CHILDREN OF TOWAN PRESCHOOL

Master Policy Index

Controlled policy set | Version 3.1 | Approved 12 September 2026

INDEX NOTE The complete controlled set contains Policies 01–31. Policy 31 sets the controls for artificial intelligence, children's data and AI-assisted digital content. Printed copies should be checked against the current controlled file before use.

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Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 01

Children's Records and Privacy Notice

PURPOSE Explains what information we hold about children and families, why we need it, how we keep it secure, how long we retain it and how people can exercise their data-protection rights.

Policy	01	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

Setting and data-controller details

For the purposes of data protection law, Children of Towan Preschool is the data controller for the personal information described in this policy.

Address	Porthtowan Village Hall, Beach Road, Porthtowan, TR4 8AU
Telephone	01209 890627 / 07886 356346
Email	childrenoftowan@gmail.com
Data protection contact	Oliver Riddett, Owner and Manager

1. Policy statement

Children of Towan Preschool keeps accurate, relevant and secure records so that children are safe, their needs are met and the setting is managed effectively. We handle personal information in line with the UK GDPR and the Data Protection Act 2018, as amended by the Data (Use and Access) Act 2025, and the current Early Years Foundation Stage (EYFS) statutory framework.

Children's information merits particular protection. We consider the child's best interests, collect only what we need, explain our use of information in clear language and restrict access to people with a right or professional need to see it.

2. Records we hold

Children's information

- Full name, date of birth, address and attendance information.

- Parents' and carers' names, addresses, parental-responsibility information, who the child normally lives with and emergency contacts. Wherever possible we hold more than two emergency contact numbers.
- Health, allergy, dietary, medication, disability, SEND and individual-support information.
- Safeguarding, child-protection, early-help, court-order or social-care information where relevant.
- Learning, development, observations, assessments and transition information.
- Accident, incident, first-aid, medication and intimate-care records.
- Photographs, video or audio used for an approved and explained purpose.

Parent, carer and household information

- Names, addresses, telephone numbers, email addresses, emergency contacts and family relationships.
- Funding and eligibility information, including identifiers required by the local authority or HM Government eligibility service.
- Contracts, invoices, payment information and relevant communications.
- Information about parental responsibility, court orders, collection arrangements and persons authorised to collect.

We usually obtain information directly from parents and carers. We may also receive relevant information from the child, another early-years provider or school, the local authority, health professionals, children's social care, the police or another authorised agency.

3. Why we use information and our lawful bases

We identify a lawful basis before collecting, using or sharing personal information. The basis depends on the purpose and may include:

- **Legal obligation -** to meet EYFS, safeguarding, health and safety, funding, tax, employment and regulatory duties.
- **Contract -** to provide the agreed childcare place, communicate about the service and administer fees.
- **Legitimate interests -** for proportionate day-to-day administration, service improvement, security and communication where these interests do not override the child's or family's rights.
- **Vital interests -** to protect someone's life in an emergency.
- **Consent -** for genuinely optional uses where a clear choice exists, such as specified publicity or promotional images. Consent can be withdrawn for future use.

Health, biometric, ethnicity, religion and some safeguarding information are special-category data. Where we use this information, we also identify an Article 9 condition. This may include substantial public interest for safeguarding, vital interests in an emergency, or explicit consent where consent is genuinely appropriate.

SAFEGUARDING Consent is not the default basis for recording or sharing safeguarding information. Where information is needed to protect a child, we use the appropriate legal basis and do not delay action because consent has not been obtained.

4. How we use information

- To keep children safe, healthy and appropriately supervised.
- To plan for and support learning, development, SEND, medical and care needs.
- To maintain attendance records and follow up unexplained or prolonged absence under the setting's Attendance and Absence Policy.
- To contact parents, carers and emergency contacts and manage authorised collection.

- To claim funded early education and meet local-authority conditions.
- To manage contracts, fees, insurance, complaints and regulatory requirements.
- To transfer relevant records when a child moves, where the transfer is lawful, necessary and secure.

The EYFS now requires providers to have a separate attendance policy shared with parents. This records policy explains how attendance information is handled but does not replace that attendance policy.

5. Photographs, learning journals and publicity

- Images used in a secure individual learning record are limited to the educational or care purpose explained to families and are held on approved systems such as Tapestry.
- Separate, specific permission is obtained for external publicity, websites or social media. Refusal does not affect a child's place or care.
- Staff do not store setting images or records on unauthorised personal devices or accounts.
- Withdrawing consent stops future consent-based use; it may not require removal of information that we must retain or have already used lawfully.

6. Who we may share information with

We share only what is necessary, for a clear purpose, with an appropriate recipient. Depending on the circumstances this may include:

- Parents and carers, subject to the child's rights, parental responsibility, court orders, confidentiality and third-party information.
- Other early-years providers, schools and professionals working with the child.
- Cornwall Council and government services for funding, SEND, early help or statutory functions.
- Children's social care, safeguarding partners, health professionals or the police.
- Ofsted, our insurer, professional advisers, auditors or a court where appropriate.
- Approved service providers acting on our instructions, including secure learning-journal, administration, payment, email, IT-support and storage providers.

We do not sell personal information. We do not share it for another organisation's marketing. If an approved supplier transfers information outside the UK, we require an appropriate legal transfer mechanism and safeguards.

7. Safeguarding and sharing without consent

We may record and share information without consent where this is necessary to safeguard a child or another person, meet a legal obligation, comply with a court order, prevent or detect crime, or respond to a vital emergency. We aim to tell the child and family what we are sharing and why whenever it is safe and appropriate to do so.

We will not inform a person before sharing if this could increase risk, prejudice a police or safeguarding enquiry, lead to evidence being destroyed or otherwise undermine effective safeguarding. Decisions and the lawful basis are recorded. See Policy 03 - Information Sharing and the Safeguarding and Child Protection Policy.

8. Security and accuracy

- Paper records are kept in locked storage and are not left visible in public or shared areas.
- Digital records use approved accounts and devices, strong passwords, access controls, updates, backups and encryption where available.
- Access is restricted by role and professional need; staff confidentiality continues after employment ends.

- Recipients and contact details are checked before disclosure, and sensitive transfers use an approved secure method.
- Records are factual, dated, attributable and updated where necessary. Professional opinion is clearly distinguished from observed fact.
- Any loss, misdirection, unauthorised access or disclosure is reported immediately to the Manager. We assess notification to affected people and the ICO, including the 72-hour ICO deadline where the legal threshold is met.

9. Retention and secure disposal

The EYFS requires records about individual children to be kept for a reasonable period after they leave; providers must set and justify their own retention periods. We apply the schedule below, but retain information longer where safeguarding, legal proceedings, complaints, insurance, funding conditions or another documented reason requires it.

Record type	Usual retention	Notes
Registration, attendance, permissions and routine care records	While attending + 3 years	Longer if linked to safeguarding, a complaint, serious incident or potential claim.
Learning and development records	Until transfer or child leaves	Normally given securely to parents or the next provider; copies are not kept without a documented need.
Safeguarding, child-protection and early-help records	Normally until age 25	Stored separately. Check Cornwall safeguarding guidance before destruction or transfer.
SEND and significant health-support records	Normally until age 25	Retain where needed for continuity, safeguarding or potential later enquiries; avoid duplicating records without purpose.
Accident, incident and first-aid records	While attending + 3 years	May be retained to age 21 years 3 months for serious injury, safeguarding, insurer or potential civil-claim reasons.
Medication administration records	While attending + 3 years	Includes associated parent permissions and instructions.
Complaints records	At least 3 years	Keep at least until after the next Ofsted inspection and longer if the matter remains live.
Funding and financial records	Normally 6-7 years	Follow current HMRC, local-authority and funding-contract requirements.

At the end of the retention period, paper is cross-cut shredded or placed in approved confidential waste; digital information is securely deleted so far as reasonably possible. We keep a destruction log for significant record sets.

10. Access and other data-protection rights

Data-protection rights belong to the child. Because children in our setting are young, a person with parental responsibility will usually exercise those rights for them when this is in the child's best interests. We consider the child's competence, welfare and privacy, any court order, and the rights of other people before disclosing information.

- Request access to personal information (a subject access request). Requests may be verbal or written and are normally answered within one month.
- Ask us to correct inaccurate or incomplete information.

- Ask for erasure, restriction, portability or object to processing where the relevant legal conditions apply.
- Withdraw consent at any time for future processing that relies on consent.
- Ask for information about the lawful basis, recipients, retention and any international transfer safeguards.

These rights are not absolute. We may need to retain or withhold information where an exemption applies, including where disclosure could cause harm, reveal another person's information or prejudice safeguarding. We verify identity and authority proportionately and provide information securely.

11. Data-protection complaints

A concern or complaint should be sent to Oliver Riddett using the contact details above. We provide a clear route for complaints, acknowledge receipt within 30 days, make appropriate enquiries, keep the complainant informed and communicate the outcome without undue delay.

If the matter is not resolved, a complaint may be made to the Information Commissioner's Office (ICO): 0303 123 1113, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF, or www.ico.org.uk.

12. Automated decisions and review

We do not make decisions producing legal or similarly significant effects about a child solely by automated means. This policy is reviewed at least annually and sooner after a legal, regulatory, service or systems change, a serious incident or a material complaint.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Working Together to Safeguard Children 2026 (March 2026)
- ICO: Children and the UK GDPR (updated 15 May 2026)
- ICO: A guide to subject access (updated 16 July 2026)
- ICO: How to deal with data-protection complaints (updated 8 May 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 02

Body Awareness and Personal Boundaries

PURPOSE Builds children's body confidence, voice, privacy and mutual respect through calm everyday practice, while setting clear care, safeguarding and response procedures.

Policy	02	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool teaches body awareness and personal boundaries in a calm, neutral and developmentally appropriate way. Learning is embedded in play, care, relationships and daily language rather than centred on frightening or graphic scenarios. Children are helped to notice their own communication, use words or signals such as 'stop', respect another person's boundary and tell a trusted adult about anything that worries or confuses them.

FOUNDATION MESSAGE My body belongs to me. I can say stop. I listen when someone else says stop. I can tell a trusted adult about anything that worries me.

SAFEGUARDING FIRST A disclosure, injury, coercive or sexual behaviour, repeated concerning pattern, or adult boundary concern is reported to the DSL immediately. Staff do not wait for proof, investigate themselves or use this policy as a reason to minimise a concern.

2. Status and scope

The EYFS does not prescribe a standalone 'body boundaries' lesson or a fixed script. This policy is the setting's chosen approach to PSED, communication, physical development, safeguarding and respectful care. It must be read with Policy 05 (devices and images), Policy 10 (positive behaviour), Policy 16 (safeguarding) and Policy 20 (intimate care).

- It applies to children, staff, volunteers, students, visitors and activities on the premises, outdoors, on outings and online where the setting is responsible.
- It covers whole-body boundaries, optional affection, play, personal space, private and public behaviour, intimate care, health and first aid, images, sexual development and safeguarding concerns.
- The setting's calm approach never overrides a child's right to be heard, an adult's duty to protect, or the need for direct age-appropriate safeguarding education when risk, development or professional advice requires it.

3. Core teaching principles

- **Whole-body awareness -** children learn about comfort, discomfort, personal space, expressions, movement and body signals; safety is not reduced only to underwear-covered areas.
- **Body ownership -** adults use simple messages about the child's body and voice without promising that a child can refuse every essential care or safety action.
- **Stop means stop -** in play and optional affection, adults act on words, signs, moving away, freezing, distress or other communication and help peers stop promptly.
- **Mutual boundaries -** children learn that their voice matters and that another child's voice and body matter too. Boundary teaching does not licence one-sided control.
- **Privacy without shame -** underwear-covered parts and intimate routines are private. Bodies, curiosity and care are discussed factually, not described as dirty, naughty or secret.
- **Trusted adults and telling -** children are reassured they can tell about any touch, image, request, secret or feeling and will not be blamed, even if it involved someone known or a rule was broken.
- **Simple, accurate language -** staff answer genuine questions briefly and truthfully, using clear body words when relevant. Children are not forced to repeat vocabulary or drawn into extended adult-led discussion.

4. Everyday practice

Situation	Adult practice
Play, hugs and tickling	Model asking and noticing: 'Would you like a hug?', 'They moved away, so we stop.' Optional affection ends immediately when the child communicates no, stop or discomfort.
Personal space and rough play	Pause the activity, secure safety, name the boundary without shaming, help each child communicate, then adapt space, intensity, roles or supervision before play restarts.
Private parts and privacy	Explain simply that underwear-covered areas are private and that care or health may sometimes require an adult to help. Protect privacy without implying that other unwanted touch is unimportant.
Questions and curiosity	Respond calmly to what was actually asked. Do not laugh, silence, interrogate or add frightening detail. Check understanding and seek DSL or family support if the content or context concerns staff.
Self-touch or nudity	Treat developmentally typical curiosity without shame. Redirect to privacy, hygiene and the current activity. Consider frequency, context, distress, compulsion, injury, coercion and developmental stage.
Images and devices	Follow Policy 05. Children are never asked to pose in a state of undress or during intimate care, and personal devices are not used to photograph or record children.

5. Care, comfort and necessary safety action

- Warm, proportionate touch is part of early-years care. Staff follow the child's cues, remain professionally visible and never withhold comfort merely to avoid appropriate touch.
- For nappy changing, toileting, first aid, medication or health support, staff explain what they are doing, seek the child's cooperation, offer real choices where possible and protect dignity. They follow the authorised care or medical plan and do not falsely present an essential action as optional.
- If a child resists routine care, the adult pauses where safe, explores communication, sensory, pain, trauma or relationship needs, involves a familiar adult and reviews the plan with parents. Required care is not forced for convenience.
- Immediate safety can require proportionate physical intervention. Under EYFS this is limited to averting immediate danger of injury, or managing behaviour where absolutely necessary. Every use is recorded and parents are told the same day or as soon as reasonably practicable.
- No adult asks a child to keep touch, care or communication secret. Confidentiality is explained as information shared with people who need to help, not as secrecy between an adult and child.

6. Sexual development and behaviour

Young children may show ordinary curiosity about bodies, nudity, bodily functions, roles and their own private parts. Staff consider the individual child's development, communication, disability, culture, context and the effect on every child. One behaviour is not diagnosed in isolation, and an unsubstantiated concern is not dismissed simply because some curiosity can be typical.

- **Usually lower concern -** spontaneous, playful curiosity between children of similar development; easily redirected; no force, fear, distress, injury or secrecy; and not unusually explicit for the child's stage.
- **Needs closer assessment -** repetition despite calm boundaries, significant preoccupation, public behaviour that does not reduce with support, unusual knowledge, a marked age/development/power difference, or an unclear account.
- **Immediate safeguarding concern -** coercion, threats, force, secrecy, distress, pain, injury, penetration, use of objects, adult involvement or imagery, a disclosure, or behaviour that appears abusive or exploitative.

Staff do not label a child as an abuser, victim, sexualised or manipulative. Every child involved may need protection and support. The DSL considers immediate safety, parents, records, children's social care, police, health advice and specialist assessment under Policy 16.

7. Responding when a boundary is crossed

1. **Stop and protect.** End the contact or activity calmly, separate only as necessary and attend to injury, distress and supervision.
2. **Use clear language.** State what must stop and why in simple terms: 'They said stop. We keep bodies safe.' Avoid public shame, forced apologies or asking children to resolve a safety issue alone.
3. **Hear each child separately.** Use open prompts only where needed to understand immediate safety. Do not repeatedly question, put words in a child's mouth or arrange a confrontation.
4. **Record facts.** Record time, context, observed behaviour, exact words or communication, people present, response, injury and relevant prior pattern. Distinguish observation from interpretation.
5. **Report and decide.** Tell the session lead and DSL immediately where the behaviour, disclosure, pattern or adult conduct could be safeguarding-related. A concern may be referred without parental consent where protection requires it.
6. **Plan support.** Adjust supervision, space, routines, language, care or individual plans; involve parents and professionals where safe; and review whether the response protected all children without exclusion or stigma.

8. Responding to a disclosure

- Stay calm, listen and take the child seriously. Say they were right to tell and are not to blame.
- Do not promise secrecy. Explain that information will be shared with adults who can help.
- Do not investigate, confront anyone or ask leading, repeated or detailed questions. Clarify only what is needed for immediate safety.
- Record the child's exact words or communication, the context, date, time, observations and action, then report immediately to the DSL or make a direct urgent referral if delay or conflict makes that necessary.
- Parents are normally informed unless doing so could increase risk, prejudice an enquiry or conflict with statutory advice.

9. Inclusion and family partnership

- Teaching and response are adapted for age, development, SEND, sensory processing, trauma, home language and communication. Words are supported with signs, visuals, modelling and repetition where helpful.

- A child's disability or limited speech never reduces the weight given to distress, behaviour or non-verbal communication. Equally, difference is not treated as evidence of abuse.
- Families are told the setting's messages and invited to share language, care practices and concerns. Cultural or religious context is respected, but no practice overrides the child's welfare, equality or safeguarding duties.
- Parent partnership does not mean seeking permission before making a necessary safeguarding referral or sharing proportionate information to protect a child.

10. The Archetype Approach lens

The Rebel/Friend axis is a reflective practice framework, not a statutory category, diagnosis or label. Healthy boundary learning holds autonomy and relationship together: the Rebel capacity supports a clear voice and self-assertion; the Friend capacity supports empathy, cooperation and respect for another person's voice.

- Adults ask whether a child needs more support to express a boundary, tolerate another person's boundary, repair relationship or feel safe enough to communicate.
- Staff avoid turning confident refusal into 'defiance' or compliance into proof that a child is comfortable. They observe the child beneath the behaviour and remain open to correction.
- The lens supports professional curiosity; it never replaces safeguarding assessment, SEND assessment or evidence-based professional advice.

11. Responsibilities, training and review

- **Manager/DSL -** Oliver Riddett ensures this policy aligns with safeguarding, intimate care, behaviour and device procedures; leads referrals, training, records and quality review.
- **Deputy/Deputy DSL -** Beth Morgan supports consistent practice and acts when the Manager/DSL is unavailable or involved in the concern.
- **All adults -** model boundaries, respond to communication, provide safe care, report concerns immediately and work within their training and role.

Induction and safeguarding refreshers cover child communication, professional touch, intimate care, developmentally typical and concerning sexual behaviour, disclosures, recording and referral. This policy is reviewed annually and sooner after a concern, complaint, incident, change in practice evidence or statutory update.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Working Together to Safeguard Children 2026 (March 2026)
- Child abuse concerns: guide for practitioners (DfE guidance)
- Information sharing advice for safeguarding practitioners (May 2024)
- NSPCC Learning: sexual development and behaviour in children (updated 28 July 2026)

Approval / Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 03

Information Sharing

PURPOSE Sets out when and how staff obtain, use and share information so that children are protected, families are treated fairly and disclosures are lawful, necessary, proportionate and secure.

Policy	03	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool treats information about children and families as confidential, but confidentiality is not absolute. Effective information sharing is essential to identify need, coordinate support and protect children. Data protection law provides a framework for appropriate sharing and must not be used as a reason to leave a child at risk.

CORE RULE If a child may be at risk, staff must not wait for proof, a particular threshold or parental consent before discussing the concern with the DSL and sharing relevant information with an appropriate safeguarding agency where necessary.

2. Scope and responsibilities

This policy applies to all staff, agency workers, volunteers, students, committee members and contractors who may encounter personal or confidential information. It covers verbal, written, digital, photographic and recorded information.

- **All staff -** recognise concerns, record accurately, maintain confidentiality and consult the DSL promptly.
- **Designated Safeguarding Lead -** Oliver Riddett, Owner/Manager. Leads safeguarding decisions, referrals, liaison and records.
- **Deputy DSL -** Beth Morgan, Deputy Manager. Acts when the DSL is unavailable and supports consistent practice.
- **Manager/data-protection contact -** ensures lawful bases, security, processor arrangements, complaints and breaches are managed.

In an immediate emergency, call 999. If the DSL is unavailable and delay may increase risk, a practitioner must contact children's social care or the police directly and record the action taken.

3. Governing principles

- The child's safety, welfare, rights and best interests are the first consideration.
- Be open with children and families about sharing wherever it is safe and practical to do so.
- Share early enough to be useful. Do not wait for certainty where information may help safeguard a child.
- Use a valid Article 6 lawful basis; for special-category data also identify an Article 9 condition and any relevant Data Protection Act 2018 condition.
- Share only information that is relevant, accurate, timely and no more than necessary.
- Verify the recipient, use a secure method and protect the identity of anyone who may be placed at risk by disclosure.
- Record the decision, the lawful basis, what was shared or withheld, with whom, why and the outcome - including decisions not to share.

4. Consent, transparency and confidentiality

Safeguarding situations

Consent is not required to share personal information where a child is at risk or there is a perceived risk of harm, provided there is another lawful basis. For a private childcare provider, relevant bases may include legal obligation, legitimate interests or vital interests; public task may apply only where a specific statutory function supports it. Safeguarding of children and individuals at risk is a recognised condition for processing special-category information in appropriate circumstances.

Where safe, staff should explain what is being shared, with whom and why. We do not tell a child, parent or carer before sharing where this may increase risk, lead to retaliation or evidence being lost, compromise a police enquiry or otherwise undermine safeguarding.

Non-safeguarding support

Where there is no safety concern and a family has a genuine choice - for example, a voluntary referral for additional support - consent will usually be sought before confidential information is shared. Consent must be specific, informed and capable of withdrawal. Withdrawal does not invalidate earlier lawful sharing.

Common-law confidentiality

Information given in confidence may be shared where disclosure is required by law or an overriding public interest, such as protecting a child, justifies proportionate disclosure. Each decision is considered on its facts.

5. Decision-making procedure

1. **Identify the purpose and urgency.** What concern, need, duty or request makes sharing necessary? Is anyone in immediate danger?
2. **Check the information.** Separate observed facts, the child's words, third-party information and professional opinion. Correct material inaccuracies where possible without obscuring the original record.
3. **Consult promptly.** Discuss with the DSL or Deputy DSL. Seek safeguarding or data-protection advice if uncertain, but do not allow advice-seeking to create harmful delay.
4. **Identify the legal route.** Record the Article 6 basis, and an Article 9/DPA condition for special-category information. Consider confidentiality, human rights, court orders and any specific statutory power or duty.

