policy will be implemented.
* All information gathered and discussed will be stored securely and all conversations are highly confidential.
* All meetings plans and observations will be recorded and stored in the child’s record in a locked cabinet.
* The staff will always work in the best interest of the child using their best judgement in situation which can be demanding and stressful on all involved.

## STRATEGIES FOR SUPPORTING POSITIVE BEHAVIOUR

* One to one adult support will be offered to the child that has misbehaved to help the child to see what went wrong and offer possible solutions.
* Comfort and support will be offered where another child has been hurt in an incident.
* Explanations for challenging unwanted behaviours and attitudes will be made clear immediately to the child/children.
* It will always be made clear to the child in question that it is the behaviour and not the child that is unacceptable.
* Staff will use simple, positive language, speaking calmly and quietly to the children when dealing with these situations.
* Staff will demonstrate respect and empathy by listening and being interested.
* By offering alternatives, positive behaviour is encouraged and helps to teach children about the value of compromise.
* Recurring problems will be dealt with in an inclusive manner following observations and involving the child, the child’s parents, and other appropriate adults.
* Books and activities will be available to help the children explore and name their feelings, where appropriate, in conjunction with an adult.

# ****BITING POLICY****

Graiguecullen Parish Childcare Centre recognise that when a biting incident occurs it is upsetting for everyone involved. Graiguecullen Parish Childcare Centre would like to offer you some information on biting so that it might make it a little easier to understand why children sometimes have a tendency to bite. Biting is one of the most difficult behaviours to deal with in young children.

Biting is carried out on impulse and very often without any outward sign to indicate what is about to happen. Graiguecullen Parish Childcare Centre focuses on effective ways that address the specific reasons for biting. When biting occurs the staff will, together with the parents, develop a plan to address the problem. The techniques used include:

* Observing the child
* Observing the daily routine of the room
* Talking to parents
* Being at all times aware and mindful of the child concerned
* Helping children understand that biting is unacceptable

Action taken when biting occurs include:

* Bitten child is cared for first
* Say no immediately in a calm but firm tone to the child who has bitten, then take her/him away from other children and explain that biting is not nice and it hurts and upsets others
* Child is encouraged to apologize to the other child and ask if they are ok
* Child is reminded that biting hurts and is not nice. The child is encouraged not to repeat this

## Working with parents

Staff of Graiguecullen Parish Childcare Centre and members will inform parents when an incident occurs. If the child persists in biting, parents will be asked to attend a meeting with the Room Leader/Manager to put in place an agreed program to help the child. The agreed programme will be implemented at home and in the School Aged Childcare with the main focus being on the child’s positive behaviour and building on that behaviour.

**Developing a Positive Approach to Discipline Policy. What is discipline?**

Discipline means training, guidance and leadership, especially of the kind that provides self-control, orderliness and capacity for co-operation.

In a disciplined environment children will:

* Learn to control their own behaviour
* Learn to feel good about themselves
* Learn to understand the needs of other people
* Learn to understand the consequence of their actions
* Learn to become increasingly independent and responsible

These essential qualities enable children and adults to lead happy and fulfilling lives at home, in school, at work and at play.

Behaviour, which injures people either, emotionally or physically, or which damages property, is a real problem for parents and adults working with young children. However, prevention is better than cure. Forward planning, teamwork, collaboration with parents and a sound knowledge of child development are essential. The layout of the room, the equipment and curriculum offered, the adult’s style of interaction and people’s expectations will have an impact on the children’s behaviour.

## POSITIVE DISCIPLINE STRATEGIES

* Staff create and maintain a warm caring play/learning environment in which children and adults feel valued and respected.
* The staff in the group are happy to work together and this is shown by the exchange of comments, information, looks and smiles
* Staff establish and maintain a predictable, daily routine so that children feel secure and have a sense of control over what is going to happen next.
* The routine has a balance of child initiated and adult initiated activities and children have the opportunity to make choices throughout the session.
* Children have access to a wide range of materials which are of interest and value to them.
* Space is divided into distinct play areas, in which several children have enough space to play together.
* Staff accept that children are functioning at different levels of development and understanding and therefore behave and use materials in a variety of ways.
* Staff eliminate long waiting periods such as snacks and trips to the toilet and make short waits as active as possible. For example, involve children in tidying up and preparing and distributing the snacks.
* Staff acknowledge children’s positive behaviour with specific comments.
* Staff seek value and listen to children’s ideas and points of view.
* Staff acknowledge and describe children’s concerns and feelings.
* Staff discuss and agree on expectations and necessary limits and are consistent in following them through- if something is unacceptable today it is unacceptable tomorrow.
* Staff avoid unnecessary constraints and restrictions.
* Staff work in collaboration with parents, sharing aims, expectations and information on a regular basis.
* Staff give children clear consistent explanations for rules and limits.
* Staff acknowledge that learning to develop self – control, solve problems and negotiate solutions are important life skills, which children learn through experience with support from adults, who are patient and consistent in approach and who model care and concern for people and materials throughout the session / day.

## ON THE SPOT ACTION

Staff intervene immediately when children are fighting, kicking or biting.

Staff comforts the injured child first and gives him/her their full attention.

Staff will speak with the child who is fighting and ask what the matter is and why did they get so upset. Staff will explain that it is ok to get upset but when they are upset not to lash out. The child will be asked to suggest another way of solving their problem.

Staff will encourage the child to apologise.

Staff will encourage the other child to accept the apology.

If the behaviour becomes persistent, parents will be informed.

Staff will recognize and praise positive behaviour from young people

# ****SAFETY POLICY & PROCEDURE****

It is the policy of Graiguecullen Parish Childcare Centre CLG to:

* Ensure the health, well-being and personal safety of all users of the Service on the premises.
* Have proper accident prevention and emergency procedures agreed and shared with all users of the Service.
* Ensure all safety procedures are reviewed regularly and followed consistently.
* We ensure children, parents, staff and students are aware of the dangers of fire and how to react if they ever experience a fire at our service.
* Comply with all legislation in force in the area of safety and fire prevention including:
  + Planning and Development Act 2000.
  + Planning and Development Regulations 2001.
  + Building Control Act 1990.
  + Building Control Regulations 1997 & 2000.
  + Building Regulations 1997 & 2000.
  + Health Safety and Welfare at Work Act 2005.
  + Fire Services Act 1981.
  + Childcare Act 1991 Part 7.
  + Childcare (pre School Services) Regulations 1996.
  + Childcare (pre School Services) (Amendment) Regulations 1997.
  + Hygiene Regulations.
* The service has all the relevant fire safety equipment recommended in the Dept. of the Environment’s *Fire Safety in Pre-Schools* booklet including fire extinguishers, smoke alarms and fire blankets.
* A record of the serial number and type of equipment is kept beside each piece of fire- fighting equipment in all of the rooms.

## FIRE SAFETY PROCEDURES

On induction all staff are trained and instructed in the use of fire-fighting equipment and how to operate the fire alarm system.

Pensec Ltd conducts quarterly and annual periodic inspections on the Integrated Fire Alarm System.

* The fire safety equipment is serviced annually.
* Fire drill instructions are posted in each room.
* The assembly point is clearly marked.
* A fire drill is carried out with the staff and children every month. Days of fire drills are changed so that every child attending the service is involved in the practice.
* Staff discuss with the children the reasons for the fire drills before and after each drill.
* Records of the fire drills are kept detailing the day, time, duration and difficulties encountered in evacuating children and staff from the premises.
* Difficulties during file drills are dealt with immediately.
* Fire drill instructions indicating exit routes and the fire assembly point outside the building is clearly displayed in each room. Staff attend regular fire safety training and Yvonne Coffey is the appointed Fire Safety Warden.
* Smoke detectors, fire extinguishers and fire blankets are available as recommended by the Fire Safety Officer and serviced annually.
* Written records are kept of the monthly checks of the fire-fighting equipment.
* Staff will be trained on how to use fire- fighting equipment. A record of this training will be recorded. This takes place every two years.
* Materials contained in bedding and internal furnishings within the service will be of EU standard (i.e. kite symbol or CE compliant) in relation to fire retardant properties and will be non- toxic.
* Heat emitting surfaces will be protected by a fixed guard and/or thermostatically controlled to ensure safe temperatures.
* Escape Route and exit doors should be maintained free from obstruction so that they can be safely and effectively used at all times
* All flammable materials (oils, polish etc.) are safely stored outside of the children’s areas. Waste is promptly disposed of and, in general, precautions are taken to ensure the prevention of occurrences likely to constitute a fire hazard.

## STEPS TO TAKE DURING THE FIRE DRILL

* Raise Alarm
* The person discovering the fire will immediately sound the fire alarm
* The Designated person will collect the register
* Evacuate Building
* Staff and children evacuate the premises safely to the fire assembly point outside the building. The Fire Safety Officer (Yvonne Coffey) or Designated person checks all areas of the service to make sure that there no persons left in the building.
* No one is permitted to enter the building after all areas have been checked and cleared.
* The Room Leader checks children and staff present against the register.
* Call Fire Brigade - The Fire Safety Officer (Yvonne Coffey) or Designated person calls the fire brigade from a mobile phone.

## Mobile Children

* When the fire alarm sounds the children are asked in a calm manner to form a line without delay
* No coats are put on or bags taken
* All windows and doors should be closed to minimise the danger of the fire spreading
* Lead by one of the staff, mobile children are lead from the building the shortest route to the fire assembly point
* The childcare staff take the role book, check the premises, the bathrooms and then leaves to the assembly point.
* Once outside encourage children to hold hands and wait, it may be necessary to take some children by the hand and hold on to them outside.

## Immobile Children

* Designated person ensure that doors are open for evacuation.
* A fire safety cot should be available to transport children to the assembly point.
* Be aware of how many immobile children there are and ensure a head count is done prior to leaving and a role call is taking at the assembly point.
* Check and recheck to ensure all children are accounted for.
* The fire officer checks the premises, toilet, changing room and leaves last
* Once outside, staff should call the children’s role immediately,
* The Fire Officer can ring 999/112
* Do not re-enter the building until management or the fire brigade – fire safety officer informs you it is safe to do so.
* A roll call will be carried out by management at the assembly point to ensure all staff persons are accounted for.

## When Dealing with a Fire

* Employees should be aware of the location of the fire-fighting equipment on the premises and the method of operation of this equipment prior to use in an emergency.
* If a person’s clothing is on fire, wrap the fire blanket, rug or similar article closely around them and lay them on the ground to prevent flames reaching the head.
* If electrical appliances are involved, switch off the power before dealing with the fire.
* Shut the doors and, if possible, the windows of the room in which the fire is discovered ensuring the main routes of escape are maintained at all times.
* Call the Fire Brigade – The designated person(s) should call 999 and give precise instructions as to the address, including the name of the nearest main road and/or other landmarks
* Evacuation – Commence an orderly evacuation of the building. The Manager will check that all the rooms are unoccupied including sleep rooms and bathrooms. Close the doors and windows as each check is completed. The Manager will take the daily attendance sheets and a list of Parents Telephone Numbers to the Assembly Point
* Assembly – Assemble Children and staff at a safe pre-arranged point. A roll call or head count should be carried out, based on the daily attendance sheets held by the Manager. The group should then proceed to a nearby safe house, from which the parents can be contacted.
* Staff Report – A member of staff should be on hand when the Fire Brigade arrives to provide any information they require
* Attack Fire – You can try to extinguish the fire but only if it is safe to do so, using proper equipment. Otherwise, wait until trained personnel arrive.

The above procedure should be practiced as a Fire Drill at regular intervals to familiarize the children with the procedure without frightening them.

The Designated Fire Safety Persons are on display in all rooms and common areas.

# ****EMERGENCY CLOSURE****

In the unlikely event that Graiguecullen Parish Childcare Centre has to close at times other than scheduled in the normal opening hours and dates, the policy will be applied to ensure that all involved in the service have a clear understanding of the procedures which will take place.

## Statement of Intent

The service will endeavour to be open during normal service hours. Where disruption is unavoidable, all involved in the service will be kept informed and the Preschool will reopen at the earliest possible opportunity.

## Procedure

**An emergency closure will be implemented in the following circumstances:**

* When the building is unusable through accidental or malicious damage
* When the building is unusable due to required maintenance work. Where possible Graiguecullen Parish Childcare Centre will endeavour to negotiate scheduled work to be carried out during times of closure.
* When an outbreak of illness within the service community requires closure in line with the Tusla recommendations.
* When illness levels within the staff body mean it is impossible to maintain the correct ratios of suitable adults to children as per the Child Care Act 1991 (Early Years Services) Regulations, 2016.
* When an emergency occurs during the opening hours which requires the service to close early.
* When there are dangerous storm warnings, wind warnings or extreme snowfall.
* In the event of any of the above incidents occurring which requires the Graiguecullen Parish Childcare Centre members to close on a given day, The Manager will make contact with the families of the Preschool affected for that day in advance where practical. Where this is not practical, a member of the management will remain at the building until such time as it can be determined that all the affected families have been made aware of the situation.
* Parents will be informed about how they can find out when the Preschool will reopen and other information according to the circumstances of the closure. This may include asking them to nominate a preferred contact number/email address or holding a special meeting to keep parents informed.

## Emergency closure after a session has started

* In the event of an emergency closure after the session has started, parents and carers 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 children can be collected.
* If the closure is due to an emergency which requires the building to be evacuated, the children will be safely evacuated according to the current Fire Drill procedures. Contact information for all the children will be taken out of the building alongside the daily register.
* Once the building is evacuated, the emergency services will be called.
* The children will then be taken to a place of safety until such time as they can all be collected by parents/designated person. Parents will be contacted by the Manager. All staff will remain with the children during this time.

# Policy on Dropping Off and Collection of Children

# The safety of the children attending our service is of paramount concern to all staff, students and volunteers. For this reason, GPCC operates a strict collection policy.

# Authorisation to Collect

# Upon enrolment Parents/Guardians must complete a registration form and provide details about individuals who are authorised to collect their child/children. These details are kept on file for each child. Children may only be collected by the authorised person(s) named on their registration form.

# Child Collection Procedures

# Children may only be collected by the person(s) named on their registration form.

# The parent/carer must notify staff in advance if another authorised collector (not parent/guardian) is to collect their child on a particular day.

# If any person comes to collect a child/children who is not known to the staff even if the name they provide is on the authorised collection list they will be asked to confirm their identity by producing proof of identification i.e. driver’s license/passport. If they are unable to provide identification the parent will be phoned to confirm.

# If written permission is provided by the parent on the enrolment form an older sibling may collect a child from the Service.

# Children must always be collected on time, our service closes at 6 pm.

# Children will not be released into the care of a person who appears to be incapable of caring for a child.

# Parents/Guardians who are under the influence of drugs and/or alcohol will not be permitted to collect their child/children.

# In these circumstances, management will contact an alternative authorised collector on the child’s registration form.

# If an alternative person cannot be contacted to collect the child/children, a member of management will contact An Gardaí, as per our Child Protection Policy.

# Children collected by the service by foot

# GPCC is based in the grounds of St Fiacc’s Primary School. We provide a free collection service for Junior and Senior Infant children only at 2pm from St Fiacc’s Primary.

# We do not collect from any other school.

# GPPC staff leave the Service at 1.55pm and bring attendance sheets with the names of all the children who are booked to attend. There is 1 staff member to every 12 children plus the Supervisor on the rota every day. It takes approx. 1 minute to walk to the school door from the Service.

# GPCC staff have access to the school hallway and wait outside the door of the classrooms and coordinate with the class teacher about which children are going to Afterschool.

# Once all the children’s names are noted on the attendance sheets the children are escorted to the Afterschool Service. The Supervisor has a mobile phone at all times and can ring the office for assistance if necessary.

# Children from first to sixth class who are booked to attend walk over at 3pm.

# Staff record the time of arrival of the children into their designated rooms. The Supervisor and Assistant Supervisor monitor both entrance paths from the school to the Service to ensure children arrive in an orderly and safe manner.

# If a child is booked and does not attend the parent is contacted immediately.

# ****MISSING CHILD POLICY****

To minimise the likelihood of children going missing while in the care of Graiguecullen Parish Childcare Centre and to provide the correct procedure to follow should that happen. All children attending Graiguecullen Parish Childcare Centre are of equal importance and are cared for equally. Staff are deployed and the building is used in such a way as to minimise the chance of children removing themselves from the main group without being noticed, whilst allowing them a free choice of activities. In this way staff can be made immediately aware of a child needing help or support and react accordingly.

