

# Working practices for child protection



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Analyse the working practices that are needed to ensure that adults and children are protected

Children are full of energy and curiosity about their environment. When they are excited about a new experience, or see something they want to do, children may not think about any possible risks or dangers.

We need to be able to recognise the challenges to the safety and well-being of children and young people how we work with, and help to minimise the risks, without taking away from the excitement of their activities.

Any setting should have clear policies and procedures about all aspects of Health and safety. All rooms and equipment used by children and young people should have regular checks to ensure that everything is working well and is safe. Some of these checks are required by law, for example, for electrical equipment must be checked by a qualified electrician every year.

Nursery managers should make sure that health and safety checks are carried out as required. In a case of an accident, failure to check equipment could have serious implications.

Many items that are used every day have been tested for safety by the British Standards Institution. An item with a BSI means that it has been independently tested and confirmed that the product complies with the relevant standard and is safe and reliable.

Supervision is a key way in which we can keep children safe. Everyone who is responsible for children must know where they are and what they are doing

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at all times. Sometimes, adults perceive that supervision is about preventing children from doing things, but it can also be viewed positively, often supervised children can be encouraged to do more interesting and challenging activities.

At the start of a session, some settings can become very busy. Parents may be dropping their children off, sometimes with siblings, and adults in the setting may be stretched because they are keeping an eye on the children who are already there while at the same time greeting children and their parents who are arriving. To avoid children wandering out, or staff not knowing which children have arrived, it is essential that all settings must have a register. Up-to-date register is essential in case there is a fire and must importantly to ensure that staff child ratios are correct. It is important that we look for ways of reminding parents not to keep doors open or to let out any children other than their own. This in itself may not be adequate and so many settings also have doorbells or buzzers that indicate when a door has been left open or is being held open.

In the same way that we must create systems to help children on arrival, so we must think about children's safety as they leave the setting. Many of the systems that are put in place for when children arrive should also be followed when children leave. It is essential that children are not released into the care of someone who is not their parent or carer unless prior notification, preferably written, has been given by the child's parent.

Physical activities is essential for children of all ages as it helps to strengthen many parts of the body including to heart, lungs, bones and muscle. Physical activity is also linked to children's need for stimulation.

What children eat and drink has a important effect on children's health.

Children should have a majority of their calorie and nutrient intake at meal times. To help adult plan meal, the Food Standards Agency has produced the " eatwell plate". This can be useful when considering the composition of a healthy meal.

Hand washing is an essential activity that children need to learn. It needs to become part of the physical care routine so that children automatically wash their hands after going to the toilet, before meals and after playing outdoors.

The setting should have writing provision for:

- accident records
- head lice
- sickness
- medication administration
- consent for, and the recording of, medicine administration
- food hygiene
- sun safety

Some children have ongoing medical conditions or infections that are controlled by medication and so parents may ask to be administered medicines. As medicines are a potential hazard procedures should be put in place to ensure that correct dosages are given and they are kept out of reach of children when not being administered. For any complaints that arise as a result of an incident, correct and full documentation is imperative for both children and staff alike.

Explain the various Health and safety requirements needed for children attending the setting at the various different stages of child development

Health and safety in the nursery environment requires adaptation for each different age group of children that are catered for in the setting. In every nursery, there are, in most circumstances, different rooms allocated for the various age groups enrolled. For example:

- babies for 6 weeks to 12 months
- young toddler for 12 months to 2 years
- older toddlers for 2 years to 3 years
- pre-school for 3 years up to 5 years.

Health and safety for babies in the nursery setting is concerned with scrupulous hygiene and a safe and secure room with clean, comfortable cots which conform to the British Safety Standards. The baby room differs from others in the nursery, as is an environment where many nurseries endeavour to create a home experience for the baby. This is achieved by incorporating

homely furniture, mobile and brightly coloured posters. The health and safety implication for babies are concerned with hygiene, particularly surrounding the preparation of formula milk, nappy changing and application of barrier cream.

Care must be taken by staff when making up baby milk to follow the instruction for making, storing and use of the made up milk.