5. **Consider transparency and objections.** Tell the child and family where safe. Consider any objection, but override it where sharing is necessary to protect a child. Record the reasoning and legal basis.
6. **Minimise and secure.** Share the relevant parts rather than an entire file unless the full file is genuinely required. Confirm the recipient's identity, role and secure contact details.
7. **Record and follow up.** Record what was shared, date/time, recipient, method, purpose, lawful basis, authorising person, family notification and outcome. Seek feedback where appropriate.

6. When we may share information

Safeguarding and welfare

- With Cornwall children's social care, safeguarding partners, health services or the police to identify, assess or respond to possible harm or unmet need.
- Where a child is missing, repeatedly absent, moving between areas or settings, or where patterns across children, adults, locations or contexts may indicate risk.
- About relevant adults where their circumstances or behaviour may affect a child's safety or welfare.
- To support early help where information sharing is necessary and appropriate; consent is generally sought if there is no safeguarding risk and the service is voluntary.

A formal section 17 or section 47 Children Act process does not have to be underway before relevant information can be shared to safeguard a child at possible risk of harm.

Regulatory, legal and operational sharing

- With Ofsted, the local authority, funding or eligibility services where required for inspection, regulation, funding or statutory functions.
- With another early-years provider, school or professional where necessary for continuity of education, care, SEND, health or safeguarding.
- In response to a court order, statutory requirement or properly authorised request.
- With approved processors providing secure learning-journal, administration, payment, IT or storage services under written terms.

7. Requests from agencies

Staff refer external requests to the Manager or DSL unless the procedure expressly authorises them to respond. Before disclosure we check the requester's identity, organisation, purpose, authority, urgency, required information and secure return route. A request headed 'police' or 'social care' is not automatically sufficient reason to disclose an entire record.

We may also share proactively when necessary to safeguard a child. Where a disclosure is legally compelled, we preserve the request or order with the disclosure record.

8. Parents, parental responsibility and children

Separated parents and carers

We do not assume that the parent with whom a child lives has sole authority over information. We check parental responsibility, any court order, the child's best interests, confidentiality and the rights of other people. A parent with parental responsibility does not automatically receive every document: the information is the child's, and exemptions or third-party rights may limit disclosure. Disputes are referred to the Manager and legal or safeguarding advice is sought where needed.

Children in care or other legal arrangements

Where a child is looked after, subject to a placement order, special guardianship order or another arrangement, we confirm who holds parental responsibility and what decision-making authority has been delegated before sharing, while acting immediately if safeguarding requires it.

The child's voice and data rights

We listen to the child in a way suited to their age and understanding. Data-protection rights belong to the child. A person with parental responsibility will usually exercise them for a young child where this is in the child's best interests, but the child's competence, welfare and privacy remain central.

9. Secure sharing methods

- Use approved accounts, systems and devices; never personal messaging, email or cloud storage unless expressly authorised for an emergency and secured immediately afterwards.
- Double-check names, addresses and attachments before sending. Use encryption, a secure portal or password protection for sensitive material where appropriate; send a password separately.
- Verify telephone callers and avoid discussing confidential information where conversations may be overheard.
- Use tracked or signed-for delivery for necessary paper transfers and mark them private and confidential.
- Record receipt or follow up when the information is urgent or safeguarding-critical.

10. Recording the decision

The child's confidential record must show:

- the date and time, concern or purpose, and level of urgency;
- the information considered and its source;
- the decision to share or not share and the reasons;
- the Article 6 lawful basis and, where relevant, Article 9/DPA condition;
- who authorised the decision and any advice obtained;
- exactly what was shared, with whom, when and by what secure method;
- whether the child or family was informed, any objection and why notification was withheld if applicable; and
- the response, agreed actions and follow-up.

Safeguarding records are stored separately from routine learning records and transferred securely to the next appropriate organisation when required. The sending setting records the transfer and receipt.

11. Mistakes, breaches and disagreements

- A misdirected email, lost record, unauthorised conversation or inappropriate disclosure is reported immediately to the Manager and handled under the data-breach procedure.
- The Manager contains the breach, records the assessment and considers notification to affected people and the ICO, including the 72-hour ICO deadline where the legal threshold is met.
- Professional disagreement must not delay protection. Staff use escalation procedures and record the differing views and outcome.
- A complaint about information sharing is handled through the setting's data-protection complaints process and acknowledged within 30 days.

12. Training, monitoring and review

Information sharing forms part of induction, safeguarding training and supervision. The DSL reviews the quality and timeliness of relevant records and disclosures. This policy is reviewed at least annually and sooner following new legislation or guidance, a serious incident, a data breach, a complaint or a significant change to systems or local safeguarding arrangements.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Working Together to Safeguard Children 2026 (March 2026)
- Information Sharing: advice for safeguarding practitioners (May 2024)
- ICO Data Sharing Code of Practice (statutory code)
- ICO: 10-step guide to sharing information to safeguard children (current guidance)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 04

Transfer of Records

PURPOSE Explains how we provide timely, accurate and secure information when a child moves to another early-years setting or school, while protecting confidentiality and maintaining an audit trail.

Policy	04	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool supports continuity of learning, care, SEND provision and safeguarding when a child moves. We involve parents and carers wherever it is safe to do so, listen to the child in an age-appropriate way, and share only information that is relevant, accurate, necessary and proportionate.

A transfer is not treated as routine administration. Before information is sent, we identify the purpose, recipient, lawful basis, confidentiality considerations and secure method. Safeguarding information is never withheld merely because consent has not been obtained where sharing is needed to protect a child.

PRIORITY Urgent safeguarding information must reach the receiving organisation in time to protect the child. Administrative delay, a missing signature or uncertainty about consent must not leave a child at risk.

2. Scope and responsibilities

- **Key person -** prepares an accurate, strengths-based transition summary with the parent or carer and the child where appropriate.
- **SENCO -** coordinates relevant SEND information, strategies, reasonable adjustments, professional advice and any EHC plan material.
- **Designated Safeguarding Lead (DSL) -** Oliver Riddett. Decides and oversees the transfer of safeguarding information and liaises directly with the receiving DSL.
- **Deputy DSL -** Beth Morgan. Acts when the DSL is unavailable and delay could affect safety.
- **Manager/data-protection contact -** checks lawful handling, security, retention and any unusual or disputed disclosure.

This policy covers paper and digital learning records, progress information, attendance, health and care information, SEND records and confidential safeguarding material. It should be read with Policies 01 and 03 and the Safeguarding and Child Protection Policy.

3. Preparing for transition

- Confirm the child's leaving date, destination, main contact and the receiving setting's DSL and SENCO details where relevant.
- Discuss the transition with parents or carers and explain what information is normally shared and why. Record any views or objections.
- Give the child accessible opportunities to express wishes, feelings, interests and concerns through conversation, observation, play or communication aids.
- Check whether parental responsibility, a court order, care arrangement, restricted address or safeguarding risk affects contact or disclosure.
- Review the record for accuracy, distinguish fact from professional opinion and correct material errors without erasing the audit trail.
- Agree practical transition support, including visits, familiar objects, visual information or a phased handover where appropriate.

4. Learning and development information

The transition summary is concise and useful. It describes the child rather than attaching unnecessary evidence. It may include:

- the child's strengths, interests, communication, relationships, routines and current learning priorities;
- the parent's or carer's contribution and the child's views and preferred ways to communicate;
- languages used at home and in the setting, with progress considered in the home language where relevant;
- health, allergy, dietary, medication, intimate-care or accessibility information required for safe continuity;
- identified SEND, graduated support, effective strategies, professional involvement and relevant EHC plan information;
- attendance information where it is relevant to continuity, need or safeguarding; and
- the most recent statutory assessment information, where applicable.

Written or photographic evidence is not required merely to prove routine EYFS assessment. Images or artwork are included only where they add genuine value and their transfer is lawful and expected.

5. Statutory EYFS points

Situation	Required approach
Progress check at age two	If a child moves between ages two and three, the setting where the child has spent most time would usually complete the check. We agree with parents when the summary will be most useful and encourage them to share it with relevant professionals and the new provider.
EYFS Profile	Where the Profile applies and a child moves during the academic year, the original setting must send its assessment against the early learning goals to the relevant school within 15 days of receiving a request.
More than one setting	We maintain an appropriate two-way flow of information so that needs are met and assessment is coherent, with clear roles and secure communication.

Source: EYFS statutory framework, paragraphs 2.6-2.10, 2.17 and 3.92

6. SEND and health handover

- The SENCO speaks with the receiving SENCO or appropriate lead when this will materially improve continuity.

- We share current support plans, relevant professional advice, outcomes, successful adjustments, communication methods and review dates rather than unfiltered historical material.
- Where an EHC plan exists, the plan and relevant records are handled in coordination with the local authority and receiving provider.
- Urgent medical, allergy or medication information is confirmed before attendance begins; the receiving setting remains responsible for its own assessment and arrangements.
- Parents receive or are signposted to copies of learning and development summaries unless a lawful safeguarding reason prevents this.

7. Safeguarding records

The DSL reviews safeguarding information separately from routine learning records and contacts the receiving DSL directly. The transfer includes enough information to understand the concern, current risk, protective action, professional involvement and required follow-up. It may include the full safeguarding record where local safeguarding procedures or the circumstances require it.

- Verify the receiving DSL's identity and secure contact details independently.
- Do not send safeguarding information through the child, an unverified personal address or an open email account.
- Protect the identity and contact details of any person who may be placed at risk if their information becomes known.
- Tell the child and family about the transfer where safe and practical. Do not alert them if this could increase risk or compromise an enquiry.
- Request and record confirmation of receipt. Escalate promptly if receipt is not confirmed.
- If the destination is unknown and there is a welfare concern, follow the Safeguarding and Attendance and Absence procedures rather than simply closing the file.

8. Lawful basis, minimisation and security

For routine transition support, we use the appropriate lawful basis identified in Policy 01 and are transparent with the family. Consent may be used only where there is a genuine choice. For safeguarding, legal obligation, legitimate interests, vital interests or another applicable basis may support sharing; special-category information also requires an Article 9 and, where relevant, Data Protection Act condition.

- Share the relevant parts of a record, not an entire file by default.
- Use an approved secure portal, encrypted transfer, protected attachment with the password sent separately, or tracked confidential delivery as appropriate.
- Check names, addresses and attachments before sending and keep a copy only where the retention schedule, insurer, legal obligation or local safeguarding procedure requires it.
- Record the purpose, lawful basis, authoriser, content, recipient, method, date, family notification and confirmation of receipt.
- Report any loss, misdirection or unauthorised access immediately under the data-breach procedure.

9. Transfer checklist

1. **Confirm.** Destination, named contact, DSL/SENCO details, leaving date and urgency.
2. **Review.** Accuracy, relevance, child's voice, family views, court orders, confidentiality and risks.
3. **Authorise.** Purpose, lawful basis and approval by the appropriate lead.
4. **Package.** Separate routine, SEND/health and safeguarding material; label confidential content clearly.
5. **Send securely.** Use an approved route and double-check the recipient.
6. **Confirm.** Obtain receipt and follow up urgent actions.
7. **Record.** Keep the transfer log and retain or dispose of remaining material under Policy 01.

10. Disputes, complaints and review

A parent's objection is considered carefully but does not create a veto where sharing is necessary to safeguard a child or meet a legal duty. Disagreements are referred to the Manager or DSL and advice is sought without harmful delay. Complaints are handled under the Complaints Policy and data-protection concerns under Policy 01.

This policy is reviewed annually and sooner after a significant transition incident, data breach, complaint, legal change or update to Cornwall safeguarding procedures.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Working Together to Safeguard Children 2026 (March 2026)
- Information Sharing: advice for safeguarding practitioners (May 2024)
- ICO: Children and the UK GDPR (updated 15 May 2026)
- SEND Code of Practice: 0 to 25 years (updated September 2024)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 05

Mobile Phones, Cameras and Connected Devices

PURPOSE Sets clear controls for phones, cameras, smart devices, online platforms and images so that children, families and professionals are protected from misuse, loss and inappropriate sharing.

Policy	05	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

The EYFS requires the setting's safeguarding procedures to explain how mobile phones, cameras and other electronic devices with imaging and sharing capabilities are used. Children of Towan Preschool permits only necessary, proportionate and supervised use of approved technology. Safeguarding, privacy, professional boundaries and children's best interests take priority over convenience.

NON-NEGOTIABLE No member of staff, volunteer or student may photograph, film, record or store information about a child on a personal device or personal account.

2. Scope and roles

This policy covers phones, cameras, tablets, laptops, smartwatches, wearable cameras, voice assistants, gaming devices, removable media and any device able to capture, store, transmit or share sound, images, video, location or personal information.

- **Manager -** approves systems and devices, maintains oversight of permissions, security, incidents and staff practice.
- **DSL -** Oliver Riddett. Leads safeguarding action where device use or online activity creates a concern.
- **Deputy DSL -** Beth Morgan. Acts when the DSL is unavailable.
- **All staff and volunteers -** follow the controls, challenge unsafe practice and report concerns immediately.

3. Personal devices: staff, volunteers and students

- Personal phones and connected devices are switched off or silenced and stored in the designated secure place before a person begins work with children.
- Smartwatches and wearables with imaging, recording or messaging functions must be removed or have those functions disabled while working directly with children, as directed by the Manager.
- Personal devices are used only during authorised breaks in a staff-only area where children and confidential information cannot be seen or heard.
- A personal device may be used for an urgent personal matter only with Manager permission and away from children. It must not be used to record setting information.
- Staff do not connect personal devices to setting accounts, storage, printers or children's learning platforms unless specifically authorised for a documented business need.
- Accessibility, disability or medical needs are addressed through an individual reasonable adjustment and risk assessment, not by an informal exception.

4. Setting devices and accounts

- Only approved, inventoried devices and accounts are used for setting business and images.
- Devices use a strong PIN or password, automatic locking, supported software, security updates and encryption where available.
- Personal cloud backups, personal messaging, personal email and unapproved applications are disabled or not used.
- Access is role-based. Devices are stored securely when not in use and are not routinely taken home.
- Images and records are uploaded promptly to the approved system and deleted from the capture device when no longer required, including from recently deleted folders where appropriate.
- The Manager periodically checks devices, account access and stored content. Staff must have no expectation of personal privacy when using setting equipment.

5. Photographs, video and audio

Before creating an image or recording, staff must be clear about its purpose, lawful basis, expected audience, storage and retention. The child's comfort and dignity are considered even where a parent has agreed.

Use	Controls
Learning and care records	Use approved equipment and systems only. Capture the minimum needed, avoid undignified or intrusive content, and follow the lawful basis and privacy information in Policy 01.
Displays inside the setting	Use only for an explained setting purpose. Check current permissions, safeguarding restrictions and whether other children are identifiable.
Website, publicity or public social media	Obtain separate, specific permission; minimise identifying details; never combine a child's full name with an image; honour withdrawal for future use.
Events involving families	The Manager sets and communicates the photography rules for each event. Safeguarding restrictions may require no photography even where household-use data rules might otherwise apply.

Children are never photographed or filmed in a state of undress, during toileting or intimate care, or in a way that could reasonably cause embarrassment, distress or increased safeguarding risk.

6. Parents, carers, visitors and contractors

- Signs and staff instructions make clear that phones and cameras must not be used around children without permission.
- A visitor needing to make a call is directed to an agreed area away from children and confidential information.
- Visitors and contractors are supervised as required and do not photograph the premises, records or children without written authorisation.
- Parents are asked not to post images containing other children publicly. The setting may prohibit photography at an event where this is needed to protect a child.
- A child who brings a device is not punished. The device is switched off where possible, stored securely, returned to the authorised adult and the incident explained sensitively.

7. Outings and emergencies

- An approved setting phone is carried on outings for emergency contact and is checked before departure.
- The outing risk assessment identifies connectivity, emergency numbers, secure storage and who is responsible for the device.
- No personal calls, images or social media activity take place during an outing.
- If an unforeseen emergency makes personal-device use necessary to protect life or safety, the member of staff informs the Manager or DSL as soon as possible, uses the minimum information needed and creates a written record. Any setting information is moved to the approved record and removed securely from the personal device.

8. Children's use of technology and online safety

- Electronic devices are used only where they add value to learning or communication; prolonged sedentary screen time is avoided.
- Children never use internet-connected devices alone or with other children without active adult co-engagement.
- Content, applications and privacy settings are checked in advance and are appropriate to the children's age and development.
- Search, recommendation, chat, upload, purchasing, location and live-streaming functions are disabled or restricted as appropriate.
- Practitioners model asking permission, respectful image use and seeking help when something feels unsafe.
- Any online content that may indicate harm, grooming, exploitation or radicalisation is preserved and reported to the DSL; staff do not investigate independently.

9. Online learning journals and suppliers

Approved platforms such as Tapestry are subject to a proportionate privacy and security assessment. Contracts or terms must address confidentiality, access, security, retention, deletion, incident reporting, sub-processors and international transfers where relevant. Parent access is limited to the authorised account and families are asked not to download or redistribute images of other children.

Passwords are not shared, leavers' access is removed promptly and access logs or account activity are reviewed where concern arises. A platform's convenience does not override Policy 01 or the child's best interests.

10. Social media and professional boundaries

- Staff do not communicate with current children through personal accounts and do not accept or initiate social-media contact with children.
- Personal friendships with parents or carers are disclosed where they may create a boundary or confidentiality risk; the Manager agrees appropriate communication routes.
- No confidential information, child image or identifiable incident is discussed on a personal account, closed group or private message.
- Only authorised people post through setting accounts, using approved content and access controls.
- Online conduct that may affect suitability to work with children is handled under safeguarding, allegations, disciplinary and whistleblowing procedures.

11. Concerns, allegations and breaches

1. **Protect.** Act immediately if a child may be at risk; contact emergency services where necessary.
2. **Report.** Tell the DSL or Manager immediately. If the concern is about the Manager, use the allegations or whistleblowing route.
3. **Preserve.** Do not delete, forward, copy widely or conduct an unauthorised search of a device. Preserve potential evidence and follow police or LADO advice.
4. **Contain.** For a data breach, disconnect or secure access where safe, but do not destroy evidence. Follow the breach procedure.
5. **Record and refer.** Create a factual record and make any required referral to children's social care, police, LADO, Ofsted or the ICO.

Possessing, creating, requesting or distributing indecent images of children is treated as a serious safeguarding concern and may be a criminal matter. Staff must not attempt to view or investigate suspected illegal content beyond what is unavoidable to recognise the concern.

12. Training, monitoring and review

Device and online-safety expectations are covered in induction, safeguarding training and supervision. The Manager checks compliance and reviews this policy annually and sooner after an incident, technology change, data breach or updated guidance.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- DfE: Help for early years providers - Internet safety (updated 13 July 2026)
- UKCIS: Online safety considerations for early years settings (February 2019)
- ICO: Children and the UK GDPR (updated 15 May 2026)
- Working Together to Safeguard Children 2026 (March 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 06

Inclusion, Equality and British Values

PURPOSE Sets out the setting's core equality, SEND and Prevent arrangements and explains how fundamental British values are promoted in an inclusive, age-appropriate and child-centred way.

Policy	06	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool is committed to equality of opportunity and anti-discriminatory practice. We plan for inclusion rather than waiting for a child or family to encounter a barrier. We recognise each child as unique, work in partnership with families and provide support that enables children to participate, belong and develop.

We comply with the Equality Act 2010, the Children and Families Act 2014, the EYFS, the SEND Code of Practice where applicable, and the Prevent duty. We apply these duties in a way that protects children from stereotyping and treats safeguarding, equality and human rights as mutually reinforcing.

2. Equality Act responsibilities

- As a service provider, we do not unlawfully discriminate, harass or victimise people in access to or provision of our service.
- We avoid direct and indirect discrimination and discrimination arising from disability, subject to the legal tests and exceptions.
- The duty to make reasonable adjustments for disabled people is anticipatory: we consider likely barriers in advance as well as responding to an individual child's or adult's needs.
- Reasonable adjustments may include changes to a rule or routine, the way information is provided, the environment, communication support, equipment or additional assistance.
- We do not charge a disabled person for a reasonable adjustment required by law.
- Employment decisions are also covered by the Equality Act's separate work provisions and are handled under fair recruitment, employment and grievance procedures.

LEGAL CLARITY Receipt of public funding does not by itself mean that every private provider must publish public-sector equality information. Where we exercise a public function or a contract imposes additional equality requirements, we identify and meet those duties. Our service-wide commitment remains broader than the minimum legal position.

3. Protected characteristics and broader inclusion

The Equality Act contains nine protected characteristics: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. The exact protection varies by context. For services, age discrimination protection is generally limited to adults aged 18 or over and marriage and civil partnership is not a Part 3 protected ground. Children and adults may also be protected through association or perception.

Regardless of technical scope, we welcome and value children and families across age, disability, health, care experience, language, family structure, gender expression, race, nationality, ethnic or social origin, religion or belief, sex, sexual orientation, pregnancy or maternity and economic circumstances.

4. SEND and reasonable adjustment

- We have arrangements to identify and support children with SEND and identify a SENCO for group provision.
- Because the setting delivers local-authority-funded early education places, it has regard to the SEND Code of Practice.
- Practitioners discuss concerns about progress in the prime areas with parents or carers and agree support, including specialist advice where needed.
- Support follows a graduated approach: assess, plan, do and review, with the child and family involved in accessible ways.
- A lack of diagnosis does not prevent reasonable, evidence-informed support or an adjustment.
- We consider communication, sensory, physical, learning, medical and emotional needs when planning the environment, curriculum, routines and transitions.
- If a requested adjustment is not considered reasonable, the Manager records the factors considered, explores effective alternatives and explains the decision.

5. Fundamental British values in early years

We promote democracy, the rule of law, individual liberty, and mutual respect and tolerance of those with different faiths and beliefs through ordinary early-years practice, not party-political instruction.

Value	Age-appropriate practice
Democracy	Children communicate preferences, contribute to shared choices and see that different views are listened to. Adults use observation and communication support so non-verbal children are included.
Rule of law	Children help shape a small number of fair boundaries, learn why they keep people safe and experience predictable, proportionate responses.
Individual liberty	Children make meaningful choices within safe limits, develop confidence, privacy and autonomy, and learn that their choices must respect others' rights.
Mutual respect and tolerance	Children encounter respectful representations of different families, cultures, faiths and beliefs; adults challenge prejudice and help children repair harm.