## Procedure

* Children are welcomed into the setting by a designated member of staff, who marks their presence in the daily register.
* A member of staff remains on duty by the door throughout the arrival and departure period of the childcare facility and until all parents and carers have left the premises.
* The main door is kept secure at all times when a member of staff is not on duty at the entrance.
* Children’s times of arrival and departure are noted on the register along with who collected them (full names not titles).
* Staff are deployed throughout the setting during the session, ensuring that no child is left alone for any period of time without an adult being aware of their location.
* The outdoor area is supervised.
* The outdoor area is securely fenced and the gate secure at all times.
* The rooms in which the children play in are never left unsupervised.
* If all staff and children are outside and a child needs to come inside, a member of staff will accompany them inside.
* Visitors are viewed through a window before the door is unlatched to allow them access to the building and they must go to the office to sign in.

## In the event of a member of staff not being able to locate a child on the premises

* The premises will be searched thoroughly and immediately.
* The register will be called to determine which child(ren) are missing.
* The grounds surrounding the childcare facility will be searched.
* The Manager will call the local Garda.
* The Manager will inform the parents.
* A full and thorough review of procedures and practices will take place to determine how the incident occurred and changes will be made if appropriate.

## In the Event of a Child going missing on an outing

However, the following procedures are to be followed.

* As soon as it is noticed that a child is missing, staff on the outing ask children to stand with their designated person and carry out a headcount to ensure that no other child has gone astray.
* One staff member searches the immediate vicinity but does not search beyond that.
* The Manager contacts the local Garda station and reports the child as missing. Then follow their instructions.
* The Manager contacts the parent, who makes their way to the setting or outing venue as agreed.
* Staff take the remaining children back to the setting if applicable.
* In an indoor venue, the staff contact the venue’s security who will handle the search and contact the local Garda Station if the child is not found.
* A full and thorough review of procedures and practices will take place to determine how the incident occurred and changes will be made if appropriate.

# ****CRITICAL INCIDENT PLAN POLICY****

Graiguecullen Parish Childcare Centre will endeavour to ensure that the children are protected and cared for at all times and in the event that the building needs to be evacuated staff will follow this plan safely and children will be will be supervised during any period spent outside the premises. In the event of an emergency at our facility this policy will be applied to ensure that all involved in the service have a clear understanding of the procedures which will take place. The purpose of this plan is to address basic emergency planning and response for a range of childcare emergencies

## Definition of Critical Incident

A critical incident is any incident or sequence of events which overwhelms the normal coping mechanisms of the service.

## Emergency Preparedness

Emergency preparedness is the preparation and planning necessary to effectively handle a critical incident or emergency situation. It involves our service assessing the likelihood of specific critical incidents occurring and developing an emergency plan that identifies the services we require, and the resources we need to have on hand in case such an incident occurs. The goal of these preparedness activities is to make sure that our service is ready and able to respond quickly and effectively in the event of a critical incident.

## Responsibilities and Roles in Emergency Planning and Response

Graiguecullen Parish Childcare Centre& member’s management will:

* Ensure that the facility remains in compliance with Child Care Act 1991(Early Years Services) Regulations 2016 in regard to:

o First Aid  
o Medical Assistance  
o Management and staffing  
o Registering of children  
o Records  
o Information for Parents  
o Fire safety measures  
o Premises and Facilities

* Will Develop and review Emergency Preparedness Plan(s). Emergency situations identified during risk assessment as being high risk to the service will have a specific plan developed.
* Ensure that staff are trained in the provisions of Emergency Preparedness Plan(s).
* Ensure that children are prepared for the provisions of Emergency Preparedness Plan(s).
* Conducts evacuation and lockdown drills, keep records and plan revisions based on drill evaluations.
* Assign emergency responsibilities to staff members as required, with regard to individual capabilities and normal responsibilities.
* Keep parents and staff members informed of Emergency Preparedness Plan revisions.
* Regular safety checks of the service, equipment and toys are done and records kept.

**Graiguecullen Parish Childcare Centre will:**

* Participate in developing the facility’s Emergency Preparedness Plan(s).
* Participate in emergency preparedness training and drills.
* Help children develop confidence in their ability to care for themselves.
* Provide leadership during a period of emergency.

**Graiguecullen Parish Childcare Centre Maintenance Personnel and Management will:**

* Participate in developing the facility’s Emergency Preparedness Plan(s).
* Conduct periodic safety inspections of the facility.
* Identify shut-off valves and switches for gas, oil, water and electricity. A chart showing shut-off locations so that others can use them in an emergency is available in both reception and kitchen areas.
* Provide for emergency shut-off of the ventilating system (as applicable).
* Instruct all staff members on how to use fire extinguishers.

## Food

**The Manager will:**

* Ensure that suitable, sufficient, nutritious and varied food is available at all times.
* Maintain adequate supplies of non-perishable food and water for emergency use.
* Rotate supplies to ensure freshness.

## Parents

**The Manager will:**

* Encourage parents to become familiar with the Emergency Preparedness Plan(s) and procedures they are to follow.
* Advise parents of the service’s procedure for picking up their children if an emergency causes the service to relocate to another site.
* Ensure that the information the facility has on the children and parents is current and correct.

**Graiguecullen Parish Childcare Centre has addressed the following emergency situations:**

* Medical Emergencies (see Accident and Incident, First Aid, Anaphylaxis and Illness Policies)
* Missing Child (See Missing Child Policy)
* Natural Disasters: flood, storms, icy weather (see Emergency Closure Policy)
* Utility Disruption, water, electricity, heating (see Emergency Closure Policy)
* Fire/smoke Emergencies (see Fire Safety Policy)
* Hazardous Material; chemical spills (see Spillages and Hazards Policy)
* Pandemic Flu or other Pandemic Episodes (see Swine Flu and Infection Control policies)
* Evacuation Process and Procedure for Sheltering Off-site (see Emergency Closure Policy)
* Gas leak (see Emergency Closure Policy)
* Potentially Violent Situations (unauthorized/suspicious person/intruder) (see Lockdown/Evacuation procedures below)
* Disgruntled or Impaired Parent/Guardian (see Comments and Complaints and Lockdown/Evacuation procedures below)
* Bomb Threat (see Lockdown/Evacuation procedures below)

**Graiguecullen Parish Childcare Centre in its development of Emergency Preparedness Plan(s) has the following:**

* A current list of staff members’ names, addresses and contact details for staff and next of kin.
* A current list of children including special needs requirements.
* An attendance logbook.
* A current list of parents and second named guardian including contact details.
* Adequate first aid resources and a current list of staff with first aid training.
* A quick reference guide with contact details for the Critical Incident Team and essential services.
* A clearly defined evacuation procedure which identifies pre-designated assembly areas and if required, a relocation shelter site.
* Up to date facility floor plans and maps outlining fire exits and location of essential services.
* Templates for communications with parents and the media (ref. Resource materials, Dept. of Education).
* Contact details for interpretive services if required.
* Maintaining a soft copy file of children’s photographs, with parental consent, should be considered.

## Critical Incident Procedures

When an incident occurs, staff will immediately alert the Manager or designated person. It is the responsibility of the Manager to determine whether the incident is deemed to be critical. The Manager or designated person will lead the emergency response and be guided by the Critical Incident Action Guide

## Immediate Response [within 24 hours]

a) Identify the nature of the critical incident  
b) Implement the appropriate emergency preparedness plan  
c) Contact emergency services  
d) Delegate immediate first aid to trained staff  
e) If applicable, secure the area  
f) Ensure safety and welfare of children and staff  
g) Notify the critical incident team leader if not on site  
h) Liaise with emergency services, hospital and medical services  
I) Contact and inform parents and family members  
j) Identify children and staff members most closely involved and at risk  
k) Manage media and publicity  
l) Maintain Emergency Operational Procedure & Time Log

## Lockdown Procedure

If there is a dangerous person inside or immediately outside the service, the best procedure may be to lock all interior doors and to protect the staff and children in their rooms.

Staff have agreed a code word or signal during the emergency planning process and all staff are trained to recognize this signal which warns them that there is a danger and that all rooms should be locked.

Children will be kept inside the rooms, away from doors or windows where they can be seen.

The Manager will should summon the Garda Síochaná. Efforts to get the dangerous person(s) to leave the service should only be taken if it is safe to do so.

Staff should only unlock the doors to their rooms if they hear the previously agreed code word or signal.

## Shelter in the Facility

If it is unsafe for the adults and children of the service to go outside, provisions have been made to provide “protected spaces” inside. Depending on time available to move the children, it may be necessary to try to shelter in a “close” part of the service, rather than the most protected space.

**A safe area is:**

* In the interior of the building away from glass that may shatter.
* Not in a room with large ceiling spans (like gymnasiums or auditoriums) that may fall if subjected to strong winds.
* In a room where furniture and wall-hangings are secured so that they will not fall onto children or adults.

There may be danger of flooding or a real danger of not being able to get out – making it even more important that the emergency services know where you are.

These locations were identified during the planning process and are made known to all staff.

All air intakes and openings should be closed to protect the atmosphere inside in the event that we are being kept inside because of smoke or toxic chemicals outside.

## Emergency Evacuation after a Session has started

* The alarm bell will be sounded by the Manager or other nominated person or the code word will be used to staff.
* In the event of an emergency evacuation after the session has started, parents and carers may be informed by telephone that they are required to collect their child as soon as possible from the Emergency Assembly Point which is opposite to the outdoor playground.
* The children will be safely evacuated according to the current Fire Drill procedures to the Emergency Assembly point.
* Contact information for all the children will be taken out of the building along with the daily register.
* Once the building is evacuated, the emergency services will be called.
* Children will only be escorted back into the building under the advice of the emergency services or the Manager once all threats to safety have been cleared.

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## Procedures for Dealing with a Trespasser

**If a trespasser is found on the premises the Manager or other nominated person will:**

a) Establish their name and why they are on the premises.  
b) Inform another member of staff that they are dealing with a trespasser and activate the lock down or evacuation procedure if required. (Use the code word to alert other staff members)  
c) Offer help to the person or to call someone for them in the event that the trespasser is distressed or it is suspected that they are under the influence of alcohol or other intoxicants.  
d) Request that the person leaves quietly.  
e) If the person refuses to leave the Gardaí will be called.

Under no circumstances must staff member put themselves in danger if the trespasser is aggressive or violent. The evacuation procedures should be followed and the Gardaí called.

## Post Assault/Post Trauma: Procedures and Guidelines

In the event of any incident Graiguecullen Parish Childcare Centre Manager should offer as much support as is reasonably possible to those involved.

Note: it is considered essential that the service Manager and all staff are aware of the effects of assaults/serious incidents.

**The following areas need to be addressed for the staff:**

* Debriefing immediately following, or as soon as practical after an assault/incident
* Completion of report on the incident
* Follow up to check how the staff member is doing
* Outside/independent support for the staff member if appropriate
* Get immediate medical help if necessary
* Consult own GP and if advised take sick leave
* Complete an incident report form.  
  Have a policy to report assaults/incidents and serious threats to the Gardaí, but it is acknowledged that it is up to the individual staff member to make a decision on pressing charges. The Manager should accompany the staff member when  
  making a report to the Gardaí and also to court if charges are brought and the staff member is required as a witness.

N.B. Staff members making a statement to the Gardaí should use their work address and not their personal address.

## Secondary Response [24–72 hours]

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

## Ongoing Follow-up Response

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

## Evaluation and Review of Management Plan

* After a critical incident, a meeting of the critical incident team will be held to evaluate the critical incident report, the effectiveness of the management plan and to make modifications as required.
* After any evacuation or security breach a full and comprehensive review will take place by the Management and will include:
* Completing an incident report form with a full report of how the situation was dealt with.
* A report of any children or staff that have been distressed or upset during the incident or subsequent evacuation.
* Evacuation procedures.
* Security arrangements to avoid trespassers accessing the building.
* The evaluation process will incorporate feedback gathered from staff, parents and local community representatives.
* An evaluation report will be made available to the management team.

## Information/Training

* These procedures should be known to all staff and reviewed on a regular basis and incorporated into the induction programme.
* Management and staff should agree an emergency code or phrase.
* Under no circumstances must staff be made feel incompetent or apologetic for activating the emergency procedures.
* Responsibility for the training is assigned to the Manager.

## Dealing with the Media

In the event of a crisis, emergency or controversial situation, the manager will handle all contacts with the media, and will coordinate the information flow. In such situations, all staff should refer calls from the media to the Manager. No staff may talk to the media unless designated to do so. A breach of this may invoke the disciplinary policy.

**DEALING WITH THE MEDIA**

Some events draw a great deal of media attention and this can add complexity and stress to what is already a difficult situation. The media can be used to dispel rumour and give a clear factual message. On the other hand, the media can sensationalise the story.

The primary concern at any time of crisis is to protect the privacy of those affected by the incident and to ensure any media attention is handled sensitively.

It is most important that all those involved understand how the media will be handled at times of crisis

## Press Statement

* Prepare a Press Statement that is factual and accurate
* It should be brief and carefully considered
* Avoid sweeping statements or generalisations
* Consider privacy of families concerned

## Interviews

* Decide if the service wished to partake
* Use designated times and in a specific press room (this keeps you in control)
* Preparation is key
* Parents should be advised not to let children be interviewed
* Delegate a spokesperson
* Management should inform everyone concerned that only the nominated spokesperson will deal with the media

## CRITICAL INCIDENT STRESS DEBRIEFING

**DEBRIEF**

* Assess impact
* Safety and Security
* Ventilation and validation
* Prediction and planning
* Support
* Recovery

# ****DIVERSITY, EQUALITY & INCLUSION POLICY & PROCEDURE****

This policy represents the agreed principles and commitments for inclusion, in line with the Early Childhood Care and Education National Inclusion Charter. GPCC CLG will implement this policy to support and develop an inclusive environment for children and adults within our early childhood service.

‘Inclusion’ refers to:

A process involving a programme, curriculum or education environment where each child is welcomed and included on equal terms, can feel they belong, and can progress to his/her full potential in all areas of development. (National Childcare Strategy 2006–2010)

GPCC CLG actively seeks to support learning and participation that does not hinder or exclude individual children or groups of children. This means that equality of opportunity must be a reality for all children attending the service. This is achieved by using a child-centred equality and diversity approach to create an inclusive learning environment.

Core principles of this policy are:

* Work in partnership with parents.
* Support children’s ability, identity, cultural background and sense of belonging.
* Support children to become respectful of difference.
* Foster each child’s critical thinking in order to confront bias and discrimination.
* Implement a curriculum that meets the individual needs and emerging interests of the child under the National Quality Framework – Síolta (2006) and the National Curriculum Framework – Aistear (2009).
* Respond to children’s diverse and individual learning needs and styles through an emerging curriculum.
* Continual development for all early childhood practitioners, so as to ensure that they are trained in an equality and diversity approach to providing care and education to all.

## DIVERSITY, EQUALITY & INCLUSION PROCEDURES:

**Early childhood practitioners work to ensure the following:**

* Children feel secure and know that their contributions are valued.
* Children know they belong and are valued as unique individuals.
* All children’s cultural backgrounds are respected and valued.
* The individuality of each child is respected and nurtured.
* Children feel strong and confident about their identity.
* Children are taught in groupings that allow them all to experience success.
* Children use materials that reflect a range of social and cultural backgrounds.
* Children have a common curriculum experience that allows for a range of different learning styles. Children are encouraged to participate fully, having particular regard for and being cognisant of children with a variety of abilities.
* If a child uses an aid or assistive technology to communicate, that the device is used solely for this purpose.
* Acknowledge festivals celebrated by all families in our local community and in the wider society.
* Children are encouraged at all times to appreciate similarities and value differences. A range of materials should be chosen to reflect cultures, genders and ability difference.
* The childcare service recognises that all children have needs but some have more needs than others. The special needs of children are acknowledged.
* Every effort will be made to meet the needs of children and families using the service.
* Children and adults will be encouraged to experience a range of different festivals, for example through stories, celebrations, special food and clothing. Appropriate advice and input will be sought from people who celebrate the festival.

## INCLUSION POLICY

Graiguecullen Parish Childcare Centre is committed to providing the children in our care with the best possible learning opportunities and experiences. We welcome and actively promote inclusive practices and diversity within our service. Our aim is to make our setting accessible to all families who wish to use it. Our mission is to value the ability, individuality and cultural background of all children by providing each child with the opportunities they need to reach their full potential as active learners within an inclusive ethos/culture. At Graiguecullen Parish Childcare Centre, we achieve care and inclusion in education by continually reviewing an anti-bias approach that is implemented by the early childhood service, and by working in partnership with families, children and the early childhood team, both individually through reflective practice, and in consultation with children and their families, so as to ensure that the education and care provided is fully inclusive of all children, families and agencies that attend and use our service.

## Role of Inclusion Coordinator

The Inclusion Coordinator within our service is the manager.

Core principles

Graiguecullen Parish Childcare Centre actively seeks to support learning and participation that does not hinder or exclude individual children or groups of children. This means that equality of opportunity must be a reality for all children attending the service. This is achieved by using a child-centred equality and diversity approach to create an inclusive learning environment.

