



newsletter

April 2016

"Together we make a family!"



Follow us on Twitter and like us on Facebook!



Two great ways for you to keep up to date with all the latest news from the KingsWellies gang!

Outdoor Education at KingsWellies

Scott and his gang of trusty helpers (including Rumpole and Ziggy) have been VERY busy improving our outdoor play area. We now have a HUGE stock of mud for our mud kitchen, a stage to sing, dance and perform on, KingsWellies Castle to play in, obstacle courses to test our agility, dens to build and a whole range of loose materials to construct with. We even managed to make a bus out of Asda crates and old steering wheels!

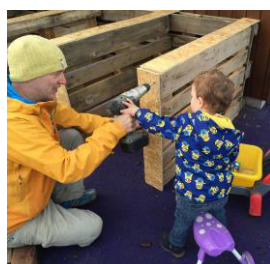


Rocky the Rooster, Gail and Deidre (aka Graeme, Stuart and Fife) are all still behaving and are laying around three eggs for us every day! We have been collecting the eggs and using them for science experiments, to bake, prepare scrambled eggs, make sensory jars, paint and to help us research lifecycles.

Alec and Leanne Cocker (Finlay's mum and dad) are currently incubating eggs for us and we are hoping to welcome some new chicks to our KingsWellies Farm. We will let you know when they arrive and will make sure that we keep you inundated with LOTS of cute photos!

The Care Inspectorate have just released a new document called **"My World Outdoors."** We will be making very good use of this publication to assist us in continuing to provide the highest quality of outdoor play for all of our children. You can find this document at hub.careinspectorate.com

Have a look for our "Welcome Message" on our outside blackboard every day too.



North Sound Cash for Kids Superhero Week

North Sound will be raising money for cash for kids during their annual Superhero Day on 13th May. We will be helping them to fundraise by holding our very own Superhero Week! **During the week of 9th May**, we will be asking children, parents, families, friends and staff to:

- Dress up as a superhero and pay £1 (all week or any day)
- Superhero photo wall – bring a photo of you or a member of your family doing something SUPER! (sports, outdoor activities, eating healthily, helping someone else).
- Design your own superhero!
- Buy some of our SUPER baking!
- Tackle our superhero obstacle course!
- Make up your own superhero song and dance!
- Superhero fashion show – strut your stuff on the catwalk!
- Super Raffle – buy a ticket with the chance to win a SUPER prize!

If you would like to donate to our raffle, please hand in your donation to the office during the week of 2nd May. Raffle tickets will be on sale during Superhero Week! Every donation will be much appreciated.



Healthy Body, Happy Me Campaign!

The children had lots of fun and learnt lots of important information during our Healthy Body, Happy Me Campaign! This was a week-long fun activity campaign with a focus on the Health and Wellbeing curriculum.

Monday - Eat well! Feel fantastic! We made oat cookies and banana muffins and tried lots of new fruit and vegetables. We also had PE with Birgi.

Tuesday - Caring for our bodies! We were busy learning about the importance of brushing our teeth, washing our hands, taking care of ourselves and keeping safe.

Wednesday - Magic Movers! Pamela taught us some line dancing and we danced the day away to Sticky Kids. We learnt lots of different action songs.

Thursday - The great outdoors! We made dens, mud pies and obstacle courses. Jo Jingles encouraged us to dance and sing around the garden! Rocky the Rooster joined in with the singing!

Friday - Reflection Friday! We listened to our favourite stories and reflected on what we had learnt all week. We made new friends from other rooms and talked about our Golden Rules.

Saturday and Sunday - Out and about with the family getting active!



Parents – Coffee Meeting

As outlined in our previous newsletters, some of our parents were keen to meet up with each other for a wee gathering. A small group went ahead and arranged to meet for a coffee on Tuesday 19th April. I know that they would be delighted to welcome any other parents who would like to join future get-togethers. They are a VERY friendly bunch and I am sure that this would be a really nice opportunity to make some new friends and have a great time! Please let me know if you would like to attend and I will pass your email address on.

Dobbies Visit and Other Visits

A group of our older children loved catching the bus at the Park and Ride and going to Dobbies garden centre for the afternoon. When there, they purchased seeds for each room to plant in our allotments. They also LOVED looking at the pets in the pet shop and discussing what type of pet to adopt for KingsWellies. A HUGE thank you to Claire and Graeme Reith (Jude's parents) who very kindly donated £20 for the children and staff to have a tasty treat in the lovely Café too! How very thoughtful!

We will be arranging various trips out and about over the next few months. These will include visits to Westhill library, local farms, garden centres and parks. Playroom staff will require you to complete a permission slip prior to any visits. If you would like to join us on a trip, please let us know.



Pyjama Drama, Aberdeen City Football Club, summer walks, seasons, weather, pets, minibeasts, pizza-making, families, school, superheroes, planting, lifecycles and much much more.....