We do not label a child or family as failing to support British values because they hold a lawful faith, belief or cultural practice. Concerns are based on behaviour, context, vulnerability and risk, not stereotypes.

6. Prevent duty

The Prevent duty requires specified education and childcare providers to have due regard to the need to prevent people from becoming terrorists or supporting terrorism. It is a safeguarding duty and is applied proportionately to the age of the children, the local context and the setting's size.

- The Manager/DSL leads Prevent arrangements and maintains a proportionate risk assessment and action plan covering local and online risks.
- Relevant staff complete appropriate Prevent awareness training and know how to raise a concern.
- The curriculum builds belonging, critical thinking, empathy and confidence to ask for help; it does not ask young children to interpret political or religious ideology.
- Internet filtering, device controls and staff supervision form part of the setting's wider online-safety approach.
- A concern about susceptibility to radicalisation is reported to the DSL, considered alongside other safeguarding information and referred through the current local Prevent route where appropriate.
- If there is immediate danger or suspected terrorist activity, the police are contacted. Channel support is voluntary and requires consent from the person or, for a child, the appropriate parent or guardian before support is provided.

7. Admissions, curriculum and family partnership

- Admissions criteria and fees are transparent and applied consistently, with adjustments where the law requires.
- Information is offered in clear language and alternative formats or languages where reasonably possible.
- Resources reflect varied identities, abilities, cultures, skin tones, family structures and roles without tokenism.
- Festivals and beliefs are explored respectfully and accurately; no child is required to participate in an activity that conflicts with a family's belief where a reasonable alternative can be provided.
- Home languages are valued. English-language development is supported without treating bilingualism as a deficit.
- Food, dress, personal care, sleep, physical activity and celebrations are planned through respectful discussion, safety assessment and reasonable adjustment.

8. Challenging discrimination and safeguarding concerns

- Staff intervene calmly in discriminatory language, exclusion or conduct, protect the person affected and explain why the behaviour is unacceptable in a developmentally appropriate way.
- We consider what the behaviour communicates, whether a child has copied language, what support is needed and whether a wider safeguarding concern exists.
- Significant or repeated incidents are recorded and reviewed for patterns. Families are involved unless this would create a safeguarding risk.
- Allegations about staff or volunteers are handled through safeguarding, allegations, whistleblowing, disciplinary or grievance procedures as appropriate.
- A complaint or protected act must not lead to retaliation or less favourable treatment.

9. Employment, training and upcoming change

Recruitment, allocation of work, training, progression, supervision and employment decisions are fair and evidence-based. The setting takes reasonable steps to prevent sexual harassment of workers, including risks from third parties such as parents, visitors or contractors, and protects sexual-harassment whistleblowers under the law in force from April 2026.

Announced changes from October 2026 will strengthen the duty to all reasonable steps and introduce wider employer liability for third-party harassment unless all reasonable steps were taken. We apply that stronger preventive standard now and will update procedures when the final commencement arrangements take effect.

10. Monitoring, concerns and review

The Manager reviews participation, exclusions, complaints, incidents, adjustments, training and feedback for patterns, while protecting confidentiality. A person can raise an equality concern through the Complaints Policy; staff may also use the grievance or whistleblowing procedure. Safeguarding concerns go directly to the DSL.

This policy is reviewed annually and sooner after an equality or Prevent incident, complaint, inspection finding, legal change or significant change in local risk.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- EHRC Statutory Code of Practice: services, public functions and associations (in force 5 August 2026)
- SEND Code of Practice: 0 to 25 years (updated September 2024)
- Prevent duty guidance: England and Wales (in force 31 December 2023)
- Acas: Employment Rights Act 2025 implementation (updated 7 July 2026)
- Working Together to Safeguard Children 2026 (March 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 07

Sun Protection and Hot Weather

PURPOSE Provides a practical, risk-based approach to ultraviolet exposure, heat, hydration and sunscreen so children can continue to benefit from safe outdoor play.

Policy	07	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children's skin and bodies are more vulnerable to ultraviolet (UV) damage, dehydration and heat illness than adults'. Children under five and children with some health conditions or medicines may face greater heat risk. We use shade, clothing, timing, hydration and suitable sunscreen together; sunscreen is not treated as the only control.

Outdoor play remains an important part of the EYFS. Decisions are based on the UV index, temperature, humidity, shade, activity, individual needs and current Heat-Health Alerts rather than on a single fixed temperature or a blanket seasonal ban.

EMERGENCY Suspected heatstroke is a medical emergency: call 999 and cool the child while following emergency-service instructions.

2. Responsibilities

- **Manager -** ensures staff understand the controls, monitors relevant alerts and provides shade, drinking water and emergency arrangements.
- **Session lead -** checks the forecast, UV index and Heat-Health Alert before outdoor activity and adapts the plan.
- **Key person -** knows each child's permissions, allergies, medical needs, communication and signs that may indicate discomfort or dehydration.
- **Parents and carers -** provide current information, suitable clothing and the child's labelled sunscreen where this is the agreed arrangement.
- **All staff -** model safe practice, supervise children, promote independence and respond promptly to signs of sunburn or heat illness.

3. Daily assessment and action

Condition	Setting action
UV index below 3 and comfortable conditions	Continue normal outdoor provision, with water available and individual medical needs followed.
UV index 3 or above	Use protective clothing, shade and at least SPF 30 broad-spectrum sunscreen with a UVA rating of 4 or more stars on exposed skin. Limit prolonged exposure, especially around 11am to 3pm.
Very hot day or amber Heat-Health Alert	Move vigorous activity to cooler times, increase shade and drink breaks, shorten exposure, relax clothing expectations and closely monitor vulnerable children.
Red Heat-Health Alert or unsafe local conditions	Follow official advice and the setting's dynamic risk assessment. Use cooler indoor areas, modify or suspend outdoor activity, and communicate material changes to families.

Source: UKHSA hot-weather guidance for schools and early-years settings, updated 8 July 2026

4. Clothing and shade

- Children are encouraged to wear loose, light-coloured clothing that covers shoulders and a wide-brimmed or legionnaire-style hat that shades the face, ears and neck.
- Shade is provided or sought, particularly between 11am and 3pm from March to October and whenever the UV index indicates protection is needed.
- Activities and equipment are moved where practicable so that children are not required to remain in direct sun.
- Dress expectations are adapted for heat, disability, sensory needs, culture and religion while maintaining safety.
- Children under six months, if attending, are kept out of direct strong sunlight in line with NHS advice.

5. Sunscreen

Parents or carers provide written permission and current information about allergies, sensitivities or prescribed skin care. Products are stored securely, within date and according to their instructions.

- Use a broad-spectrum product of at least SPF 30 with a UVA rating of 4 or more stars, unless a clinician has advised a different suitable product.
- The child's product is clearly labelled. Products are not shared between children unless the setting has specific permission and has checked allergy and sensitivity information.
- Families are encouraged to apply sunscreen before arrival when UV exposure is expected. Staff reapply generously at least every two hours and after water play, towelling, sweating or rubbing, following the manufacturer's instructions.
- Staff apply sunscreen in an open, observable environment using hygienic practice. Children are encouraged to apply it themselves with developmentally appropriate help, while areas such as the face, ears, neck and shoulders are checked.
- Sunscreen is kept away from eyes and mouth. Staff stop and seek advice if a reaction occurs.
- If the agreed product or permission is unavailable, the child is protected through shade and clothing and the parent or carer is contacted; the child is not exposed while the issue is resolved.

6. Hydration and indoor comfort

- Fresh drinking water is available throughout the day and offered more frequently during warm weather and active play. Children are not expected to wait until they ask or appear thirsty.

- Staff monitor drinking, nappies or toileting, behaviour and physical signs, taking account of children who communicate thirst or discomfort non-verbally.
- Windows, blinds, ventilation, fans and room use are managed according to official guidance and the setting's risk assessment. Fans are positioned safely and may be unsuitable when indoor temperatures exceed 35 degrees Celsius.
- Heat-generating equipment is switched off when not needed and children are moved away from direct sunlight through windows.
- For a child with a clinical vulnerability, the setting follows an individual health plan and advice from the child's clinical team.

7. Recognising and responding to harm

Sunburn

Move the child out of the sun, cool the skin with cool water, do not apply ice directly, and follow first-aid guidance. Inform the parent or carer, record the incident and seek medical advice if the child is unwell, the skin swells badly or blisters, or there is another concern.

Heat stress or heat exhaustion

Possible signs include unusual irritability, discomfort, tiredness, dizziness, headache, nausea, vomiting, heavy sweating, pale clammy skin, severe thirst, dark urine or drier nappies. Move the child to a cool area, encourage cool water if safe, remove unnecessary clothing and cool the child promptly. Contact NHS 111 if concerned or symptoms worsen.

Heatstroke

Possible signs include confusion, poor coordination, seizure, loss of consciousness, very high temperature, red hot skin, fast heartbeat or fast shallow breathing. Call 999 immediately, begin cooling and follow instructions. If the child is unconscious, use the recovery position if trained and directed.

8. Records, communication and review

- The setting records sunscreen permission, product and relevant allergy or medical information.
- First aid, sunburn, heat illness and significant refusals or reactions are recorded and parents or carers informed on the same day or as soon as reasonably practicable.
- Patterns and near misses are reviewed and the risk assessment or environment is changed where needed.
- Families receive seasonal reminders about clothing, hats, sunscreen and water bottles without excluding a child because a family has difficulty providing an item.

This policy is reviewed annually and sooner after a heat-related incident, significant alert, change in official guidance or change to the premises or outdoor provision.

Legal and guidance basis

- UKHSA: Looking after children in hot weather (updated 8 July 2026)
- NHS: Sunscreen and sun safety (current guidance)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 08

Children's Rights and Participation

PURPOSE Turns children's rights into everyday practice by centring safety, dignity, inclusion, play, development, privacy and meaningful participation in decisions that affect each child.

Policy	08	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Every child is a person with rights, not simply a recipient of care. Children of Towan Preschool uses the United Nations Convention on the Rights of the Child (UNCRC) as a child-centred framework and delivers the domestic legal duties in the Children Acts, Equality Act, EYFS, data-protection law and safeguarding guidance.

The UK ratified the UNCRC in 1991. The Convention guides our values and decisions; specific legal duties in England arise through the applicable domestic law. Children's welfare and best interests are central, and their wishes and feelings are sought, heard and responded to in ways suited to their age, development and communication.

LISTEN WIDELY A child's voice includes words, behaviour, play, facial expression, body language, gesture, communication aids, silence and changes from their usual presentation.

2. Rights in everyday practice

Right or principle	What children experience here
Non-discrimination and belonging	Each child is welcomed, represented and supported. Barriers and prejudice are addressed, with reasonable adjustments for disability.
Best interests	Decisions consider safety, relationships, identity, family life, health, development, views and the least restrictive effective response.
Life, survival and development	Children receive safe care, healthy routines, responsive teaching and timely help when needs emerge.
Voice and participation	Children influence play, routines and matters affecting them. Adults explain outcomes and why a preferred option was not possible.

Right or principle	What children experience here
Protection from harm	Adults are vigilant, respond to signs and disclosures, share necessary information and never ask a child to carry responsibility for their own protection.
Identity, culture and family	Names, languages, cultures, faiths, family relationships and personal histories are treated respectfully and confidentially.
Privacy and dignity	Personal care, records, images, conversations and bodies are treated with respect. Information is shared only for a clear lawful purpose.
Play, rest and expression	Children have time, space and choice for play, creativity, movement, rest and enjoyment, with support to participate.

3. Meaningful participation

- Practitioners build secure relationships so that children can communicate preferences and concerns without fear of ridicule or punishment.
- Choices offered are genuine, manageable and safe. Adults do not present a predetermined decision as if the child controlled it.
- Children receive information in simple language, pictures, objects, signs or other accessible formats before being asked for a view.
- The key person observes babies and pre-verbal or non-verbal children closely and checks interpretations with people who know the child well while remaining professionally curious.
- A child may change their mind. Refusal, hesitation or distress is explored respectfully, especially in personal care, photography, physical contact and unfamiliar activity.
- Adults explain the outcome and, where the child's preference cannot be followed, give an age-appropriate reason and look for an acceptable alternative.

4. Choice, consent and adult responsibility

Participation does not mean a young child carries adult legal or safeguarding responsibility. Adults make necessary safety decisions, but use the least restrictive effective option, explain what is happening and restore the child's sense of control as soon as possible.

- For optional experiences, staff seek the child's willing participation as well as any required parental permission.
- For necessary care, staff explain, offer choices about how it happens and pause where safe if the child is distressed.
- A parent cannot require the setting to ignore a child's welfare, privacy, disability rights or safeguarding needs.
- Data-protection rights belong to the child. A parent or carer will usually exercise them for a young child when this is in the child's best interests, subject to competence, confidentiality and legal exemptions.

5. Safety, disclosure and information sharing

If a child communicates a concern, the practitioner listens, reassures them that they have done the right thing, does not promise secrecy, avoids leading questions and records the child's words and presentation accurately. The concern is passed to the DSL without delay.

Where safe, the child is told what will happen next and kept appropriately informed. Information may be shared without consent when necessary to safeguard a child and supported by a lawful basis. A child is never blamed for abuse, neglect, exploitation, bullying or discriminatory treatment.

6. Inclusion and additional communication needs

- Reasonable adjustments and auxiliary aids are considered in advance so disabled children can communicate and participate.
- Home languages, signing, visual systems, objects of reference, sensory cues and trusted communication partners are used where helpful.
- Adults allow enough processing time and do not equate limited speech, English or eye contact with limited understanding.
- Children in care, refugees, children affected by domestic abuse and children with communication difficulties receive sensitive support without being defined by their circumstances.
- When views conflict, the Manager records how the child's wishes, welfare, rights of others, professional advice and legal duties were balanced.

7. Behaviour, relationships and repair

Children have the right to protection from harmful behaviour and the right to support when their own behaviour affects others. We separate the child from the behaviour, seek to understand unmet need or communication, and use teaching, co-regulation, boundaries and repair. Humiliation, corporal punishment and punishment that negatively affects well-being are prohibited.

A child affected by bullying, harassment or discriminatory conduct is listened to and supported. A child displaying harmful behaviour is helped to understand impact, develop safer strategies and repair relationships without being labelled as a bully. See Policies 09 and 10.

8. Feedback, complaints and advocacy

- Children are regularly invited to show what they enjoy, dislike, want changed or need help with.
- Everyday feedback may be gathered through key-person conversations, observations, choices, drawings, group reflection and parent partnership.
- A child can approach any trusted adult. Staff respond to the substance of a concern even if it is not expressed as a formal complaint.
- Parents and carers may use the Complaints Policy. A complaint does not reduce the child's care, opportunities or the family's treatment.
- Where appropriate, the setting helps the child or family access an independent advocate or specialist support.

9. Staff responsibilities and review

Children's rights are covered in induction, supervision, curriculum planning, safeguarding, SEND and behaviour practice. The Manager reviews incidents, exclusions, participation, complaints and feedback for evidence that particular children or groups are not being heard or are experiencing barriers.

This policy is reviewed annually and sooner after a serious incident, complaint, legal or guidance change, or evidence that children's participation is not meaningful.

Legal and guidance basis

- Working Together to Safeguard Children 2026 (March 2026)
- United Nations Convention on the Rights of the Child (ratified by the UK in 1991)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 09

Equality and Diversity in Practice

PURPOSE Translates the setting's equality commitments into fair admissions, accessible communication, representative provision, respectful family partnership and effective responses to discrimination.

Policy	09	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool welcomes difference and removes avoidable barriers so that every child and family can participate with dignity. Equality does not always mean identical treatment: lawful positive action, reasonable adjustment and tailored support may be needed to achieve fair access and outcomes.

This operational policy complements Policy 06, which sets out the legal, SEND, British values and Prevent framework. It applies to children, families, staff, volunteers, students, visitors, contractors and people seeking to use or work in the setting.

2. What we prevent

Term	Meaning in practice
Direct discrimination	Treating a person less favourably because of a protected characteristic, including some treatment by association or perception.
Indirect discrimination	Applying a rule or practice to everyone that disadvantages a protected group and the individual, unless it can be objectively justified where the law allows.
Disability discrimination	Including unjustified unfavourable treatment arising from disability and failure to make a reasonable adjustment.
Harassment	Unwanted conduct related to a relevant protected characteristic, sexual harassment, or less favourable treatment following a response to sexual harassment, where the legal test is met.
Victimisation	Subjecting a person to detriment because they did, or were believed to have done, a protected act such as raising an equality complaint.
Stereotyping and bias	Assumptions or patterns that may not always meet a legal definition but can still exclude, diminish or disadvantage children and families and must be challenged.

3. Fair admissions and access

- Admissions information, eligibility requirements, charges, waiting lists and allocation decisions are transparent and applied consistently.
- We do not refuse or delay a place because a child is disabled or may need additional support without first considering reasonable adjustments, available support, specialist advice and the individual facts.
- Questions about disability, health, language, religion, family circumstances or support needs are asked only for a legitimate purpose such as safety, support, adjustment, monitoring or legal compliance.
- Parents are offered accessible information, communication support or additional time where reasonably needed to understand forms, contracts, policies and decisions.
- Physical access, arrival, toileting, eating, sleep, outings and emergency evacuation are included in anticipatory access reviews.
- A decision that limits access is authorised by the Manager, based on evidence, documented and explained with a route to review or complain.

4. Inclusive environment and curriculum

- Books, dolls, images, music, role play and displays include varied skin tones, disabilities, languages, cultures, faiths, family structures, occupations and ways of living as ordinary parts of provision.
- Resources are checked for stereotypes, tokenism and inaccurate or demeaning representation. Children encounter both similarities and difference.
- Activities allow varied ways to join in, communicate, move, rest, focus and demonstrate understanding.
- Festivals and cultural experiences are planned with families and reliable information. Children are not asked to represent an entire group or disclose private beliefs.
- Home languages are visible and valued. Practitioners distinguish language acquisition from possible communication delay and explore a child's skills in the home language with parents where needed.
- Gendered expectations do not limit toys, colours, clothing, emotions, friendships, roles or aspirations.

5. Partnership with families

- We ask each family how names are pronounced, who is important to the child, how the family describes itself and what communication works best.
- Staff use respectful terms and do not assume family relationships, gender roles, faith, immigration status, finances or living arrangements.
- Diet, dress, hair and skin care, personal care, celebrations and routines are discussed without judgement, subject to the child's safety and welfare.
- Interpreters or translated information are considered for significant decisions; children are not used as interpreters for sensitive adult matters.
- Family requests are considered individually. A protected characteristic does not excuse conduct that harms a child or another person.
- Confidential information about identity or family circumstances is shared only on a lawful need-to-know basis.

6. Reasonable adjustments and support

1. **Identify the barrier.** Listen to the child and family, observe participation and seek professional advice where useful.
2. **Consider options.** Review rules, routines, communication, staffing, equipment, auxiliary aids and physical features.

3. **Agree and record.** Set out the adjustment, responsible person, timing, review and any safety arrangements.
4. **Implement.** Brief relevant staff and ensure equipment or support is actually available and maintained.
5. **Review impact.** Ask whether the child can participate in practice, not simply whether an adjustment was offered.

A lack of resources is relevant to what is reasonable but is not an automatic answer. The Manager considers effectiveness, practicability, cost, available assistance, disruption, safety and the setting's overall resources, and explores alternatives.

7. Responding to discriminatory language or conduct

- Intervene promptly and calmly; ensure the person affected is safe and heard.
- Name the impact and reinforce the setting expectation without humiliating a child.
- Explore what happened, what the child understood, where language or behaviour may have been learned, and any unmet need or safeguarding context.
- Use stories, modelling, restorative conversation and supported repair to build understanding.
- Inform families about significant or repeated incidents unless doing so creates a safeguarding risk.
- Record significant incidents, action and outcome; review for patterns involving children, adults, activities, times or staff response.
- Escalate adult conduct through safeguarding, allegations, complaints, grievance, disciplinary or whistleblowing procedures as appropriate.

8. Employment and workplace dignity

Recruitment and employment decisions are based on the role and evidence. Reasonable adjustments are considered for applicants and workers. Bullying, discrimination, harassment, sexual harassment and victimisation by colleagues or third parties are not tolerated.

The setting assesses harassment risks and takes preventive steps including clear standards, reporting routes, supervision, training, action on warning signs and protection from retaliation. Sexual-harassment disclosures are capable of receiving whistleblowing protection under the law in force from April 2026. The setting is preparing for the announced October 2026 duties concerning all reasonable steps and third-party harassment.

9. Recording, monitoring and confidentiality

- Equality monitoring is proportionate, explained and handled under Policy 01. Providing monitoring information is voluntary unless a lawful requirement says otherwise.
- The Manager reviews admissions, attendance, participation, exclusions, complaints, incidents, adjustments and outcomes for disproportionate patterns.
- Records identify facts, the views of those involved, action, review and outcome. Sensitive identity information is not repeated unnecessarily.
- Findings lead to changes in environment, resources, communication, staffing, training or policy where needed.

10. Raising a concern and review

Children may approach any trusted adult. Parents and service users may use the Complaints Policy. Workers may use the grievance or whistleblowing procedure. A safeguarding concern is reported directly to the DSL. No person is treated adversely for raising a concern in good faith or doing a protected act.

This policy is reviewed annually and sooner after a substantiated complaint, serious incident, inspection finding, new legal requirement or evidence of unequal access or outcomes.

Legal and guidance basis

- EHRC Statutory Code of Practice: services, public functions and associations (in force 5 August 2026)
- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- SEND Code of Practice: 0 to 25 years (updated September 2024)
- Acas: Preventing sexual harassment (updated 25 March 2026)
- Acas: Employment Rights Act 2025 implementation (updated 7 July 2026)
- Working Together to Safeguard Children 2026 (March 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 10

Positive Behaviour, Anti-bullying and Harassment

PURPOSE Explains how warm relationships, co-regulation, consistent boundaries and restorative support are used to promote safety, respond to harmful behaviour and protect children from bullying or harassment.

