



# **HEALTH AND HYGIENE POLICY & PRACTICE**

Date of last review: July 2024

Date of next review: July 2025

Darul-ul-Madinah promotes a healthy lifestyle and a high standard of hygiene in its day-to-day work with children and adults. This is achieved in the following ways:

## **HYGIENE**

To prevent the spread of all infection, adults in the group will ensure that the following good practices are observed.

### **Personal Hygiene**

- Hands are washed after using the toilet.
- A box of tissues is available and children are encouraged to blow and wipe their noses when necessary and that soiled tissues are disposed of hygienically.
- Children are encouraged to shield their mouths when coughing.
- Staff have a small bottle of anti-bacterial liquid to use on their own hands once they have wiped children's noses etc.
- Paper towels are used and disposed of appropriately.
- Hygiene rules relating to bodily fluids are followed with particular care and all staff and volunteers are aware of how infections, including HIV infection, can be transmitted.

### **Cleaning and clearing**

- Any spills of blood, vomit or excrement are wiped up and disposed of down the toilet or in the sealed yellow bin in the accessible toilet. Disposable gloves are always used when cleaning up spills of bodily fluids. Floors and other affected surfaces are disinfected using chlorine or iodine bleach diluted according to the manufacturer's instructions. Fabrics contaminated with bodily fluids are thoroughly washed in hot water.
- Spare laundered pants and other clothing are available in case of accidents and nappy bags are available in which to wrap soiled garments once they have been rinsed through.
- All surfaces are cleaned daily with a disinfectant cleaner, after each nappy change.

## **Food**

Darul Madinah will observe current legislation regarding food hygiene, registration and training.

The manager, and staff will hold a level 2 certificate in Food Hygiene.

In particular, each adult will:

- Always wash their hands under running water and with soap before handling food and after using the toilet.
- Adhere to best practise when storing food.
- Not be involved with the preparation of food if suffering from any
- Infectious/contagious illness or skin trouble.
- Never smoke anywhere in or around Darul Madinah premises.
- Never cough or sneeze over food.
- Use different cleaning cloths for kitchen and toilet areas.
- Wash fresh fruits and vegetables thoroughly before use.
- Use separate chopping boards for the preparation of foods.
- Tea towels will be kept scrupulously clean and washed between each session.
- All utensils will be kept clean and stored in a dust free place, e.g. closed cupboard or drawer.

- Cracked or chipped china will not be used.
- Always wear a disposable apron, and tie hair back when preparing food.
- All staff will receive Food Hygiene level 1 training or the next available course.

## **HEALTH**

### **Outdoor Play**

Children will have the opportunity to play in the fresh air daily in the outside play area, the children will be allowed to free flow between the indoor and outdoor environment, when weather permits.

### **Garden Guidelines**

- Check the garden is safe – gates are secure before setting up.
- Ride-on toys need to stay in designated areas.
- Bikes may be scooted, balanced on, used in a variety of ways to improve physical skills/balance, but should not be used as battering rams into others or buildings/walls.
- Correct staff/child ratio in garden at all times.
- No touching fungus. Remove any if we know it to be poisonous.
- No climbing on fences or outside of steps.
- No weapons.
- Children should not pick flowers, vegetables/fruit etc. indiscriminately, but can be picked for appropriate purposes, daisy chains, displays, gifts for helpers etc.
- When climbing on climbing equipment no nursery dressing up clothes or toy to be used unless for specific purposes e.g. fire fighters.
- Red and white tape indicates an area not in use.
- A risk assessment should be carried out in adverse weather conditions to decide on the suitability of outside activities.

## **Food**

At Dar-ul-Madinah nursery we provide a well-balanced diet (snack); all fruit or vegetables are fresh and washed before serving on the premises.

Darul Madinah will provide pasteurized milk which will be supplied fresh on daily basis and children will be encouraged to drink from a glass.

Drinks of water or milk will be provided throughout the day.

Although children will not enter the kitchen during cooking activities, but will take part in preparations of cooking. The adults will provide healthy & wholesome food ideas (recipes books will be used) promoting and extending the children's understanding of a healthy diet.

### **Food Allergy Prevention Admission**

On admission parents are asked to inform Darul Madinah of any allergies, medical conditions or cultural restrictions. All this information is compiled onto alert sheets and is kept in Darul Madinah registers to ensure confidentiality is maintained. The alert sheets are available for the staff to view and check throughout the day.