Core principles of this strategy are:

• Work in partnership with parents.

• Support children’s ability, identity, cultural background and sense of belonging.

• Support children to become respectful of difference.

• Foster each child’s critical thinking in order to confront bias and discrimination.

• Implement a curriculum that meets the individual needs and emerging interests of the child under Síolta: The National Quality Framework (2006) and Aistear: The National Curriculum Framework (2009).

• Respond to children’s diverse and individual learning needs and styles through an emerging curriculum.

• Support continual development for all early childhood practitioners, so as to ensure that they are trained in an equality and diversity approach to providing care and education to all.

## RESPONSIBILITIES OF MANAGEMENT AND EARLY CHILDHOOD PRACTITIONERS AT GPCC CLG

All families and children are encouraged to participate, accessing learning experiences through the curriculum on offer.

At GPCC CLG, we promote children’s individual learning according to their stage of development in line with the Child Care Act, 1991; Child Care (Pre-school Services) (No. 2) Regulations 2016; Disability Act 2005; Equal Status Acts 2000– 2011; the United Nations Convention on the Rights of the Child, with particular attention to Articles 29 and 30; and Children First: National Guidance for the Protection and Welfare of Children, 2011.

## WORKING IN PARTNERSHIP WITH PARENTS

As children and families are the most knowledgeable about their background, culture, language, and physical and developmental needs, GPCC CLG will ensure that families are consulted when developing and implementing policy.

An effective diversity and equality approach will ensure that ability and diversity are recognised and celebrated, and that discrimination, inequality and exclusion are addressed.

## DEALING WITH DISCRIMINATORY INCIDENTS

* The first step in handling incidents involving discrimination is to recognise and acknowledge what is happening.
* All children need to know that name-calling or physically hurting someone is unacceptable.
* Discuss with the children in a democratic and sensitive manner that name calling or physically hurting someone is unacceptable.
* When an incident occurs (hurtful remarks made by one child to another), both children learn from the incident. Refer back to the rules of the service where appropriate.
* Always determine the real reason for incidents involving exclusion or conflict. It may not be a discriminatory incident, so be careful not to make assumptions.
* Some issues may be brought into the early childhood service by the child, arising from comments made by adults outside the setting. Recognise when it is an adult issue, and identify appropriate actions for addressing the issue with the child’s parents or guardians.
* An incident should be considered from the perspective of all individuals involved as well as those who witnessed it. Appropriate actions need to be taken, at circle time or in group discussion, in order to address incidents witnessed by children who were not involved. This does not mean singling out children in the group.
* By showing empathy and expressing our feelings, we help children to express their feelings.
* It is important to be aware of how our own attitudes can shape how we respond to a given situation. Be mindful that early childhood practitioners are role models for the children and the early childhood service. Children will do as we do.

## VALUING DIVERSITY IN FAMILIES

Key Workers regularly engage with parents to facilitate information sharing and to ensure parents are involved in planning for their child’s learning and development. Information sharing between staff and parents ensures a partnership approach which happens in the form of daily communications as well as scheduled meetings as required. Staff, children and parents work together to ensure that food served in our service meets the medical, cultural and dietary needs of each child. Parents and children are encouraged to contribute to various aspects of our service for example providing information or resources illustrating aspects of their lives, culture or community.

## ACCESSIBILITY AND FLEXIBILITY

An induction process is carried out for all families and children new to the service. This involves registration, information sharing about both the child, the service and the exploration of policies and procedures of the service. Because the need of each family and child can vary, the service will respond to individual needs where possible, for example, period of induction, times of attending the centre.

## REPRESENTATION AND PARTICIPATION

The curriculum, activities, books, materials and environment are used to reflect the diversity of all children, families and the wider community. Where possible, these will be adapted as necessary to facilitate the inclusion of all children within the daily routine and activities of the service. Staff actively discourage stereotyping of gender, culture, background or ability by facilitating non stereotypical play, and through the use of non-stereotypical resources and images. We strive to provide learning experiences that are meaningful to each individual child and recognise varying learning styles and abilities.

## STAFF

The inclusion policy forms an important aspect of the recruitment of staff within the service. Applicants will not be excluded from being considered for a position based specifically on their need, background, culture, religion, gender or economic circumstances. (as pertaining to the Equality Act 2004). Positions will be offered based on competency, qualification 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 it’s importance. When possible, staff will attend training pertaining to inclusion, for example, behaviour management, equality and diversity, language development or special needs.

# ****OUTINGS POLICY & PROCEDURE****

Outings are an important part of a pre-school calendar. It is important for children to experience different environments and play experiences. Whether it’s a walk in the local park, or a trip to an adventure centre, pre-school services must ensure that procedures are in place to protect the children in their care. Outings include any organised outing where the child leaves the premises/grounds of the service.

## RISK ASSESSMENT

* A risk assessment will be carried out by Manager/Supervisor before outings to identify any potential hazards on the journey and at the location.
* Where appropriate, risks will be minimised or an alternative location will be found.

## CONSENT

* Each parent must be informed of the destination, method of travel, times of departure and expected time of arrival back
* Parents must provide written consent prior to the outing.
* Forms must be signed and returned to the service before the outing date.

## RESPONSIBILITIES

* Each staff member must be aware of their responsibilities for e.g. roll call, head counts, dealing with accidents/incidents and co-coordinating responses to any critical incident that may arise on the outing e.g. search and stay on site in the event that a child goes missing.
* Children should be prepared for the outing destination, e.g. have appropriate clothing and sunscreen should be applied by parent/guardian in advance.
* Staff should be aware of the procedures to be taken in the event of a critical incident – refer to Critical Incident Policy & Procedure

## INSURANCE

The Manager will contact the insurance company in relation to outing.

The adult/child ratio as specified by the insurance company must be adhered to.

## MANAGEMENT OF OUTING

* An appropriate number of adults is required on all outings for insurance and safety reasons.
* The attendance register including contact telephone numbers for parents will be in the possession of the Room Leader.
* The Room Leader takes responsibility for checking numbers of children. Regular and frequent head counts will take place before leaving, while on the outing and before departing.
* The Room Leader from each room will have a mobile phone on the outing which is capable of working at the outing location and has a fully charged battery.
* A staff member trained in first aid will accompany the group on all outings.
* A first aid kit is taken on all outings, included with the first aid kit is information on children’s allergies and medical conditions.
* Children with additional needs should be taken on outings whenever possible but one to one adult supervision may be required.
* Parents and staff will ensure that appropriate clothing is brought on the outing depending on the weather, e.g. sun hats, sun cream, raincoats etc.
* Insurance details of bus drivers used to travel on the outing are kept by the Manager.
* The children will be appropriately supervised at all times.
* h child will wear a high-vis jacket to ensure they are easily identified.
* High-vis jackets will be put on the children prior to departure, will be worn at all times during the outing and will not be removed until we have returned to the setting.
* In the event the children are too warm, staff will remove high-vis jackets, take off child’s jumper or coat and put high-vis jackets on again.

## RECORDS

The School Aged Childcare attendance register, including all emergency contact numbers and parents contact details are taken on every outing.

These include details of each child’s medical history, including allergies.

## OTHER

If packed lunches are provided they must be stored in cool boxes.

# HOMEWORK POLICY

Although there is no legal requirement for School Age Childcare Settings to provide homework support, however, it is the policy of GPCC to do so.

The Service will provide suitable space and a maximum time for children to spend on their homework. The following is the maximum time allocated for homework:

|  |  |  |  |
| --- | --- | --- | --- |
| Junior/Senior | 15 mins | Third/Fourth | 25 mins |
| First/Second | 20 mins | Fifth/Sixth | 30 mins |

GPCC staff will supervise children/young people as they are engaged in their homework and will encourage peer support and shared learning. Homework support is balanced with other needs of the child/young person, including the need to relax, develop new skills, eat, engage in physical activities in-doors and outdoors, and socialise.

Parents are asked to discuss the homework subjects with their child that they would like them to undertake/prioritise in Afterschool, fill in a form and return it to the GPCC office. They may not have the time to complete all the homework that has been selected and will have to complete it at home. (See page 167 for sample of form)

**IT IS THE RESPONSIBILITY OF THE PARENT TO READ, CHECK AND SIGN THEIR CHILD’S HOMEWORK**

* **Staff foster positive attitudes towards homework and encourage a positive outlook for learning, bolstering children’s confidence in their ability**
* **Staff use quizzes, art, stories etc. to support homework**
* **The service provides support, space and a maximum time limit for homework whilst also providing an atmosphere conducive for homework**
* **Staff encourage peer support and shared learning when children are engaging in homework**

# ****ACCIDENTS, INCIDENTS AND INJURIES POLICY & PROCEDURE****

It is the policy of our Graiguecullen Parish Childcare Centre CLG to promote the health, wellbeing and personal safety of all children and adults involved in our service, through developing and regularly reviewing accident prevention procedures and fire safety procedures.

## ACCIDENT PREVENTION

* A Safety Statement has been prepared and is reviewed on a regular basis.
* All new staff and volunteers must be familiar with the Safety Statement.
* There are at least two adults on the premises at all times.
* Children are supervised by adults at all times.
* Care is taken to ensure that no child can leave the premises undetected.
* When the main entrance is locked the key must remain in the position which is known and accessible to all adults.
* Staff must know which children are present at any one time.
* Furniture and equipment are laid out to minimise safety risks.
* Only suitable and age appropriate objects are available to children
* Windows and doors have safety appropriate glass with restricted opening safety devices.
* All electrical sockets are fitted with safety covers.

## ACCIDENTS & FIRST AID

* The First Aid Box is always fully equipped, easily identifiable and in each of the preschool rooms.
* Medical supplies are checked regularly. If any supplies are taken out they will be replaced as soon as possible.
* Portable First Aid boxes are taken outdoors for outdoor play.
* All Preschool staff hold an up to date First Aid Certificate.
* Records are accessible to all relevant staff in case of an emergency.
* Staff must wear protective clothing (disposable apron and gloves) to clean any bodily fluids or spillages.
* Minor accidents will be treated in the childcare premises and parents/carers will be advised of the injury and the action taken, when the child is collected.
* All accidents even minor ones, are recorded using the Accident Form.
* The Accident form must be signed and witnessed by the Childcare Practitioners as well as the parent/guardian on arrival to the service.
* In the case of a serious accident, the Manager/Supervisor will phone the doctor and the child’s parent/carer.
* If the child has to go to hospital before the parent/carer arrives, an adult known to the child must accompany him/her to hospital and stay until the parent/carer arrives.
* The child’s record card must be brought for reference.
* All accidents must be reported to the insurance company.

## First Aid Officer Duties

* The Named First Aid Officer is on display in all rooms and common areas.
* The First Aid Officer will supervise children who are under observation, as a result of accidents/sickness while on the premises.
* The First Aid Officer will ensure staff have an up to date list of contact numbers for parents, doctors and hospitals in an easy accessible place.
* The First Aid Officer will be responsible for re-stocking the First Aid kit at regular intervals, at least once a month.
* Report faulty electrical equipment immediately.
* Daily attendance records are kept.
* All flammable materials are safely stored outside of children’s areas.

## Carrying out First Aid in the service

* Disposable gloves must be worn when dealing with open wounds, vomit or blood. Always wash hands thoroughly after administering first aid.
* Tissue/cotton wool and water is used for all injuries. Never, ever, use soap on wound.
* Cold compresses are used for minor bumps, kicks, pinches, falls, scratches, where slight swelling and/or bruising may occur.
* Cold compresses are used for major bumps, bites, pinches, falls where swelling and bruising will occur. An ice pack can be found in the freezer compartment of the fridge in each room. Ice packs should be replaced as you use them and when necessary.

First aid boxes are located in all rooms and common areas.

A list of what should be in the box is printed on the inside of the lid. All items removed from the box must be replaced immediately after use.

## Choking and Strangulation

Food, hard sweets, peanuts and marbles are the most common cause of choking. Blind cords, curtain cords or clothing (e.g. ribbons and belts) are a serious strangulation risk to children

## Dealing with a Child Choking (over 1 year)

1. Ask the child: Are you choking? Can you breathe?  
2. If the child cannot, breathe, talk or cough, stand or kneel behind the child. Start the Heimlich Manoeuvre by placing the flat thumb side of your fist between the child’s navel and the breast bone. Be sure to keep well off the breast bone. Wrap your other hand  
around your fist and press upwards towards their stomach.  
3. Keep doing this until the object pops out and the child starts to breathe again.  
4. If the child becomes unresponsive, gently lower them to the floor. Call for help and send someone to dial 999 or 112. Stay on the phone and listen carefully to the advice.

* You must begin CPR (Cardio Pulmonary Resuscitation)
* If during CPR you can see the object, remove it with your fingers but do not place your fingers in the child’s mouth if you cannot see the object

# ****CHILD COLLECTION POLICY & PROCEDURE****

The safety and welfare of children attending Graiguecullen Parish Childcare CLG is of paramount importance. At GPCC CLG we have established procedures for the drop off/ collection of children, to ensure a smooth transition and effective time keeping within our service. All procedures follow legislative requirements as per the Child Care Act 1991 (Early Years Services) Regulations 2016.

## Statement of Intent

All Parents/employees must follow the collections and arrivals policy and procedure.

## Attendance

It is essential to the efficient running of the service that you inform the Manager or any other member of the childcare service staff if your child is unable to attend the service within an hour of your child’s normal start time and follow up with a telephone call to inform the service when the child will be returning. A register of the times and days that children attend is kept.

## DROPPING OFF A CHILD

* Children must not arrive at Graiguecullen Parish Child Care Centre more than 5 minutes before the session begins.
* The front door must be kept locked at all times to ensure the safety of all children and staff.
* Only staff are permitted to open the door to parents and visitors to the service.
* On arrival parents should inform their child’s key-worker of any information that is relevant to their child’s care for that day/session.
* Parents and children are encouraged to say goodbye to each other before they leave.
* Your child is registered on arrival with a member of staff.
* Support your child to remove coats and to find their coat pegs.
* If a child will not be attending, we request that parents advise us.

## COLLECTING A CHILD

* Parents/guardians must collect their child by the agreed collection time. Parents will be asked to give the names of at least two other people who are authorised to collect the child. If the parent is late arriving to collect the child, the Manager will endeavour to contact the parent. In the event of being unable to contact the parent the Manager will contact the other named persons to collect the child.
* On returning to collect a child, parents are encouraged to meet with the key-worker to be updated on the child’s day.
* It is the policy of Graiguecullen Parish Childcare Centre CLG that children may only be collected by the person(s) named on the enrolment form.
* A person collecting a child must be aged 16 years or over.
* A person collecting a child must be named on the child’s enrolment form as an authorised person.
* The parent/guardian must notify the staff in writing or add a name to the enrolment form if an alternative named person is to collect the child. In the case of necessity or emergency a change be made over the telephone with the agreement of the Manager/Supervisor.
* If a person collecting a child is not named on the child’s enrolment form as an authorised person, written or verbal permission from the parent must be provided to a staff member, before collection. On the first occasion, the person collecting the child must supply identification, for example, driver’s license.
* The service will not release a child to anyone who is not authorised without prior consent from the parent.
* We ask that parents do not collect their child from the service while under the influence of alcohol or illegal substance. This can lead to embarrassment and worry within the team. If parents, feel that this situation may arise they should arrange for an authorised collector to collect their child.
* Children should be collected only by the adult/s named on the Enrolment Form, should the person responsible be unable to collect the child, the parent is asked to inform the staff and the office.
* In the event of a parent collecting another fellow child a prior arrangement must be made and their name must be added to the enrolment form.
* In order to comply with childcare legislation which determines the staff/ child ratios and in the best interest of the children (children can become distressed when no-one comes for them when all the others have been collected) it is important that children are collected on time from the service.

## LATE COLLECTION OF CHILDREN

The Graiguecullen Parish Childcare Centre understand that sometimes a parent is unavoidably delayed when coming to collect their child. We will ensure that the child receives a high standard of care in order to cause as little distress as possible. Where a parent knows they will be late collecting their child after the agreed time, they are required to consult with the service to make alternative arrangements. When a parent is late and does not telephone the service, then a late fee will be charged. A fee of €5.00 will apply per 15 minutes after collection time. If a child is not collected by a parent 30 minutes after the agreed time the service will attempt to contact the parents or the emergency contact persons. Regulations require two members of staff (or a staff member and another adult) to be in present at all times when children are on the premises.

## NON-COLLECTION OF CHILDREN

If a child is not collected at the end of the session/day and the service is unable to contact both the parent and the emergency contacts, after 2 hours the following procedures apply;

* A child will stay at the service in the care of two fully-vetted staff members until the premises close, or staff are no longer available to care for the child.
* Staff will follow procedures outlined in the Child Protection Policy. Contact Tusla/An Garda Síochána. A full written report of the incident is recorded.