Policy	10	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Young children's behaviour is communication and is shaped by development, relationships, environment, sensory needs, language, health and experience. Children of Towan Preschool teaches skills and supports regulation rather than labelling children as 'naughty' or relying on punishment.

Every child has the right to be safe and included. Harmful behaviour, bullying, harassment and discriminatory conduct are addressed promptly. The child affected receives protection and support; the child displaying the behaviour receives clear boundaries, teaching and appropriate help.

EYFS REQUIREMENT Corporal punishment, threats of corporal punishment and any punishment that could negatively affect a child's well-being are prohibited.

2. Aims and responsibilities

- **Manager -** ensures a consistent approach, sufficient training, fair investigation and appropriate external advice or referral.
- **Key person -** builds a secure relationship, knows the child's cues and works with the family on support and review.
- **SENCO -** supports assessment and reasonable adjustment where behaviour may relate to SEND, communication, sensory or developmental need.
- **DSL -** leads where behaviour may indicate abuse, neglect, exploitation, child-on-child harm, domestic abuse, online harm or risk from an adult.
- **All practitioners -** model respect, intervene safely, record factually and avoid responses based on bias or frustration.

3. Universal positive practice

- Warm, predictable relationships and a key-person approach help children feel secure.
- A small number of positively worded boundaries are explained, modelled and applied consistently.
- Routines, transitions, spaces and activity demands are adapted to reduce avoidable stress, waiting and conflict.
- Adults notice and describe cooperation, effort, empathy and repair without using rewards to control every interaction.
- Children are taught emotional vocabulary, calming strategies, turn-taking, asking for help, consent and peaceful problem-solving.
- Practitioners provide movement, quiet space, sensory support, visual cues and communication choices where helpful.
- Expectations reflect each child's development and needs; equality does not require an identical response to every child.

4. Responding in the moment

1. **Make safe.** Move people or hazards, call for support and give brief clear directions.
2. **Regulate.** Use a calm voice, reduce language and stimulation, offer space or co-regulation and avoid public confrontation.
3. **Attend to harm.** Comfort the child affected, provide first aid and acknowledge their experience before focusing on explanation.
4. **Understand.** Once calm, gather simple factual information and consider triggers, communication, development, sensory or safeguarding factors.
5. **Teach and repair.** Practise a safer action and support meaningful repair. A forced apology is not used as proof that the matter is resolved.
6. **Record and review.** Record significant incidents and agreed follow-up; look for patterns rather than treating each event in isolation.

5. Prohibited and unsuitable responses

- smacking, shaking, rough handling, threatening physical punishment or deliberately causing pain;
- humiliation, ridicule, shouting at a child, sarcasm, intimidation, degrading language or public shaming;
- withholding food, drink, toileting, sleep, comfort, outdoor access or contact with a trusted adult as punishment;
- locking a child alone, punitive isolation or exclusion without supervision and support;
- labelling a child as a bully, naughty, manipulative or attention-seeking;
- punishing behaviour caused by disability or an unmet communication, sensory or medical need without considering adjustment; and
- asking another child or parent to mediate a serious concern or disclose confidential information.

6. Physical intervention

Physical intervention is used only to avert immediate danger of personal injury or, where absolutely necessary, to manage behaviour, using the least force for the shortest time. It is never used to secure compliance, express anger or punish.

- Staff summon help where possible and continue to communicate calmly.
- The child's breathing, circulation, dignity and medical or disability needs are protected; unsafe holds and pressure to the neck, chest or abdomen are not used.
- The intervention stops as soon as the immediate danger has passed.
- Every use is recorded, including antecedent, risk, action, duration, people involved, injury or first aid and debrief.

- Parents or carers are informed on the same day or as soon as reasonably practicable, as required by the EYFS.
- Repeated use triggers review of the environment, support plan, reasonable adjustments, training and external advice.

7. Bullying, harassment and discriminatory behaviour

A single harmful incident is addressed even if it is not bullying. Bullying usually involves repeated behaviour and a power imbalance; very young children may not have the sustained intent associated with older children's bullying. Staff focus on impact, pattern, protection and teaching rather than waiting for a label.

Concern	Response
Repeated physical, verbal, relational or online harm	Protect the child affected, record patterns, involve the Manager and families, and create an individual support and safety plan.
Discriminatory language or exclusion	Intervene immediately, support the person targeted, challenge the message in age-appropriate language and follow Policy 09.
Sexualised behaviour	Respond without shame, consider development and context, use the safeguarding procedure and seek specialist advice where behaviour is harmful or concerning.
Possible abuse or exploitation	Report to the DSL immediately. Do not investigate or promise confidentiality. Share relevant information and refer under safeguarding procedures.
Adult bullying or harassment	Use safeguarding, allegations, whistleblowing, grievance, disciplinary or complaints procedures. This child-behaviour policy is not a substitute for a fair employment process.

8. Individual support plans

Where behaviour is persistent, intense or creating risk, the key person coordinates a strengths-based plan with the child, family, SENCO and DSL as relevant. The plan records:

- the child's strengths, communication, relationships and what helps them feel safe;
- observable behaviour and likely functions or triggers, without unsupported diagnosis;
- preventive changes to environment, routine, demand, sensory input and adult response;
- skills to teach and consistent co-regulation strategies;
- reasonable adjustments and professional advice;
- how other children and staff will be kept safe;
- what will be recorded, review dates and evidence of progress; and
- clear safeguarding or emergency escalation arrangements.

Exclusion, reduced hours or asking a family to collect early is not used informally as a behaviour strategy. Any change to attendance is exceptional, time-limited, documented, reviewed for equality and safeguarding impact, and discussed with relevant professionals or the local authority where appropriate.

9. Working with parents and carers

- Information is shared factually and privately, without identifying another child unnecessarily.
- Parents are invited to share relevant patterns, changes, strengths, cultural context and successful approaches from home.
- We agree consistent aims while recognising that setting and home strategies may differ.
- Parents are not required to secure an assessment or diagnosis before the setting begins reasonable support.

- A parent's request for punishment, exclusion or disclosure of another child's information will not override welfare, equality, confidentiality or professional judgement.

10. Recording, confidentiality and monitoring

- Significant incidents are recorded promptly using observed facts, exact words where relevant, action, injury, first aid, witnesses and follow-up.
- Records separate the child's identity from the behaviour and distinguish fact, reported information and professional analysis.
- The Manager reviews frequency, location, activity, trigger, children involved, protected-characteristic concerns, staff response and outcomes for patterns.
- Records are confidential and shared only with people who have a right or professional need, in line with Policies 01 and 03.
- Any physical intervention, serious injury, safeguarding referral or allegation is also handled under the relevant statutory notification and safeguarding procedure.

11. Staff support, complaints and review

Behaviour practice is included in induction, supervision and ongoing training. Staff seek support before frustration affects their response and are encouraged to reflect without fear of blame while unsafe practice is challenged. Parents may use the Complaints Policy; staff may use grievance or whistleblowing routes.

This policy is reviewed annually and sooner after a serious incident, repeated physical intervention, complaint, safeguarding review, equality concern or change to statutory guidance.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Working Together to Safeguard Children 2026 (March 2026)
- EHRC Statutory Code of Practice: services, public functions and associations (in force 5 August 2026)
- SEND Code of Practice: 0 to 25 years (updated September 2024)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 11

First Aid, Accidents and Incident Reporting

PURPOSE Sets out immediate care, recording, family communication and statutory escalation after an accident, injury, illness, near miss or medical emergency.

Policy	11	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool provides prompt, calm and competent first aid while protecting the child from further harm. Emergency treatment or a 999 call is never delayed while consent, paperwork or a family member is sought. Records are factual, proportionate and used to prevent recurrence.

EMERGENCY Call 999 immediately for a life-threatening or potentially serious emergency. Follow the call handler's instructions, give trained first aid and arrange for a familiar adult to accompany the child if a parent or carer is not yet present.

2. Responsibilities and first-aid cover

- **Manager -** completes the needs assessment, provides equipment and training, reviews incidents and makes or delegates statutory notifications.
- **Paediatric first aider -** assesses the child, acts within current training, records treatment and ensures an appropriate handover.
- **All staff -** summon help, make the area safe, preserve dignity, report hazards and never exceed their competence.
- **DSL -** Oliver Riddett. Leads where an injury, explanation, delay in treatment or pattern raises a safeguarding concern.

At least one person with a current full paediatric first-aid certificate suitable for babies and young children is on the premises and available whenever children are present and accompanies children on outings. Certificates are renewed at least every three years. Deployment, room layout and outdoor arrangements must allow a rapid response.

The Manager also assesses first-aid needs for employees under workplace health-and-safety law. Paediatric provision for children does not automatically satisfy every employee need.

3. Equipment, information and readiness

- Clearly identified first-aid kits are accessible to adults, appropriately stocked, checked at least monthly and after use, and kept out of children's reach.
- Emergency contact, allergy, medical-plan and medicine information is available securely wherever the child is cared for, including outings and evacuation points.
- Emergency medicines remain immediately accessible to trained adults; they are not locked away where access would be delayed.
- Single-use gloves and other appropriate protective equipment are available. Staff follow infection-control procedures and wash hands before and after care.
- An automated external defibrillator is used, where available and indicated, in accordance with training and the 999 call handler's instructions.

4. Immediate response

1. **Make safe.** Stop the activity, remove immediate hazards and protect the other children without leaving the injured child alone.
2. **Assess and call.** Use current first-aid training. Call 999 promptly if serious harm is suspected or the child's condition could deteriorate.
3. **Treat and reassure.** Give only treatment within competence, explain in simple language, respect privacy and observe continuously.
4. **Contact family.** Contact parents or carers as soon as practicable. If they cannot be reached, use emergency contacts, but do not delay emergency care.
5. **Handover.** Give ambulance staff or the receiving adult the child's relevant history, medicines administered, observations and incident details.
6. **Record and escalate.** Complete the record the same day and immediately alert the Manager or DSL where the incident is serious, unusual or safeguarding-related.

Staff do not diagnose, perform invasive procedures outside an agreed plan and training, give food or drink to an unconscious or seriously unwell child, or transport a child in a private vehicle as a substitute for an ambulance.

5. Recording and communication

Every accident, injury and first-aid treatment is recorded promptly. The record includes date, time, place, activity, observed facts, injury or symptoms, first aid, medicine, witnesses, people informed, collection or onward care, and the recorder's name and signature. The parent's acknowledgement confirms receipt, not agreement with the account.

- Parents or carers are informed on the same day, or as soon as reasonably practicable, of any accident or injury and first aid given.
- Head or facial injury advice is given in writing and the child is monitored; any deterioration is escalated immediately.
- A near miss or equipment failure is recorded separately even if no injury occurred, so controls can be improved.
- Entries are not erased. Corrections are dated, attributable and preserve the original meaning.
- Records are stored confidentially and shared only with those who have a right or professional need under Policies 01 and 03.

6. Notification decision table

Route	When it applies	Timing / owner
Ofsted	A serious accident, injury or illness, a child's death while in care or later as a result of something that happened in care, or food poisoning affecting two or more children. Other significant events are reported under the serious-incident guidance.	Manager: as soon as possible and always within 14 days.
Local safeguarding agencies	A serious accident, injury or death and any circumstances suggesting abuse, neglect, unsafe practice or unmet protection needs.	DSL/Manager: without delay; follow advice received.
HSE under RIDDOR	A work-related death; specified worker injury; reportable disease; dangerous occurrence; over-seven-day worker incapacity; or a non-worker taken directly from the scene to hospital for treatment because of a work-related accident. The legal test must be applied to the facts.	Responsible person: normally without delay; statutory deadlines include 10 days or 15 days for over-seven-day incapacity.
Insurer / hall owner	Where the policy, lease or incident type requires notification, including material premises or equipment defects.	Manager: within contractual deadlines, after urgent safety action.

CHECK Ofsted reporting and RIDDOR are separate tests. A hospital visit is not automatically RIDDOR-reportable, and an incident can require more than one notification route.

7. Safeguarding, evidence and review

- Unexplained, inconsistent, repeated or delayed presentations are referred to the DSL; staff record the child's exact words and do not investigate or ask leading questions.
- The scene, relevant equipment, CCTV, photographs or records are preserved where necessary without compromising immediate safety or confidentiality.
- The Manager reviews cause, supervision, ratios, environment, equipment, training and recurrence. Risk assessments and practice are amended promptly.
- Serious and repeated incidents are analysed for trends. Learning is shared without disclosing confidential personal information unnecessarily.

This policy is reviewed annually and sooner after a serious incident, regulatory notification, first-aid guidance change or identified weakness.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Ofsted: Report a serious childcare incident (updated 24 April 2026)
- HSE: When do I need to report an incident under RIDDOR? (current guidance)
- HSE: First aid at work (current guidance)
- Working Together to Safeguard Children 2026 (March 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 12

Staff Wellbeing, Health and Safety

PURPOSE Combines supportive supervision with practical controls for stress, violence, lone work, illness, adjustments and day-to-day workplace safety.

Policy	12	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children's safety and high-quality care depend on staff being treated fairly, supported to raise concerns and protected from avoidable harm. Children of Towan Preschool manages physical and psychosocial risks through consultation, suitable risk assessments, supervision, training and timely action. Wellbeing support does not replace the employer's health-and-safety duties.

IMMEDIATE RISK No one is expected to continue work that presents a serious and imminent danger. Move to safety, protect the children, call 999 if required and inform the Manager as soon as possible.

2. Roles and speaking up

- **Owner/Manager -** Oliver Riddett. Assesses risk, consults staff, provides resources, responds to concerns and maintains confidential employment records.
- **Deputy / senior person -** acts during the Manager's absence and ensures immediate safety concerns are not deferred.
- **All staff -** take reasonable care, follow controls, report hazards and injuries, attend training and seek help before health affects safe practice.
- **DSL -** leads where staff health, conduct, domestic circumstances or workplace behaviour creates a child-protection concern.

Staff may raise a concern through supervision, the grievance process or whistleblowing route. Bullying, harassment, victimisation and retaliation are not tolerated. Sexual-harassment concerns, including concerns involving third parties, are handled under the equality, safeguarding and employment procedures.

3. Work-related stress and mental health

- The Manager reviews workload, demands, control, support, relationships, role and organisational change, and completes an individual stress risk assessment where indicated.
- Staff receive regular supervision with protected time to discuss workload, child welfare, professional development, safety and support. Safeguarding information cannot be promised absolute confidentiality.
- Warning signs such as persistent absence, exhaustion, conflict, reduced concentration or unsafe mistakes prompt a supportive and proportionate conversation, not diagnosis by the setting.
- Agreed action may include priorities, temporary workload change, supervision, training, time away, occupational-health or GP advice, and a reviewed return-to-work plan.
- Immediate risk of self-harm or harm to others is treated as an emergency and escalated to appropriate emergency or health services.

4. Working arrangements, health and adjustments

- Rotas allow statutory ratios, suitable breaks, planning, cleaning and opening/closing tasks without routinely relying on unpaid or unsafe work.
- Sickness is reported promptly. Staff do not work where illness, medicine, alcohol or another substance means children could be put at risk.
- Pregnancy and new-mother risk assessments are reviewed as circumstances change. Disability and long-term health needs are considered through confidential discussion and reasonable adjustments.
- Menstrual health, menopause, fertility treatment, bereavement, caring responsibilities or domestic abuse are approached sensitively; any adjustment is based on the person and operational safety.
- Health information is restricted to those who need it. Colleagues receive only the practical safety or adjustment information necessary for their role.

5. Aggression, violence and harassment

Verbal abuse, threats, intimidation, stalking, discriminatory abuse and physical violence connected with work are foreseeable workplace risks and are assessed. Staff remain calm, keep an exit route, avoid physical confrontation, use an agreed alert and prioritise children.

- Meetings with a known risk are planned with appropriate staffing, venue, communication and ending arrangements; remote or off-site contact is considered where safer.
- If behaviour escalates, end the contact, move children and staff to safety and call police when there is danger, violence, a credible threat or criminal conduct.
- Record the incident and preserve messages or CCTV. The Manager considers reporting, contact restrictions, safeguarding action and follow-up support.
- A parent's complaint or distress is heard respectfully, but it does not justify abuse or override safe boundaries.

6. Lone working and home visits

Lone working is permitted only after a suitable assessment. The setting identifies who is at risk, foreseeable hazards, whether the task can be done alone, communication, supervision, emergency response and the person's health or experience.

- Opening, closing, administration, cleaning and maintenance arrangements include check-in, secure access, lighting, phone access and a missed-contact response.
- A home visit uses verified details, an itinerary, expected return time, check-in system and a known exit strategy. Staff do not enter if people, animals, weapons, substances or the environment create unmanaged risk.

- Personal phones may be authorised for lone-worker safety only under the device policy; personal numbers and data are protected wherever possible.
- No lone worker undertakes a task that legislation, the risk assessment or their competence requires another person to support.

7. Premises, tasks and incidents

- Staff follow risk assessments for manual handling, slips and trips, work equipment, substances, infection, fire, food safety and outdoor conditions.
- Defects are isolated or removed from use and reported. Only trained and authorised people use specialist equipment or hazardous substances.
- Work-related injury, ill health, near miss and violence are recorded promptly. The Manager applies the RIDDOR test and insurer requirements where relevant.
- After a serious event, immediate welfare support and a factual debrief are offered. A learning review must not become an informal disciplinary investigation.

8. Review and confidentiality

The Manager reviews anonymised patterns in workload, absence, incidents, staff turnover, supervision and grievances. Action is agreed and followed up. Individual health or complaint details are not discussed more widely than necessary. This policy is reviewed annually and sooner after a serious event, staff feedback, legal change or risk-assessment review.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- HSE: Work-related stress and mental health (current guidance)
- HSE: Managing the risks of lone working (current guidance)
- HSE: Violence at work (current guidance)
- Acas: Employment Rights Act 2025 (implementation guidance for 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 13

Safer Recruitment, Staffing and Deployment

PURPOSE Sets a defensible recruitment trail, September 2026 vetting and reference controls, statutory qualification ratios and ongoing suitability expectations.

Policy	13	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool recruits on merit and equality while treating safeguarding as a continuous responsibility. No single check establishes suitability. Decisions use identity, employment history, references, qualifications, interview evidence, criminal-record and barred-list information where eligible, overseas information and ongoing observation.

SEPTEMBER 2026 From 1 September 2026 the supervision exemption is removed for frequent unpaid teaching, caring for or supervising children. A person must not begin regulated activity until the required enhanced DBS and children's barred-list information has been received.

2. Planning and fair selection

- The role description identifies duties, required qualifications, regulated-activity status, working pattern, safeguarding responsibility and reasonable requirements.
- Advertising states the setting's safeguarding commitment and that appropriate suitability checks will be made.
- Application forms require a complete chronology; unexplained gaps, short employment and reasons for leaving relevant child-work roles are explored.
- Questions are consistent and evidence-based. At least two suitable people normally take part in selection, and conflicts of interest are declared.
- Health or disability questions are asked only where lawful and necessary, with reasonable adjustments offered throughout recruitment.

3. Pre-appointment checks

Check	Minimum control
Identity and right to work	Inspect acceptable original or approved digital evidence, complete the statutory right-to-work process and reconcile names, addresses and dates.
Qualifications	Verify certificates with the awarding body or approved record where necessary and confirm whether they meet current DfE early-years qualification requirements.
Written references	Obtain at least one before recruitment for staff, students and volunteers. Obtain it directly from an authorised senior person; do not accept open references or a family member. Verify the latest relevant work and the last employer where the applicant worked with children, and resolve concerns or inconsistencies.
DBS and barred list	For people aged 16 or over in eligible roles, obtain the level required by the EYFS and DBS rules. Record the certificate reference, date obtained and who checked it; do not routinely copy the certificate.
Overseas suitability	Where a person has lived or worked abroad, make additional checks that are reasonably available and assess any evidence gaps rather than treating a UK DBS check as complete.
Other suitability	Consider disqualification requirements, known convictions or cautions, safeguarding history, professional restrictions and information the candidate or an agency must disclose.

The DBS Update Service is checked only where the person is subscribed, the certificate is at the correct level and workforce, and consent is obtained. It does not replace identity, barred-list, reference, overseas or ongoing suitability checks.

4. Starting before or outside regulated activity

A person who requires an enhanced DBS check with children's barred-list information does not begin work or volunteering until it is received. The limited EYFS exception for an occasional supervised volunteer, such as a parent on a trip, is not used for overnight activity, personal care or work that meets the frequency test for regulated activity.

- Visitors, contractors and unchecked adults are never left unsupervised with children and cannot obtain unsupervised access to records or child-use areas.
- Agency staff are subject to written confirmation of the required checks, identity verification on arrival and a setting-specific induction. The setting remains responsible for deployment.
- Any risk-managed exception must be lawful, documented and approved by the Manager; convenience or staffing pressure is not justification.

5. Induction, probation and ongoing suitability

- Before unsupervised duties, induction covers safeguarding and child protection, DSL routes, emergency evacuation, health and safety, first aid, confidentiality, mobile devices, behaviour, allegations and whistleblowing.
- Staff receive safeguarding training meeting EYFS Annex C and refreshed at least every two years, with updates whenever needed to maintain knowledge and skills.
- Probation reviews conduct, competence, relationships, record quality, boundaries, attendance, training and any promised checks or qualification action.
- Regular supervision provides support, coaching and a confidential route to discuss children's development, wellbeing and protection and to identify solutions to issues.
- Staff must disclose promptly any event that may affect suitability. The Manager assesses risk, records action and obtains advice without assuming guilt or leaving children exposed.

- Where the legal threshold is met, the setting refers to DBS and any relevant professional regulator even if the person resigns before action concludes.

6. Statutory staffing and qualification ratios

Children	Minimum position for group-based provision
Under two	At least 1 adult to 3 children; at least one member of staff holds an approved level 3 qualification and at least half of the remaining staff hold an approved level 2 qualification.
Aged two	At least 1 adult to 5 children; at least one member of staff holds an approved level 3 qualification and at least half of the remaining staff hold an approved level 2 qualification.
Aged three and over	Normally at least 1:8, with at least one approved level 3 and at least half of the remaining staff approved level 2. A 1:13 ratio is available only when a suitable teacher/EYPS/EYTS is working directly with the children and at least one other member of staff holds an approved level 3 qualification.