If at any point Darul Madinah management is made aware of any child who suffering from any kind of allergy/ food allergy maximum measures will be put in place to minimise the risk of an incident occurring and avoiding cross contamination.

### **Snack time**

The children are offered milk or water and fruit or vegetable. If any child has an allergy to these items an alternative must be offered. Snack times must be supervised.

### **Celebrations**

In the event of the child's birthday, if the parents wish to provide a cake for their child/ children they are advised to check with the manager for any allergies.

### **Illness**

Parents are asked not to bring into Darul Madinah any child who has been vomiting or had diarrhoea until at least 48 hours has elapsed since the last incident, and to adhere to our communicable disease's information sheet, outlining advised incubation periods. Staff must also comply with these exclusion periods. Infectious illnesses such as chicken pox, conjunctivitis, head lice etc, **cannot** return to nursery until your child has been medically treated and has followed the required exclusion period on the Childhood illness chart and can cope with Darul Madinah day. There is also an infection control guidance poster displayed on the parents notice board.

### **Disease/ Illness Minimal Exclusion Period**

Please inform the Manage if your child has any of the following:

- Chicken Pox At least 5 days until the spots scab over
- Measles Minimum of 7 days from appearance of rash
- Mumps Until the swelling has reduced and in no case less than 7 days
- Rubella (German Measles) For 7 days after the rash has shown
- Whooping Cough For 3 weeks from the first signs. If treated with antibiotics, the child can return when doctor gives the all clear
- Hand Foot and Mouth No minimal exclusion but the child must be able to cope with Darul Madinah day. Symptoms include high temperatures and generally feeling unwell
- Diarrhoea and vomiting Until diarrhoea and vomiting has settled. (child must be free from diarrhoea and sickness for at least 48 hours)
- Head lice None
- Impetigo Until lesions have crusted/ healed
- Meningococcal Meningitis Contact CCDC for advice any action needed
- Scarlet fever 5 days from commencing antibiotics
- Slapped cheek (fifth disease) None
- Salmonella Until diarrhoea and vomiting has settled (neither for last 24 hours)
- Tuberculosis CCDC will advise on action
- Threadworm None
- Tonsillitis None

- Gastro-enteritis, food poisoning, salmonellas, Dysentery. Until authorised by the doctor or District Community Physician
- Poliomyelitis See above
- Typhoid fever See above
- Ringworm None
- Scabies None

Parents are asked to keep their children at home if they have any infection, and to inform Dar ul Madinah as to the nature of the infection so that Darul Madinah can alert other parents, and make careful observations of any child who seems unwell.

If the children or staff are unwell, the children will not accompany their parents/carers to work in the nursery.

Cuts and sores, which have been covered at home, may not be renewed at the nursery. Darul Madinah will ensure that the first aid equipment is kept clean, replenished and replaced as necessary. A checklist is in place to ensure this. Sterile items will be kept sealed in their packages until needed.

If a child should become unwell while attending Darul Madinah every effort will be made to contact firstly the parent and then the person designated as emergency contact, to ask for the child to be collected. The child will be looked after and comforted by a member of staff until collection. Parents will be expected to collect their child as soon as possible. The child may return when they can cope with Darul Madinah day.

In an emergency situation an ambulance will be called and one member of staff will accompany the child. Parents will be contacted and informed of the destination. Darul Madinah will immediately inform Ofsted by either telephone or letter of any food poisoning affecting 2 or more children.

## **Medication**

Medication is normally taken to mean specifically prescribed for the treatment of noncontagious conditions and non-prescribed medication for temperature and pain control. However, Darul Madinah will work in partnership with parents in the administration of non-prescribed medication, such as;

- Calpol
- Aqueous cream
- Sudacream

When the parent approaches Dar ul Madinah to administer non prescribed medication it must be authorised by the manager.

The parents are required to fill out a medication form as with prescribed medicines.

Darul Madinah needs to know exactly how long the medication has been given to the child and they will follow guidance that is provided with the medication. Medication required to be kept in the fridge, will be stored in the main kitchen fridge, clearly labelled with the child's name and dosage.

Wherever possible the staff or level 3 qualified staff member will administer medication.