Our children will be very busy learning lots about all of the above over the next few weeks. Our curriculum plans are displayed outside each room for your information and feedback. If you would like to come in to help out or to read a story, please let us know. We would LOVE to welcome you!

Some gentle reminders

- Please provide labelled suncream for your child (hopefully we will get some sun!)
- Please remember to complete a Parental Questionnaire. We have had a few returned but not many. I will evaluate these and send you the results in our May Newsletter.
- Please remember to check your child's pigeon hole (recycled pizza box) on a daily basis. Staff will put children's jotters, art work and other important information in these.
- Please give us some family photos. We are making our family display boards outside each room and are also making family books for our children to look at during the course of the day.
- Please NEVER leave medication in your child's bag. ALL medication must be signed in and out of nursery by a member of staff.

KingsWellies Got Talent

Congratulations to Kerryn McRae who has just starred in "Mighty Mia!" (Aberdeen Student Show 2016). KingsWellies were delighted to sponsor Kerryn and to support the 37 charities who will benefit as a result of this fantastic show!



Kerryn McRae

Publicity Team also playing **Dawn Dinna**

As a 20½-year-old (yes, the half is important) third year International Business Management student, Kerryn has been part of this year's immensely successful publicity team. She's back for her third student show in a row, and as long as we can tear her away from the jigsaw puzzles on her iPad, she'll be on stage. It might be a struggle... A regular of the Inverurie Panto for the last few years, she has no trouble helping the less talented dancers among us learn to at least move in the right direction. She may need some pointers in the cooking department though now she's moved away from home.

Welcome to Shelley, Lucy, Sarah and Racheal who have joined the ever-expanding KingsWellies team. Best wishes also to Leanne who has left us to go on maternity leave. We will REALLY miss her but can't wait to meet Baby Watt! Christine has also left us for sunnier climes and is now in Menorca, working as a Thomson's Holiday Rep. Jodie will be taking over as Supervisor in the Wellie Beans room with support from Samantha and Stephanie. Laura is now the Supervisor in Wellie Tots with support from Ruby. Named photos of all staff are displayed outside each room for your information.

Congratulations also to Entier (our amazing catering company) who have just won the prestigious Queens Award for Enterprise and International Trade 2016. Well done to the Entier team! Great work! **Look out for our new lunch menu which is also coming soon!**



Interactive Learning Diary and Learning Journey Folder

If you would like to sign up to view your child's **digital Interactive Learning Diary (ILD)**, please see Aimee or Suzanne who will provide you with your very own unique registration code. This excellent tool assists us with the recording and planning of your child's educational development. We have had excellent feedback from parents who are able to regularly access and observe their child's learning whilst at nursery. You can also send in your own observations of your child's activities from home.

If you would like to take your child's **individual Learning Journey Folder** home to have a good look at or add to, please see playroom staff who will be more than happy to oblige. We only ask that you please return it as soon as possible and complete the evaluation form within. We encourage our children to access these folders all of the time and to be proud of their learning and achievements.



KingsWellies Policies of the Month

This month we would like to provide you with the opportunity to consult on our **"Infection Control, Sickness, Illness and Immunisation Policy and our Outdoor Education Policy."** We hope that you will find this information useful. Please give us your comments and feedback. This will be used to audit our policies. All of our policies can be found on our KingsWellies website.

Comments, Compliments, Complaints and Concerns

Please give us your feedback, good and bad! We are committed to delivering a quality service to all of our families. We are a very reflective nursery and only want to do our VERY BEST for all of our families! Please let us know how we are doing! Your feedback is very important to us.

If you would like this newsletter or any other documentation from nursery translated into another language or an alternative reading format, please do not hesitate to contact us.



The local, global food family



The Queens Award for International Trade

I am delighted to announce that Entier has achieved the prestigious 2016 Queens Award for Enterprise - International Trade.

The UK's most prestigious enterprise awards recognise those who excel at international trade, innovation or sustainable development and is the highest official UK award for British businesses.

Our company's strong focus on people development, relationships with the communities where we operate and close supplier relationships in the international arena, have played a key role in our overseas growth. This has allowed us to 'think global and act local', has been critical in our success and is a strategy which sets us apart.

We have taken a different approach to each market and establishing strategic partnerships with suppliers to provide us with the best quality local food products, as well as assisting with the local workforce which is not only innovative in our sector, but makes our commercial investment and return more sustainable.



Our international operations now make a significant contribution to the overall success of the business and its continued growth. During a time of insecurity in the oil & gas sector globally, Entier has secured contracts internationally for the next five years.

We would like to extend a huge thank you to everyone, from our suppliers to our clients, our board and most importantly our workforce internationally, whose help and efforts have led us to this great achievement.

Thank you all!