Ratios are minimums, not staffing targets. The Manager increases staffing for needs, layout, outings, mixed ages, behaviour, intimate care, staff competence or risk. Children are usually within sight and hearing and always within sight or hearing; while eating, they are within both sight and hearing.

- The Manager holds an approved level 3 qualification or above and a named, capable and appropriately qualified deputy is available.
- Students and long-term volunteers aged 17 or over and apprentices aged 16 or over count only where the EYFS permits, after suitability, competence and paediatric-first-aid requirements are met; they may count no higher than one level below their study level.
- People under 17 are not left unsupervised. Supernumerary people are not relied on to meet ratios unless every statutory condition is met and the deployment decision is recorded.
- At least one current full paediatric first aider is available whenever children are present and accompanies outings. Qualification-counting PFA rules are checked for each practitioner.

7. Records, equality and review

The single recruitment record holds the application, chronology checks, interview decision, references, identity and qualification verification, right-to-work evidence, DBS reference and date, overseas checks, risk decisions, induction and review dates. Sensitive criminal-record and health information is access-controlled and retained only as required.

Recruitment and employment decisions comply with equality law. Safeguarding concerns are assessed fairly and proportionately, but children's welfare remains paramount. This policy is reviewed annually and sooner after a recruitment concern, DBS or EYFS change, audit finding or allegation.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- DBS: Regulated activity with children (updated 23 April 2026)
- DBS: Removal of the supervision exemption (effective 1 September 2026)
- Working Together to Safeguard Children 2026 (March 2026)
- Acas: Employment Rights Act 2025 (implementation guidance for 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 14

Outings, Missing Children and Safe Collection

PURPOSE Provides practical controls for trips and local walks, immediate action when a child is unaccounted for, and safe decisions when collection is late or unsafe.

Policy	14	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool plans outings so children can benefit from their community while foreseeable hazards are removed, reduced or managed. Attendance and headcounts are active safeguarding controls. A missing or uncollected child is treated according to risk, not an arbitrary waiting period.

MISSING CHILD If a child cannot be found after an immediate check of the place they were last seen, or the circumstances indicate immediate danger, call 999 without delay. Do not postpone a police call merely to complete a lengthy search.

2. Authorisation and planning an outing

- Parents receive the setting's usual local-outing arrangements on admission. Specific written information and permission are obtained for non-routine trips where the destination, transport, cost, timing or risk makes this appropriate.
- The named outing lead checks destination, route, weather, transport, accessibility, toilets, water, communications, emergency arrangements, public access and each child's medical, allergy, SEND and behaviour needs.
- Hazards and controls are assessed in advance and dynamically on the day. The EYFS does not require every outing assessment to be written, but the setting records planned outings and any assessment needed to demonstrate safe management.
- Staffing is decided from the children, activity, environment and competence. There is no universal statutory outing ratio such as 1:4; ratios are enhanced wherever risk requires it.
- Any vehicle, driver, child restraint and transport provider is suitable, lawful and adequately insured. Public transport and walking routes have clear boarding, alighting and crossing controls.

3. Outing equipment and control

- A named register shows each child, assigned adult and staff attending. Staff know the group total and any child who must remain specifically within reach.
- Headcounts and name-to-face checks take place before departure, after boarding or alighting, at every transition or regrouping point, after toilets, before leaving the venue and on return.
- The lead carries charged communication, emergency contacts, first-aid equipment, required medicines, plans and essential care supplies in a secure and accessible form.
- At least one current full paediatric first aider accompanies the outing. Staff maintain sight or hearing as required by the EYFS and both sight and hearing while children eat.
- High-visibility clothing, wrist links, buggies or other controls are used only where suitable for the child and risk; labels do not display unnecessary personal information.
- The outing is changed or abandoned if staffing, weather, transport, behaviour, medicine or another control is not safe.

4. If a child is unaccounted for

1. **Alert and verify.** Say the child's name and description, stop movement, check the register and last confirmed location, and alert the Manager or venue immediately.
2. **Protect the group.** One competent adult takes charge of the remaining children. Staff do not leave the group inadequately supervised to search.
3. **Search rapidly.** Check immediate high-risk and last-seen places, exits, toilets, vehicles and hiding places using assigned zones. Ask venue security to control exits and review CCTV where available.
4. **Call police.** Call 999 immediately where danger is possible and in any event when the rapid initial check does not locate the child. Give description, clothing, photo if available, medical or communication needs and last-seen details.
5. **Inform family and setting.** The Manager or delegated senior person informs parents or carers without obstructing the police response and ensures the setting's DSL is involved.
6. **Record and notify.** Preserve the register, timings, calls, staff accounts and relevant evidence. The Manager considers safeguarding referral, Ofsted serious-incident notification and insurer or premises notification.

If the child is found, a suitable adult checks wellbeing and first-aid needs and reassures without blame. Police and family are updated immediately. The child is not questioned repeatedly; any concerning disclosure is passed to the DSL.

5. Authorised collection

- A child is released only to a person explicitly notified by a parent or carer with authority. Changes are verified through a known contact route and a password or agreed identification process where used.
- Staff check court orders, parental-responsibility information and restrictions held by the setting; they do not mediate family disputes or disclose attendance to an unauthorised person.
- A child is not released to a person who appears unable to provide safe care because of intoxication, aggression, impairment, unsafe transport or another immediate concern. Staff keep the child safe, seek an alternative authorised collector and contact police or children's social care according to risk.
- No child leaves unsupervised. Staff do not take the child home or use a private vehicle merely because collection is late.

6. Uncollected child

1. **Reassure and supervise.** Keep the child with at least the staffing needed for safe care and maintain a calm routine; do not express blame in front of the child.

2. **Contact.** Telephone parents or carers and then authorised emergency contacts using every safe known route. Check messages, collection changes and known incidents.
3. **Assess risk.** Consider the child's age, needs, time, weather, family history, unexplained absence and whether anyone may be in danger. Escalate immediately if welfare concerns exist.
4. **Seek safeguarding support.** If no safe collection can be arranged promptly, contact Cornwall's Multi-Agency Support and Safeguarding Hub on 0300 123 1116; outside normal hours call 01208 251300. Call police for immediate danger. Follow professional instructions.
5. **Record and follow up.** Record times, calls, decisions, advice, eventual collection and the child's presentation. Repeated or concerning late collection is reviewed with the DSL and may require early-help or safeguarding action.

SAFEGUARDING There is no fixed one-hour rule. The timing of social-care or police contact is governed by the child's safety and the ability to secure prompt, authorised care.

7. Review, complaints and records

After a missing-child event or significant collection concern, the Manager completes a factual review of registration, communication, staffing, environment, transitions and decision-making. Necessary changes are made before the activity repeats. Records are retained under Policy 01 and shared under Policy 03. Complaints do not delay safeguarding action.

This policy is reviewed annually and sooner after an event, local safeguarding update, route or premises change, complaint or change to the EYFS.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Working Together to Safeguard Children 2026 (March 2026)
- Ofsted: Report a serious childcare incident (updated 24 April 2026)
- Cornwall Council: Child protection and safeguarding contacts (updated 6 August 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 15

Health, Illness, Allergies and Medical Needs

PURPOSE Uses current health-protection exclusions and clear medicine, allergy, infection-control and emergency arrangements without unsafe blanket rules.

Policy	15	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool promotes good physical and oral health, supports individual medical needs and reduces infection without excluding children unnecessarily. Decisions use the child's condition, ability to participate safely, risk to others, current UKHSA guidance and advice from relevant health professionals.

IMPORTANT CORRECTION Antibiotics do not create a universal 48-hour exclusion. Exclusion depends on the infection and current UKHSA guidance. Vomiting and diarrhoea require exclusion until 48 hours after the symptoms have stopped.

2. Information and individual plans

- Parents provide current emergency contacts, GP details, diagnoses, allergies, medicines, triggers, symptoms and professional instructions, and notify changes promptly.
- A written healthcare or allergy plan is agreed where a condition may require individual action. It states prevention, signs, routine care, medicine, emergency response, contacts and review dates.
- Staff receive role-appropriate instruction and practical training from a competent source before providing technical or condition-specific care.
- Information is shared only to the extent needed for safe care. Privacy, dignity, communication and age-appropriate participation are respected, and activities or evacuation arrangements are adjusted where reasonably required.

3. Fitness to attend and exclusions

A child should stay at home or be collected if they are too unwell to participate, need more one-to-one care than can safely be provided, have a condition requiring exclusion, or present a material infection risk that cannot be managed. Mild residual symptoms alone do not automatically require exclusion.

Situation	Setting response
Vomiting or diarrhoea	Exclude until 48 hours after the last episode. Seek health-protection advice for outbreaks, severe illness, blood in stool or other concern.
Antibiotics	Follow the condition-specific UKHSA exclusion period and the child's fitness. There is no general rule requiring 48 hours after the first dose.
Fever or respiratory illness	A child with a high temperature or who is more than mildly unwell stays away until well enough to attend. Current UKHSA advice applies; routine COVID testing is not a setting requirement.
Rash or uncertain infection	Separate from close contact where practical, contact the family and obtain clinical advice where needed. Emergency signs such as a non-blanching rash with serious illness require 999.
Medicine given before arrival	Paracetamol or another medicine does not by itself decide attendance. Parents disclose the dose and reason; the setting assesses symptoms, masking of illness, safe dosing and the child's fitness.

The Manager uses the latest UKHSA exclusion table rather than reproducing every infection in this policy. Families may be asked for clinical or health-protection advice where risk is uncertain, but a routine doctor's certificate is not required unless there is a specific and lawful reason.

4. Medicines

- Prescription medicine is administered only as prescribed by a doctor, dentist, nurse or pharmacist. Aspirin is given only when prescribed by a doctor.
- Prescription and non-prescription medicine is given only with prior written permission for that specific medicine, dose, time, route and reason, except emergency action authorised by law or a current plan.
- Medicine arrives in the original labelled container, in date, with the child's name and instructions. Staff check the right child, medicine, dose, route, time and record before and after administration.
- Each administration, refusal, omission, spill or error is recorded and the parent informed on the same day or as soon as reasonably practicable. A significant error is escalated for clinical advice and incident review.
- Medicines are stored securely at the required temperature while remaining promptly accessible. Emergency medicines accompany the child; long-term or complex treatment has a written plan and trained named staff. Doses are not changed without authorised written clinical direction.

5. Allergy and anaphylaxis

ANAPHYLAXIS Suspected anaphylaxis is a medical emergency: use the child's adrenaline auto-injector in accordance with training and the plan, call 999, state 'anaphylaxis', follow instructions and do not leave the child alone.

- Allergy plans include allergens, usual and severe symptoms, medicine, injector location, emergency contacts, food and non-food controls and an agreed photo where appropriate.
- Staff check labels every time, prevent cross-contact during storage, preparation, cooking and serving, and supervise eating. Unlabelled or uncertain food is not served to the affected child.

- The setting is allergen-aware, not guaranteed allergen-free. A broad 'nut-free' label is not relied on as protection; individual controls, hand hygiene, cleaning, supervision and family information remain essential.
- Children participate where reasonable controls make this safe; stigma is challenged. After an emergency dose, the child goes to hospital by ambulance even if they appear to recover, with used devices and the record handed over.

6. Infection prevention and outbreaks

- Children and adults wash hands at key times. Respiratory hygiene, ventilation, cleaning, food hygiene, laundry, waste and body-fluid procedures follow current guidance. Protective equipment is based on exposure risk and does not replace hand hygiene.
- Parents are informed of relevant exposure without naming an affected child. Attendance and symptom patterns are monitored for a possible outbreak.
- The Manager contacts the UKHSA Health Protection Team or local authority when guidance indicates, including an unusual cluster, serious infection or difficulty controlling spread, and follows advice on communication, testing, cleaning or exclusion.
- Registered medical practitioners and laboratories have the statutory duty to notify specified diseases. The setting does not automatically notify Ofsted or UKHSA merely because a child has any diagnosis; it applies the relevant incident, outbreak and health-protection tests.

7. Becoming unwell or a medical emergency

1. **Assess and protect.** A trained adult stays with the child, gives immediate care and reduces contact with others where infection may be involved without isolating the child unsafely.
2. **Call for help.** Call 999 for breathing difficulty, anaphylaxis, seizure requiring emergency action, altered consciousness, severe injury or any other potentially life-threatening condition.
3. **Use the plan.** Give emergency medicine or treatment within training and the child's current plan and follow the call handler's instructions.
4. **Contact family.** Notify parents or carers and emergency contacts, but do not delay emergency treatment or ambulance transfer.
5. **Record and review.** Record symptoms, observations, medicine, calls, advice and handover. Consider Ofsted, safeguarding, RIDDOR, health-protection and insurer routes according to the facts.

8. Return, confidentiality and review

Return follows the applicable exclusion period and the child's ability to participate safely. Plans are reviewed after emergency treatment, diagnosis or medicine changes, hospital attendance or a control failure. Health records remain access-controlled. This policy is reviewed annually and sooner after a significant incident or change in UKHSA or EYFS requirements.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- UKHSA: Public-health exclusion periods (updated 9 July 2026)
- UKHSA: Preventing and controlling infections (current guidance)
- GOV.UK: Notifiable diseases and causative organisms (current guidance)
- NHS: Anaphylaxis (current clinical information)
- Ofsted: Report a serious childcare incident (updated 24 April 2026)

Approval / Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 16

Safeguarding and Child Protection

PURPOSE Sets the setting's immediate response to welfare concerns, disclosures, allegations, unsafe practice and absence, with clear Cornwall referral and September 2026 training arrangements.

Policy	16	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool safeguards children by noticing, listening, recording and acting without avoidable delay. The child's welfare is paramount. Safeguarding is everyone's responsibility and applies to harm at home, in the community, online or within the setting, including harm caused by another child or an adult in a position of trust.

ACT NOW If a child may be in immediate danger, call 999. If there is a safeguarding concern, immediately contact Cornwall's Multi-Agency Support and Safeguarding Hub (MASSH) in line with local procedures. Staff do not wait for proof, a manager's permission or parental consent before obtaining urgent protection.

2. Safeguarding leadership and contacts

Role / service	Contact and purpose
Designated Safeguarding Lead	Oliver Riddett, Owner/Manager — leads decisions, referrals, records, staff support and liaison with statutory services.
Deputy DSL	Beth Morgan, Deputy Manager — acts when the DSL is unavailable; urgent concerns are never held until the DSL returns.
Cornwall MASSH	0300 123 1116 / massh@cornwall.gov.uk; use Cornwall Council's online form for written referrals. Out of hours: 01208 251300.
Police	999 for immediate danger or a crime in progress; 101 for non-emergency police advice where appropriate.
Cornwall LADO	01872 326536 / lado@cornwall.gov.uk for allegations or suitability concerns about people who work with children.

If the concern is about Oliver Riddett, staff contact Beth Morgan and the LADO directly. If the concern is about Beth Morgan, staff contact Oliver Riddett and the LADO. Anyone may contact Cornwall's Multi-Agency Support and Safeguarding Hub (MASSH) or the police directly where internal action is unsafe, unavailable or inadequate.

3. Recognising possible harm

Staff remain alert to physical, sexual and emotional abuse; neglect; domestic abuse and coercive control; child sexual or criminal exploitation; harmful sexual behaviour; online abuse; fabricated or induced illness; FGM; radicalisation; discrimination; trafficking; and risks connected with family or community circumstances.

- Possible signs include an injury or explanation that does not fit, changes in behaviour or wellbeing, fearfulness, hunger, poor hygiene, regression, sexualised behaviour, concerning play or words, repeated absence, or an adult's inappropriate boundaries.
- Babies, pre-verbal children, disabled children and children with communication differences may show distress through behaviour, movement, sleep, eating, play or changes in presentation rather than a verbal disclosure.
- A single sign may have many explanations. Staff record what they observe and pass the concern on; they do not diagnose abuse or decide that a concern is too small to share.
- Concerns involving another child are treated as safeguarding matters for every child involved, with developmentally appropriate support and no automatic criminalising or labelling.

4. Responding to a disclosure or concern

1. **Listen.** Stay calm, take the child seriously and allow their own words, communication or play without pressing for detail.
2. **Reassure carefully.** Say they were right to tell and are not to blame. Do not promise secrecy; explain that help will be sought.
3. **Clarify only what is necessary.** Use open prompts such as 'Tell me what happened'. Do not investigate, confront anyone or ask leading or repeated questions.
4. **Protect.** Call emergency services where required, preserve evidence and avoid actions that could increase danger or compromise an enquiry.
5. **Report immediately.** Tell the DSL or deputy and make a direct referral if delay or conflict makes that necessary.
6. **Record.** Write the date, time, context, exact words or observed communication, injuries, witnesses, action and people contacted. Sign and retain the original record securely.

The DSL applies local thresholds and consults or refers through Cornwall's Multi-Agency Support and Safeguarding Hub (MASSH), using the council's online referral form where required. Parents are normally informed unless doing so could place a child or another person at greater risk, prejudice an enquiry or conflict with statutory advice.

5. Attendance and unexplained absence

- Parents report absence and the expected return under the separate Attendance and Absence Policy. The setting records the reason, source and time of notification.
- Unnotified or prolonged absence is followed up promptly using parents and alternative emergency contacts. A fixed two-hour or next-day wait is not used where risk requires earlier action.
- The DSL considers patterns, vulnerability, family circumstances and failed contact. Concerns are referred to MASSH and/or a police welfare check is requested.
- The setting does not close a child's record merely because contact is lost or the destination is unknown; safeguarding and transfer procedures are followed.

6. Allegations and concerns about adults

Any information that a staff member, volunteer, contractor or other person working with children may have harmed a child, committed an offence against a child, posed a risk of harm, or behaved in a way suggesting they may be unsuitable must be reported immediately. The person receiving it records facts and does not investigate.

- The Manager contacts Cornwall LADO for advice and informs the LADO within one working day where the allegation threshold is met. If the concern is about the Manager, the Deputy or reporter contacts LADO directly.
- The child's immediate safety is secured. Suspension is not automatic; neutral redeployment, supervision or other restrictions are considered with LADO advice and without compromising the enquiry.
- Registered providers notify Ofsted of allegations of harm or abuse by anyone living, working or looking after children at the premises, and the action taken, as soon as reasonably practicable and within 14 days.
- Concerns below the harm threshold are recorded and reviewed as low-level concerns where appropriate. Patterns, boundary breaches and suitability implications are not dismissed because a single event appears minor.
- A DBS referral and any professional-regulator referral are made where the legal threshold is met, including where the person resigns before a process concludes.

7. Whistleblowing and professional challenge

Staff, students and volunteers may raise poor or unsafe practice with Oliver Riddett or Beth Morgan and will be told how the concern will be handled. If internal routes are inappropriate or the concern is not addressed, they may use Ofsted's complaints route, the NSPCC whistleblowing advice line on 0800 028 0285 / help@nspcc.org.uk, or another prescribed person within its remit.

Employment-law protection depends on the statutory protected-disclosure tests, including reasonable belief, public interest and an appropriate route; it is not accurately described as automatic protection for every report made 'in good faith'. Retaliation, victimisation or attempts to suppress genuine safeguarding concerns are not tolerated.

8. Prevent, online safety and professional boundaries

- The setting has due regard to the Prevent duty while protecting lawful belief, equality and children's developmental context. Concerns are discussed with the DSL and referred through local safeguarding routes; staff do not profile families by religion, ethnicity or political opinion.
- Online harm, image sharing and connected devices are managed under Policy 05. Personal devices are not used to record children, and professional communication uses approved accounts and boundaries.
- Staff avoid favouritism, secrecy, unnecessary one-to-one attention, sexualised or humiliating language, personal social-media contact, and physical contact that is not necessary, proportionate and child-centred.
- Intimate care is provided by suitable staff under Policy 20, with privacy balanced against safeguarding and support needs. Required care is never withheld to avoid appropriate professional contact.

9. Information sharing, records and family support

- Data protection is not a barrier to proportionate safeguarding sharing. The DSL identifies the purpose, lawful basis, relevant information, recipient and rationale, and records decisions including a decision not to share.

- Safeguarding records are factual, chronological, access-controlled and separate from routine learning records. They are transferred securely to the next DSL where necessary for protection.
- The child's voice, identity, culture, disability and family context are considered without stereotyping. Families are offered early help and practical support where safe, while the setting remains professionally curious.
- Looked-after and previously looked-after children receive sensitive key-person support coordinated with carers, social workers and relevant plans; the DSL is the setting lead.

10. Safer culture, training and review

- Recruitment and suitability follow Policy 13. Visitors and shared-premises access follow Policy 19. No unchecked person has unsupervised contact with children.
- All practitioners receive safeguarding training meeting EYFS Annex C and renew it every two years. Annual refreshers are used where needed to maintain skills, respond to change or address concerns.
- The DSL's training also meets Annex C, takes account of local safeguarding-partner advice and covers culture, recruitment, referrals, allegations and online safety.
- Induction, supervision, scenarios, audits and team discussion test whether staff can put the policy into practice. Reading and signing the policy alone is not sufficient training.

This policy is reviewed annually and sooner after a concern, allegation, serious incident, safeguarding-partner update, audit finding or statutory change. A qualified safeguarding or legal adviser is consulted where facts or duties are contested.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Working Together to Safeguard Children 2026 (March 2026)
- Cornwall Council: allegations and LADO (updated 17 June 2026)
- Cornwall Council: Multi-Agency Support and Safeguarding Hub (MASSH) (updated 5 August 2026)
- Prevent duty guidance: England and Wales (current statutory guidance)
- Information Sharing: advice for safeguarding practitioners (current guidance)
- GOV.UK: whistleblowing and protected disclosures (published 7 April 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 17

Food, Nutrition and Safer Eating

PURPOSE Combines the statutory nutrition guidance with practical allergen, choking, hygiene, packed-lunch and incident controls for every meal and snack.

Policy	17	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Food and drink provided by Children of Towan Preschool is healthy, balanced and nutritious. The setting has regard to the statutory EYFS nutrition guidance and makes eating calm, inclusive and developmentally appropriate. Food safety, allergy and choking controls take priority over convenience or pressure to finish food.