• We cannot refuse either parent to collect their child unless a court order is in place.

• We ask that parents give us information on any person that does not have legal access to the child.

• Where custody of a child is granted to one parent, we would ask you to clarify the circumstances with us. This information will remain confidential and will only be made known to the relevant staff. If there are any legal documents i.e. custody order, barring order we would ask you to provide us with a copy to keep on file.

In the event of Staff not being able to locate a child on the premises:

* The premises will be searched thoroughly and immediately. •
* The register will be called to determine which child(ren) are missing. •
* The grounds surrounding the service will be searched. •
* Staff will call the local Garda immediately and without delay. •
* Staff will inform the parents/guardians immediately and without delay. •
* A full and thorough review of procedures and practices will take place to determine how the incident occurred and changes will be made if appropriate. •
* An accident/incident form will be completed and appropriately signed

**ATTEMPTED COLLECTION BY A PARENT WHO HAS BEEN DENIED ACCESS IN A COURT ORDER**

A parent who has been denied access to a child through a court order will not be permitted on to the services premises. (A copy of a Court Order currently in place must be shown to the service Manager). If the parent who has been denied access becomes threatening and insists on attempting to remove a child from the service, the Manager will call An Garda Síochána.

**ATTEMPTED COLLECTION BY A PARENT WHO IS ADVERSELY AFFECTED BY ALCOHOL OR DRUGS**

The service will not release a child who is deemed to be at risk, if a parent or authorised person arrives at the service and staff are concerned that they are in an unfit state due to drugs or alcohol. Staff will explain to the parent or the authorised person who is unfit, why the child should not leave with them and offer to assist them by; contacting the other parent or a person from the emergency contact/s. If the parent refuses assistance and insists on taking the child with them and the staff believe the child will be at risk, the manager will call An Garda Síochána immediately.

# ****CURRICULUM POLICY****

Graiguecullen Parish Childcare Centre are committed to developing a play curriculum that is based on shared principles and which supports young children’s development, learning and well-being. Curriculum describes: all the opportunities, experiences and events whether planned or unplanned that occur within the childcare service.

Well Being – we support each child’s development through:

• Providing a safe and secure environment for the child both with the people there and the actual physical space

• Allowing children to make choices

• Providing safe and appropriate opportunities for children to experience risks and challenges. Along with opportunities to master new skills and achieve success

• Assisting the child with realising that both their own feelings and the feelings of those around them are important

• Support the child in knowing and understanding the limits and boundaries of acceptable behaviour

• Ensuring children are cared for and educated by skilled and knowledgeable adults

• Opportunities for both rest and play (indoors and outdoors)

• Provision of healthy and nourishing food and drink for snacks and meals

Identity and Belonging – throughout our curriculum we:

• Understand each child is unique with individual rights

• Understand each child is an individual within the context of a group, family or within their community

• Value the child’s contribution within our service

• Appreciate each child as a competent learner with the knowledge that they have many valuable experiences which in turn enrich the service

• Affirm the child and value their culture

• Understanding of right and wrong

• Thinking, reasoning, questioning and experimentation

• Respect for ethnic, cultural and physical diversity

• Making choices and using their initiative

• Spiritual and moral well being

• Knowledge and understanding of their world

• We aim for an equal balance between adult-led and child-initiated activities. Programme curriculum plans are informed by observations and regular evaluations and a record is kept of the planning process and of decisions made.

## OUTDOOR CURRICULUM

* Graiguecullen Parish Childcare Centre will ensure that children have access to a range of outdoor activities to climb, run, crawl, balance, jump, throw, catch, pour, sort, pretend and access different levels.
* The outdoor curriculum encourages children to participate in growing vegetables and planting flowers.
* A variety of activities take place outdoors and children can utilise a range of outdoor equipment.
* The outdoor play area will be safe and scaled to a child’s size.
* The outdoor time will be maximised through an intentional, well-planned approach to arranging the space and using the time.
* The curriculum will create a positive tone supporting a child’s natural curiosity in playing outdoors.
* There will be opportunities for children to encounter and interact with each other.
* Children will be given the freedom to select safe materials to use outdoors to build upon their natural sense of exploration.
* The outdoor space offers choices for children.
* The curriculum will be child-led where active problem solving will be encouraged.
* Children and adults will interact in a relaxed and natural way.

# ****CHILD DEVELOPMENT****

It is widely accepted that children develop holistically and to enhance their whole development we must provide them with a comprehensive programme that gives them active learning experiences. All children should be supported in their learning and their experiences extended in a variety of ways that are appropriate to their stage of development.

## Statement of Intent

Graiguecullen Parish Childcare Centre is committed to developing a curriculum that incorporates child development and creates a child centred play-based environment, which enables young children to actively pursue their own learning, based on the above principles.

## Policy and Procedure

Staff will provide balanced intervention and support to encourage positive attitudes towards learning and play. The Whole Child Perspective requires that the outcome of children’s development be recognised and taken into account. The following are the outcomes taken from the Whole Child Perspective that must be considered when working with children:

## Physical and Mental Well-being

This aspect is concerned with growth and development through physical and mental health. Service providers should ensure that the appropriate accommodation, supports and opportunities are put in place, both indoor and outdoor, to promote all areas of children’s physical and mental well-being.  
The provider should promote the health and well-being of children, ensure nutritious diet, prevent the spread of infection and take positive steps to prevent harm to them.

## Emotional and Behavioural Well-being

This area concerns children’s feelings and actions. It includes their growing ability to adapt to change, to cope with stress and to demonstrate self-control. It also covers children’s ability to empathise with others and behave in a socially responsible way. Service providers should ensure that children are always treated with respect and dignity. Children should be supported to form positive attachments to their carers’ and other children in the service through strong positive interactions. Children should be supported to develop a strong sense of self-esteem and self-confidence in an environment of emotional warmth and approval. Consistent boundaries are important to children’s sense of security. Children should not be subjected to any degrading or abusive language or behaviour.

## Intellectual Capacity

This area covers all areas of cognitive development, educational achievement and active learning from their surrounding environment. An environment that engages, enables, responds and stimulates in support of active learning, should be provided with the appropriate access to resources, materials and social interaction to empower cognitive and linguistic capacity in accordance with each child’s needs and abilities. The opportunity to learn through play is of particular importance.

## Language Development

Childcare workers should be aware that children’s language develops at different rates therefore the variety of activities and opportunities for language must be as wide as possible.

## Spiritual and Value Systems Well-being

This covers feelings, experiences and beliefs that stimulate self-awareness, wonder, reverence and the meaning and nature of life and death. Each child’s own traditions of belief and observance of religious duties should be respected by the service provider and by other children in the service. Children’s developing sense of knowing right and wrong should be nurtured.

## Identity

The diversity of children’s experiences, culture, gender, social background and traditions should be nurtured and valued by the service provider. The provider and staff must actively promote equality of opportunity, participation and anti-discriminatory practice regarding all children in their care. This includes the promotion of mutual respect between children in their care.

## Self-Care

This includes the competencies that all children require in order to look after and respect themselves. Service providers should seek ways to support children’s own capacities for self-care.

## Family Relationships

Children’s capacity for development along this aspect is more likely to be met if they have a sense of belonging and in situations where changes of carer are kept to a minimum. Service providers should seek to support, work with and actively involve each child, child’s family/carers in the child’s development by providing opportunity for on-going communication about the child. These should include on-going updates of the child’s activities and regular reviews of the child’s well-being.

## Social and Peer Relations

Graiguecullen Parish Childcare Centre encourages an ethos of peer education. This involves the child’s ability to make friends and feel part of a peer group. Service providers should seek to support children’s capacity for social development through providing opportunities for the co-operation, collaboration and friendship to develop friendships and co-operate with others. Children should be protected from bullying and assisted in learning skills to manage bullying behaviour.

## Social Presentation

This concerns children’s growing understanding of their capacity to engage with others and realise the impact of their actions, appearance and behaviour on others. Service providers should support children in their understanding of others and learn to engage in social situations.  
(The main text under the nine headings is taken from the National Childcare Strategy – The Whole Child’s Perspective)

# ****TRANSITIONS POLICY****

Transitions occur as children move within settings, from one type of activity to another (e.g. active play to tidy up time) and as they move between settings (from home/school to School Aged Childcare). Changes can be stressful at any stage in life, but for young children they can be particularly challenging. Moving on to different surroundings makes demands on young children as they learn to cope with a new situation. Parents/Carers also need support to cope with change and new situations. Because of this, the sensitive care and attention given to planning and ensuring smooth transitions is extremely important. Young children learn from every experience, including routines and transitions, and can develop skills by participating in these routines and transitions.

Transitions include:

• Multiple daily changes in routines and experiences and separations from familiar people and settings.

• Changes in care provider or setting

Routines and transitions within the daily programme of activities.

• Children should be allowed to perform personal routines, such as going to the bathroom, according to individual body schedules.

• Transitions should be planned so that children who are ready before others have something to do.

• Children should be given appropriate advance notice of changes to routines or planned changes within the schedule of activities that will affect them i.e. through timers, songs and five-minute notices .

• Some children need to be given more time and adult assistance to cope with changes than others.

• Routines and transitions should be handled consistently so that children can learn trust and security.

• While balancing the range of activities (active/quiet, small group/large group/individual etc.), the daily plan should be kept as simple as possible to keep transitions to a minimum.

• If the furniture is going to be changed around this should be discussed with children and explained in advance so that they understand why the change is happening.

• Children should be allowed to participate in routines as much as possible (e.g. helping to set the table, cleaning up etc.).

• Share their cultural values and child-rearing practices with staff before and during their child’s transition and describe what parents expect from staff.

• Communicate frequently with staff about the child’s routines, temperament, reactions, likes, dislikes, and ability to adapt to differences and change.

• Provide staff with ongoing feedback and negotiate differences.

Checklist for exchanging information

• Families will be encouraged to share:

• Information about their child’s temperament.

• Information about what upsets their child and what comforts them.

• How their child reacts to strangers, familiar adults and other children.

• How they handle routines such as eating and sleeping.

• Information about themselves and their culture.

• Information about their child’s previous experiences.

• A brief developmental and medical history of their child – from birth to the present – that includes social, emotional, motor skills and language development information.

• How they prefer to communicate (e.g., in person, by telephone, or in writing).

• How they wish to be involved in the Service/Centre.

• Their vision for the transition period.

• Their hopes for their child.

This will be done through our getting to know you forms, enrolment forms and transition forms.

Staff can share with families:

• How they transition children into the Service.

• Information about the program’s composition, philosophy, schedules, and activities.

• How they communicate information to families.

• How families can get involved in the Service.

• How they track and report developmental progress.

• How they handle transitions within the programme.

Successful experiences during early transitions can increase a child’s ability to adapt to changes in the future and can provide a more secure base for the child’s development. It is essential to enable parents/carers and staff to support and facilitate successful transitions through responsive relationships that are secure, consistent and continuous. All transitions will be planned with sensitivity to each child’s needs.

We will:

• Consider transitions from the perspective of the developmental needs of each child and their family.

• Build partnerships with families to support the development of responsive, respectful relationships among children and staff.

• Individualize routines and practices to support each child’s needs, temperament, family preferences, culture and language.

• Use routines and transitions as opportunities to promote children’s development.

• Plan for transitions and placements that provide consistency and continuity for children and their families.

• Evaluate the quality and effectiveness of transitions using various means, including feedback from families.

• Assist parents/carers in becoming advocates as they make the transition with their children both into the service from home or from other childcare settings (e.g. childminder) and from this service to other childcare settings or to school.

• Ensure the most appropriate environment and services following participation in this service by beginning transition planning as soon as possible prior to the child’s move.

• Provide any relevant information (with the parents’/carers’ permission) about the children that is helpful in ensuring a successful transition from this service to other settings, e.g. school

# ****INTERACTION and COMMUNICATION****

Graiguecullen Parish Childcare Centre encourage open and proactive communication within the organisation. In order to achieve this, we provide an open- door policy whereby we would encourage each member of staff to communicate any issues or concerns that they may have. We have a Complaints policy to address any issues that parents may wish to raise and we listen to children’s opinions and interests when planning our activities and curriculum.

## Communicating and Interacting with Children:

At Graiguecullen Parish Childcare Centre we believe that effective adult-child interaction is essential to running a successful early childhood service.

* Appropriate language must be used at all times when dealing with children.
* Adult conversations should never take place in front of children.
* When talking with a child it is best to do so at child’s eye level. It displays respect and in turn gains the respect of the child.
* Children should never be shouted at or screamed at in our facilities.
* Staff should encourage positive interactions between children. They should actively engage in interactions with children individually and in groups and support in the development of relationships between both children and staff and children together.

Staff at Graiguecullen Parish Childcare Centre look for natural openings in children’s play and then join the child or children at their physical level. As pretend play partners, adults take roles assigned by children and stay within the play scenario the children have created.

**Staff should ensure that:**

* We offer a warm, welcoming and relaxed atmosphere
* Children are comfortable and appear relaxed
* Interactions between staff and children are positive
* There are opportunities for children to play in pairs, groups or individually.
* Siblings and children of different age groups mix during the day
* They use encouragement instead of praise- Rather than statements that evaluate or judge, staff make objective, specific comments that encourage children to expand their descriptive language and think about what they are doing.
* Whenever possible, they encourage children to solve problems for themselves. While adults could often solve the problem more easily by taking over, the goal is for children to develop their own problem-solving abilities through trial and error.
* They read and understand the Childcare policies and procedures we have developed

To help children with little or no English we will:

* Ensure inclusion in the group and staff will talk to the child, speaking slowly and simply, demonstrating what is meant by the words.
* Support the child and parents by a staff member who will try and learn some key phrases in the child’s language, e.g. ‘hello’ ‘goodbye’ ‘hungry’ ‘thirsty’ ‘do you need help?’
* We encourage children to use their home language whenever they are so inclined. Dual language books are helpful to encourage the use of other languages.
* Make it easy for the child to settle into the setting, we encourage other children to talk to non- English-speaking children in the same way as usual.
* Parents are invited to help with key words and phrases in the child’s home language.

## Communicating with Colleagues:

* Staff are required to sign in and out when entering or leaving the building.
* All employees should be up to date on all the children attending the service especially when there is a change in the child’s home background that may induce disruptive or abnormal behaviour, e.g. a new sibling, parent’s separation, etc.
* Any information received from a parent regarding a child should be passed on to the Manager as soon as possible.

## Communicating with the Managers:

* The Managers are there to support staff and help where necessary. Any incidents that staff are concerned about should be brought to the attention of a Manager no matter how minor or small the concern may seem to be.
* During staff supervision sessions it is advisable to bring to the attention of the Manager any worries, thoughts or concerns you may have. If a staff member is concerned for a child’s development and or behaviour a Manager must be consulted.

## Building Positive Relationships with Families:

* A strong connection between families and childcare providers is essential for building a positive environment for young children. Miscommunication, or limited communication between adults, can lead to situations that adversely affect all of the parties involved. Staff may not discuss with parents any concerns about their child without first discussing the matter with the Manager. Any developmental or behavioural concerns should be looked at in accordance with the Child Development policy before making any judgements.

# ****HEALTHY EATING POLICY & PROCEDURE****

It is the policy of the Graiguecullen Parish Childcare Centre CLG to promote a healthy lifestyle through prevention of illness and establishing healthy eating patterns. As a Health Promoting Preschool and School Aged Childcare Service n we understand the importance of good nutrition and have adopted the guidelines set out by the NCN through their Health Ireland Smart Start programme.

## HEALTHY EATING PROCEDURES

* Sweets, crisps, sweetened juices/ cordials, chewing gum, popcorn and nuts are prohibited from being consumed within the service.
* Special dietary needs of children are met.
* An adult always sits with the children at meal times to encourage good eating habits, stimulate conversation and enhance the quality of the interaction.

A 3 weekly menu plan will provide the children with varied foods. This menu will be on display in advance on the Parent’s Notice Board. Recipes and food ingredients are available to parents. Details of the 14 allergens specified in the Food Information for Consumers (FIC) Regulation (EU) No 1169/2011 are also included on all menus and An Allergen Information Station is located in the office.