Peter Bruce, CEO Entier Ltd

f t in

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Infection Control, Sickness and Illness & Immunisation Policies

Published	October 2014 (V1)
Revised	Annually



Infection Control Policy

Purpose of Policy

This policy is designed to ensure that a safe, healthy environment is maintained at KingsWellies Nursery. The nursery recognises that infections can spread quickly amongst children in childcare environments therefore we will endeavour to ensure that infections are controlled and good health and hygiene practices are maintained at all times.

KingsWellies Nursery has a duty to protect the health, safety and welfare of all users and employees as well as a duty of care. In addition to this, the prevention and control of infection is essential in helping to establish a safe and secure environment in which children can learn and develop through play.

Who is Responsible?

It is the responsibility of the Nursery Director to ensure that any children, parents and members of staff who have a contagious illness are excluded from the nursery for the recommended period of time.

The Nursery Director has a responsibility to inform parents and carers when their child enters the setting with a contagious illness. The Nursery Director must also inform all parents if more than 10% of the children attending the setting have a contagious illness.

All members of staff have a responsibility to ensure that any children who arrive at the setting unwell are adequately cared for. The child's parent / carer must speak to management / senior staff before a decision is made with regards whether the child should remain at nursery or go home.

All members of staff have a responsibility to ensure that they do not attend the nursery session if they have an infectious illness. This will assist KingsWellies Nursery in preventing the spread of any infectious illness.

How the Policy will be implemented

KingsWellies Nursery aims to prevent the spread of infectious illnesses and infections by adhering to the following procedures:

- Excluding children with infectious illnesses and infections for the recommended period of time (please see the NHS Exclusion guidelines for further information on this)
- Excluding all members of staff with infectious illnesses and infections for the recommended period of time (please see the NHS Exclusion Guidelines for further information on this).
- Identifying signs of illness in children and staff whilst they are in the setting
- Informing parents / carers of sick children that their children are ill and arranging for them to be collected at the earliest opportunity.
- Limiting the contact of sick children with other children until they can be collected from the setting, taking into account the sensitivity of the situation and that the child does not feel victimised as a result of any action taken.
- Preventing the spread of infection by adhering to the Nursery's Health and Safety Policy, Personal Hygiene Policy and Food Safety Policy.
- Reporting incidences of certain infections to other parents and members of staff whilst maintaining the anonymity of all children and members of staff involved.

The following are the types of infections that would be reported to parents and members of staff:

- Head Lice
- Measles
- Chicken Pox
- Mumps
- Meningitis
- Whooping Cough

Staff will highlight the importance to parents, that if their children have not been immunised then they will be in a high risk category if an infectious illness presents itself in the setting. Parents have the right to choose whether or not they will send their child to the setting. This is particularly relevant in cases of:

- Measles
- Mumps
- Rubella
- Whooping Cough

Monitoring of children and members of staff where there has been exclusion for signs of the same illness will be ongoing.

All cases of infectious illnesses are recorded in an illness form and are signed by the child's parent or carer on collection of the child.

Members of staff who become unwell during working hours will immediately be sent home and a relief member of staff called in to ensure ratios of staff and children are maintained.

Dealing with Children who become Unwell

In accordance with Nursery registration guidelines, children will not be admitted into the setting if they are showing signs of any ailment that could be contagious or could affect the Nursery's ability to care for the child and the other children in attendance. Similarly, any member of staff who attends work showing signs of any ailment that could affect their ability to carry out their duties, will be sent home and a replacement member of staff called in to cover the minimum child to adult ratios.

Children who become unwell during the course of the session will be made comfortable and will be cared for by a member of staff until their parent or carer can collect them. The dignity of the child will remain paramount and the child will be treated very sensitively, but the setting will put measures in place to ensure that the risk of the illness spreading is minimised.

In instances where any medication is administered as a form of treatment, such medication will be administered in accordance with the administration of medication policy and will only be administered with the express permission of the child's parent. Any and all administration of medication will be recorded on the medicine administration form.

Where the parent or carer cannot be contacted, the Nursery will contact the child's emergency contact (details provided on the registration form). The person collecting the child will be asked to sign any records, for example, illness form and administration of medication form.

Exclusion Guidelines

In cases where a child, parent or member of staff is known to have contracted a contagious illness or infection that could affect other children or staff, the nursery will implement the following exclusion guidelines:

- Any child who has an illness that results in a greater need for care than members of staff can provide and who may be placing other children at risk, will be excluded until such time as treatment has been received and the child is feeling better.
- Any member of staff who has an illness that affects their ability to carry out their duties and who may be placing children or other members of staff at risk, will be excluded until such time as treatment has been received and they are feeling better.
- Any child or member of staff showing signs of fever, lethargy, or difficulty breathing or any other manifestations of severe illness, will be excluded until such time as a diagnosis has been made and treatment received and they are feeling better.
- Gastric upset: exclusion for 48 hours after last attack of vomiting or diarrhoea.
- **The exclusion period for all other Infections / Viruses will be as recommended by NHS and HPN within the “Exclusion Criteria for Childcare and Childminding Settings.” These Exclusion Criteria are displayed throughout the nursery and are sent home with all Nursery Induction Packs.**

All infectious illnesses must be reported to the Nursery Director who will advise of any exclusion period and make the decision to inform other parents and staff members.

