

# [We must promote good health of all children](https://assignbuster.com/we-must-promote-good-health-of-all-children/)

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Cu1535- Promote children’s welfare and well-being in the early years. 1. 1- Welfare requirements - Within your setting you should safeguard and promote Children’s welfare, we must take necessary steps to ensure this. We must promote goodhealthof all children within our care and take steps to prevent the spread of infection from others within our care and take appropriate action when they are ill. We must ensure that there are suitable people and staffing levels are appropriate to ensure safety to all children.

The premises, environmentand equipment must be suitable to cater for the children, these include outdoor and indoor spaces, furniture, equipment and toys and they must be safe and suitable for the children in your care, age/stage appropriate. Your safeguarding/admissions/settling in policies should be kept up to date. It is important for all staff to read all policies and procedures. As a practitioner you should be aware of nutrition needs and plan healthy meals/snacks for children and on some occasions give advice to parents.

You should be aware of portion sizes, this is important because children can still become overweight on healthy foods if they are given too much. Every setting should have routines they should reflect the varying needs of all children within your group especially in terms of sleep and rest. All routines should allow time for outdoor play for all ages. Routines also need to be flexible enough to allow the children to finish their task.

Under the EYFS we as practitioners observe children during physical play this is to note the skills that they are showing and what could be emerging, this gives us important information on how we can support the child such as providing new activities, toys or simply encourage the child. Within the EYFS it is important to work closely with parents, we can find out their child’s needs, you can also provide support and advice on topics, sleep, toilet training and nutrition. EYFS Statutory requirements, Safeguarding and promoting children’s welfare. Principles in to practice card 1. Health and Well-being. 1. 2- To report something in my setting it is ourresponsibilityto go straight to our manager of the nursery and report it to her. If our manager isn’t in we would go to our deputy manager. If you any very unusual case that both of these people weren’t in we would go to the welfare officer who also helps with the running of the nursery. 2. 2i) When receiving a child into the setting you must make sure you have undergone risk assessments on the building, toys, equipment etc. You must speak to parents to get parental guidance so you are aware of risks with the child e. . allergies. Make sure you have all parent and carers emergency contact numbers. Parents must fill in the forms attaching pictures of the main carers so staff is aware. They must also fill in emergency medicine application forms in case the child falls in in the day. ii) Again risk assessments need to be done if the child is attending an outing with the nursery to somewhere e. g. the park. You must be told if someone different is picking the child up and if you don’t get told from their main carer you cannot let the child go.

If the main carer wants someone else to pick the child up then they must sign a form to say whose picking the child up, the password the number and the name. iii) Main thing when visiting offsite places is risk assessments. You must also make sure you have parent consent of the main carer. Make sure you take each child’s emergency contact numbers and also one member of staff to carry along their mobile phones in case of emergencies. You must take weather related items for all children and the first aid box. The staff ratio must be right according to how many children and their ages. 2. i 2. 5msquared ii- Ratios- 1 adult to 3 children for under 2 year olds 1 adult to 4 children aged 2-3 years 1 adult for 8 children ages 4 and over. 3. 1- Meeting children's basic needs for health and well-being through the resources ; equipment a setting has eg. furniture, cutlery, sinks, staff, advice, doors to get outside etc. Aspects for basic needs .. Foodand diet Water Natural light Rest and sleep Warmth Fresh air Exercise, physical activity, stimulation Hygiene - safe environment for hand washing, table cleaning, toilet areas, awareness of cross infection and contamination ..

Security - safe environment: risk assessed/monitored, familiar to support confidence Love, affection, continuity, stability Professional knowledge ; training External professionals - GPs, health visitor, dentist etc. 3. 2- The roles of key health professionals are as follows: School nurse she will offer advice to parents on the health of their child and she will carry out hearing checks, give advice on to parents regarding their child’s toilet habits, advice on skin tags and rashes gives information on weather the child needs to visit their GP, this can all be done in the setting.