* Parents are encouraged to offer menu suggestions or comments on the nutrition policy.
* All children will have suitable food available depending on their age, development and needs, using the recommended servings table as a guide.
* Breakfast will be available each morning. Parents are responsible for informing the pre-school staff if their child needs breakfast on arrival.
* Full fat milk or fortified low fat milk will be served with breakfast.
* Potable drinking water will be available at all times.
* Fizzy drinks will not be provided.
* Milk or water will be served with main meals.
* Staff will encourage children to acquire healthy eating behaviours in a number of ways.
* These will include: Small group time activities and discussions, provision of resources in different interest/play areas, fruit and vegetable tasting, information leaflets for parents/guardians.
* These and other activities within our Healthy Eating Policy will help raise children’s and parent’s/guardians’ awareness of the importance of good nutrition.
* Children will have access to fruit if they are hungry between scheduled meal and snack times.
* Parents will be advised if their child is not eating well.
* Parents of children on special diets will be asked to provide as much information as possible about suitable foods. In some cases, parents may be asked to provide food themselves.
* Children will sit when eating or having a drink.
* Withholding food will not be used as a form of punishment.
* Parents are asked not to send sweets, crisps and other snack foods to the pre-school.
* Birthday party food should be discussed in advance with the staff. Parents are welcome to bring in a cake. Party bags/treats that parents supply will be given to the children at home time. The only days this will not be possible are open days and other days where there are special events such as Nativities, Sports Days etc.
* All food in the Preschool will be stored, prepared and served using HACCP food safety practices.
* Staff will receive training in relation to healthy eating and food safety.
* Children will be encouraged to play outside every day, weather permitting, to ensure they receive sunlight which helps their bodies to make vitamin D.

## LUNCHBOXES/REFRIGERATED ITEMS

* Children who bring lunch to the service will be provided with lunchboxes at the beginning of the year. They will be clearly labelled with the child’s photograph and name thereon. Any items which require refrigeration such as yoghurts, cheese, sandwiches or milk are then placed in the fridge until lunch/snack-time.

## MEAL TIMES

* Key workers will sit with the children during meal times to encourage conversation and extend interactions
* Encouraging children to make choices, drink and feed themselves during meal times will help to develop each child’s independence
* Meal times are an important social aspect of the daily routine within a childcare setting. They provide opportunities to inform and educate children about nutrition and healthy eating.
* The children’s main meal will consist of the appropriate servings for their age range of protein, starch, dairy, vegetables and iron

## SNACKS

* Parents will be encouraged to promote healthy eating by providing healthy snacks for children
* Suggestions of healthy snacks will be made available for parents at the start of the Preschool year. Snacks such as fruit, yoghurt, sandwiches or fruit juices will be encouraged as healthy alternatives for children.
* Full fat milk and water will be served at snack-times.

## SPECIAL DIETARY REQUIREMENTS

All special dietary requirements will be respected inclusive of dietary needs and cultural dietary habits. Parents will be asked to give details of foods eaten or not eaten by their children.

# ****FOOD HYGIENE****

Graiguecullen Parish Childcare Centre will comply with legislation in the provision of food and food hygiene. Graiguecullen Parish Childcare Centre ensure that where food is consumed on the premises by a preschool child, the person carrying on the preschool service shall ensure that there are:

* Adequate and suitable facilities for the storage, of food.
* Adequate and suitable eating utensils, hand washing, wash-up and sterilising facilities are provided.
* All waste and other refuse must be stored hygienically and disposed of frequently and hygienically and in such a manner as not to cause a nuisance.
* Graiguecullen Parish Childcare Centre will follow the food hygiene standards required under the Preschool Regulations throughout the service as ‘best practice’.

## Policy and Procedure

Those responsible for preparation of food should fully comply with hygiene, storage and waste disposal regulations. The person cooking the food must have completed \*HACCP training. A number of staff should have completed food handling training.

## Food Hygiene

* Tables used for food and drink should be cleaned before and after use and floors swept where necessary.
* Children will be encouraged to wash their hands after using the toilet and before and after meals.
* All surfaces coming into contact with food should be in good repair and easy to clean. Food areas will be free from contamination, dust, flies etc.
* Adults drinking hot drinks will not be involved in play activities or take hot drinks into the children’s rooms. Hot drinks should not be taken where children are around.
* All utensils will be kept clean and stored in a dust free place.
* All kitchen equipment is cleaned once a week.
* Cracked or chipped cups will not be used.
* Food is not placed directly onto table surfaces
* Food preparation area will be in a separate room of the service.
* Only food that is clean and undamaged is purchased
* All labels are checked and ‘best’ before and ‘use by’ dates are followed
* Any food or drink that requires heating should be served immediately and not left standing.
* Dates will be checked on all perishable food. These foods and drinks will be kept refrigerated.
* Food handlers should be aware of the need for personal hygiene, and of the action to be taken if they have an infectious illness.

## Food Preparation

* Separate chopping boards should be used for raw, meat fish and vegetables.
* Fruit and vegetables should be washed well.

## Kitchen

* No children in the kitchen.
* No items belonging to the children to be kept in the kitchen.
* Matches and sharp instruments must be kept out of sight.
* First Aid box kept in the kitchen/ice pack in the freezer.
* Surfaces kept clean at all times.

## Fridge

* Fridge will be cleaned once a week using washing up liquid and hot water and hot soapy water. This is recorded on kitchen cleaning sheet.
* Temperature is taken every day of operation. (Less than 5°C) This temperature is recorded on Temperature Control Chart.
* If the fridge temperature is found to be over 5°C, any dairy produce or meats will be disposed of.
* All use by dates are checked every day and disposed of expired.

## Mealtime Practises

* Ensure that staff and children wash their hands before meals.
* Use disposable gloves when serving the younger children food including snacks, older children are encouraged to serve their own food portions.
* Children are encouraged to be independent at mealtimes, to set the table, serve their own food and scrape their plates. Babies should not be left sitting in highchairs for long periods.
* Never blow on or taste the children’s food.
* Never give the children food that is too hot. Let it cool before serving it to them.
* Help and encourage the children to eat their meals. Do not force or demand that a child eats their food. Use positive encouragement in a relaxed manner.
* Ensure that mealtimes are enjoyable experiences for the children.
* Teach the children table manners and etiquette. Show them how to use cutlery correctly.
* Never let one child eat another child’s food to prevent allergies or cross contamination.
* Clean up the eating area after each meal. Clean down the table etc. with a clean cloth, using the anti-bacterial spray.
* All dishes and cutlery are sent to the kitchen. Cups/beakers which are kept in the classroom should be washed with washing up liquid and hot water and dried thoroughly.
* Clean the children after each meal, hands/clothes etc. Clean each child’s face with individual pieces of wet cotton wool or baby wipes.

**Food Allergens**

**Food Information for Consumers (FIC) Regulation (EU) No 1169/2011 (S.I.No. 489 of 2014)** stipulates that food allergen information for non-pre-packed food must, as a minimum, be provided in written format, but can also be provided verbally at any time.  
The allergens in any meals, snacks and any food consumed in activities such as baking must be listed and parents made aware of before the food is consumed. There is no requirement under this regulation to list foodstuffs used in creative play such as corn flour for ‘gloop’, wheat flour for playdough etc. as this is not **intended** for consumption (even if the child may eat it!). Each meal or snack must indicate if any of the 14 (required) allergens **are** present. The information provided must include the word “contains “followed by the specific allergens, e.g. **contains** wheat, barley, soya and egg. Precautionary declarations such as “may contain…” or “prepared in a kitchen/premises that uses…” are voluntary declarations and**do not** satisfy the allergen information requirements set out in S.I. No. 489 of 2014 for non-pre-packed foods.

Childcare facilities are required to provide written food allergen information. However, young children are not in a position to understand or appreciate written food allergen information and therefore, it is necessary that this information is provided to the parent or guardian, particularly when new or altered menu items are made available.

Weekly/daily menu plans should contain the allergen information and they must be displayed and parents made aware.

If parents send in birthday cakes, it is preferable that these are shop bought as the packaging will contain allergen information that can be provided to parents. However, if parents send in a home-made cake it is the responsibility for the Childcare provider to obtain the allergen information from the parent so that this can be displayed.

Allergens that must be listed (or products of): Gluten, Crustaceans, Eggs, Fish, Peanuts, Soybeans, Milk, Nuts, Celery, Mustard, Sesame Seeds, Sulphur Dioxide and Sulphites, Lupin, Molluscs

Providers should ask parents to send in a list of ingredients for home-made cakes as under legislation childcare providers are required to advise parents of allergens contained in food stuffs including home-made cakes or any other home-made foods that are sent in for parties etc.

# ****OUTDOOR PLAY POLICY & PROCEDURE****

Graiguecullen Parish Childcare Centre CLG recognises that outdoor play is vital to a child’s development. The outdoors provides opportunities to explore nature and natural living objects as well as providing the children with ample time to enjoy physical exercise in a safe secure environment. To promote this the Service offers:

* The opportunity to go outdoors at break time in different types of weather as long as it’s safe.
* Children are encouraged to participate in physical Play outdoors daily.
* A variety of activities to promote the physical development of the child including sports, nature and art & craft.

## OUTDOOR PLAY PROCEDURES

* Before the children go outside to play The Preschool Supervisor, Manager or Office Administrator conduct a risk assessment of the area, as well as ensuring all gates are locked
* The Room Leader ensures all children have hi-vis jackets on before going outdoors
* The Room Leader takes responsibility for checking numbers of children. Regular and frequent counts will take place before leaving, while outdoors and before returning to the Preschool Room.
* The children will be appropriately supervised at all times
* Staff will ensure all children have visited the bathroom before going outdoors
* The Room Leader will bring an outdoor kit which includes:
  + - Roll Call/Attendance Records
    - Portable First Aid Bag
    - Fully charged mobile phone
    - Bell or whistle
    - Potable Water and disposable cups in warm weather
* In the event of an accident/incident the Room Leader should ring The Preschool Supervisor immediately.
* Garden time is an extension of indoor activities therefore sitting should be kept to an absolute minimum.
* Staff should ensure that their presence and position in the outdoor play area allows that all areas of the outdoor area are under constant supervision and that all children are in the sight of at least one member of staff, at all times.
* The outdoor play area must be checked by a member of staff for safety before any children use the outdoor play area.
* Staff must engage with the children during the outdoor play time. The curriculum should be used outdoors as well as in the children’s room.
* Children should not be allowed interfere with the gate in the outside area.

**Clothing:**

It is important that children are dressed appropriately for outdoor activity. The children will go outdoors everyday so therefore, Parents/ guardians are asked to ensure their children have the appropriate attire for the weather. Children are also encouraged to wear wet gear provided by the service when going out in wet weather.

**Sun Safety**

Graiguecullen Parish Childcare Centre request that parents:

* Apply sun cream to their child/children before they attend pre-school. As in the first instance it is the responsibility of the parent to apply sun cream to their child/children.
* If parents have forgotten to apply sun cram to their child, the service will provide some and request that the parent put it on the child.
* For children in the Full Day Care setting, parents are asked to put sun cream in the child’s bag and request the staff member to apply the sun cream, every effort will be made by the staff member to do this. (Medicine Forms?????)
* Parents provide a sunhat for children.

We will ensure that:

* On extremely hot days’ children will have reduced exposure to sunlight in the middle of the day.
* Where possible, children can seek shade when outside in the sun.
* Ensure that children will wear a sunhat if provided by the parent.

**Outdoor Safety:**

* When setting out the equipment each day and during sessions, staff must lookout for safety and remove any objects such as cans, bottles etc. which may have been left by others.
* The area should be checked for animal droppings.
* Before children go outside a member of staff must check the main gate is closed.
* Staff on duty outdoors must always be aware of the safety of the children in their care, be vigilant at all times and never leave the play area for any reason unless another member of staff has taken over responsibility.
* It is most important for staff to move around the area constantly so that all areas are adequately supervised. Each person should position him/herself in separate areas so that no area is unsupervised.
* At the end of the session the areas should be scanned carefully in case children should be left outside unsupervised.
* Hot drinks should not be taken into the outdoor areas.
* Students helping outdoors must never be left in charge of any area.
* All equipment should be stored away sensibly and carefully, to allow for safe and easy removal next day.
* If a child is injured, he/she should be taken indoors for treatment quickly as possible if necessary, if possible, the child should be treated with the portable first aid kit outdoors.
* Details of the accident must be written up as soon as possible in the Accident Report book. The child’s parent must be informed of the accident and treatment and sign the accident report form.
* Students/volunteers may not administer first aid
* Climbing apparatus should only be set out on the safety surface.
* Children’s clothing should be monitored carefully e.g. unfastened shoelaces and buckles, scarves and ties on anoraks which are too long can easily cause accidents, particularly on wheeled toys and climbing equipment.
* If it is necessary for childcare worker to put toys away whilst children are still in the play area, they should involve the children in the process and never leave the group unattended.
* Encourage children always to look before they move on the slide, or when jumping off apparatus; also encourage children to leave space between themselves and the child in front.
* When children are climbing on climbing frames, staff must be continually aware of any risks (e.g. objects left underneath).
* Whenever children carry equipment (clearing away or carrying planks, blocks etc. etc.) they should be taught how to do it and adults should be aware of the risks involved and minimise them to ensure safety.
* At the end of the day if parents arrive while children are in the playground staff should ensure that a member of staff is positioned near the gate to ensure no children leave unattended and that the gate is kept closed.

# ****STAFF ABSENCE POLICY & PROCEDURE****

Graiguecullen Parish Childcare Centre CLG understands that from time to time staff will be absent from work. 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. Absences include annual leave and/or unpaid leave, illness of emergencies.

## STAFF ABSENCE PROCEDURES

In the event of an absence staff must inform the Manager as soon as possible (as per Employee Handbook) by phone and the Manager will arrange sufficient cover for the Service from the panel members. In the event that the manager cannot be contacted, the supervisor will be contacted.

* Procedure on how staff notify the service in the event of unexpected absences, i.e. illness – is documented in the Employee Handbook and shared with staff.
* Staff will sign off on the policy and procedure.
* A panel of Childcare Assistants have been drawn up to cover planned staff absences and emergencies, which includes Garda vetting and two written references, which must be followed up by a telephone call (this must be recorded), name, address and contact telephone numbers and photographic ID.
* All panel staff should undergo Child Protection Training.
* A list of panel members is available in the office and panel staff will be chosen from this list.
* The Manager and Preschool Supervisor are also suitably qualified, trained, and Garda vetted in the event of a staff absence.
* Adult/Child ratios for each room and age range will be maintained as specified in Regulation 11 of The Child Care Act 1991 (Early Years Services) Regulations 2016.
* Daily and weekly staff rosters are documented and recorded and include the area and time each member of staff is required to work.
* Staff (including relief staff) will record their arrival/departure times and lunch breaks.

# ****POLICY & PROCEDURE ON THE USE OF INTERNET, MOBILE PHONE, SMART WATCHES, PHOTOGRAPHIC AND RECORDING DEVICES****

The purpose of this policy is to support the Child Protection policy and to ensure the rights and privacy of all children is respected. Failure to adhere to this policy will result in disciplinary action. Graiguecullen Parish Childcare Centre CLG adheres to the Data Protection Acts 1988 and 2003.

## PROCEDURES ON THE USE OF INTERNET, MOBILE PHONE, PHOTOGRAPHIC AND RECORDING DEVICES

**PHOTOGRAPHS AND CAMERAS ARE TO BE USED FOR:**

* Assessment, planning and recording
* Observation tools
* Information for visitors and parents
* Training purposes
* Language extension
* Teaching and learning

We are aware of the need for sensitivity when taking photographs and observe the following:

* Parental permission will always be sought before photos are taken.
* Only the services camera/video camera may be used to take pictures.
* Staff are not allowed to take pictures with picture phones or their own personal cameras. (If this is breached disciplinary action may be necessary)
* The child does not object to having his/her photograph taken
* Photographs are used to show positive issues (e.g. a piece of work that the child has worked hard on or is pleased with, children playing co-operatively together…….)
* We are inclusive so that gender, race, special educational needs, and differing abilities are reflected in a balanced way
* There may be cultural issues of which we need to be aware when taking photographs of children from different ethnic minority groups
* Where photographs, videos or even samples of children’s work are to be displayed outside GPCC CLG we seek parental permission for this to happen. Examples of this are newspaper reports, articles in early year’s publications or exhibitions of children’s work.
* Students visiting professionals or researchers, who need to take photographs or videos as part of their work, are made aware of the need for confidentiality and that children will not be named or identified in any other way. Further parental permission will be sought in this instance.
* Parents are made aware of our use of cameras, and the location of this policy through the parent’s handbook, and have the opportunity to voice any concerns.

## USE OF PHOTOGRAPHS

Photographs are used throughout GPCC CLG for a variety of purposes.