SAFER EATING Children must be within both sight and hearing while eating. A member of staff with a current full paediatric first-aid certificate is in the room, and staff remain close enough to recognise silent choking and act immediately.

2. Responsibilities and food information

- **Manager -** maintains food-safety arrangements, supplier and training records, menu oversight, allergen systems and incident notifications.
- **Named mealtime lead -** confirms the register, special-diet information, assigned checker, seating and first-aid cover at each meal or snack.
- **Food handlers -** follow hygiene and allergen controls, check labels and report illness, contamination, error or uncertainty immediately.
- **Parents and carers -** provide accurate and current information about allergy, intolerance, dietary requirements, texture, feeding development and food sent from home.

Before admission, the setting obtains special dietary requirements, preferences, allergies, intolerances and health requirements. Information is updated through ongoing discussion and shared with every person involved in preparing, checking or serving food, without unnecessary public display of medical information.

3. Healthy, balanced and inclusive provision

- Menus and snacks are planned using the EYFS nutrition guidance, with suitable variety across food groups, portions and textures. Fresh drinking water is always available and accessible.
- Food supports oral health and limits free sugars, excess salt and foods high in saturated fat in accordance with the guidance; food is not described morally as 'good' or 'bad'.
- Cultural, religious, ethical, medical and SEND-related needs are respected. Equivalent safe alternatives are planned so a child is not unnecessarily separated or offered a nutritionally poor substitute.
- Parents providing packed food receive clear guidance. Staff do not shame a family or remove food without discussion unless an immediate safety risk requires action.
- Children are encouraged to explore food but never forced, bribed, punished or required to clear a plate. Hunger and fullness cues are respected, including during responsive feeding.

4. Allergy and special-diet control

- Each known allergy has a current action plan agreed with parents and, where appropriate, health professionals. Staff know symptoms, treatment and the difference between allergy and intolerance.
- At every meal and snack, one named adult checks the correct child, food, label, recipe and plan before service. Uncertain, unlabelled or substituted food is not given.
- Ingredients and labels are checked every time because recipes change. Cross-contact is controlled through storage, surfaces, utensils, handwashing, preparation order and supervision of food sharing.
- Emergency medicine remains immediately accessible. Suspected anaphylaxis is treated under the child's plan: give the adrenaline auto-injector if indicated, call 999 and state 'anaphylaxis'.
- The setting is allergen-aware, not guaranteed allergen-free. A 'nut-free' description is not relied on as the safety control and must not create false reassurance.
- Food prepacked for direct sale by the setting is labelled with the food name and a full ingredients list with the 14 regulated allergens emphasised, as required by PPDS rules.

5. Choking prevention and mealtime practice

- Food is prepared for the individual child's development and familiar texture, not age assumptions alone. Whole grapes and similar foods are cut lengthways; hard, round and other high-risk items are avoided or modified under current guidance.
- Children sit securely and upright in an appropriate chair. Distractions and rushing are reduced; children do not eat while walking, running, lying down or travelling unless a specific safe arrangement applies.
- Staff position themselves to see faces and food, supervise food sharing and remain actively attentive rather than completing unrelated tasks.
- A choking event requiring intervention is recorded with the food, preparation, location, circumstances and response. Parents are informed and the Manager reviews trends and controls.

6. Food hygiene and premises

- Everyone preparing or handling food receives food-hygiene training appropriate to their role and is assessed as competent. The EYFS requires training; it does not prescribe that every handler must hold a particular Level 2 certificate.
- Hands, food-contact surfaces, equipment and highchairs are cleaned at the correct times. Gloves are used where the risk assessment requires them and never replace handwashing.
- Raw and ready-to-eat foods, allergens and cleaning chemicals are stored safely. Fridge, date-code, cooling, reheating and contamination controls follow the setting's food-safety management system.

- The setting keeps suitable supplier, ingredient, delivery, temperature, cleaning, training and corrective-action records and acts promptly on product withdrawals or recalls.
- A person with vomiting, diarrhoea, infected skin lesions or another food-safety risk does not handle food and follows current health-protection exclusion advice.

7. Incidents, concerns and review

- Food errors, allergic reactions, choking, contamination, foreign objects and temperature failures receive immediate care, family communication, factual recording and Manager review.
- Suspected food poisoning is reported to Environmental Health or UKHSA as advised. Food, packaging, batch details and records are preserved where safe.
- Ofsted is notified of food poisoning affecting two or more children cared for on the premises as soon as reasonably practicable and within 14 days.
- Menus and practice are reviewed at least termly and after any incident, allergy change, child development change, supplier substitution or guidance update.

This policy is reviewed annually and sooner after a serious incident, inspection, menu-system change or statutory update. It should be read with Policies 11 and 15.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Early Years Foundation Stage nutrition guidance (statutory guidance from September 2025)
- FSA: Allergen guidance for food businesses (current guidance)
- FSA: PPDS allergen labelling for nurseries (updated 17 July 2026)
- FSA: Safer Food, Better Business (current food-safety management guidance)
- Ofsted: Report a serious childcare incident (updated 24 April 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 18

Staff Sickness and Absence Management

PURPOSE Provides a fair, supportive and operationally safe process for reporting, certification, pay, cover, return to work, disability and longer-term absence.

Policy	18	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool manages absence consistently while considering individual circumstances, equality, confidentiality and children's safety. Sickness processes are not punitive. Genuine ill health is supported; unauthorised absence or dishonesty is addressed through the appropriate conduct process rather than being confused with illness.

2026 SSP CHANGE From 6 April 2026, eligible workers receive Statutory Sick Pay from the first qualifying day of sickness and the lower earnings limit has been removed. Contractual sick pay, if any, remains governed by the employment contract.

2. Reporting an absence

1. **Contact.** Telephone Oliver Riddett or Beth Morgan personally as soon as the need for absence is known and normally by 7:30am on the first day. A text or message is used only when calling is not reasonably possible.
2. **Explain.** Give the reason in sufficient practical terms, the likely duration, urgent work or safeguarding information and whether medical or infection-control advice affects return.
3. **Keep in touch.** Agree the next contact rather than automatically calling every day. The level and method of contact reflect the likely duration, health and need to plan cover.
4. **Escalate safely.** If the absence relates to a work injury, safeguarding issue, pregnancy, stress, domestic abuse or a risk created by work, tell the Manager so immediate protective action can be considered.

The setting recognises genuine emergencies and communication difficulties. Failure to meet the normal deadline is considered in context before absence is classified as unauthorised.

3. Evidence and sick pay

Period / issue	Required approach
Seven calendar days or fewer	The employee self-certifies in the agreed form. A medical fit note is not normally required for statutory purposes.
More than seven calendar days	A fit note from an authorised healthcare professional is provided, including non-working days in the count. Reasonable delay in obtaining it is discussed.
'May be fit for work'	The Manager and employee discuss suggested changes. If safe and workable adjustments cannot be agreed, the employee is treated as not fit for work for the period.
Statutory Sick Pay	Payroll applies current SSP eligibility and rate rules. From 6 April 2026, payment begins on the first qualifying day for an eligible worker and is the lower of the statutory flat rate or 80% of average weekly earnings.
Not eligible / entitlement ending	The setting gives the required written explanation or SSP1 form and signposts the employee to current advice.

4. Safe staffing and fitness for work

- The Manager checks numbers, qualifications, paediatric first aid, key-person needs and deployment before accepting children. Ratios are minimums and unsafe pressure is not placed on remaining staff.
- Cover uses suitable existing staff, approved bank or agency staff and lawful deployment. Identity, checks, induction and competence are confirmed; an unfamiliar person is not treated as automatically suitable because an agency supplied them.
- If safe cover cannot be secured, places, rooms, hours or the session are reduced or closed and families are informed promptly.
- Staff do not attend while infection-control exclusion applies or while illness, medication, alcohol or another substance could impair safe care. Medical advice is sought where medication may affect work with children.

5. Return-to-work discussion

- A proportionate private discussion takes place after each sickness absence to confirm dates, self-certification or fit note, current fitness, infection controls, work-related factors and support.
- The discussion is supportive and does not require unnecessary diagnostic detail. Relevant actions, adjustments and review dates are recorded and access-controlled.
- A phased return, temporary duties, altered hours, equipment, additional supervision or occupational-health advice may be considered. Safety-critical duties are restored only when the person can perform them safely.
- Annual leave continues to accrue during sickness. Requests to use or rearrange holiday are handled under current law; the setting does not force statutory holiday to replace eligible sick leave.

6. Monitoring and review points

The Manager records duration and reason categories to identify support needs, work causes and operational patterns. A trigger is a prompt for review, not an automatic warning or evidence of misconduct.

- Short-term and long-term absence are considered differently. The employee is invited to explain any pattern, medical issue, workplace cause or other relevant circumstances.
- Pregnancy-related and disability-related absence is identified separately where appropriate. Equality duties and reasonable adjustments are considered before attendance targets or formal action.

- Time off for dependants, bereavement, family leave, appointments, domestic emergencies or another statutory/contractual reason is recorded under the correct procedure rather than automatically as sickness.
- Inconsistent evidence, failure to report or unauthorised absence may move to investigation under the disciplinary procedure, with the employee given the information and opportunity to respond.

7. Long-term or recurring ill health

- Absence lasting more than four weeks may be treated as long-term, but support begins earlier where useful. Contact is agreed and does not become intrusive or a demand to work while unfit.
- With informed consent, relevant medical or occupational-health evidence may be obtained. The employee can see and comment on information in accordance with applicable rights.
- The setting consults on prognosis, barriers, reasonable adjustments, rehabilitation, alternative duties and the effect on the service. Reviews have clear dates and written outcomes.
- Capability dismissal is a last resort after fair consultation, current evidence, reasonable time and adjustments, and consideration of alternatives. Specific legal advice is obtained before ending employment for ill health.

8. Confidentiality, review and related procedures

Medical and absence information is limited to those who need it for pay, support, safety or management. Colleagues are told only the practical information necessary for cover. This policy is reviewed annually and after a material legal change, dispute, recurring pattern or service disruption. It should be read with Policy 12, the employment contract, disciplinary and grievance procedures, and Policy 15.

Legal and guidance basis

- Acas: Statutory Sick Pay (updated for 6 April 2026 changes)
- Acas: Managing sickness absence (current guidance)
- GOV.UK: Taking sick leave and fit notes (current guidance)
- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- HSE: Work-related stress and mental health (current guidance)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 19

Shared Premises, Hall Committee and Visitor Access

PURPOSE Defines who may enter Porthtowan Village Hall during preschool sessions, how access is authorised and supervised, and when suitability checks are required.

Policy	19	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool operates from shared premises but controls the areas used for childcare while children are present. Hall ownership, committee membership, maintenance responsibility or possession of a key does not give an automatic right to enter the preschool session. Access is agreed, necessary, proportionate and recorded.

ACCESS RULE Children are never left with an unauthorised or unchecked adult. In a genuine emergency, immediate life-safety access takes priority, while staff keep children supervised and record what occurred.

2. Responsibilities and agreed use

- **Manager -** agrees routine hall access, assesses suitability and DBS requirements, maintains the visitor system and liaises with the hall committee.
- **Session lead -** controls entry, verifies identity, assigns supervision and responds to unexpected access or a security concern.
- **Hall committee / premises contact -** gives reasonable notice of inspections, contractors, testing, deliveries or works and shares hazards or emergency information.
- **All staff -** challenge unknown people politely, secure doors, protect records and report any breach immediately.

The setting and hall committee maintain a written understanding of preschool hours, exclusive or shared areas, keys, alarms, storage, utilities, emergency access, contractors, cleaning and reporting of defects. Changes to use are assessed before implementation.

3. Access categories

BANNED DOG BREEDS Banned breeds, including XL Bullies, are never permitted; exemption certificates do not alter this rule.

Person / situation	Control during childcare hours
Parent or authorised collector	Access only for drop-off, collection, meeting or agreed participation; remains within the permitted area and does not gain access to another child's records or care.
Occasional committee member or hall user	Prior agreement where practicable, identity check, sign-in and continuous supervision in childcare areas. No unsupervised contact, personal care or routine work alongside children.
Contractor, inspector or delivery	Verify identity and purpose. Schedule outside sessions where reasonably possible; isolate work, tools and hazards and supervise or separate the person from children.
Regular worker or volunteer	The Manager determines whether EYFS enhanced DBS and children's barred-list checks are required from the activity, location and timing before access begins. Supervision does not replace a check where the law requires one.
Emergency responder / urgent repair	Admit without administrative delay when necessary for safety. Staff maintain supervision, move children from hazards and complete the record afterwards.

4. Suitability and DBS decisions

A DBS decision is not based merely on the title 'committee member'. Under the EYFS, enhanced criminal-record and barred-list checks are required for relevant people aged 16 or over who work directly with children or work on the childcare part of the premises when children are present, subject to the precise exceptions. People who may have regular contact must be suitable.

- From 1 September 2026, frequent unpaid teaching, training, caring for or supervising children is regulated activity even when supervised; more than three days in 30 or overnight meets the period condition.
- The limited occasional supervised-volunteer exception does not apply to overnight activity or personal care. An occasional visitor remains supervised and is not used to perform staff duties.
- The Manager records the role, frequency, areas, child contact, personal care, supervision, check level and decision. Eligibility for a check is confirmed before applying; a DBS certificate is not a substitute for access control.
- No one starts a role requiring the EYFS enhanced and barred-list check until it has been received. Unchecked people never have unsupervised contact with children.

5. Entry, supervision and departure

1. **Arrange.** Book non-emergency access with the Manager, describe the task, people, area, equipment and expected duration, and provide risk information.
2. **Verify.** A staff member controls entry, checks identity and purpose, confirms authorisation and records arrival.
3. **Brief.** Explain permitted areas, fire and emergency arrangements, confidentiality, photography prohibition, toilets, safeguarding and who is supervising.
4. **Control.** Use barriers, locked storage, safe routes or relocation of children. Visitors wear identification where appropriate and remain with the assigned adult.
5. **Close.** Check the area, tools, substances, keys and doors; record departure, defects, incidents and any follow-up.

6. Keys, doors, records and technology

- External doors and gates are secured against unauthorised entry and children's unsupervised exit while retaining safe emergency escape. Keys and access codes are limited and changes are reported promptly.
- Hall users do not enter preschool storage, office systems or child-use toilets during sessions unless specifically authorised and controlled.
- Paper and digital records, registers, medication and staff information remain locked or screened. A visitor is not permitted to read, photograph or discuss personal information without a verified lawful purpose.
- Photography, recording, personal calls and connected devices follow Policy 05. CCTV or building systems are positioned and accessed lawfully and do not intrude into intimate-care areas.
- The hall committee, users, contractors and visitors must not bring a banned dog breed onto the premises. Any proposed animal visit is agreed in advance and risk-assessed, but a risk assessment cannot permit a banned breed.

7. Unexpected access or concern

- Staff do not physically confront a person where this could increase risk. They bring children together or move them to safety, summon the Manager and call police for forced entry, threat or immediate danger.
- A safeguarding concern about a visitor, committee member or contractor is reported to the DSL and may require children's social care, police, LADO, Ofsted or the person's employer.
- Lost keys, code compromise, propped doors, unauthorised entry, confidential-information exposure and repeated access failures are recorded and risk-assessed before normal arrangements resume.

8. Review

The Manager and hall contact review access at least annually and after building work, a new keyholder, a change of hall use, incident, complaint or legal update. The setting's safeguarding judgement is not overridden by commercial convenience or informal custom.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- GOV.UK: banned dogs (current legal guidance)
- DBS: removal of the supervision exemption (effective 1 September 2026)
- Working Together to Safeguard Children 2026 (March 2026)
- Cornwall Council: allegations and LADO (updated 17 June 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 20

Nappy Changing, Intimate Care and Toilet Learning

PURPOSE Protects dignity, health, inclusion and safeguarding during nappy changes, toileting, accidents and the gradual development of independence.

Policy	20	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Nappy changing and toileting are ordinary care and learning experiences, not behaviour problems. Children of Towan Preschool provides timely care with warmth, consent-aware communication, suitable hygiene and professional transparency. A child is not shamed, punished, excluded or left uncomfortable because they are not toilet independent.

SAFEGUARDING Personal care connected with toileting is regulated activity. Only staff whose required suitability checks are complete provide it. An occasional unchecked volunteer or visitor never changes a child or assists with intimate toileting.

2. Partnership and individual needs

- Parents share the child's routine, words or signs, products, allergies, skin needs, health conditions, developmental stage and any professional plan. Information is reviewed when needs change.
- An individual intimate-care plan is used where care is complex, frequent, medically directed or affected by SEND, trauma, mobility, communication or safeguarding needs. It identifies assistance, equipment, staffing, privacy and recording.
- The child's communication, preferences and growing independence shape the approach. Cultural or family preferences are respected where compatible with the child's welfare, equality and safe practice.
- The setting keeps essential supplies and asks families for preferred nappies, wipes and spare clothes, but a missing item never results in care being withheld.

3. Safe nappy-changing sequence

1. **Prepare.** Tell a colleague, check the changing space, gather the child's named supplies and protective equipment, and wash hands before bringing the child.
2. **Communicate.** Explain what will happen, use the child's words or signs and seek cooperation. Distress or refusal is explored calmly; required care is not forced without considering alternatives, support and family contact.
3. **Change safely.** Maintain physical support and never leave a child unattended on a raised surface. Use single-use gloves and an apron according to exposure risk; clean front to back and avoid unnecessary exposure.
4. **Observe without diagnosing.** Notice soreness, broken skin, unusual marks, pain, bowel or urine changes and the child's communication. Do not photograph intimate areas on a setting or personal device.
5. **Dispose and clean.** Bag and place waste in the designated lidded system, remove protective equipment safely, clean and disinfect the mat and touch points, and manage soiled clothing in a sealed named bag.
6. **Wash and record.** Wash the child's and adult's hands, settle the child, record the care and any concern, and inform parents of relevant health or supply issues.

4. Toilet learning

- Toilet learning begins from readiness and family discussion, not a fixed age or pressure to meet a deadline. Signs may include awareness, longer dry periods, interest, communication and ability to sit safely.
- Staff offer regular, predictable opportunities and accessible clothing, foot support, a suitable potty or toilet insert and the child's preferred communication. Prompting is gentle and never coercive.
- Success is acknowledged without excessive rewards or comparison. Accidents are expected and handled privately, calmly and without teasing, disgust, punishment or loss of activities.
- Children learn the sequence of clothing, wiping, flushing and handwashing in manageable steps. Assistance is reduced as competence grows, but supervision remains appropriate to age, need and premises.
- Regression, constipation, pain, repeated withholding, urinary symptoms or distress is discussed sensitively with parents and may require health advice. Staff do not diagnose or prescribe a training method.

5. Privacy, safeguarding and staffing

- Changing and toileting privacy is balanced with safeguarding and support. The arrangement is observable or interruptible to colleagues without exposing the child to passers-by or other children unnecessarily.
- A second staff member is not automatically required for every change. Two-person care is used when an individual plan, moving-and-handling need, allegation risk, distressed child or dynamic assessment requires it.
- Personal phones, cameras and recording devices are not used or carried into intimate-care activity except an authorised emergency communication device kept outside direct care as the Manager directs.
- Staff do not make sexualised, mocking or body-shaming comments, ask a child to keep care secret, or provide care beyond their training. Professional language and touch remain necessary and proportionate.
- Visitors, hall users and unchecked volunteers do not enter active changing areas or assist. Doors are not locked in a way that prevents emergency access or professional oversight.

6. Hygiene, infection and environment

- The setting provides suitable hygienic changing facilities, toilets and hand basins. Supplies are stored safely and changing surfaces are intact, waterproof and easy to clean.
- Each child has named creams and products with parent permission where required. Products are not shared and staff follow medicine procedures if a preparation is medicinal.
- Spillages, blood, diarrhoea, vomit, reusable items, laundry and waste follow current infection-prevention procedures. Enhanced cleaning or health-protection advice is used during an outbreak.
- Potties are emptied into the toilet, cleaned and disinfected after each use, stored dry and never cleaned in a food-preparation sink.

7. Recording and concerns

- The setting records each nappy change or significant toileting care with time, staff initials and relevant bowel, urine, skin, product, accident or supply information. Routine records are proportionate and not limited to children under three.
- Parents receive relevant same-day information while the child's privacy is protected. Medical or safeguarding details are not displayed publicly or discussed at the door within others' hearing.
- Unexplained marks, bleeding, pain, sexualised behaviour, repeated severe rash, neglect of basic care, a concerning disclosure or an adult boundary concern is reported immediately to the DSL under Policy 16.
- Staff record observed facts and the child's exact words. They do not question repeatedly, promise secrecy, confront a family or delay a referral while seeking an alternative explanation.
- An allegation about a staff member is managed under the LADO procedure; the care record is preserved and not rewritten.

8. Inclusion and review

Reasonable adjustments are made so disability, developmental difference, continence needs or delayed toilet learning do not prevent equal access. Staff receive induction and refreshers in safeguarding, infection control, communication, moving and handling, and any individual technique they perform. This policy is reviewed annually and after an incident, complaint, infection cluster, equipment change or updated plan.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- UKHSA: Preventing and controlling infections (current guidance)
- Working Together to Safeguard Children 2026 (March 2026)
- SEND Code of Practice: 0 to 25 years (current statutory guidance)
- NHS: How to potty train (current health guidance)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 21

Complaints and Concerns

PURPOSE Provides an accessible, fair route for resolving concerns while protecting children, meeting the 28-day EYFS requirement and preserving every person's right to contact a regulator or safeguarding service.

Policy	21	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool welcomes concerns as an opportunity to put matters right and improve practice. Complaints are handled promptly, impartially, respectfully and without disadvantage to a child or family. A concern may be raised verbally, in writing or with communication support; no legal terminology or special form is required.

SAFEGUARDING FIRST A complaint never delays action to protect a child. Call 999 if anyone is in immediate danger. Safeguarding concerns are passed immediately to the DSL and children's social care or police as required; allegations about a person who works with children follow the LADO procedure.