Minimise Sources of Contamination

- We will ensure all nursery staff have Food Hygiene Certificates or other training in food handling.
- We store food that requires refrigeration, covered and dated within a refrigerator, at a temperature of 5°C or below.
- We wash hands before and after handling food.
- We clean and disinfect all food storage and preparation areas.
- Food is bought from reputable sources and used by recommended date.

To Control the Spread of Infection

- We ensure good hand washing procedures (toilet, handling animals, soil, food)
- Children are encouraged to blow and wipe their own noses when necessary and to dispose of the soiled tissues hygienically.
- Ensure different cloths and towels are kept for different areas.
- We cover all cuts and open sores.
- We wear protective clothing when dealing with accidents. (e.g. gloves and apron)
- A protocol is in place that is followed regarding contact with blood and bodily fluids.
 - Gloves and apron worn
 - Soiled articles sealed in a plastic bag.
 - Staff aware of procedures for the prevention of HIV infection.

To Raise Awareness of Hygiene Procedures

- Inform all attending adults of the existing policy and procedures
- Insure that student induction includes this information.
- Provide visual instructions where possible for ease of understanding.

To Prevent Cross – Contamination

- Ensure that adults and children have separate toilet facilities.

To Prevent the Persistence and Further Spread of Infection

- Ensure that dedicated sinks are clearly marked.
- Be vigilant as to signs of infection persisting or recurring
- Ask parents to keep their child at home if they have an infection, and to inform the nursery as to the nature of the infection.
- Remind parents not to bring a child to nursery who has been vomiting or had diarrhoea until at least 48 hours has elapsed since the last attack.

Management of Clinical waste

All clinical waste will be disposed of in an efficient and professional manner, thus reducing waste to landfill sites. We will work in partnership with a local clinical waste disposal company to ensure the best and most effective service.

Although not hazardous, nappies' (in large quantities) can be offensive and cause handling problems, therefore the waste will be removed and transported in appropriate containers and taken back to the trust base for appropriate disposal by Sanitary Hygiene Services.

Protect Your Business from E. coli O157

E.coli O157 Fact Sheet - ACC Version 9. 12-09-12

Bacteria, such as E. coli O157 may cause serious illness or death. They may enter your food business on raw meat, or fruits and vegetables which have been in contact with the soil. They are invisible to the naked eye, so they can easily spread to other foods without you realising.

This is known as cross contamination and is one of the most common causes of food poisoning. It happens when harmful bacteria are spread onto ready-to-eat food from other foods, surfaces, hands or equipment.

If your business handles food which could be contaminated with E. coli O157 in the same establishment as ready-to-eat food, there will be greater risk. Raw meat, fruit and vegetables which have been in contact with the soil, and are not supplied as ready-to-eat, must be handled as if they are contaminated by E. coli O157. This includes potatoes, carrots, onions, leeks, swede, parsnips, cabbage, marrows, squashes, radishes, spring onions, lettuce, celery, parsley (and other fresh herbs), fennel, artichoke, cucumber, mushrooms, melons, strawberries. This is, however, not an exhaustive list.

This factsheet highlights the strict measures that are necessary to control E. coli O157. Local authority enforcement officers will consider these measures as part of their inspections.

Note: The key control measures involve:

- separation of raw and ready-to-eat foods by separation of work areas, equipment,
- packaging and cleaning products
- effective cleaning and disinfection of contaminated items
- personal hygiene and handling practices (including hand washing technique).

If ready-to-eat foods are exposed to the risk of E. coli O157 contamination, enforcement officers will take appropriate action to protect customers. Depending on the situation, the officer may impose one or more of the following control measures;

- the prohibition of certain activities
- immediate cleaning and disinfection of surfaces, equipment and utensils
- quarantine, rework, disposal or seizure of food
- modification of food preparation activities
- retrieval of customer's meals or product withdrawal or recall

Always Separate

The best way to prevent E. coli contamination is to ensure separate work areas, surfaces, and equipment for raw and ready-to-eat foods as follows:

Work areas: Provide separate working areas ('clean' areas) for the preparation of ready-to-eat food where raw meat or unwashed fruit/vegetables are forbidden. Ideally separate staff should be allocated to such areas but this may not be practical in which case staff should be provided with clean protective clothing for work in the 'clean' area, or the ready-to-eat food preparation should be carried out at the start of the working day/shift.