Baby milk may be made up in advance providing it is immediately cooled under running water then stored under refrigeration and used within 24 hours.

Baby milk which has been made up in advance may be warmed gently in a jug of warm water immediately before given it to the baby. Un-finished bottles of feed must be discharged.

It is very important that all the equipments used to feed and to prepare feeds for babies, has been thoroughly cleaned and sterilised before use. Cleaning and sterilising equipment removes harmful bacteria that could grow in the feed and make the babies ill.

Some mothers who are breast-feeding their babies will bring in express milk either frozen or fresh to be used in bottles. The Department of Health recommend the following guidelines for storage:

- up to 5 days in the main part of a fridge at 4 grade C or lower
- up to 2 weeks in the freezer compartment of a fridge
- up to 6 months in a domestic freezer at minus 18 grade C or lower.

Breast milk that has been frozen can be defrosted in the fridge and can be served straight from the fridge rather than warmed.

The Health and safety requirements for toddlers and pre-schools children different from babies, primarily because they are much more mobile and therefore different types of health and safety requirements apply.

Measures to maximise protection for toddlers and pre-schoolers should include:

- safety covers for plug sockets
- secured windows which prohibit toddlers attempting to climb through them
- shatterproof film should be fitted to windows and any glass structures within the nursery building that may pose a shattering hazard
- doors should contain filled safety guards to prevent children from trapping their fingers
- kitchen and office areas should have safety gates which remain locked to prevent access to dangerous areas
- equipment should be safety and securely stored to prevent toddlers accessing materials that may injure them
- equipment should be age-appropriate and safe for toddlers.

Indoor rooms should be 18-21grade C to avoid children becoming too hot. In warm weather, this temperature may be difficult to maintain and so extra

fluids must be offered and children may be encouraged to take off layers of clothing.

The need for fresh air is about children having opportunities to breathe more oxygenated air. Indoors this means ensuring that is adequate ventilation, which also helps prevent the spread of airborne infections. Being outdoors in the fresh air seems to help children sleep and eat better. It also means that children have access to sunlight which can support their intake of vitamins D. It is important to take measures to protect children's skin from direct sunlight in the summer months, in order to prevent later skin cancer, but being out in the sunshine in the winter months is good for children. Light is important to their health because it is linked to hormone regulation and this in turn can affect the sleeping patterns as well as the mood.

The healthy development of babies and children's brains requires that they must have opportunities for stimulation. This means providing play and activities as well as opportunities for sustained interaction and conversation with adults.

Evaluate the various different procedures required to cover good hygiene within the nursery setting

The nursery setting will have a policy and detailed procedures for infection control based on the advice from the Health Protection Agency.

Hand washing is now of the most important ways of controlling and spread of infections, especially that cause diarrhoea and vomiting, and respiratory disease. The recommended method is the use of liquid soap, warm water



and paper towels. Always wash hands after using toilet, before eating it handling food and after handling animals. All cuts and abrasions need to be cover with waterproof dressings.

Coughing and sneezing easily spread infections. Children and adults should be encourage to cover their mouth and nose with a tissue. They need to wash hands after using or disposing of tissues. Spitting should be discourage.

Personal protection equipment. Disposable non-powdered vinyl or latex-free CE-marked gloves and disposable plastic aprons must be worn where there is a risk of splashing or contamination with blood/body fluids. Goggles should also be available for use if there is a risk of slashing to the face.

Cleaning of the environment, including toys and equipment, should be frequent, thorough and follow national guidance.

Head lice spread by moving from one head to another. If there is an outbreak of head lice in the setting, it is important to inform parents so that everyone can check their hear. This includes the adults. It is also advisable for hair to be tied up wherever possible to prevent the spread.

In the case of a child with a development of a illness, they should be discharged from the nursery setting as soon as possible. While the child is waiting to go home they should be isolated from this peers to minimise the risk of infection to other children.

For a good hygiene in the nursery, it is necessary to briefly touch upon immunisation schedules to ensure protection from childhood disease. In

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situation where a child's immunisation scheme is not up-to-date parents should be encourage to contact their GP surgery to organise the immunisation that need to be carried out.