2. Scope and the correct route

Issue	Route
Service, care, learning, communication or EYFS requirement	Use this procedure. A written complaint relating to fulfilment of the EYFS requirements receives a written outcome within 28 calendar days.
Child at risk or possible abuse or neglect	Contact the DSL / children's social care immediately; call 999 in an emergency. The complaints process may continue alongside safeguarding action.
Allegation about a staff member, volunteer or other adult working with children	Report to the Manager or, if the concern is about the Manager, the Deputy; obtain Cornwall LADO advice without undertaking an internal investigation first.
Employment concern raised by a worker	Use the grievance, whistleblowing or safeguarding route according to the substance. A label does not override statutory protection.

Issue	Route
Personal-data concern	Raise it with the setting's data-protection contact. The person may also complain to the ICO after giving the setting an opportunity to respond where practicable.
Fees, contract or compensation dispute	The setting will address its own agreement and consumer responsibilities. Ofsted regulates childcare requirements but does not resolve private disputes or award compensation.

3. How to raise a concern

- Speak to the child's key person or the staff member leading the session for a quick, informal resolution where that is safe and appropriate.
- Raise a formal complaint verbally or in writing with Oliver Riddett, Owner/Manager. Staff record a verbal complaint accurately and confirm with the complainant what has been captured.
- If the complaint concerns Oliver Riddett or a conflict makes his involvement inappropriate, send it to Beth Morgan, Deputy Manager. A suitable independent person will be used where impartiality cannot otherwise be secured.
- A friend, advocate, interpreter or accessible format may be requested. Anonymous concerns are considered on the information available, although a response may not be possible.
- The complainant should explain what happened, when, who was involved, the impact and the outcome sought. Missing detail does not prevent urgent action.

4. Response and investigation

1. **Acknowledge.** The setting confirms receipt promptly, normally within five working days, names the person handling it and explains the process, confidentiality and expected timescale.
2. **Triage.** Immediate safety, safeguarding, regulatory, data-protection, disciplinary and conflict issues are identified and referred through the correct route.
3. **Clarify.** The investigator confirms the issues and desired outcome, and offers reasonable communication adjustments.
4. **Gather facts fairly.** Relevant records are preserved; people are interviewed separately where appropriate; conclusions distinguish evidence, recollection and inference. The subject is given a fair opportunity to respond without exposing a child or witness to risk.
5. **Decide and respond.** The written outcome addresses each issue, explains findings and actions, identifies learning and gives escalation information. EYFS-related written complaints are concluded within 28 calendar days.
6. **Follow through.** Actions have an owner and date. The Manager checks completion and looks for repeated themes across complaints, incidents and safeguarding records.

Where another authority is investigating, the setting still meets immediate protection and notification duties. It may pause only those fact-finding steps that could prejudice an enquiry, records why, keeps the complainant informed and resumes when safe. Confidentiality means information is shared on a need-to-know basis; it is not a promise that identities or outcomes can always be disclosed.

5. Outcomes, escalation and external contact

- Possible outcomes include an explanation, apology, corrective action, practice or policy change, training, supervision, referral or no further action where the evidence does not substantiate the complaint.
- If dissatisfied, the complainant may request an internal review within 10 working days, explaining the material error, overlooked evidence or concern about fairness. The reviewer is not the original investigator where practicable.
- Parents are given Ofsted's details and may contact Ofsted about a registered childcare provider: enquiries@ofsted.gov.uk or 0300 123 4666. Ofsted decides how to use the information and cannot resolve a private dispute.
- A person does not have to complete this procedure before seeking urgent protection, police help, legal advice or contacting a body that accepts the matter directly.

6. Records, privacy and learning

- The setting records the complaint, date, category, people involved, evidence, safeguarding or regulatory referrals, findings, response, actions and completion. The complaints record and outcome are available to Ofsted on request.
- Complaint records are kept securely with restricted access and retained under the setting's retention schedule for at least three years, or longer where safeguarding, insurance, limitation or another legal requirement justifies it. This is the setting's minimum, not a statement that EYFS fixes a three-year period.
- Information is shared only when necessary and lawful. Subject-access or disclosure requests are considered separately; third-party and safeguarding information may require redaction or restriction.
- No child or adult is victimised for raising a concern or assisting an investigation. Deliberately false allegations may be addressed fairly, but an unsubstantiated complaint is not automatically malicious.

7. Monitoring and review

The Manager reviews themes, timeliness, fairness, accessibility and completed actions at least annually and after any significant complaint. A de-identified summary may be used for governance and improvement. This policy is reviewed sooner after a statutory, regulatory or local-procedure change.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Ofsted complaints procedure: complain about childcare (current contact route)
- Working Together to Safeguard Children 2026 (March 2026)
- Cornwall Council: allegations and LADO (current local procedure)
- Information Commissioner's Office: make a complaint (current data-protection route)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 22

Smoke-Free, Vape-Free and Nicotine Safety

PURPOSE Protects children, staff and visitors from smoke, aerosol, residue, poisoning and fire risks across the setting, grounds, outings and vehicles.

Policy	22	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool maintains a smoke-free and vape-free environment. No person may smoke or vape in any indoor or outdoor area controlled or used by the setting while children are present or about to be present. This rule applies to staff, parents, visitors, contractors and hall users entering the setting's area.

CORE RULE Smoking is not permitted in or on the premises when children are present or about to be present. Practitioners must not vape or use e-cigarettes in those circumstances. The setting applies the stronger no-smoking/no-vaping rule throughout its operating areas and activities.

2. What this policy covers

- Cigarettes, cigars, pipes, shisha, cannabis, herbal smoking products, heated-tobacco products, e-cigarettes and disposable or refillable vapes, whether or not they contain nicotine.
- The preschool rooms and entrance, toilets, kitchen and storage used by the setting, outdoor play areas, the immediate collection area, outings and any vehicle used to transport children.
- Smoke and aerosol exposure, third-hand residue on hands and clothing, nicotine-liquid poisoning, ingestion of pouches or products, battery and charging fires, litter and adult role-modelling.

The statutory smoke-free law for enclosed workplaces and public buildings does not treat vaping as smoking. The vape prohibition is therefore an explicit setting rule and an EYFS-aligned safeguarding control, not a misleading statement that every vape use is covered by smoke-free legislation.

3. Premises, vehicles and signage

- Required no-smoking signs are displayed and the Manager coordinates rules with the village hall's responsible persons. Shared use does not reduce the setting's duty during childcare hours.
- Smoking or vaping is not permitted at doors, windows, gates, play boundaries or assembly points where children could see it, encounter residue or be exposed to smoke or aerosol.
- A vehicle carrying anyone under 18 must not be smoked in. Shared work vehicles are smoke-free under the relevant workplace rules; the setting also prohibits vaping in any vehicle used for children.
- Cigarette ends, vape devices, refill bottles, nicotine pouches, matches and lighters must never be left where children can reach or find them, including bags, coats, bins and outdoor areas.

4. Staff breaks and return to work

- Smoking or vaping may take place only during an authorised break, away from the premises, children, families, setting entrance and view of the setting. Staff must not wear visible preschool identification while doing so.
- Before resuming care, the person washes and dries hands thoroughly, safely disposes of products, and changes or covers an outer garment where needed to reduce residue. They must return fit for work and able to provide close personal care without avoidable exposure.
- Perfume or air freshener is not used to mask smoke or vape residue around children. A manager may require further reasonable steps or temporary alternative duties where exposure remains evident.
- Break arrangements must preserve staffing ratios, supervision and key-person continuity. No one leaves the setting or their assigned group without authorisation and handover.

5. Storage, charging and emergencies

- Staff and visitors should leave tobacco, vapes and nicotine products outside the setting. If an item is unavoidably brought in, it is switched off and secured in an adult-only locked location; it is never kept in a pocket or bag accessible in care areas.
- Vapes, spare batteries and power banks are not charged on the premises. Damaged, hot, leaking or swollen devices are isolated only if safe, kept away from combustibles and reported immediately under the fire procedure.
- Possible nicotine ingestion or liquid exposure is treated as a medical emergency: remove access, follow first-aid advice, call 999 for serious symptoms and contact NHS 111 or a poison-information route through a healthcare professional. Do not induce vomiting.
- A device fire triggers the alarm, evacuation and 999 call. Staff do not handle or fight a lithium-battery fire unless trained, it is safe and escape is not delayed.

6. Parents, visitors and contractors

The rule is explained through enrolment information, signs and direct reminders. Staff use calm, non-stigmatising language and ask the person to stop or move away. A child is not denied safe collection because an adult has smoked; however, staff act under safeguarding and collection procedures if an adult appears impaired or creates an immediate risk.

7. Breaches and support

- A breach is stopped immediately and recorded in proportion to the risk. Repeated or deliberate breaches by staff may be managed under conduct procedures; visitors may be required to leave the controlled area.
- Any child exposure, ingestion, fire, near miss or unsafe litter is reported to the Manager and parents as appropriate, and reviewed for medical, safeguarding, RIDDOR, Ofsted or fire-safety action.
- The setting supports staff who wish to stop smoking or vaping and signposts evidence-based help. Seeking support is encouraged and is not itself misconduct.

8. Training and review

Induction covers the boundaries, staff-break arrangements, safe storage, poisoning and fire response. The Manager checks signage and outdoor areas and reviews this policy annually, after a breach or incident, or when premises, law or EYFS requirements change.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- GOV.UK: Smoking at work—the law (current workplace and vehicle rules)
- NHS Better Health: quit smoking (current cessation support)
- GOV.UK: Fire safety in the workplace (current fire-risk duties)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 23

The Key Person and Settling-In

PURPOSE Creates a secure, individual and inclusive start for every child, with clear key-person responsibility, family partnership and planned continuity through absence and transition.

Policy	23	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Every child is assigned a key person. The key person helps ensure that care is tailored to the child, supports familiarity with the setting, builds a settled relationship with the child and parents, and helps the family engage with specialist support where appropriate. The relationship is warm and dependable while remaining professional and safeguarding-aware.

SHARED CARE A key person is a named point of connection—not the child's only safe adult and not a substitute parent. The whole team remains responsible for safety, learning and care, and each child is supported to trust a small, consistent group of familiar adults.

2. Allocation and information before starting

- The Manager allocates a suitable key person before or at admission, considering attendance pattern, relationships, communication, home language, SEND, medical needs, staff deployment and continuity.
- Parents are told the key person's name and role and receive the setting's settling, communication, safeguarding, privacy and complaints arrangements. The child is introduced in an age- and communication-appropriate way.
- A nominated secondary familiar adult provides planned continuity for breaks, absence, training, room use and emergencies. Ratios and supervision are never reduced because a child prefers one adult.
- Allocation is reviewed if attendance changes, the relationship does not develop, a conflict arises or a parent or child raises a concern. A change is handled sensitively and is not treated as blame.

3. Learning about the child

Before and during settling, the key person gathers only information needed for safe, responsive care: family names and pronunciation, routines, comfort, interests, communication, home language, culture and faith, sleep and eating, toileting, health, allergy, medication, SEND, previous settings and significant circumstances. Parents choose what personal context to share unless information is required for safety or law.

- The child's cues, preferences, play, words, signing, movement and behaviour are treated as meaningful communication. Adults do not expect verbal agreement from every child.
- Information is updated through two-way conversation, not a one-off form. Relevant details reach every adult who needs them while privacy is protected.
- Where a child has an EHC plan, SEN support, medical plan or professional involvement, the key person works with the SENCO, Manager and family and follows agreed adjustments and advice.

4. Flexible settling plan

1. **Plan together.** Agree visits, arrival, separation, comfort objects, communication, collection and review points around the individual child rather than a fixed universal timetable.
2. **Build familiarity.** Offer short, predictable experiences and introduce routines, spaces, children and secondary adults gradually. A parent may stay by agreement where this supports the child and safeguarding, privacy and supervision remain secure.
3. **Separate honestly.** Use a calm goodbye routine. Adults do not disappear secretly, make promises about exact return times a young child cannot understand, or shame distress.
4. **Respond and observe.** Provide comfort, co-regulation and an engaging invitation without forcing participation. Staff distinguish expected protest from distress that is prolonged, escalating or unusual for the child.
5. **Communicate.** Give an agreed update and a factual handover about wellbeing, play, eating, care and any concern. Images or messages use approved systems and consent arrangements.
6. **Review and adapt.** If the child is not settling, meet with the family, consider timing, attendance pattern, relationships, health, communication, SEND and outside advice, and record the revised plan.

5. The key person's ongoing role

- Welcome the child and family, notice wellbeing, provide close relational care, support play and learning, and coordinate daily information without becoming the sole source of knowledge.
- Use professional knowledge and proportionate observation to understand development and plan responsive experiences. Documentation supports—not replaces—time and interaction with children.
- Support home language and identity, avoid deficit assumptions and seek help early where development, wellbeing or inclusion raises concern.
- Keep appropriate boundaries: no favouritism, secret-keeping, private social-media contact, personal gifts that create obligation, or exclusive relationships that isolate the child from other adults.
- Raise safeguarding concerns immediately under Policy 16. Trust with a family never means withholding information needed to protect a child.

6. Absence, change and continuity

- The secondary familiar adult takes the lead during short absence. Families are told about significant or planned absence and the temporary arrangement where appropriate.
- When a key person leaves or changes role, the setting plans overlap where possible, names the new person, shares relevant information securely and acknowledges the child's feelings without asking the child to manage adult emotion.
- No key-person arrangement overrides safe staffing, breaks, supervision, equality or a child's right to seek comfort from another trusted adult.

7. Transitions within and beyond the setting

Transitions are a process, not a single handover. The key person prepares the child through visits, stories, photographs, familiar routines and honest language, and coordinates reciprocal contact with the new room, provider or school where possible. Relevant information about strengths, interests, communication, relationships, safeguarding, SEND, health and effective support is shared lawfully and securely under Policies 03 and 04.

Parents and children contribute to transition information. Consent is sought where it is the correct legal basis, but necessary safeguarding or statutory sharing is not inaccurately made conditional on consent. The setting checks receipt of high-risk information and does not send the original record without an authorised transfer process.

8. Quality assurance and review

- Supervision considers relationship quality, boundaries, communication, workload, absence cover and children who appear less connected or disproportionately dependent on one adult.
- The Manager monitors allocation, family feedback, settling reviews, complaints, transitions and inclusion. Children are observed for comfort and belonging rather than expected to give a formal evaluation.
- This policy is reviewed annually and sooner after a safeguarding concern, complaint, staffing change, transition issue or statutory update.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Supporting a smooth transition into reception (published 16 April 2026)
- SEND Code of Practice: 0 to 25 years (current statutory guidance)
- Working Together to Safeguard Children 2026 (March 2026)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 24

Risk Assessment and Risk–Benefit Management

PURPOSE Sets a proportionate, evidence-led system for identifying hazards, protecting people and preserving worthwhile play and learning rather than attempting to remove every risk.

Policy	24	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool takes reasonable steps to keep children, staff and visitors safe and to demonstrate how risks are managed. Risk assessment supports good decisions and worthwhile experiences; paperwork is not the control. The setting does everything reasonably practicable to prevent harm while recognising that children learn through developmentally appropriate challenge.

ACT ON DANGER Stop and protect people where there is immediate danger. Dynamic action may be essential, but it does not replace planning, recording significant findings where required, completing actions or reviewing why the hazard arose.

2. Responsibilities and competence

- **Owner/Manager -** ensures assessments are suitable and sufficient, resources controls, assigns actions and coordinates with the hall's responsible persons, contractors and other users.
- **Competent assessor -** has sufficient knowledge, training and experience for the activity or hazard and seeks specialist help where limits are reached.
- **All staff -** apply controls, make daily checks, report defects and near misses, stop unsafe activity and contribute practical knowledge.
- **Children and families -** are listened to about access, fear, capability, culture, medical needs and successful support; responsibility for legal assessment remains with the provider.

The setting consults workers and takes account of children, disabled people, pregnant or new-parent workers, young workers, visitors, contractors, lone workers and anyone whose communication, health or circumstances may affect exposure or evacuation.

3. Five-step process

1. **Identify hazards.** Observe the environment and work as actually done; check equipment, substances, routines, maintenance, records, incidents, near misses and non-routine activity.
2. **Decide who may be harmed and how.** Consider children individually as well as groups, staff, families, visitors, contractors and people beyond the immediate activity.
3. **Evaluate and control.** Record existing controls, likelihood and severity, and what more is needed. Prefer elimination, safer substitution, physical or engineered controls and work organisation before relying on instructions or PPE.
4. **Record and act.** Name the owner, deadline and completion evidence. Where five or more employees are employed, significant findings must be recorded; the setting records when it helps demonstrate safe practice regardless of headcount.
5. **Review.** Check whether controls work in practice and revise after change, concern, defect, incident, near miss or new information. A calendar review alone is not enough.

4. When and what we assess

Assessment / check	Approach
Premises and operations	General assessment plus opening, closing and regular checks for access, security, surfaces, furniture, equipment, water, temperature, hygiene, outdoor areas and shared-space interfaces.
Activities and play	Proportionate risk–benefit planning for significant or unfamiliar hazards; routine competent practice need not generate repetitive forms.
Outings	Assess route, site, transport, supervision, children, weather, communication and emergencies. EYFS does not require every outing assessment to be written; the provider decides when a written record is helpful.
Individual needs	Specific assessment or plan for medical needs, allergy, disability, behaviour, communication, intimate care or evacuation, with reasonable adjustments and family/professional input.
Specialist hazards	Separate competent assessment where required, including fire, hazardous substances, manual handling, food, infection, work equipment, electricity, stress, violence and lone working.
Change and emergency	Assess building work, events, contractors, staffing, new equipment, severe weather, utilities failure, infectious disease and other foreseeable disruption before or as soon as practicable.

ABSOLUTE PREMISES RULE A banned dog breed, including an XL Bully type, must not be kept or present on the premises at any time. This is an absolute EYFS prohibition, including where an exemption certificate exists; it is not a risk that can be accepted or controlled by ordinary risk assessment.

5. Risk–benefit decisions

- The assessor describes the developmental or operational benefit as well as the credible harm. Minor everyday bumps are not treated like low-frequency catastrophic hazards.
- A numerical matrix may support consistency but never replaces judgment. Scores are not manipulated to justify a preferred activity, and a low score does not excuse a missing mandatory control.
- Controls should preserve autonomy and inclusion where reasonably practicable—for example, supervision, positioning, adaptation, teaching and staged challenge before blanket prohibition.
- Residual risk is accepted only by a person with authority, with the reasons, conditions and review trigger clear. Unresolved intolerable risk means the activity does not proceed.

6. Daily checks and dynamic assessment

- The opening lead completes and records the agreed checks before children enter. Outdoor and shared areas are checked again before use and when conditions change.
- Staff remain alert during sessions and outings. They remove or isolate hazards, move children, increase supervision, adapt or stop the activity, summon help and inform the lead without waiting to complete a form.
- A defect is clearly taken out of use until repaired or replaced. Temporary controls have an owner and expiry; repeated workarounds are not accepted as permanent control.
- Closing checks secure substances, devices, records, exits and premises and pass unresolved issues to the Manager and hall contact.

7. Minimum record and action control

A written assessment identifies the activity or area, assessor and date; hazards; people and harm; current controls; further action, owner and due date; residual risk; communication or training; approval where required; and review date or trigger. Versions are controlled, superseded copies are archived, and evidence that actions were completed is retained.

Assessments and individual plans are available to the staff who must use them, in an accessible format where needed, but medical, disability and safeguarding details are not displayed or shared more widely than necessary.

8. Incident learning, monitoring and review

- After an accident, near miss, complaint or safeguarding concern, immediate care and reporting take priority. The Manager then examines underlying causes, whether controls were usable, and whether similar risks exist elsewhere.
- The Manager samples assessments, checks overdue actions and observes real practice. Staff receive induction and task-specific instruction and are not treated as competent solely because they signed a document.
- This policy and the risk-assessment system are reviewed annually and sooner after material change, enforcement advice, serious incident or evidence that a control is ineffective.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- HSE: steps needed to manage risk (updated 10 June 2024)
- HSE: COSHH assessment (current guidance)
- GOV.UK: fire risk assessments (current written-record duty)
- Emergency planning and response for education and childcare settings (current guidance)
- GOV.UK: banned dogs (current legal guidance)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 25

Fire Safety and Emergency Evacuation

PURPOSE Prevents fire and gives every adult a clear, child-centred evacuation response, with written assessment, shared-premises coordination, inclusive planning, drills and recovery.

Policy	25	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool prevents fire so far as reasonably practicable and ensures that children and adults can reach a place of safety quickly. Fire safety is coordinated with the village hall's responsible persons because legal duties follow the areas and matters each person controls. Shared premises do not justify gaps or assumptions.

FIRE ACTION On discovering fire or smoke: raise the alarm, call 999, evacuate by the nearest safe route, close doors if safe, account for everyone at the designated assembly point and do not re-enter until the fire and rescue service says it is safe.

2. Responsibilities and coordination

- **Legal responsible persons -** the employer and people controlling the premises or relevant parts meet their duties and cooperate, coordinate and share fire-risk information.
- **Oliver Riddett, Owner/Manager -** coordinates the preschool assessment, emergency plan, training, checks, staffing roles, records and communication with the hall.
- **Session fire lead -** confirms exits and routes, attendance and visitor information, staff deployment, children requiring assistance and any temporary change before opening.
- **All staff -** know both exit routes and assembly arrangements, immediately raise the alarm, lead children to safety, report defects and never delay evacuation to collect property.

The current premises fire plan names the hall contact, alarm points, utility isolation, escape routes and the designated assembly point. It is displayed where staff can use it without publishing sensitive personal information. Any conflict between this policy and the live building plan is escalated immediately and resolved before the affected area is used.

3. Written fire risk assessment

The responsible person keeps a suitable and sufficient written fire risk assessment. It identifies ignition, fuel and oxygen sources; people at risk, especially young children and those needing help; prevention and protection; emergency arrangements; information and training; actions; and review triggers. A competent fire-safety specialist is used where in-house knowledge is insufficient.

- Review takes place regularly and after building, layout, occupancy, staffing, equipment, activity or guidance changes; a fire, alarm, drill problem, defect or enforcement advice; or reason to believe the assessment is no longer valid.
- The preschool and hall assessments are compared so that responsibilities for alarm, detection, emergency lighting, doors, servicing, extinguishers, shared routes, storage, events and contractors are explicit.
- Personal or generic emergency evacuation arrangements are made for children, staff and visitors who may need assistance because of age, mobility, sensory, communication, medical or other needs. The plan works without relying on a parent being present.