They will monitor the health of the children and also give advice to schools. Audiologist they will measure the child’s hearing levels Dentist gives advice on how to keep teeth and gums healthy. Dieticians work to give advice on the right nutrients the child needs and from what foods to get them. My setting also has leaflets available for parents to take home on healthy eating. GP doctors are usually one of the first people to see the child and can give care to the child and thefamilyand make the right referrals if required.

Paediatrician they specialise in working with children with health problems. Speech therapists they help children with speech, language andcommunicationdifficulties and give advice to schools and parents. Physiotherapists help children with coordination and their movement resulting from injury, illness or a medical condition. In my setting they will come in and give advice to the teaching assistant who works with a child with a medical problem. Psychologists will work with a child with behavioural or learning difficulty. Optometrist will examine the child’s eyesight and prescribe glasses if needed.

Health visitor they work with GPs to give support to children and their families they can give advice to parents regarding the child’s health and development. Parent’s permission must always be given before making referrals. 4. 3- Storing breast milk. There are two ways to store breast milk you can store it in a fridge or a freezer, the department of Health guidance for the storage of breast milk is as follows: • You can store breast milk in a fridge at 4 oc or lower for up to 5 days. • You can store breast milk in the freezer compartment of a fridge for up to 2 weeks. You can store breast milk in a domestic freezer for up to 6 months at minus 18 oc or lower. If breast milk has been frozen you can defrost it in the fridge and it can be served straight from the fridge rather than being warmed up. This will prevent bacteria. Preparation of formula milk. If parents bring in made up bottles of formula milk, they need to be placed in the fridge immediately and used within 24 hours this will ensure that it is kept cold to prevent bacteria and to keep it safe. Before we prepare formula milk clean all the work tops and wash your hands.

The bottles, teats and brushes should be thoroughly cleaned and sterilised according to the manufacturer’s instructions, this will stop the risk of a baby getting sickness and diarrhoea. Best practice means that formula milk should be made up fresh for each feed, if the baby leaves formula milk this should be thrown away, this will prevent a baby becoming ill. If you are unable to make up formula milk fresh then you can use ready to use liquid formula or by filling a hot thermos with hot water (at least 70 oC in temperature)and the formula can be made up as required.

To make formula milk boil fresh water in the kettle, let it cool down, but for no more than half an hour, using hot water will kill any harmful bacteria in the powder. Put the boiled water in the bottle first and add the required amount of powder, follow manufacturer’s instructions on the ratio of powder to water. Cool the formula quickly to feeding temperature by holding the bottle under cold running water with the cap on. 5. 1- The number of children in the UK who are overweight or obese is on the increase. As early years practitioners we have to provide healthy and nutritionally appropriate food for the children that we care for.

This is a requirement of the EYFS. Most settings provide a meal or snack within their provision. The Food Standards Agency recommends that a healthy nutritious diet should contain foods from the following groups each day – starchy foods, fruit and vegetables, protein-rich foods and dairy products. A balanced diet should contain foods from these groups, all meals snacks and drinks taken throughout the day must provide children with the sufficient nutrients to make up a balanced diet. When diets become unbalanced children could suffer from health problems or become lacking in a certain vitamin.

When planning meals for children, there are several things to take into consideration to ensure that meals contain sufficient nutrients and calories. We need to look at the food labels to see how much salt, calories, fat are in foods and whether the food is rich in nutrients. Children aged 1 to 3 should have no more than 2g of salt a day and children aged 4 to 6 no more than 3g. Calorie measure how much energy is in food. The amount of calories a child needs changes as they grow and will also depend on how much physical activity they take.

It is important that children do not exceed the recommended calorie intake as this may cause them to become overweight. In turn children who do not eat enough calories may become underweight. A child aged between 1-3 years should have around1230 calories a day for a boy and 1165 calories for a girl. Fat is a source of energy for children providing it is in nutritious foods. Some foods are higher in nutrients than others if a food is high in calories it should also be high in nutrients. Foods such as crisps, biscuits and sweets are high in calories but low in nutrients and so an unhealthy option.