Storage: Use separate storage and display facilities, including refrigerators and freezers for raw and ready-to-eat foods. Where separate units are not provided, the ready-to-eat areas should be sufficiently separated and clearly identifiable. A colour coded shelf system (with corresponding guide) labels or a refrigerator diagram may assist. Whilst items such as tomatoes, peppers, marrows and strawberries may have surface contamination and are not considered 'clean' until peeled and/or washed, the risk is considered lower and they should be stored away from more likely contaminated items such as dirty root vegetables like carrots and potatoes etc. and raw meat, but also away from ready-to-eat foods such as cooked meats and desserts.

Equipment: Use separate machinery and equipment, such as vacuum packing machines, slicers and mincers, for raw and ready-to-eat foods. Where this equipment is used for ready-to-eat food, it should be kept in the designated clean area.

Utensils: Separate dedicated chopping boards, equipment and utensils must be used for raw and ready-to-eat foods. These should be easily identifiable, e.g. colour coded with corresponding chart or suitably marked.

Packaging: Packaging materials for ready-to-eat foods should be stored in a designated clean area and the outside surfaces of any wrapping materials for ready to-eat food brought into a clean area must be free from contamination. Items such as cling-film used for ready-to-eat foods must be kept separate from materials used for raw meats or potentially contaminated fruits and vegetables which have not been washed.

Hand Contact Surfaces/Items: Cash registers, weighing scales and other equipment which staff are required to touch should not be shared by staff handling ready-to-eat food and staff working in other areas. You should provide separate equipment for use with raw food and ready-to-eat foods. A single piece of such equipment may be used if appropriate measures are taken to prevent the spread of bacteria, e.g. if a cash register is kept outside the clean area, staff from the clean area must wash their hands after using it or before returning to the clean area.

Cleaning products: Separate cleaning materials, ideally colour coded, including cloths, sponges and mops should be used in the designated clean area. Use disposable, single-use cloths wherever possible.

Clean and Disinfect

Effective cleaning and disinfection destroys bacteria and stops them spreading to food. There are two suitable ways to disinfect contaminated areas or items:

1. **Chemical Disinfection of sinks and work surfaces** - Where you have no choice but to use a work surface or sink for raw and ready-to-eat food, these must be effectively cleaned and disinfected between tasks. This involves carrying out a 'two-stage cleaning process' as follows:

1st Stage - clean surfaces with an appropriate 'food safe' cleaning product which removes grease, visible dirt, food particles and debris, and rinse to remove any residue.

2nd Stage – disinfect using a 'food safe' product which meets the standard of **BS EN 1276:1997, or BS EN 13697:2001**. Ensure you follow the manufacturer's instructions in relation to the correct dilution and contact time for the chemical to be effective in killing bacteria and thereafter rinse with drinking water, if required.

Note: If you use a single sanitiser designed to clean and disinfect at the same time you will have to carry out the same two stage cleaning process with that product.

2. **Heat Disinfection of Equipment and Utensils** - Food containers, chopping boards, knives and other equipment and utensils will always require disinfection by heat after use if they are to be subsequently used for ready-to eat food preparation. Heat is one of the best ways of killing bacteria, but the temperature and contact time must be sufficient to destroy harmful bacteria.

A commercial dishwasher can be used to wash raw food equipment alongside items which will be used for ready-to-eat foods (Otherwise separate cleaning processes for the raw food equipment and the ready-to-eat equipment will be necessary).

Note: Dishwashers must be thoroughly cleaned (including jets and filters) at suitable frequencies, it must be in good working order, fit for purpose and the appropriate setting must be used.

Cloths - The safest way of cleaning is to use single-use, disposable paper towels. If, however, re-useable cloths are used, you must have separate, clearly identifiable cloths for clean areas, .e.g. a colour coded system. Without such a system, cloths must be single use only. All re-useable cloths must be washed and disinfected to remove grease, visible dirt and food particles. This should be achieved by using an appropriate cleaning agent and subsequently boiling them, or washing them on a hot cycle at 82°C or above. They must then be suitably dried.

Handle Food Hygienically

It is vital for staff to follow good food handling and personal hygiene practices to help prevent harmful bacteria spreading to ready-to-eat food by cross-contamination.

Food Preparation

Additional care should be taken when handling foods such as carrots, onions, and cabbage if they are to be eaten as a ready-to-eat food (without cooking). For example, grated carrot used in a side salad or as a constituent of coleslaw. The surface layer of carrots may have numerous cracks and crevasses which could harbour E. coli O157. They must be washed to remove contaminants, then peeled and rinsed before grating. Thereafter strict separation control is required between these prepared foods and raw foods to ensure they are not exposed to a risk of contamination from any unwashed/unprepared root vegetables or raw meat.

Some fruit and vegetables such as unwashed/unprepared tomatoes, grapes, apples, pears, raspberries and blackcurrants are less likely to have been in contact with the soil and will therefore be less likely to be contaminated with E. coli O157. Less stringent washing of these types of food is acceptable although care is required to prevent contamination prior to consumption.