Generally childcare practitioners take photographs of the children throughout the year to capture a particular example of play or something that a child has achieved. In addition we use photographs for:

* Displays of children’s work
* A record of ideas and topic references
* Examples of children’s play
* As a part of an individual child’s profile
* Classroom areas
* To show the range of activities
* Class albums
* For children to look at and talk about
* Policy folders
* To explain the work of the service to parents and visitors Special events and festivals
* As a record of the year and for children and parents to look at and talk about
* Birthday display
* Used as a class resource for talking about birthdays, months of the year etc
* Photographic maps of the service and local environment
* A resource for topic work
* From home
* To act as a link between home and Preschool
* Children’s own photographs
* Children take photographs at GPCC CLG on the digital camera, to gain experience in technology

## VIDEOS

* Videos are also occasionally used in GPCC CLG for many of the above purposes.
* In particular we may use them for observations of children’s play to further our understanding, or for assessment and planning tools

## PARENTS PHOTOGRAPHING AND VIDEOING CHILDREN

* Parents may not take photographs or record children in GPCC CLG without the consent of the Management

## STORAGE OF PHOTOS

* Photographic or video recording will not be stored on devices in GPCC CLG for extended periods of time.
* If a photograph is likely to be used again it will be stored securely and only accessed by those people authorised to do so.
* We will not re-use photos more than one year old, without further permission from the subject of the photo or the parent, as applicable.

## DISPOSAL OF PHOTOGRAPHS

* In the event that we no longer require a photo it will be disposed of as confidential waste.
* When photos are destroyed, the negatives will be destroyed as well.

**WHERE THE IMAGE IS KEPT ELECTRONICALLY**

* The CD disk will be made unusable
* The memory card erased
* The computer file deleted

**MOBILE PHONES**

* The use of personal mobile phones is not permitted during working hours. Staff members may take/make personal calls during their lunch breaks.
* All staff members must turn off personal mobile phones and place them in a locked cabinet whilst working with the children.
* Staff are prohibited from carrying their phone on their person at all times *(there are no exceptions to this rule).*
* In the event of an emergency staff can be contacted on the setting’s main phone number.
* The use of camera phones is strictly forbidden and pictures must not be taken with personal phones.
* A staff mobile is available in each of the rooms to be used in the event a staff member needs to contact a Parent or the Preschool Supervisor. The use of this phone is strictly for GPCC CLG use only. Photographs are not permitted on this or any other phone.

## INTERNET USAGE

* The use of computers in the childcare facility must be monitored at all times by staff members whilst they are being accessed by the children in attendance. The use of internet research must be age appropriate and networking sites must not be used – eg) Facebook, Twitter etc. Staff members should review all websites prior to the children’s use.
* All communications must comply with applicable laws and regulations, including those governing the export and import of technology, software, and the protection of copyrights and intellectual property generated.
* Data Protection Act 1988 and Amended Act 2003Co Users who maintain details of others on computer have legal obligations under the Data Protection Act 1988 (amended 2003) and the Data Protection Directive (95/46/EC). This legislation confers considerable rights on individuals to control how data relating to them personally is stored and processed. In brief, personal data must be processed fairly and lawfully, it must be collected for specified, explicit and legitimate proposes and must be adequate, relevant and not excessive in relation to the purposes for which they are collected and processed. Data may only be processed when the subject of the data has clearly given his/her consent for this to occur.

## WEBSITE

* GPCC CLG’s website is used for sharing information relating to the childcare service. This will include photographs, videos/media packages, childcare related news posts, child activity updates e.g. sample plans and sample learning stories, fundraising and local childcare initiatives.
* The website will used as an extension of the early childhood services form of communication and will not be used for personal communication for staff, committee or parents. A strict yearly review process will take place before the start of each Preschool year to remove all out of date images, videos or media packages involving children who have not attended the early childhood service for 2 years.
* The service does not use the website as a replacement of already established communication methods with parents.
* The website is a tool used for updates and sharing relevant information with parents.
* The website is an extension of the early childhood services form of communication; it is not used for personal communication for staff, committee or parents.
* Images of individual or groups of children are not uploaded to the website without prior permission from parents.
* All images or videos will only be kept on the site for a maximum of 2 years; a review will be completed each year to remove old images or videos past the expiry date.

**MOBILE COMPUTER DEVICES**

All reasonable precautions must be taken to protect equipment against damage, loss and theft. The equipment must not be left unattended in any public place. Damage, loss or theft must be immediately reported to the Manager of the Centre. Data must be backed-up to the network on a regular basis and laptop users must ensure that the date on their laptop is adequately backed up. Breaches of this policy will be regarded as a breach of discipline and will be dealt with in accordance with the company’s disciplinary code.

## INTERNET AND EMAIL

* All staff have a responsibility to use the Internet in a professional, ethical and lawful manner.
* Users must not use the Company’s Internet facilities to download, display, generate and/or pass on to other members material whether in text, pictures or any other form, which would be regarded as offensive.
* Users must not deliberately perform acts that waste computer resources. These acts include, but are not limited to, sending mass mailings or chain letters, spending excessive amounts of time on social media sites which include Facebook and Twitter, failing to exit from websites, engaging in online chat groups, uploading or downloading large files, accessing streaming audio and/or video files, or otherwise creating unnecessary loads on network traffic associated with non-business-related uses of the Internet.
* No covert e-mail monitoring is allowed by employers, except in cases where specific criminal activity has been identified and the surveillance is required to obtain evidence and subject to the respect of legal and procedural rules. The monitoring of e-mails should, if possible, be limited to traffic data on the participants and time of a communication rather than the contents of communications if this would be sufficient to allay employers concerns. If access to an e-mail's content is absolutely necessary, the employer should take into account the privacy of people outside the Service receiving the e-mail as well as those inside.
* Employees have a legitimate right to a certain degree of privacy in the workplace. However, their right to privacy must be balanced with the legitimate rights and interests of the employer.
* The Service does not actively monitor computer usage (including e-mail and the Internet). However users, both volunteers and staff, should be aware that records are kept of all usage and could be made available in specific circumstances. The computer resources of the Service cannot be used for illegal acts, for activities in breach of the Service aims and objectives, for activities in breach of software or electronic licences, or for personal commercial activity unless specifically authorised.
* Only staff and volunteers of the Service may use the computer resources. Unauthorised use may lead to prosecution under the Criminal Damages Act 1991
* Staff must take reasonable precautions to prevent unauthorised use of electronic media by guarding your accounts and passwords.

## MONITORING OF INFORMATION FLOWS/BOUNDS OF CONFIDENTIALITY

* This Service reserves the right to audit information in various electronic formats in order to safeguard the interests of employees and volunteers and to fulfil statutory obligations.
* Electronic format encompasses both information transmitted in real time as well as historical information.
* There should be no expectation of personal privacy when using the Service’s equipment and services.
* All information, data or files created, received, downloaded, stored, transmitted, deleted or used while in the employ of the Service are the Service’s property.
* The Service may monitor, copy, access, or disclose any information or files that employees create, receive, download, store, transmit, delete or work with while using the Service's equipment and services including, but not limited to:
  + - Assuring compliance with the Service ’s policies and procedures
    - Detecting improper use or conduct that may be illegal or adversely affect the Service
    - Preventing inappropriate or excessive personal use of the Service equipment.
    - This monitoring may be periodic, random or continuous. The Service may investigate any transmission or storage of information and any use of equipment or services inconsistent with the Service’s aims and objectives.

**WHILE THE SERVICE DOES NOT ROUTINELY MONITOR E-MAIL, IT MAY DO SO FOR THE FOLLOWING REASONS:**

* + - To detect viruses or other malicious content
    - To locate information urgently required by the Service
    - To respond to legal or regulatory requirements
    - To fulfil their obligations to clients, third parties and relevant regulatory authorities
    - In the course of an investigation triggered by indications of misconduct
    - Such monitoring of e-mail will be authorised by the employer or his/her representative.
    - Any communication sent by e-mail may be subject to a discovery order by the courts and may be disclosed to any relevant authority, unless the e-mail comes within the category of communications protected by legal privilege e.g. in the context of advice sought from the Service’s solicitors in anticipation of litigation or in the course of legal proceedings.
* The Service relies on e-mail as an efficient means of communicating information to its employees and volunteers. Although e-mail may appear to be a more informal method of communicating, it has the same legal effect as other written communications. People will exercise discretion when sending an e-mail note and choose their words with the same care that they would use when sending a formal letter.
* An employee's contract with the Service obliges them to keep confidential Service information. This includes e-mail. The presumption is that all email communications are confidential and for internal use only, unless it is clearly stated otherwise.
* No person may establish an ‘automatic’ forward of electronic mail to an address outside the Service’s domain. This includes, for example, the auto-forwarding of an employee’s organisational e-mail to a personal e-mail account with an outside provider or to an e-mail account that the employee may maintain at a client site. This policy is intended to protect confidential information of the Service by preventing the unauthorised transmission or disclosure of internal communications to unauthorised parties outside. The Service may monitor their email systems for auto-forwarding.
* The Service is not liable for lost or deleted e-mail.
* Personal e-mail should not be forwarded to mailing lists or other users without the original author's permission.
* It is prohibited to send e-mail with a hidden or false identity.

## IMPROPER USE OF SERVICE EQUIPMENT/DISCIPLINARY PROCEDURES IMPROPER USE OF SERVICE EQUIPMENT INCLUDES THE FOLLOWING:

Using equipment or services for-

* Viewing, transmission, storing, downloading or communication of images or text consisting of:
* Ethnic slurs, racial epithets, hate speech, sexually explicit or provocative material and obscenities
* Anything else that may be construed as illegally harassing or offensive to others based on- an individual’s race, national origin, religion, sex, sexual orientation, colour, marital status, age, disability, membership of the Traveller community or any other legally protected category
* Accessing sites and ‘chat rooms’ that feature gambling, pornography, off-colour jokes, hate speech and similar sites; or, any solicitation or distribution unrelated or contrary to the aims and objectives and underlying principles of the Service.
* Viewing, storing or propagating of any from of material that could be construed pornographic
* Transmission of any statements or materials which are defamatory, abusive, obscene or which may cause offence or annoyance to any other person
* Forging or attempting to forge e-mail messages
* Creating or sending chain letters through electronic mail
* Revealing internal company information to any sites, be it confidential or otherwise, or commenting on company matters at any time
* Reading, deleting, copying or modifying the e-mail of others without their permission.
* No attempt should be made to circumvent system security, including firewalls, put in place to protect the company.
* Offensive screensavers are strictly prohibited.
* Conduct that is inconsistent with the ethos and underlying principles of the Programme and the Service is forbidden. If a person has engaged in improper use, he or she should assume that he or she will be subjected to the Service’s disciplinary procedure up to and including dismissal and/or legal proceedings.
* Personal opinions or feelings must not be submitted to these media. The Confidentiality Policy of the Service should be referred to in this regard.
* If a person receives a communication, which contains inappropriate messages they must inform the sender, that such material is not permitted under the Service’s policy on electronic communication. It is strictly prohibited to forward inappropriate material of any nature.
* All employees must immediately report any suspicion or evidence of abuse.

## LICENCE

* All software is the property of the company.
* The company strongly supports strict adherence to software vendors’ licensing agreements.
* Any copying of software in a manner that is not consistent with the vendors’ license agreement is prohibited.
* Participation (including during off-hours) in pirated software bulletin boards and similar activities are prohibited.

## STANDARD LEGAL DISCLAIMERS

* Should the Service develop a website a standard legal disclaimer should appear on all official websites. This disclaimer should be positioned so as to be readily viewable to the user. The text might contain the following: The information contained in these Service pages is, to the best of our knowledge, true and accurate at the time of publication, and is solely for informational purposes. This Service accepts no liability for any loss or damage howsoever arising as a result of use of or reliance on this information, whether authorised or not. By continuing, I am accepting these conditions.
* Information published by individuals should be declared as such and should not appear to be published on behalf of the Service. There will be a clear distinction made between Service information and personal information and the latter should contain the following disclaimer.

**No Phones**

Children are not permitted to bring or use phones in our service. Only designated staff are permitted, in strictly controlled circumstances (authorised to take photographs for the purpose of observations, documenting progress or for learning journals), to carry or use phones inside the care rooms of our service during operational hours.

Tablets/Smart Watches

A selection of Apps normally come in-built in Tablet computers, such as cameras, games and email. Although a Smart watch is small and discreet, it functions similarly to a mobile phone. On most Smart watches, text messages, phone-calls and emails can be easily accessed, viewed, sent and/or received. Social media platforms can be viewed and interacted with through a Smart watch. A Smart watch can be used as a direct substitute to a mobile phone, i.e. a child or adult might leave their mobile phone at home or out of reach and use the functions of a Smart watch as an alternative. There is a photo-taking function on some Smart watches that is synchronised directly to the Smartphone. For example, a function on some Smart watches can be used to activate the camera app on the synchronised mobile phone (when the app is left open on the phone) to capture and store a photograph. GPCC recognises a Smart watch in the same way it recognises a mobile phone device.

Photographs: Our service recognises that photography of children is an important way of documenting their learning, interests, progress, achievements, and general engagement in day-to-day activities. The taking of photographs of children is also required for the completion of activities undertaken during the afternoon. The sharing of photography of individuals or groups of children is welcomed by our families and facilitated by our service. Consent to take photographs is first sought from parents/guardians and recorded in our child registration forms before the child commences in our service. Any parent/guardian who does not give consent will not have photographs taken of their child for the purpose of sharing in closed groups. The email addresses of parents/guardians have been provided to us for the purpose of such communication. GDPR is adhered to by using the Bcc feature on all email distribution. Photographs are regularly deleted from the devices. The devices are accessible to authorised staff members for GPCC use only.

Tablet Use (music and song)

Our service also recognises the importance of music and song in the curricula and the joy and learning it invokes in the classroom. Tablet Devices are also in use in each of our care rooms for the purpose of playing music and songs to the children to aid their interactive learning, for wind down periods, and to support curricula themes and topics. Where the YouTube App is used to play music or show acurriculum-supporting clip, the clip will be previewed in full by a staff member before being shown to children. YouTube Clips will not be streamed or on ‘live’ mode. Where possible, the Kids YouTube App will be in use instead. YouTube will never be used as a ‘filler activity’ at any time in our service.

Children will not have unsupervised or sedentary viewing of video on any device in our service. Tablet Devices will not be accessible to children and close supervision will take place when it is in use by a staff member. Staff are not permitted to have access to their phones while in ratio with children except in exceptional circumstances where permission has been granted by management.

Tablets and School Age Children Our Service recognises that Tablet devices are popular among children and that children may own/bring their own Tablet. Tablets are also sometimes used for the duration of school class times and this is facilitated, with close supervision (should homework tasks be required to be carried out on a Tablet), child use of a Tablet will be permitted for the period of time close supervision is available.Children will not have unsupervised access to Tablet Devices while in our care. Inaccessible storage will be provided to children who arrive at our setting from school with a Tablet device for storage when not in use. Device Distractions (Staff) All notifications received to your mobile phone can be synchronised to a Smart watch. This means that a Smart watch will beep or vibrate on receipt of texts, calls, emails and social media notifications. Naturally, these alerts, when received, can divert the attention of adults caring for children during operational hours. GPCC recognises the risks posed to child safety and welfare as a result of device distraction.

Should a Smart watch be worn by members of staff working directly with children, all notifications/alerts must be switched fully off (including vibrate alerts). Notifications can be checked before or after hours of care to children, and/or during staff breaks.

SCHOOL AGE CHILDREN: Should a Smart watch be worn by children, all notifications/alerts must be switched fully off (including vibrate alerts). Notifications can be checked before or after hours of care to children.

# ****STAFF RECRUITMENT POLICY & PROCEDURE****

The management committee of Graiguecullen Parish Childcare Centre CLG is committed to ensuring that our recruitment procedures are fair, open and transparent and comply with relevant employment legislation. Personal information received is dealt with in the strictest confidence.

## STAFF RECRUITMENT PROCEDURES

## JOB DESCRIPTIONS

A detailed job description is prepared before each post is advertised

Each job description can include:

* 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

All posts are publicly advertised in local or national newspapers and state clearly that Graiguecullen Parish Childcare Centre CLG is an equal opportunities employer. All advertisements include the following:

* Name and role of organisation.
* Job Title.
* Brief description of the job.
* Location of position.
* Qualifications and experience which are essential and which are desirable.
* Whether the position is full time or part- time, temporary or permanent.
* How to apply.
* How to get further information.
* Closing date for application.
* Equal opportunities statement.
* Logos as required.

**SHORT LISTING**

A short listing panel with a minimum of two people is set up to review all applications.

* The selection criteria are based on the information in the advertisement and the job description. Assessment of applications is based only on information provided by the applicant.
* All applicants who meet the selection criteria are invited to attend an interview.
* A letter of regret is sent to all applicants who do not meet the selection criteria.
* A complete report of the short listing process is prepared by the short listing panel.

## INTERVIEWS

* An interview panel with a minimum of two people is selected by the Management Committee and always includes at least one member of the short-listing panel.
* Each member of the panel is supplied with the applications and CV’s in advance.
* 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.
* A marking system and score sheet are also prepared.
* When the interviews are completed a full report of the interview process is prepared by the interview panel. The report is signed by each member of the panel and is kept on file for at least one year, together with the short listing report and the interview score sheet.