Children’s stomachs are tiny and so have a limited capacity in can sometimes be hard to make sure they eat enough nutrients before they are full. It is important to ensure children take enough drinks throughout the day to prevent them from becoming dehydrated. Water should always be made available throughout the day and at meal times. Other drinks such as milk, fruit juices and smoothies can also be offered. These drink all contain nutrients and calories so need to be included in a child’s daily intake. Fruit juices contain a lot of natural sugar so should be given in moderation to help prevent tooth decay.

Fruit drinks, squashes and fizzy drinks also contain a lot of sugar and are high in calories and low in nutrients so should not be offered to children on a daily basis. As children’s stomachs are small they may require snacks between meals so that they can take in sufficient nutrients. Snacks should also be included in the overall daily food intake and should be nutritious. Giving snacks to close to meal times can ruin a child’s appetite and we need children to eat well at meal times. Good healthy snacks for children include fruit and vegetable, dried fruit, cheese and crackers, yoghurt, breadsticks and rice cakes.

When planning meals for children it may be useful to look at their food intake for a whole week to ensure that they are eating a varied healthy diet and to consult with the child’s parents 5. 2- You need to follow carer’s instructions on their child’s food allergies or intolerances as it could be because of their religion/culturewhich mean they don’t eat certain foods out ofrespect. My diversity, equalityand inclusion policy states that you include, respect and embrace all children and their families from whatever background, religions or beliefs they have.

If you don't adhere to a child's intolerances - what may happen if you give a diabetic, a coeliac or a child with a nut allergy something that they/their body/system cannot cope with? - serious illness or death. 5. 3- Religious or cultural group Dietary requirements Islam Islamic dietary requirements specify that only Halal (lawful) Lamb, Beef and Chicken, fish and shellfish can be consumed. Pork is a forbidden food to the Islamic people, Haram (unlawful). Cheese which has been certified Halal or cheese that does not contain rennet such as vegetarian cheese (rennet is extracted from the mucosa of a calf’s stomach, added to some cheeses).

Eggs, tea, coffee and cocoa are permitted in the Islamic diet. Ramadan is a time of spiritual reflection and worship and is the Islamic month of fasting for in the 9th month of the Islamic calendar and lasts 29/30 days. Muslims adults refrain from eating and drinking in the daylight hours. Judaism Jewish dietary requirements specify that only kosher Lamb, Beef and chicken can be consumed. Kosher is not a style of cooking, it is the way in which the food is prepared or the way the animal is killed, (in accordance with the Jewish law) Fish is to be eaten with the fins and scales.

Cheese, milk and yoghurts are never eaten in the same meal even drinks containing milk are forbidden when eating meat dishes. Eggs are permitted providing they do not have any blood spots. Shellfish is forbidden to the Jewish people. Tea, coffee and cocoa are permitted. The saucepans, crockery and cutlery that have been used to cook non kosher food are then believed to be non-kosher utensils and are not to be used for kosher foods. Yom Kippur is the holiest day of the Jewish people and is celebrated on the 9th day of the Hebrew month of Tishrei.

The Jewish adults fast for 25 hours. Sikhism Due to the fact that there are vast grey areas on what Sikhs eat and refrain from eating, in our setting we require written confirmation from parents on what their child is/is not allowed to eat The general consensus is that Sikhs are free to choose whether to adopt a vegetarian or meat diet. Therefore Sikhism dietary requirements vary from one Sikh person to another however it does specify that Halal and Kosher meat is forbidden (Halal and Kosher is meat that is ritually slaughtered).