Handwashing

Effective handwashing using a recognised technique, E.g. from the Department of Health or the NHS, is always required prior to handling ready-to-eat foods in order to control cross-contamination. It must also occur after: going to the toilet, handling any food that may be a potential source of E. coli O157, hand contact with equipment or other surfaces that may have been in contact with raw foods, handling waste, eating and cleaning.

The use of non-hand-operable taps is strongly advised, but if they are not available, taps should be turned off using a paper towel. A non-hand-operable mixer tap is convenient for providing water at the desired 45°C for effective handwashing.

Soap must always be available and should be in liquid form from a dispenser. Soaps which conform to BS EN 1499:1997 are recommended.

Single use towels from a dispenser are considered best for drying hands hygienically. They should be disposed of in a manner which does not cause recontamination of the hands, e.g. in a foot pedal operated bin.

Note: Anti-bacterial hand gels should not be used instead of thorough handwashing, but only as an additional measure after handwashing. A range of **free online training videos** including correct handwashing technique are available to view at <http://www.food.gov.uk/business-industry/caterers/hygiene-videos>

Handling Food - Safety Tips:

Keep hands clean to prevent contamination.

Minimising direct contact with food will reduce the risk of harmful bacteria spreading. Handle food with regularly cleaned and disinfected tongs and other utensils.

Wear clean protective clothing. Frequently change contaminated outer protective clothing (e.g. aprons and gloves) and wash hands thoroughly before putting on clean clothing and entering a clean area used for handling and storing ready-to-eat foods.

Use disposable gloves but change them between tasks, as well as at every break and when they become damaged. Wash hands thoroughly before putting gloves on and after taking them off.

If it's not possible to have separate preparation areas for raw and ready to eat foods, use 'time separation' as a control i.e. handle/prepare all raw meats or unprepared vegetables at a specific time separate from ready-to-eat preparation (with disinfection of areas and equipment afterwards).

For more information on good food hygiene please refer to the food hygiene information pack at www.food.gov.uk/goodbusiness. Alternatively, contact your local council Environmental Health Service.

Sickness and Illness Policy

At KingsWellies Nursery we promote the good health of all children attending. To help keep children healthy and minimise infection, we do not expect children to attend nursery if they are unwell. If a child is unwell it is in their best interest to be in a home environment with adults they know well rather than at nursery with their peers.

Our procedures

In order to take appropriate action of children become ill and to minimise the spread of infection we implement the following procedures:

- If a child becomes ill during the nursery day, we contact their parent(s) and ask them to pick up their child as soon as possible. During this time we care for the child in a quiet, calm area with their key worker, wherever possible
- We follow the guidance on Infection Prevention and Control in Childcare Settings (Day Care and Childminding Settings) given to us by the Infection Control Team Scotland and the exclusion criteria for 'Childcare and Childminding Settings' (Health Protection Scotland) guidance on exclusion times for specific illnesses, e.g. sickness and diarrhoea, measles and chicken pox to protect other children in the nursery
- Exclusion Criteria for Childcare and Childminding Settings are displayed around the nursery and are also part of the initial induction pack for all children.
- Should a child have an infectious disease, such as sickness and diarrhoea, they must not return to nursery until they have been clear for at least 48 hours.
- We notify the Care Inspectorate as soon as possible and in all cases within 14 days of the incident where we have any child or staff member with a notifiable disease such as food poisoning.
- We inform all parents if there is a contagious infection identified in the nursery, to enable them to spot the early signs of this illness. We thoroughly clean and sterilise all equipment and resources that may have come into contact with a contagious child to reduce the spread of infection.
- We exclude all children on antibiotics for the first 24 hours of the course (unless this is part of an ongoing care plan to treat individual medical conditions e.g. asthma and the child is not unwell). This is because it is important that children are not subjected to the rigours of the nursery day, which requires socialising with other children and being part of a group setting, when they have first become ill and require a course of antibiotics.
- We have the right to refuse admission to a child who is unwell. This decision will be taken by the manager on duty and is non-negotiable.
- We make information/posters about head lice readily available and all parents are requested to regularly check their children's hair. If a parent finds that their child has head lice we would be grateful if they could inform the nursery so that other parents can be alerted to check their child's hair.

Meningitis procedure

If a parent informs the nursery that their child has meningitis, the nursery manager will contact the Infection Control (IC) Nurse for their area and the Care Inspectorate. The IC Nurse will give guidance and support in each individual case. If parents do not inform the nursery, we will be contacted directly by the IC Nurse and the appropriate support will be given. We will follow all guidance given and ensure that the appropriate authority is notified.

Transporting children to hospital procedure

- If the sickness is severe, a designated member of staff should call for an ambulance immediately whilst still ensuring that the child is continued to be comforted and there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together. DO NOT attempt to transport the sick child in your own vehicle.
- Whilst waiting for the ambulance, contact the parent and arrange to meet them at the hospital.
- The most appropriate member of staff must accompany the child and collect together registration forms, relevant medication sheets, medication and the child's comforter. A member of the management team must also be informed immediately.
- The nursery manager/staff member must remain calm at all times. Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance.
- Staff may also require support following an incident.