## SELECTION PROCESS

* The position is offered to the candidate with the highest mark on the score sheet, subject to references being satisfactory.
* A reference is always sought from the current or most recent employer. Two referees are contacted verbally by telephone and this is followed up with a written reference if one has not already been supplied.
* Photo ID and original certificates of accredited training are sought before the successful candidate signs a contract of employment.
* Letters of regret are sent to all unsuccessful candidates within one week of the interviews.

### Garda Vetting

* Garda Vetting is sought for all employees and students and anybody else who may come in contact with children in our service as per Garda Vetting Policy and Procedure in this document.

### Contract of Employment

* A written contract of employment is prepared for each new employee of Graiguecullen Parish Childcare Centre CLG.

All contracts include:

* Commencement date of employment.
* Duration of the contract.
* Terms and conditions of employment.
* Reporting procedures.
* Salary.
* Working hours.
* Annual Leave.
* Details of sick pay.
* Information on grievance and disciplinary procedures.
* Information on codes of conduct.
* Duration of probationary period.

# ****INDUCTION PROCEDURE****

The Supervisor will carry out an induction programme with all new staff on the first morning of employment. This will include a tour of the facilities , introduction to staff, rules of service, duties, policies and procedures and employment details as follows:

* Information about the role of Graiguecullen Parish Childcare Centre CLG.
* Further information about the employee’s new role.
* Information on the role of other employees.
* Introduction to key personnel.
* Details of conditions of employment.
* Details of salary scales.
* Details of grievance and disciplinary procedures.
* Details of codes of conduct.
* Full details of the Policies and Procedures of Graiguecullen Parish Childcare Centre CLG including the Child Safeguarding Statement.
* Employees are obliged to familiarise themselves with the Policies and Procedures of the service and to sign up to codes of behaviour as set out by the Service.

# ****STUDENT POLICY & PROCEDURE****

It is our policy, to assist students in developing their skills in childcare. Students will work closely with staff, to develop a professional and child-centred approach to working with children.

## PROCEDURES FOR STUDENTS ON PLACEMENT

* All students must be over the age of sixteen.
* All students must complete an induction before commencing their placement.
* Students must sign a confidentiality agreement before commencing their placement. This will be provided during induction.
* Students will be asked to provide two written references and photographic identification (e.g. passport/driving licence/student card).
* As part of their induction, students are requested to read the policies and procedures of the service.
* Students must sign in and out daily.
* Students are not included in the adult/child ratio and are never used in place of staff.
* Students are never left unsupervised with groups or individual children.
* Students are supported through regular supervision meetings. Support and information is also provided, if assistance is needed with projects or assignments.
* The Manager decides on what information the students can have access to and what meetings they attend.
* Our service has on-going contact with the relevant college.
* Proof of Garda Vetting and Proof of insurance for each student is sought from the college.

## VOLUNTEERS

It has been the policy of Graiguecullen Parish Child Care Service CLG since 2002 not to use volunteers in the running of this service, only paid staff.

**DRESS CODE POLICY**

Graiguecullen Parish Childcare Centre considers the way their staff dress and their appearance is of significant importance in portraying a professional image to parents, visitors, clients and colleagues and encourages a sense of belonging.

**Statement of Intent**

The Dress Code policy is designed to guide staff on standards of dress and appearance. All staff’s appearance must be professional at all times both within the workplace and when representing the service. Graiguecullen Parish Childcare Centre values its staff and does not intend to quell personal expression- but the health, safety and welfare of children and staff is paramount at all times.

**Policy**

* Clothing and shoes must be clean tidy and neat at all times
* While there is no uniform worn by staff in the service, staff must present for work in smart-casual attire
* Comfortable shoes should be worn at all times. High-heels, toe-less sandals (flip flops) or backless shoes should be avoided in light of the dangers these can present to staff and children.
* No jewellery except for wedding bands and simple stud earrings may be worn.
* The absolute minimum of make-up should be worn.
* Any tattoos should not be on view.
* Hair should be clean, washed, neat and tied back at all times.
* Nails should be short and clean at all times.
* Staff are required to change into appropriate overalls for food handling.
* Staff are role models for young children so must exercise a high level of personal care and hygiene at all times.
* Chewing gum is not permitted.

**Students and Volunteers**

* Dress must be neat, clean and tidy. It must be non-revealing and jeans are not permitted.
* Any tattoos should not be on view.
* Hair should be clean, washed, neat and tied back at all times.
* Nails should be short and clean at all times.
* Comfortable shoes should be worn at all times. High heels, toe-less sandals (flip flops) or backless shoes should be avoided in light of the dangers these can present to staff and children.
* Chewing gum is not permitted.

# ****RISK MANAGEMENT POLICY & PROCEDURE****

Graiguecullen Parish Childcare Centre CLG believes that the health and safety of children is of paramount importance. We aim to make our Preschool a safe and healthy place by assessing and minimising the hazards and risks to enable the children to thrive in a healthy and safe environment.

## RISK ASSESSMENT PROCEDURES

Our risk assessment process covers both adults and children and includes:

* Checking for and noting hazards and risks indoors and outdoors, for activities, resources and trips/outings
* Assessing the level of risk and who might be affected
* Deciding which areas need attention
* Developing an action plan that specifies the action required, the timescales for action, the person responsible for the action and any funding which may be required

It is the responsibility of the named health and safety coordinator to ensure that all risk assessments are completed fully and at the scheduled time and that any required actions are carried out.

## DAILY RISK ASSESSMENT

* The Preschool Supervisor, Manager or Office Administrator will perform a risk assessment on the outdoor area on a daily basis.
* The Room Leaders in each room are responsible for checking their own room, ensuring that nothing is damaged (e.g. toys and equipment) and that the toilets and all areas used by the children are clean and free from hazards. Room Leaders should also ensure that all electrical sockets have socket protectors.
* The fridge temperature should also be recorded.

## TERMLY HEALTH & SAFETY RISK ASSESSMENT

To be completed on a termly basis (quarterly) using the printed termly Health & Safety Risk Assessment Sheet, checking the following areas:

* Entrances and exits
* Toys
* Tripping hazards
* Blinds
* Supervision of activities
* Sun protection
* Fire Safety
* Desk Corners
* Heating and Lighting
* Electrical equipment and storage
* First Aid and medication

Hazards are noted and control measures are identified.

## EQUIPMENT AND RESOURCES

To be completed annually or sooner should it be necessary, taking into account the ages and abilities of the children that attend the setting. Any hazards the piece of equipment or resource may pose should be identified along with anyone who could be affected, the severity of the hazard, the likelihood of the hazard occurring and what can be done to control the risk.

## TRIPS AND OUTINGS

To be completed prior to any planned trip or outing taking place, identifying any hazards and the control measures to reduce the risk. If after completing the risk assessment the trip or outing is deemed as unsafe to the children or adults taking place the trip or outing will be re-evaluated or cancelled accordingly (***see separate Outings Policy***).

# ****MANUAL HANDLING****

Graiguecullen Parish Childcare Centre will assess and reduce the risks associated with manual handling. The main area of the body affected by handling accidents is the back, but virtually any part of the body can suffer injury due to poor manual handling. It is important to remember that health, safety and welfare is the responsibility of everybody in Graiguecullen Parish Childcare Centre not just the management.

**Graiguecullen Parish Childcare Centre Duties:**

* Assess risks to the health and safety of their employees and others who may be affected in order to identify the measures needed to comply with relevant Health and safety law.
* Make arrangements to implement the measures identified as being required by the risk assessment.
* Appoint competent people to help with implementation.
* Provide information to employees that can be understood, as well as adequate training and instruction.
* Set up emergency procedures.
* Staff should complete Manual handling training.
* Avoid hazardous Manual Handling operations as far as is reasonably practicable
* Make suitable and sufficient assessment of any hazardous manual handling operations that cannot be avoided.
* Reduce the risk of injury from those operations so far as is reasonably practicable

**Employee Duties: –**

* Report dangerous situations and any shortcomings in their employers’ health and safety arrangements.
* Take reasonable care not to endanger themselves or anybody else.

**Principles of Safer Handling**

The simple steps below are not a guaranteed way of protecting you from manual handling injury. By following the steps below, you are reducing the possibility of an accident and the injury that could result from it.

**The basic principles are: –**

* Avoid manual handling whenever possible.
* Use equipment (if available)
* Assess the task (consider use of equipment or breaking it down into easy stages)
* Assess the load (try a test lift)
* Know your own limitations and don’t be afraid to ask for assistance if required.
* Prepare the area, remember that whatever you pick up must be put down at some point (and vice versa)
* Position yourself correctly
* Perform the task applying safer lifting techniques
* Evaluate the task (how could it be made easier next time?)

**Performing a Safer Lift**

When performing the task there are accepted practices that should be used to make any handling task safer. They are:

* Think before handling/lifting
* Keep the load close to the waist
* Adopt a stable position
* Ensure a good hold on the load
* Moderate flexion (slight bending) of the back, hips and knees at the start of the lift.
* Don’t flex the back any further while lifting.
* Avoid twisting the back or leaning sideways especially while the back is bent
* Keep the head up when handling
* Move smoothly
* Don’t lift or handle more than can be easily managed.
* Put down, then adjust

# ****ANIMALS****

Any visiting animals will be kept under control.

**Policy and Procedure**

Animals, birds and fish may carry infections, which can be transmitted to humans. Strict hygiene procedures are therefore required when handling and caring for these creatures to prevent illness.

The children are encouraged to talk with adults regarding the animals and their care. The children hands are always washed after handling the animals.

**Precautions**

• Appropriate risk assessments must be carried out and an account must be taken of any allergies that anyone coming into contact with the animals may have and appropriate precautions taken.

• Parents must be informed before an animal visits Graiguecullen Parish Childcare Centre

• To establish if a child has an allergy or phobia to a particular animal.

• It might be advisable for the children to view the visiting animal from a safe distance, e.g. looking through a window to an animal outside.

• Children must wash their hands thoroughly with liquid soap in warm running water after coming in contact with any animals.

• Children will be supervised at all times when handling animals and will be taught correct handling and care of the animals.

• Staff must wash their hands after cleaning out the animals and dispose of all soiled matter in the outside bin.

• Children must not help to clean the animal’s environment.

**Care of Animals**

• Correct guidelines and care of the animals must be followed.

• Information regarding feeding, cleaning, and any other care information should be obtained from reliable sources.

• Suitable secure housing must be provided for the animals.

• Arrangements will be made for care of the animals over the weekend and overnight if necessary.

• Any animals brought into the service by visitors are to be their responsibility however staff are still responsible for assessing any risks and taking any necessary precautions.

Zoonoses (any disease or infection that is naturally transmissible from vertebrate animals to humans).

**Common Zoonoses**

**Escherichia coli 0157**

Bacterium that lives in the gut of animals, including cattle, sheep, deer and goats and is also carried by pets and wild birds. Can cause illness in humans ranging from diarrhoea to kidney failure and in some cases death. Infection can be caused by contacting contaminated faeces and then introducing the bacterium into the mouth. It is vital that anyone who works with or touches animals thoroughly washes their hands and arms before eating, drinking or smoking and observes good personal hygiene practices.

**Cryptosporidiosis**

This disease is caused by a protozoa called Cryptosporidium parvum. It is carried by calves, lambs, deer and goats and may be transmitted to humans by contact with animal faeces. It may cause diarrhoea and abdominal pain with ’flu-like symptoms for up to six weeks in humans. Again, good personal hygiene practices are key to preventing worker exposure.

**Salmonella**

The salmonella bacterium can be carried by many types of animals and infection in humans can result in diarrhoea, fever and abdominal pains. Human infection is normally due to contact with contaminated faeces and subsequent hand to mouth contact. Once again good personal hygiene practices are essential.

# ****PARENTS AS PARTNERS POLICY****

It is the policy of the Graiguecullen Parish Childcare Centre that staff and parents work together to achieve the best possible outcomes, learning experiences for all the children attending the service. It is our policy to involve parent/guardians at every level of their child’s development

Policies + Procedures

The Graiguecullen Parish Childcare Centre will:

• Facilitate regular meetings at mutually agreed times and venues.

• Ensure a brief daily exchange of information with each parent.

• Provide a notice board of current information, leaflets, HSE information, contact numbers, relevant statutory documents as required by the Child Care (Pre-School Services) Regulations, 1996, and regular photographic displays of the children at play.

• Offer opportunities for families’ personal development, workshop and courses with particular emphasis on how children learn, the childcare curriculum and learning at home.

• Value parents individually and ensure opportunities for them to contribute to the service activities, whatever form this may take, i.e. special skills and special activities (providing materials for junk art, cookery sessions).

• Facilitate the observation of play, which will increase understanding of child behaviour and development.

• Provide opportunities for parents and family members to enter their child’s Preschool room to observe their work and interact with other parents through open days, parents’ mornings, etc.

• Provide opportunities for engaging in shared play with children.

• Provide opportunities and time for parents to talk individually with staff/management on:

o Child’s progress and observation record

o A joint strategy for behaviour management

o Setting realistic goals for their child

o Changes in the family home

o Difficulties or concerns

o Suggestions for the service

o Joint evaluation of the childcare services

• Make parents aware of the group’s comments/complaints procedure.

# ****STAFF TRAINING POLICY & PROCEDURE****

Graiguecullen Parish Childcare Centre CLG. is committed to a policy of equal opportunities in employment. Training and promotion are open to all employees of the company. All employment decisions are based on the skills, knowledge, experience and qualifications required to perform a job to appropriate standards, and the employee’s suitability for the role.

Implied in all of the company’s contracts of employment is a commitment to equal pay for equal work.

Further information on Dignity at Work, Grievance Policy and Procedure, Disciplinary Policy and procedure, and Employee Complaints for staff is available in the GPCC Employee Handbook.

It is our policy that all staff will have access to on-going in-service training, to keep them up to date and to develop their childcare and education skills.

## STAFF TRAINING PROCEDURES

* Induction training: All newly appointed staff/students are provided with the basic information they need to settle into the job, this includes: health and safety, child protection procedures, conditions of employment, policies and procedures.
* External training and attendance at conferences/workshops/seminars is supported.
* At staff meetings, staff is given the opportunity to feed back the information from the conference/workshop/seminar they attended.
* 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, individual and the service.

# ****SUPERVISION POLICY & PROCEDURE****

This policy and code of practice has been developed to inform and guide supervision of the children in Graiguecullen Parish Childcare Centre CLG in order to ensure their welfare, health and safety. The Childcare Act 1991 (Early Years Services), Health, Welfare and development of the Child, Part V, 18 Premises and Facilities)

This Supervision of Children Policy and Procedure must be followed and implemented by all staff working in GPCC CLG. Staff must be vigilant and observant in their supervision to ensure the safety, health and well-being of the children at all times. Staff must be familiar with the environment and any possible hazards.

## INDOOR AREA

* The staff child/ratios for indoor play will be in compliant with the Preschool regulations.
* Staff/child ratios will be applicable to the age range specified in the Preschool Regulations.
* Staff will be vigilant about supervising children indoors.

## ENTRANCE AREA

* All staff must follow the practices in relation to access and egress of parents and children through the main door.
* When people reach the outside door of GPCC CLG staff should not allow entry unless they are sure that the person is:
* A parent
* An authorised collection person
* A visitor (staff should be informed of any expected visitors and given the name and company of the person visiting)
* Preschool Inspection Team
* If in doubt, check with the Manager

## HALLWAY AREA

* All staff must be constantly vigilant in this area and children must not be allowed in the corridor unaccompanied.
* Staff should teach children that this area is for hanging coats and their bags. The children should learn to move quickly into their appropriate rooms. Staff should talk to the children at this time about what activities will be happening in the room so that children’s attention can be focused in getting to their rooms as opposed to spending time in the corridor.

## SCHOOL AGED CHILDCARE ROOMS

* Staff should ensure that their presence and position in the room allows that all areas of the room are under constant supervision and that all children are in the sight of at least one member of staff, at all times.
* Staff should observe due care and attention when opening presses ensuring that children are not standing nearby.
* Childcare safety latches should be used at all times on the presses and the doors as appropriate
* The blinds on the windows should be used appropriately to ensure that the glare from the sunshine does not have an impact on the children

## OUTDOOR PLAY AREA

* The staff child/ratios for outdoor play will be in compliant with the SAC Regulations. A minimum of two staff members for every group will be present at any one time. Staff will be vigilant about supervising children outdoors. Outdoor time is play time for the children. The adult is there to supervise outdoor games or play and ensure that the children are in no danger to themselves or their peers. If you are sitting down ensure you have a good view of the whole garden. Outdoor play is an extension of indoor activities therefore sitting should be kept to an absolute minimum.
* Staff should ensure that their presence and position in the outdoor play area allows that all areas of the outdoor area are under constant supervision and that all children are in the sight of at least one member of staff, at all times.
* The outdoor play area must be checked by a member of staff for safety before any children use the outdoor play area (see outdoor play policy)
* Staff must engage with the children during the outdoor play time. The curriculum should be used outdoors as well as in the children’s room.
* Children should not be allowed interfere with the gate in outdoor area
* Staff must ensure that the gate is closed over and properly secured at all times.