Some Sikhs will eat any meat, some will not eat beef. Some Sikhs will eat fish including shell fish where others will not. Again this principle is the same when it comes to eating eggs; it all depends on whether they have adopted a vegetarian or meat diet. Sikhs who have been initiated into the order of Khalsa by the Amrit ceremony are forbidden to eat any meat or meat products. (Khalsa by the Amrit is a baptism ceremony for sikhs). Sikhs are permitted to drink milk, tea coffee and cocoa. There is no fasting period for Sikhs. Rastafarianism

Due to the fact that there are vast grey areas on what Rastafarians eat and refrain from eating, in our setting we require written confirmation from parents on what their child is/is not allowed to eat Ital (derived from the English word vital) is the name of the Rastafarian diet. The Ital diet widely varies from Rasta to Rasta and there are few worldwide rules to Ital diet. They do not eat pork as they consider the pig a scavenger; some also refrain from eating shellfish for the same reason. Some Rasta’s follow a strict vegan diet, some Rasta’s are strict vegetarians and some will consume beef, chicken, lamb, fish, eggs and cheese.

However all Rastafarians believe that food should be natural, pure and from this earth, therefore they will avoid food that contains additives or food that is chemically modified. Depending on how a Rastafarian follows the Ital diet (strict or relaxed) they are allowed to drink tea, coffee and cocoa, however many avoid caffeinated beverages. There is no fasting period for the Rastafarians. 5. 4- Giving children healthy food is just a part of encouraging children to eat healthily, there are other issues to be considered. We need to be aware of how much food a child needs over the course of a day.

Too much food can cause a child to gain weight and too little food could cause a child to be undernourished. Portion control is important to ensure a child is having the correct amount of food. Showing parents a sample of a days food and working out the calorie content is a good way of seeing how much food children need rather than telling them how many calories they need. Parents are advised early on by professionals if their children’s weight is becoming an issue. There are lots of helpful leaflets and websites that offer parents help to understand what a healthy weight for their child’s height is.

It is important that young children are not made aware of any problems with their weight as this may lead to them having problems with food at a later date. Ideally meal times should be an enjoyable occasion which can be used to talk and catch up on the day’s events. For some families meal times can become a battleground where parents are continuously attempting to get their children to eat a good range of food. As a result of this children can sometimes develop food phobias. We need to watch out for children who are becoming distressed by food or worried about what they eat.

It is important to stay relaxed during meal times. To help keep the atmosphere relaxed families could try to present food in a different way or involve the children in the preparation. Children may be more likely to try new foods if they have helped to prepare the meal. 6. 2- Medicines are stored in our medicine cupboard in the kitchen. If a child brings in medicine we will store it depending on the guidelines on the bottle i. e. in the fridge. Depending on what the medicine is we normally administer liquid medicines to children on a regular basis.

When administering medicine we always make sure we have a witness on hand, they check the name of the child on the medicine packaging and the amount you should be giving, you measure out the amount and then give to the child. We record all this on a form which will then be passed to the main carer at the end of the day to check and sign. 6. 3- The Health and Safety at Work Act 1974 is an Act of the Parliament that as of 2008 defines the, regulation and enforcement of workplace health, safety and welfare within the United Kingdom.

It outlines the responsibility of all to consider and act concerning their own safety and that of others. Not acting in a situation that warrants something done to prevent a possible injury or to remove the threat of a health and safety issue is considered negligent if the action were ‘ reasonably practicable’. Staff are expected to keep areas tidy and clutter free to help avoid dangerous situations. The Act defines general duties on employers, employees, contractors, and persons in general.

The creation of the Health and Safety Commission and Health and Safety Executive which have now joined together gave extensive enforcement powers, ultimately backed by criminal sanctions extending to unlimited fines and imprisonment for up to two years. Under section 7 all employees have a duty while at work to: • Take reasonable care for the health and safety of himself and of other persons who may be affected by his acts or omissions at work; and • Co-operate with employers or other persons so far as is necessary to enable them to perform their duties or requirements under the Act.

The Manual Handling Regulations 1992 make it a legal requirement for schools to carry out Risk Assessments. If lifting or carrying pupils, equipment training should be given. Only lift if necessary and use any appropriate equipment provided. Again training for this should be provided. Share the load if necessary. Bend knees and keep back straight. Schools should have a manual lifting policy. As with the Health and Safety at work act, adults have a responsibility to care for themselves. -portion control -tackling under and overweight children -food phobias

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