Immunisation Policy

At KingsWellies Nursery we expect that children are vaccinated in accordance with the government's health policy and their age. We ask that parents inform us if their children are not vaccinated so that we can manage any risks to their own child or other children/staff/parents in the best way possible. The nursery manager must be aware of any children who are not vaccinated within the nursery in accordance with their age.

We make all parents aware that some children may not be vaccinated in the nursery, due to their age, medical reasons or parental choice. Our nursery does not discriminate against children who have not received their immunisations and will not disclose individual details to other parents. However, we will share the risks of infection if children have not had immunisations and ask parents to sign a disclaimer.

Staff vaccinations policy

It is the responsibility of all staff to ensure they keep up to date with their vaccinations for:

- Tetanus
- Tuberculosis
- Rubella
- Hepatitis
- Polio

and keep the nursery informed.

If a member of staff is unsure as to whether they are up to date, then we recommend that they visit their GP or practice nurse for their own good health.

Emergency information

We keep emergency information for every child and update it every six months with regular reminders to parents in newsletters, at parents' evenings, through email, twitter and facebook and a reminder notice on the Parent Information Board.

Exclusion Criteria for Childcare and Childminding Settings

Recommended time to be kept away from daycare and childminding

Main points

- Any child who is unwell should not attend, regardless of whether they have a confirmed infection.
- Children with diarrhoea and/or vomiting should be excluded until they have had no symptoms for 48 hours after an episode of diarrhoea and/or vomiting.
- Coughs and runny noses alone need not be a reason for exclusion but if the child is unwell they should not attend.
- Skin rashes should be professionally diagnosed and a child should only be excluded following appropriate advice.
- Certain individuals exposed to an infection, for example an immunocompromised child who is taking long term steroid treatment or has cancer, may require specific advice from their GP.
- Children should only be excluded when there is good reason. If in doubt contact a member of the Health Protection Team (HPT).
- If an outbreak of infection is suspected the local Health Protection Team should be contacted.

Further information can be found in Infection Prevention and Control in Childcare Settings (Day Care and childminding settings) <http://www.hps.scot.nhs.uk/haic/ic/guidelinedetail.aspx?id=47103>

Information on current immunisation schedule for children can be found at <http://www.immunisationscotland.org.uk/index.aspx>

If you have any questions please contact your local Health Protection Team (HPT)

Name:

Telephone Number:

Infection/Virus	Exclusion period	Comments
DIARRHOEA AND VOMITING ILLNESS		
General advice	Exclude until 48 hours after the diarrhoea and/or vomiting has stopped. Depending on the specific infection, exclusion may apply to: • young children; • those who may find hygiene practices difficult to adhere to; • those who prepare or handle food for others. Your local HPT will advise.	Diarrhoea is the passage of 3 or more loose or liquid stools per day, or more frequently than is normal for the individual. If blood is found in the diarrhoea then the patient should get advice from their GP.
Common Infections		
Norovirus	48 hours from last episode of diarrhoea and vomiting.	
Campylobacter	48 hours from last episode of diarrhoea and vomiting.	Discussion should always take place between the HPT and Nursery
Salmonella	48 hours from last episode of diarrhoea and vomiting.	
Less common infections		
Cryptosporidiosis	48 hours from last episode of diarrhoea and vomiting.	Exclusion from swimming is advisable for two weeks after the diarrhoea has settled
E.Coli O157	Your local HPT will advise.	
Shigella (Bacillary Dysentery)	Your local HPT will advise.	
Enteric fever (Typhoid and paratyphoid)	Your local HPT will advise.	
RESPIRATORY INFECTIONS		
Coughs/colds	Until recovered.	Consider influenza during the winter months.
Flu (influenza)	Until recovered.	Severe infection may occur in those who are vulnerable to infection.
Tuberculosis (TB)	Consult with your local HPT.	Not easily spread by children. Requires prolonged close contact for spread.
Whooping cough (Pertussis)	5 days from commencing antibiotic treatment or 21 days from onset of illness if no antibiotic treatment.	Preventable by vaccination. After treatment non-infectious coughing may continue for many weeks. Your local HPT will organise any contact tracing.
RASHES/SKIN		
Athletes foot	None.	Athlete's foot is not serious. Treatment is recommended.
Chickenpox (Varicella zoster)	5 days from onset of rash.	Pregnant staff should seek advice from their GP if they have no history of having chickenpox. Severe infection may occur in vulnerable children.
Cold sores, (herpes simplex)	None.	Avoid kissing and contact with the sores. Cold sores are generally a mild self-limiting disease.
German measles (rubella)	6 days from onset of rash.	Preventable by immunisation (MMR x 2 doses). Pregnant staff should seek advice from their GP.
Hand, foot and mouth (coxsackie)	None.	Contact your local HPT if a large number of children are affected.
Impetigo (Streptococcal Group A skin infection)	Until sores are crusted or healed or until 48 hours after antibiotic treatment has started.	Antibiotic treatment may speed healing and reduce infectious period.
Measles	4 days from onset of rash. Always consult with HPT.	Preventable by immunisation (MMR x 2 doses). Pregnant staff should seek advice from their GP. Severe infection may occur in vulnerable children. Your local HPT will organise contact tracing.
Molluscum contagiosum	None.	A self limiting condition.
Ringworm	Exclusion not usually required.	Treatment is required.
Roseola (infantum)	None.	None.
Scabies	Child can return after first treatment.	Two treatments 1 week apart for cases. Contacts should have same treatment; include the entire household and any other very close contacts. If further information is required, contact your local HPT.
Scarlet fever	24 hours after commencing antibiotics.	Antibiotic treatment recommended for the affected child.
Slapped Cheek Syndrome (Erythrovirus B19)	None.	Pregnant staff should seek advice from their GP. Severe infection may occur in vulnerable children.
Shingles (Varicella zoster)	Exclude only if rash is weeping and cannot be covered, e.g. with clothing.	Can cause chickenpox in those who have not had chickenpox. Pregnant staff should seek advice from their GP.
Warts and Verrucae	None.	Verrucae should be covered in swimming pools.
OTHER INFECTIONS		
Conjunctivitis	None.	If an outbreak occurs contact local HPT.
Diphtheria	Exclusion will apply. Always consult with your local HPT	Preventable by vaccination. Your local HPT will organise all contact tracing.
Glandular Fever	If unwell.	
Head lice	None.	Treatment is recommended only in cases where live lice have definitely been seen. Close contacts should be checked and treated if live lice are found. Regular detection (combing) should be carried out by parents.
Hepatitis A or E	Exclude until 7 days after onset of jaundice (or seven days after symptom onset if no jaundice).	Your HPT will advise.
Hepatitis B and hepatitis C	None.	Blood borne viruses that are not infectious through casual contact.
Meningococcal meningitis/septicaemia	Until recovered. HPT will advise.	Meningitis C is preventable by vaccination. There is no reason to exclude siblings and other close contacts of a case. Your local HPT will provide advice for staff and parents as required and organise all contact tracing.
Meningitis* due to other bacteria	Until recovered.	Hib and pneumococcal meningitis are preventable by vaccination. There is no reason to exclude siblings or other close contacts of a case. Your local HPT will give advice on any action needed.
Meningitis viral	Until recovered.	Milder illness. There is no reason to exclude siblings and other close contacts of a case.
Mumps	Five days from onset of swollen glands.	Preventable by vaccination (MMR x 2 doses).
Threadworms	None.	Treatment is required for the child and all household contacts.

References: Guidance on Infection Control in School and other Child Care Settings Poster, HPA, April 2010. Definition of diarrhoea <http://www.who.int/topics/diarrhoea/en/>

Outdoor Education Policy

Published	October 2014 (V1)
Revised	Session 2017/18



Outdoor Education Policy (NCS: 2.2, 2.3 & 3.5)

At KingsWellies Nursery we are committed to the importance of daily outdoor play and the physical development of all children regardless of their age and stage of development. We provide outdoor play in all weathers. Where possible and appropriate, we make outdoor activities accessible to children with learning difficulties and disabilities to ensure inclusive use of the outdoor area.

We recognise that children need regular access to outdoor play in order to keep fit and healthy, develop their large and fine motor skills, experience learning in a natural environment and access sunlight in order to absorb vitamin D more effectively.

The outdoor areas, both within the nursery grounds and in the local community have a wealth of experiences and resources which help children to develop in a variety of ways, including independence, exploration and investigative skills, risk taking and self-esteem, all of which support children to develop skills now and for the future.

We ensure all areas are safe and secure through close supervision and the use of robust risk assessments and safety checks. Where possible and appropriate, we plan and encourage play that helps children understand and manage risks. This type of play allows children to explore and find their own boundaries in a safe environment with supportive practitioners. Staff are informed of the importance of safety procedures and are trained appropriately to ensure these procedures are followed effectively.

We obtain parental permission before any child leaves the nursery during the day. This includes short outings into the local community. There is more information in the outings policy.

We plan all outdoor play opportunities and outings to complement the indoor activities and provide children with purposeful activities that support and follow individual children's interests. There is a balance of both adult-led and child-initiated opportunities to enable children to learn and practice new skills, knowledge and behaviours.

We use this policy alongside the following policies to ensure the safety and welfare of children throughout their time outside:

- Health and safety
- Sun care
- Caring for babies and toddlers
- Lost child policy
- Parents and carers as partners
- Supervision of children
- Child Protection
- Outings.