## OUTINGS

* The staff/child ratios for outings should be confirmed with the Insurance Company in the first instance, as this ratio may be higher than The Child Care Act 1991 (Early Years Services) Regulations 2016.
* Staff should ensure that they follow the requirements of the Outings Policy and Procedure
* Staff must ensure that they constantly supervise the children in their care.

## BI-ANNUAL STAFF SUPERVISION and SUPPORT

All staff members fill in a Staff Supervision Form and have the opportunity to meet twice a year with the Manager and a member of the Board of Management in October and April. The purpose of this supervision is to enable the staff member to discuss their job performance, to plan work objectives for the future and their future development with the Service.

Staff will be supported while dealing with a child protection concern and outside support will be sought where necessary, the costs of this will be borne by the company.

## Copy/viewing Recordings

Management will respond to a request to view a recording by allowing the viewing to take place, in the presence of management on the Preschool premises. This is to protect other children/staff that may be present on the recording. Copies of recorded information must be strictly controlled and only made in relation to incidents which are subject to investigation. They must only be given to authorised third parties. Copies can only be issued by The Manager

## Retention

Recordings are retained for 10 (ten) days.

## Access to Recordings

# ****GARDA VETTING POLICY & PROCEDURE****

All employees, volunteers and students working within Graiguecullen Parish Childcare Centre must be Garda vetted. The Early Years Inspectors will require that all employees are Garda vetted before they commence employment with Graiguecullen Parish Childcare Centre.

## Policy

The Child Care Act 1991(Early Years Services) Regulations 2016 require any person carrying on a pre-school service must ensure appropriate vetting of all staff, students and volunteers who have access to a child. This involves:

1. Checking employer references in respect of staff and checking reputable sources in respect of students and volunteers.
2. Seeking Garda vetting from An Garda Síochána.
3. In respect of applicants who have lived abroad, ensuring that these persons provide the necessary police vetting from other police authorities.

Employment with Graiguecullen Parish Childcare Centre is subject to a satisfactory outcome of the Garda Vetting Process. Where an employee is successful for a position, they will be required to complete a Garda Vetting Application Form before they commence employment.

Management will ensure that the identity of the applicant is confirmed against an original (not a photocopy) official documentation (such as a driving licence or passport), which includes the applicant’s name, address, date of birth and a photograph. This should be compared with their written application.

Tusla-The Child and Family Agency inspection standards require Garda Vetting forms to be held on site by childcare providers otherwise the service will be deemed non-compliant under Childcare Regulations and the National Vetting Bureau (Children and Vulnerable Persons) Act 2012.

## Delay in Obtaining Garda Vetting

Graiguecullen Parish Childcare Centre will follow and respect the Garda Vetting Procedures and will follow the advice and guidance of the NVB and Tusla-The Child and Family Agency Early Years Inspector or any requirements that are compulsory under legislation.

Garda Vetting is not transferable from one service to another.

## Students

All students must be Garda Vetted. Students will be required to complete a Garda Vetting Application Form before they commence their placement. Students are required to complete Garda Vetting Application Forms in accordance with the guidelines issued by the National Vetting Bureau. Garda Vetting Forms will be held on site and are not transferable to other services or organisations.

## Transition Year Students

If Graiguecullen Parish Childcare Centre takes on a transition year student or student under 18 years of age their parent/guardian will be required to complete and sign a form declaring that there are no convictions against the transition year student. Graiguecullen Parish Childcare Centre will obtain 2 validated references for all transition year students. A transition year Student should never be left alone with any child in a pre-school service. They must be accompanied at all times by a staff member. Garda Vetting will be required, however, for all transition students over 18 years.

## Employees Who Have Lived Outside of Ireland

For persons who have lived/worked outside of the state for periods of time, a Garda Vetting Form should be completed listing the addresses both in Ireland and other countries that the person has resided in. Additionally, the person is required to provide an original Police Vetting Certificate/s from the country / countries that they have lived / worked in. This applies to international applicants as well as Irish applicants who have resided / worked abroad. Employers should take reasonable steps to verify Police vetting from other countries and these attempts should be recorded on the personnel file.

The Garda Vetting form for completion will be supplied by Early Childhood Ireland

Only completed Garda vetting Forms returned and finalised by the NVB should be stored.

## Garda Vetting Contact Person

Diane Darcy (Manager) is the Garda Vetting Contact Person, The Nominated Garda Vetting Contact Person is registered under the organisation’s membership number with Early Childhood Ireland. It is their role to manage all Garda vetting applications submitted by the organisation.

## Dealing with a negative disclosure

After the appropriate recruitment and interview process has taken place and the organisation has submitted the Garda vetting application, if there is a negative disclosure returned by the National Vetting Bureau the following policy will apply.

## Decision Making Committee – Board of Management

* The Board of Management will assess the suitability of applicants for positions within the Organisation regarding any Garda vetting disclosures that may be received in respect of them.
* If a disclosure does not automatically disqualify the applicant but raises doubts or concerns about the staff member’s suitability, it will be considered by the Board of Management.
* The decision on accepting or rejecting an applicant following a negative disclosure will be made by the Board of Managementtaking account of the nature of the disclosure, the circumstances surrounding it (to the extent that they may be known) and an assessment of the risk factors. The details of the disclosure will be verified with the applicant, who may be requested to provide further details relating to the incident(s) pertaining. Where an applicant disputes the accuracy of any detail contained in their Garda vetting disclosure, we will contact the liaison person in Early Childhood Ireland.

## Areas for Consideration after a negative disclosure

Disclosure will be assessed in relation to the applicant’s intended role within the organisation/setting. The following points will be considered:

* The seriousness or nature of any offence and its relevance to being an employee or volunteer.
* The length of time since the offence occurred.
* The number and frequency of any convictions.
* Any relevant information offered by the applicant about the circumstances, for example influence of domestic or financial difficulties.
* The self-disclosure of the conviction/prosecution or pending conviction or prosecution by the applicant.
* Whether the offence was a one-off or part of a history of offending.
* Whether the applicant’s circumstances have changed since the offence took place.
* Serious road traffic offences such as drunk driving, dangerous driving, hit and run, no insurance and car theft.
* The degree of remorse, and motivation for change, expressed by the individual, if this information is provided
* The references received.
* Any other relevant information

Some points the Board of Managementmay also take into account include:

* Does the role involve one-to-one contact with children in an unsupervised position?
* Will the nature of the role provide the applicant with any opportunity to re-offend?

The answers to these questions, and information collected from the references, will allow the Board of Managementto recommend whether the disclosed information permits the appointment, and if so the appointment can be made with or without restrictions.

## Assessing Disclosures

The Board of Managementwill assess the information provided by the disclosure process and will make a recommendation on whether or not the applicant should be appointed. If disclosures have been received, the Board of Management will request in writing that the applicant furnish further information on these disclosures or attend a meeting to discuss these disclosures and the circumstances surrounding them.

The function of this meeting is to gain more information from the applicant for the Board of Management in order to assess the disclosures. Where such a meeting or written statement is not provided, the Board of Management will assess the application on the information available to them. The Board of Management will have three options open to them:

**Appointment Approved:** If after reviewing all the available information the Board of Management is confident that the applicant is able to work within the organisation/setting, then the remainder of the recruitment process should be followed in the usual way and the appointment confirmed.

**Restricted Appointment:** After reviewing all the available information, the Board of Management may feel that the applicant is suitable to work with the organisation but should avoid any areas where there may be an opportunity to re-offend. For example, a person with a recent conviction involving drink driving could be issued with a restricted appointment excluding them from driving children on trips or school collections. If an application for the applicant position is accepted subject to any restrictions, the acceptance and terms of the restrictions should be confirmed in writing to the employee.

**Appointment Denied:** If after reviewing all the available information, the Board of Management may feel that the application should be denied, the applicant should be informed of this in writing.

Throughout the procedure it is important that the applicant is kept informed and that the information provided is kept confidential to those directly involved in the process. The applicant will then be notified in writing on the final decision made by the Board of Management.

**Commitment to Fairness:**  All Board of Managements must in all cases behave without malice, and in every event must act fairly. They are entitled to reach a decision on the basis of the information before them but may ask the prospective employee for additional information.

**Existing Staff Re- vetted every 3 years and asked during bi -annual reviews if they are the subject of criminal charges or investigation**

**Data Collected through Garda Vetting**

Graiguecullen Parish Childcare Centre will conform to the provisions of the Data Protection Act 1998 and the Data Protection (Amendment) Act 2003 in relation to the storage and retention of records.

## Storage of Data

The storage and security of Garda Vetting Form is a very important consideration under the Data Protection Acts. Appropriate security measures will be taken by Graiguecullen Parish Childcare Centre against unauthorised access to this data.

A minimum standard of security will include the following measures:

* Access to the information should be restricted to authorised staff on a “need-to-know” basis. Access to Garda Vetting Forms should be restricted to a maximum of two individuals within the service.
* Access will also be restricted to external authorised personnel – e.g. the Pre-school Inspector.
* The forms will be stored in a lockable filing cabinet located away from public areas.
* Any information which needs to be disposed of, will be done so carefully and thoroughly when out-of-date but only if a new vetting procedure has been completed.
* Premises will be secured when unoccupied.

## Retention

Graiguecullen Parish Childcare Centre will retain a record of the decision to appoint an employee and the reasons for the decision as part of the overall recruitment records. In the event of a decision not to appoint an employee on the basis of a Garda vetting disclosure, records should be retained confidentially indefinitely.

# ****SWINE FLU/Covid-19 POLICY****

## Purpose

This policy and procedure has been developed in response to the World Health Organisation confirmation of the international spread of ‘swine’ flu/Covid-19

## Policy and Procedure

Graiguecullen Parish Childcare Centre is committed to ensuring the well-being of employees and the children in our care. The policy provides guidelines and the procedures that will be taken in the event of an outbreak of swine flu (H1N1) that may be serious enough to affect the running and business of the Preschool.

Graiguecullen Parish Childcare Centre are aware that children are very susceptible to getting this new virus and the service may serve as a central point for the spread of the virus. We will endeavour to ensure that procedures are in place so that we can work towards minimising the spread of these virus’. Graiguecullen Parish Childcare Centre will ensure that by implementing good health practices and having in place protocols to ensure that we can deal with such an outbreak should it occur. We will develop contingency plans to manage flu and ensure that staff, children and parents are familiar with those plans.

All employees are expected to take personal responsibility for following the policies and procedures of the setting and in the event of a flu pandemic to act in accordance with any instructions given to them which is designed to protect the health and safety of themselves and the children in their care. Graiguecullen Parish Childcare Centre will keep parents briefed and will also request that they follow any instructions issued by the service in order to ensure the health and safety of all children and employees.

Employees must constantly be aware and they must pay particular attention to the observation of all children for symptoms. If a child does fall ill, then the employee should immediately follow the illness policy and procedure and parents should be notified immediately to take the child home.

It is most likely that nearly all persons with the flu will have at least two symptoms. There are a number of categories of people at higher risk of serious complications from seasonal flu these include children younger than 5 years old and pregnant women Good Hygiene Practices

Managing the spread of illness is possible with proper hand washing and effective nappy changing procedures, by cleaning toys properly and through education.

Vigilance by all employees in relation to hygiene is critical in order to prevent children and staff becoming sick. Graiguecullen Parish Childcare Centre will continue to operate rigorous hygiene practices. Employees, parents and visitors will be required to strictly adhere to protocols in relation to hygiene and good practice which will be displayed throughout the building and may be found at the end of this policy and procedure.

**Effective Hand Washing**

All employees, volunteers, and children must follow the procedure for hand washing.

## Safe Nose Blowing

Employees and children should blow or wipe their noses with disposable, one-use tissues and then discard them in a plastic-lined, covered, hands-free bin. After blowing the nose, hands should be washed. Every room in the service will have a supply of tissues.

## Toys and Activities

The following steps should be taken bearing in mind the need to continue to be sensitive to children’s needs and preferences and not removing favourite or comfort toys.

* Sand play and water play can be continued but children should always wash hands after these activities.
* Other communal toys that are hard to sterilise should be removed, e.g. soft toys.

## Additional Cleaning Practices in the Event of Outbreak of Swine Flu

The routine frequency of cleaning and sanitation in Graiguecullen Parish Childcare Centre will be increased whenever there are outbreaks of illness or when recommended by the health department to control certain infectious diseases. All surfaces, furnishings, and equipment that are not in good repair or that have been contaminated by body fluids should be taken out of service until they are repaired, cleaned, and, if contaminated, sanitised effectively.

All cleaning schedules will state item/area to be cleaned, frequency of cleaning, method/procedure, and person responsible, in line with the pre-school regulations.

Since children will touch any surface they can reach (including floors), all surfaces in a childcare facility may be contaminated and can spread infectious disease agents. Therefore, all surfaces must be properly sanitised.

Mops should be assumed to be contaminated since they are used to remove contamination from other surfaces.

The bleach solution used for sanitising the childcare environment is also appropriate for sanitising mops and rags. Detachable mop heads and reusable rags may be cleaned in a washing machine and dried in a mechanical dryer or hung to dry.

## Communicating with Parents

Concerned and informed parents are the first line of defence against the spread of Swine Flu/Covid-19. Graiguecullen Parish Childcare Centre acknowledges that parents/guardians have the power to prevent our service from infection, simply by keeping their child home when they do not feel well or exhibit symptoms. The childcare facility will keep parents informed on a regular basis on information pertaining to swine flu. We will request parents to ensure that all details provided to the service are up to date. Emergency contact details must also be up-to date.

**Procedure in the event of Swine Flu**

Actions for caring for a child who becomes ill with symptoms.

* Parents/guardians should be contacted to bring the child with influenza like illness (ILI) home as soon as possible
* The service will encourage parents to seek early medical assessment for all children less than 5 years of age and for children with flu-like symptoms at higher risk of complications from flu. Staff with flu-like symptoms at higher risk of complications from flu should do the same
* The service will have prior permission from parents to enable urgent medical assessment if required.
* We will ensure there is appropriate space (a separate sick room where possible) which can be used for the care of children who feel ill before their parents can collect them. Ideally this space should be away from other children to help prevent spread of the infection. We will ensure that the space is well stocked with appropriate medical supplies and is prepared for children with the symptoms of flu. An employee will be nominated to look after the child in an isolated area, if possible, apart for the remainder of the children. When providing care for the child, the staff member will observe good hand hygiene practices
* When the child has gone home, the isolation area will be thoroughly cleaned
* Employee at risk of complications if infected will not care for symptomatic children  
    
  In the event that cases of influenza occurs in Graiguecullen Parish Childcare Centre the following actions will be implemented:
* The child/staff member will be advised to stay at home for at least fourteen days from the onset of symptoms. The Department of Public Health will be contacted and advised of the diagnosis. The Department may consider closure of the service, or individual room, if there is concern about the potential for spread of the virus.

Actions in the event of an unusual number of people presenting with influenza like illness or unusual severity of illness (e.g. child requiring admission to ICU)

The Department of Public Health will be contacted by phone

## Closure

In the event that cases of influenza virus occur in the service and that the circumstances are such that Public Health advises closure, it will be essential to have a communications plan which will include:

* Up to date contact details of the children’s parents/carers – Graiguecullen Parish Childcare Centre should ensure that the identified guardian has provided current contact and an emergency contact number.
* An estimate of the number of children who may need to remain in the service e.g. parents working and unable to collect until specified time – these children may need to be isolated and cared for until collected.

## Staff Required to Stay at Home in the Event of Family Illness

Employees who are well but who have an ill family member at home with the Swine Flu/Covid-19 should not come to work. Employees must take more than usual precautions in terms of contact with co-workers and personal hygiene. Employees who have an underlying medical condition or who are pregnant should call their doctor for advice, because they may need to receive influenza antiviral drugs to prevent illness.

**Sample of Homework Form Filled Out By Parents:**

**ROOM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CLASS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CHILD NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PARENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SEESAW CODE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**List of Homework: Yes No**

|  |  |  |
| --- | --- | --- |
| **Reading** |  |  |
| **Tables** |  |  |
| **English Questions** |  |  |
| **Maths Questions** |  |  |
| **Spellings - English** |  |  |
| **Spellings – Irish** |  |  |
|  |  |  |

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Guardian**

**Feedback/Comments:**