In many settings, parents provide nappies for their children. Like many areas of physical care, this will be liked to parents preferences. Nappies need to be changed promptly and regularly so that babies do not develop a rash. It is important to carefully follow the procedures in the setting for changing nappies to prevent cross-infection. Disposable gloves and aprons should be worn and then take off when finished. This is to avoid any traces of urine or stools being passed to babies via the hands or clothes. Dirty nappies must be immediately disposed. The area where the baby is changed need to be cleaned throughly so that it is ready for the next change. Nappies should be changed in an area which is separate from areas in which food is eaten and prepared.

It is essential that food is prepared, stored and cooked hygienically as gastrointestinal infection can be particularly dangerous for children due to their immature immune system which are susceptible to viruses and bacteria.

There are three principles involved in the prevention of food poisoning caused by bacteria:

- prevent the bacteria from coming into contact with food
- prevent bacteria already present on food from multiplying and spreading to other items

- elimination of bacteria on food

Preventing the bacteria from coming into contact with food is an important first step. The kitchen area must be kept clean and anyone handling foods must have good personal hygiene. The first step that should be taken before touching any food is to wash the hands with hot water and soap. Some raw products, such as meat, poultry and fish, are likely to contain bacteria. To prevent these bacteria from coming into contact with other foods, it is essential to use separate chopping boards and knives and also to wash hands after touching them. Food brought into the nursery for children's packed lunches should be stored appropriately at the correct temperature. Cooked food should be checked to ensure that they are the correct temperature before being given to children.

Identify the contents of a first aid kit, and discuss the importance of staff training in paediatric first aid

First aid is the immediate response to someone with an injury or illness. First aid can prevent the injury or effects of the illness worsening.

Children have accidents and may suddenly become ill and need help. We don't need to work in a children's setting for long before we can be in a situation requiring someone with first aid knowledge and skills. Everyone who works with children should have paediatric first aid qualification. First aid certificates need to be renewed every 3 years from the completion date of the previous qualification. It is nursery manager responsibility to keep records which are regularly reviewed to ensure that staff receive training

when it is required. Ofsted has certain requirements of anyone working in an early years setting, as regards their first aid skills.

The responsibility of a paediatric first aider are simple. They need to:

- assess any situation in which a child appears to be ill or injured to:
- ensure own safety, and protect from any danger
- prevent further injury to the child
- prevent injury to other children
- provide care to a child who has suddenly become ill or injured until either
- medical help or an ambulance arrives
- the child's parent or carer arrives
- prevent the condition of the child becoming worse, if possible
- provide reassurance to the injured or ill child and other children who may be involved in the area
- pass on information about the event or circumstance to the professional help or parents.

First aid equipment, including personal protection, such as gloves and aprons, is only useful if we can identify it and use it appropriately. Wherever these are children, there should always be a well-equipped first aid kit, kept in place where anyone needing it will quickly find it. A first aid kit should always be taken on outings away from the setting.

The first aid kit should contain:

- disposable vinyl or latex-free gloves to protect first aider's hands from blood and other fluids
- scissors for cutting dressing and possibly clothing
- sterile gauze pads for covering small bleeding wounds
- adhesive tape for securing gauze pads
- large combined dressings for covering large wounds
- stretch bandage for holding dressing in place on body or limbs
- crepe bandage for supporting sprains to leg or ankle
- triangular bandage or sling for supporting arm or shoulder injury
- safety pins for fastening stings
- eye dressing for covering eye to protect it after injury or foreign body entry
- plasters for covering small cuts or grazes
- plastic bags to disposing soiled waste
- notepad and pen to making notes about the incident
- list of items in the first aid kit for checking the contents.

References assessment 3

### 3. 1 Personal experience

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Open study college, Nursery management level 3, study guide, page 47-52

### 3. 2 Personal experience

Open study college, Nursery management level, study guide, page 53 - 54

### 3. 3 Personal experience

Food hygiene course

Open study college, Nursery management level 3, study guide, page 56 - 60