**If ever in doubt, Darul Madinah reserves the right to refuse to administer non prescribed medication and request that the parent seeks further medical advice**

If a child is on prescribed medicine the following procedures will be followed: -

- If possible, the child's parents will administer the medicine.
- Written information will be obtained from the parent, giving clear instructions about the dosage and administration of the medication and permission for a member of staff to follow the instructions. The batch number on the medication must be recorded and checked before administration.
- All medication needs to come in the original packaging fully labelled with the prescription details.
- A medication form will be available to log in the following details: name of child receiving medication: times that the medication should be administered; time of last dose; date and time when medication is administered; dosage given; together with the signature of the person who has administered each dose; witness and finally the parents signature.
- If a child has not had the medication before, it is advised that the parent/carer keeps the child at home for the first 48 hours to ensure there is no adverse effect as well as to give time for the medication to take effect.
- Children taking prescribed medicines must be well enough to attend the setting.
- If the administration of prescribed medication requires medical knowledge, staff training will be provided by the relevant health professionals.
- With regard to the administration of life saving medication such as insulin/adrenaline injections or the use of nebulisers, it is essential that parents provide the fullest information about the child's illness, including instructions from the child's doctor, in order to give prompt and effective care.
- With regards to the administration of life saving medicine such as insulin/adrenalin/epi pens or the use of nebulisers, the position will be clarified by reference to the Nursery's insurance company.

The medicine form should be signed by the parents at the end of each day and any medicine returned to parents. These procedures are written in line with current guidance in "Managing medicines in Schools and Early Year's Settings".

### **Children who have a long-term medical condition**

Inhalers will be kept in a secure place within each room and be in original containers and clearly labelled to indicate:

- Child's name
- Photo of the child
- Date of prescription
- Expiry date
- Dosage
- Any other relevant information

Epi Pens will be stored in Box files with the child's photo clearly displayed. They will be stored in the office area so that the child's confidentiality is maintained. The box files will clearly identify what

action needs to be taken when and after administering the Epi Pen. A risk assessment is carried out for each child with a long-term medical condition that requires ongoing medication. This is the responsibility of the senior staff and key person. Other medical or social care personnel may need to be involved in the risk assessment.

Parents will also contribute to a risk assessment. They should be shown around the setting, understand the routines and activities and point out anything they think may be a risk factor for their child. The training needs of the staff will be part of the risk assessment. A health care plan will be drawn up for the child with the parent, outlining the key person's role and what information must be shared with other staff that cares for the child. The health care plan should include what to do in an emergency. This will be reviewed every six months.

### **Medication on outings**

If children who are going on outings require medication, a risk assessment must be carried out. Medication for a child will be taken in a sealed plastic box which is clearly labelled with the child's name, name of medication, inside the box a copy of the consent form and a card to record when it has been given and by whom.

On returning to the setting, the card will be stapled into the record book and the parent will sign it. If the child requires hospital treatment, the medication should be taken with them with all of the correct details and consent forms. This procedure is read alongside the outings policy. (Legal framework – medicines act 1968)

### **Information Sources**

- Parents will have the opportunity to discuss health issues with nursery staff and will have access to information available to the nursery.
- Darul Madinah will maintain links with health visitors and gather health information and advice from the local health authority information services and/or other health agencies.

### **Sick child**

If a child is taken ill whilst at nursery they will be cared for in the Quiet corner. The child's parent/carer will be contacted to arrange collection (or the next emergency contact listed for the child). If their parent/carer cannot be contacted, the child will be cared for and their symptoms observed by nursery until the end of the session. Any medical attention need during this time will be given.

### **Procedure to be followed in the event of an accident**

1. If a child or a member of staff has an accident, they will receive first aid by a member of staff or a first aider, at the discretion of the qualified member of staff in the room.
2. Gloves will be worn when dealing with blood or any other bodily fluids and then disposed of in the appropriate manner.
1. The wound will be cleaned with sterile cloths or a cold compress applied. No ointments will be applied.

2. If hospital attention is needed then the manager will make that decision and will take the necessary action to get that person to hospital.
3. If the accident has happened to a child the person in charge will inform the parents immediately.
4. An accident form will be completed and the accident will be recorded in the log. It will state the time it happened, the date, how it happened, first aid given and will be signed by two members of staff.

### **Procedures for children with allergies**

When children start the setting, the parents are asked if their child suffers from any known allergies. This is recorded on their registration form and on an allergy form in the food preparation (kitchen) area and in the register.

If a child has an allergy, a medication/allergy form is completed by the parent/carer before they start. The following details are recorded:

- The allergen
- The nature of the allergic reaction-e.g. rash, breathing problem, anaphylactic shock
- What to do in case of a reaction
- Control measures – prevent contact with allergen  
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This will be kept in the child's personal file and all staff will be notified of allergen and treatment required. Parents or other professionals will train the staff on how to administer special medication.