4. Prevention and daily readiness

Control area	Required practice
Escape	Final exits, alternative routes, corridors and doors are identifiable, unlocked for immediate escape while occupied, unobstructed and free of combustible storage. Fire doors are not wedged open unless an approved device releases on alarm.
Detection and warning	Alarm and detection arrangements are appropriate, audible and/or otherwise perceptible to everyone, tested and professionally maintained under the premises schedule. Faults trigger immediate risk-based action.
Ignition and electrics	Cooking, heaters, sockets, leads, appliances and charging are controlled. Damaged equipment is isolated. Vapes, loose lithium batteries and power banks are not charged in the setting.
Fuel and storage	Paper, textiles, waste, aerosols, cleaning products and other combustibles are reduced and kept away from heat, exits and electrical equipment. External bins do not compromise escape or the building.
Information	Registers, visitor details, emergency contacts, medicines and individual evacuation information are immediately usable. A grab bag may be taken only when to hand and without delaying escape.
Shared use	The session lead checks for hall events, contractors, isolation, altered routes, decorations or stored items. An unsafe unresolved change means the affected space is not opened to children.

5. Evacuation procedure

1. **Raise the alarm and call 999.** Use the agreed alarm method immediately. Give the full premises address, location and known information; do not assume another person has called.
2. **Evacuate.** Lead children calmly by the nearest safe route. Use the alternative route if smoke, heat or obstruction makes the usual route unsafe. Do not use a lift or stop for coats, bags, documents or firefighting.
3. **Support those needing help.** Use the current individual or group evacuation method, assigning enough adults while maintaining oversight of the whole group. Babies or non-mobile children are moved using the assessed equipment and route.
4. **Sweep only if assigned and safe.** A trained adult may check the agreed area while leaving; they do not enter smoke, search beyond the plan or place themselves at risk. Doors are closed where safe.
5. **Account.** At the designated assembly point, use name-to-face checking for children and account for staff and visitors. Report anyone missing and their last known location to the fire service; never re-enter to search.
6. **Handover and wait.** The fire lead gives relevant information to the fire service, manages children away from vehicles and smoke, contacts families when safe and follows instructions about relocation or closure.

6. Staffing, visitors and individual needs

- Roles are allocated by function, not by assuming a named person is present. Cover includes alarm and 999 call, group leadership, medicines or essential equipment where immediately available, sweep, register and gate/assembly control.
- Visitors are told the alarm, exits, assembly point and that they follow staff instructions. Contractors sign in and share any hot work, isolation, dust, temporary alarm or route impact before work begins.
- Children learn the sound and simple action through calm, age-appropriate practice. Staff do not use frightening language, hide drills as real fires or expect children to manage adult responsibility.
- Where a child or adult cannot use the standard route or warning, the plan identifies assistance, equipment, communication, refuge only where suitable, and safe alternatives. Arrangements are practised sensitively.

7. Firefighting equipment

Extinguishers and blankets are provided, positioned, checked and serviced under the assessment. The priority is alarm, evacuation and 999. A trained adult may use equipment only on a very small fire when they have a clear escape route, the correct equipment and no doubt about safety; they stop immediately if it is not controlled. No one is expected to fight a fire.

8. Drills, training and records

- Staff receive fire instruction at induction and refreshers at least annually and after significant change. Agency staff, students and volunteers receive essential information before deployment.
- Evacuation drills are held at least once each term and varied across attendance patterns, routes and reasonable scenarios so all regular staff and children can practise. A drill may be postponed if it would create greater immediate risk, with the reason and replacement date recorded.
- The record includes date and time, people present, scenario and route, alarm operation, evacuation and accounting times, individual-support performance, issues, actions, owner, deadline and completion. Speed alone is not treated as proof of safety.
- Alarm tests, emergency lighting, fire doors, extinguishers, defects, servicing, training and coordination decisions are recorded or obtained from the hall and checked against the agreed schedule.

9. After an alarm, fire or evacuation

- No one re-enters until authorised. The Manager arranges safe collection or relocation, preserves registers and incident information, and considers children's emotional support and staff debrief without assigning blame prematurely.
- The incident and any injury are recorded and reported to the hall, insurer, fire authority, HSE/RIDDOR, Ofsted or other body where the relevant threshold is met. Safeguarding and serious-childcare-incident duties are considered separately.
- The assessment, plan, staffing and premises controls are reviewed before reopening. Evidence, damaged equipment and alarm records are preserved where safe and relevant to investigation.

10. Review

This policy is reviewed annually and immediately after a fire, significant alarm, failed drill, premises alteration, enforcement advice or material legal change. The live fire plan and individual arrangements are reviewed more often when risks or people change.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- Regulatory Reform (Fire Safety) Order 2005 (current legislation)
- GOV.UK: fire risk assessments (current written-record duty)
- GOV.UK: fire safety and evacuation plans (current guidance)
- Fire safety risk assessment: educational premises (official assessment guide)
- Emergency planning and response for education and childcare settings (current guidance)

Approval

Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 26

Attendance, Absence and Safeguarding Follow-Up

PURPOSE Sets clear family reporting expectations and a prompt, proportionate safeguarding response to unnotified, prolonged or patterned absence.

Policy	26	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Regular attendance supports children's relationships, learning and wellbeing. Absence may be ordinary and explained, but it can also be an early sign of illness, unmet need or safeguarding risk. Children of Towan Preschool records attendance accurately, follows up absence promptly and responds to the child's circumstances rather than applying a rigid universal threshold.

SAFEGUARDING RESPONSE If an absent child's safety cannot be confirmed, staff do not wait for an arbitrary number of sessions. The DSL considers vulnerability, family circumstances and absence patterns and refers concerns to Cornwall's Multi-Agency Support and Safeguarding Hub (MASSH) and/or requests a police welfare check. Call 999 where there is immediate danger.

2. Scope and responsibilities

- **Oliver Riddett, Manager/DSL -** oversees the attendance system, decides safeguarding escalation, liaises with agencies and reviews patterns.
- **Beth Morgan, Deputy/Deputy DSL -** acts when the Manager is unavailable or involved and checks that follow-up is completed.
- **Session lead -** maintains the live register, starts same-day follow-up and keeps the child visible in handover until resolved.
- **Key person and all staff -** share relevant knowledge, notice patterns and report concerns; they do not assume another person has followed up.
- **Parents and carers -** provide reliable contact details and report absence, the reason and expected return as soon as possible.

3. Family reporting expectations

- Parents contact the setting before the child's usual session starts whenever reasonably possible, giving the child's name, reason for absence and expected return date.
- The setting is updated if the reason or return date changes, if a child receives medical advice relevant to the setting, or if the family will be temporarily unreachable.
- Planned absence is discussed in advance. A funded place, fee arrangement or holiday request is dealt with separately and never replaces the safeguarding follow-up required by this policy.
- Parents keep telephone numbers, addresses, parental responsibility, collection permissions and at least two practical emergency contacts current and tell the setting promptly about changes.

4. Daily attendance record

The live register records each child's actual arrival and departure time and identifies the adult responsible for the group. An absence record includes the date, reported reason, source and time of information, expected return, contacts attempted, response and any action. Late arrival, early collection and a child expected but not present are checked rather than silently amended.

Registers are available immediately for evacuation, missing-child action and safeguarding. Corrections remain auditable. Attendance information is retained and shared in line with Policies 01, 03 and 04.

5. Unnotified absence procedure

1. **Check.** Confirm the booking and register, check messages and handover information, and make sure the child has not arrived or been collected without the record being updated.
2. **Contact promptly.** Call or message every parent/carer contact using the agreed routes. Do not rely only on leaving one voicemail or assume another adult has informed the setting.
3. **Use emergency contacts.** If parents/carers cannot be reached, contact the alternative emergency contacts. Share only what is needed to establish the child's safety and whereabouts.
4. **Assess risk.** Tell the DSL and consider the child's and adults' vulnerabilities, home life, known risks, previous attendance, social-worker involvement, conflicting information and whether the absence is unusual.
5. **Escalate.** If safety is not confirmed or concern remains, the DSL contacts Cornwall's Multi-Agency Support and Safeguarding Hub (MASSH) and/or requests a police welfare check. The current MASSH contact is 0300 123 1116 / massh@cornwall.gov.uk, with written referrals made through Cornwall Council's online form. Out of hours: 01208 251300. Call 999 for immediate danger. Parental agreement is not required to make a necessary safeguarding referral.
6. **Record and continue.** Record times, numbers, responses, risk reasoning, advice and decisions. Continue proportionate attempts and agency liaison until the child's safety and whereabouts are confirmed or responsibility is formally handed over.

6. Prolonged or patterned absence

EYFS does not set a fixed number of days that makes an absence prolonged. The DSL uses professional judgement and responds sooner where risk is higher. Repeated single days, absence around particular people or events, unexplained illness, frequent lateness, sudden withdrawal, missed medical care or an unexplained change in contact can be as significant as one continuous absence.

- The key person discusses barriers sensitively with the family and agrees practical support without treating poverty, disability, culture or family stress as wrongdoing.
- For a child with SEND, a health plan, a social worker, early-help involvement or another provider, the DSL coordinates information lawfully and checks whether an agreed plan requires faster action.
- If attendance does not improve or contact remains unreliable, the Manager records a review and seeks local-authority, health, early-help or safeguarding support as appropriate.

- A child is not removed from roll merely because they are missing or difficult to contact. Transfer or closure of a place follows Policy 04, funding terms and safeguarding advice, with the receiving destination verified where relevant.

7. Return and support

On return, staff welcome the child and check wellbeing without interrogation or public discussion. The reason is clarified with the parent where needed, missed care or learning is supported proportionately, and safeguarding information is passed to the DSL. Illness and exclusion periods follow Policy 15; attendance is never promoted at the expense of infection control or the child's health.

8. Monitoring and review

The Manager reviews attendance patterns at least monthly and immediately after an unresolved absence or safeguarding escalation. The review considers whether contact details, staff action, family communication and inter-agency working were effective. Staff receive induction and scenario practice. This policy is shared with parents and reviewed annually and after legal or local-procedure change.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (paragraphs 3.11-3.12; effective 1 September 2026)
- Working Together to Safeguard Children 2026 (March 2026)
- Cornwall Council: Multi-Agency Support and Safeguarding Hub (MASSH) (current local contact and referral route)

Approval / Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 27

Safer Sleep and Rest

PURPOSE Applies the explicit 2026 EYFS sleep rules, individual planning, active supervision and a calm emergency response for every nap and rest period.

Policy	27	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Every baby and child is placed down to sleep safely and is supervised according to their age, needs and the current EYFS requirements. Family routines are discussed and respected where safe, but no request, custom, product or convenience overrides the safer-sleep rules. Rest is offered responsively; a child is not forced to sleep or kept awake for adult convenience.

NON-NEGOTIABLE SUPERVISION A sleeping child is always within staff sight and hearing and is checked frequently. A baby under six months always has an adult in the same room for every sleep. A monitor may support awareness but never replaces direct supervision or checks.

2. Individual information and preparation

- Before care begins and whenever needs change, staff discuss usual sleep pattern, comfort, prematurity, health, medication, allergies, mobility, sleep equipment and professional advice with parents.
- The key person records an individual sleep arrangement and alerts the Manager to any request inconsistent with safer-sleep requirements. Staff explain the safe alternative and seek health advice where needed.
- The sleep area, cot or approved floor mattress, bedding, room temperature and supervision position are checked before use. Ratios and the needs of awake children remain met.
- Each child has a clean, separate sleep space and bedding managed to prevent infection or mix-up. Equipment is used and maintained according to the manufacturer's instructions.

3. Requirements for children under two

Requirement	Setting practice
Position and space	Place the child on their back in their own separate sleep space on a firm, flat surface. A baby aged 12 months or under sleeps only in a cot.
Mattress and bedding	Use only a firm, flat, waterproof mattress and lightweight bedding tucked firmly below the shoulders, or a well-fitted sleep bag used to the maker's guidance.
Blankets	Place the child feet-to-foot at the bottom of the cot and tuck blankets in. Keep the head and face uncovered.
Empty cot	No toys, pillows, extra blankets, bumpers, wedges, straps, nests, pods, positioners or weighted items.
Temperature	Prevent overheating or chilling. For babies, keep the room at the recommended 16-20°C, adjust clothing and bedding, and check the child's temperature at the chest or back of neck.
Supervision	An adult remains in the same room for every sleep for a baby under six months. All sleeping children remain within sight and hearing and are checked frequently.

4. Settling and alternative locations

- Staff settle children calmly, place them down on their back and record the sleep start. If a child able to roll independently changes position, staff keep the space clear and continue close observation; they do not use a restraint or positioning device.
- Sofas, armchairs, beanbags, nests, pillows, bouncers and swings are not sleep spaces. A child who falls asleep in unsuitable equipment is moved promptly and safely to the approved space.
- A child arriving asleep in a car seat is transferred to an approved flat sleep space as soon as practicable. Travel systems are used for transport, not routine sleep at the setting.
- Swaddling and weighted sleep products are not used. The child's face and head remain uncovered; hats and outdoor clothing are removed indoors unless a clinician's plan says otherwise.
- For children aged two and over, use a clean, firm and flat individual rest surface with clear space around the face, comfortable temperature and the same sight, hearing and frequent-check safeguards.

5. Checks and sleep record

EYFS requires frequent checks but does not prescribe one universal interval. The session lead sets a sufficiently frequent interval from the individual risk assessment and increases observation for younger babies, illness, a changed pattern, medication, unusual heat, respiratory concerns or professional advice. Staff do not allow a timer to delay a check whenever concern arises.

- At each direct check, observe breathing, colour, position, face and head, temperature, bedding and the sleep-space environment without relying solely on sound or a monitor.
- Record who checked, the time, relevant observations, sleep end, response and information handed to the family. Records are factual and retained securely.
- If a child appears unwell or their breathing, colour, responsiveness or temperature causes concern, attempt to rouse, begin paediatric first aid and call 999 without delay. Inform parents and follow accident, safeguarding and notification procedures.

6. Rest, dignity and inclusion

Quiet rest is available without requiring sleep. Children who do not sleep have calm choices and remain supervised. Sleep arrangements are adapted for disability, sensory need or medical advice without reducing safety; equipment or a non-standard position is used only under a clear current clinical plan and risk assessment. Staff protect privacy but never obscure sight or hearing.

7. Training, monitoring and review

- All practitioners must read the current NHS SIDS advice and receive setting-specific induction before supervising sleep. Understanding is checked through observation and scenario discussion, not a signature alone.
- The Manager checks the environment and samples sleep records, supervision, bedding and family plans. Any unsafe practice is corrected immediately and treated as a safeguarding or conduct concern where appropriate.
- This policy is reviewed annually and after a sleep concern, incident, new child need, equipment change or updated EYFS/NHS guidance.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (paragraph 3.86; effective 1 September 2026)
- NHS: Sudden infant death syndrome (SIDS) (current safer-sleep advice)
- The Lullaby Trust: safer sleep advice (current specialist guidance)

Approval / Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 28

Curriculum, Planning, Observation, Assessment and the Archetype Approach

PURPOSE Explains a responsive, play-rich curriculum and proportionate assessment, and places the setting's Archetype Approach within clear professional and safeguarding boundaries.

Policy	28	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Curriculum intent

Children of Towan Preschool provides an ambitious, inclusive and language-rich curriculum through secure relationships, child-led play, worthwhile adult guidance, stories, movement, creativity, the natural environment and the life of the local community. Planning starts with what children need to learn, their interests and development, not with producing paperwork or completing a theme.

STATUS OF THE APPROACH The Archetype Approach is a reflective curriculum and observation lens. It is not an EYFS requirement, diagnostic instrument, personality test, attainment scale or substitute for safeguarding, SEND assessment or professional developmental judgement.

2. Statutory curriculum

The curriculum covers the three prime areas—communication and language, physical development, and personal, social and emotional development—and the four specific areas—literacy, mathematics, understanding the world, and expressive arts and design. The prime areas are especially important for the youngest children. Staff reflect the three characteristics of effective teaching and learning: playing and exploring, active learning, and creating and thinking critically.

- Practitioners are ambitious for every child and adjust teaching for different rates of development, strengths, needs, language, disability and experience.
- Children learn through their own play and through sensitive adult interaction and guidance. The EYFS does not prescribe one teaching method or commercial programme.
- Home language, culture, faith, family structure, protected characteristics and local Cornish identity are represented respectfully without stereotyping.
- Daily outdoor experience, physical challenge, sustained conversation, books, songs, imaginative play, making and first-hand exploration are protected from being displaced by screens or documentation.

3. Responsive planning cycle

Planning layer	Purpose and control
Longer view	Sets curriculum priorities, seasons, community links, recurring experiences and broad progression while remaining open to children's lives and emerging events.
Shorter view	The team agrees useful invitations, stories, environments, vocabulary and adult roles. Each practitioner may contribute an activity or idea, but children are not required to complete a quota.
In the moment	Adults notice engagement, join sensitively, introduce language or challenge, adapt resources and follow a worthwhile line of enquiry.
Review	The team asks what children learned, who was included, what was missed and what change in interaction, environment or sequence is needed next.

Plans are working tools, not scripts. A planned activity may be changed or abandoned when children's wellbeing, sustained play, weather, safeguarding, accessibility or a stronger learning opportunity requires it. The reason is discussed professionally rather than treating completion as the measure of quality.

4. Observation and formative assessment

- Ongoing assessment comes primarily from knowledgeable adults interacting with and observing children and from information shared by families. Staff act on what they learn in everyday teaching.
- EYFS does not require written records for ongoing assessment or physical evidence to prove every judgement. Tapestry and photographs are used selectively and never at the cost of interaction, privacy or safeguarding.
- Development Matters supports professional thinking but is non-statutory and is not used as a tick list, tracker or reason to generate excessive data.
- The key person keeps families informed through dialogue and shares strengths, interests, progress and concerns. Assessment considers the child's communication and competence across contexts, including home language.
- Between ages two and three, the setting completes the statutory progress check in the prime areas, identifying strengths, support needs, possible developmental delay and agreed strategies with parents and relevant professionals.

5. The Archetype Approach

The setting may use twelve named capacities—Helper, Friend, Rebel, Imagineer, Mover, Energy, Thinker, Watcher, Joker, Planner, Builder and Explorer—to notice how children approach relationships, ideas, activity and challenge. The names create a shared reflective language; they do not define what a child is.

- Every child can express every capacity. Expression changes with safety, relationships, development, environment, culture, health and the task. No child is assigned a fixed type or public label.
- Staff observe before interpreting: the Watcher principle comes before the Thinker. They record what happened and the child's communication, then test interpretations with colleagues, the family and evidence across time and contexts.
- The six balancing axes help staff consider whether provision over-favours one mode and what complementary opportunity may help. Balance means repertoire and access, not making every child behave identically.
- The lens can suggest an invitation, adult stance, vocabulary or environmental change. It must not determine safeguarding credibility, eligibility, diagnosis, discipline, group placement or a limiting prediction about the child.
- Children's dignity comes first. Adults do not tell a child they are 'a Rebel' or 'not a Thinker', turn the language into rewards, or use it to excuse bias, exclusion or missed SEND needs.

6. Planning with the twelve capacities

Capacity cluster	Illustrative curriculum opportunities
Relationship: Helper, Friend, Rebel	Shared purposes, care, negotiation, consent, turn-taking, assertive voice, collaboration and repair.
Imagination and expression: Imagineer, Joker, Energy	Stories, role play, humour, music, invention, emotional expression and open-ended materials.
Body and inquiry: Mover, Explorer, Watcher	Large movement, sensory investigation, outdoor challenge, close observation, nature and revisiting.
Ideas and making: Thinker, Planner, Builder	Questions, patterns, prediction, sequence, design, construction, problem solving and improvement.

These examples are invitations, not a separate timetable. One rich episode of play may involve several capacities and all seven EYFS areas. Staff avoid artificially interrupting sustained learning to obtain coverage evidence.

7. Concerns, inclusion and information

- When progress in a prime area causes concern, practitioners discuss it with parents and agree support, considering SEND or specialist advice. Archetype language never delays referral or replaces recognised assessment.
- Reasonable adjustments enable participation. A child is not expected to mask distress, sensory need, disability or home-language difference to fit a preferred capacity or activity.
- Observations and online-journal entries are child records under Policies 01 and 05. Staff collect the minimum useful information, distinguish fact from interpretation and correct inaccurate or stigmatising wording.
- Safeguarding indicators, disclosures or changes in behaviour are reported under Policy 16, even when they could also be discussed through an archetypal lens.

8. Leadership and review

The Manager ensures staff understand the statutory curriculum and the limits of the Archetype Approach. Team reflection samples the lived experience of different children, not the quantity of plans or observations. Family feedback, child voice, transitions, equality, SEND outcomes and inspection evidence inform improvement. This policy and the curriculum are reviewed at least annually and after a material EYFS or setting change.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (sections 1-2; effective 1 September 2026)
- Development Matters (non-statutory curriculum guidance)
- SEND Code of Practice: 0 to 25 years (current statutory guidance)
- Working Together to Safeguard Children 2026 (March 2026)

Approval / Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 29

Whistleblowing and Raising Concerns

PURPOSE Gives staff, students and volunteers a safe route to report poor or unsafe practice and sets out exactly what happens after a concern is raised.

Policy	29	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool expects every adult to raise poor, unsafe, unlawful or concealed practice. A concern is taken seriously, assessed promptly and handled fairly. No one is instructed to stay silent, prove the allegation, investigate it alone or wait for a supervision meeting where a child or adult may be at risk.

URGENT ROUTE Immediate danger or crime: call 999. A child-protection concern or allegation about an adult follows Policy 16 and the LADO/police/social-care route without an internal investigation that could prejudice safeguarding action.

2. Who and what this covers

This procedure is available to employees, agency workers, students, volunteers and others working in the provision. It covers concerns such as unsafe care, safeguarding failures, unlawful conduct, financial wrongdoing, concealment, serious health and safety risk, misuse of data, discrimination, retaliation or repeated failure to follow requirements.

Issue	Main route
Child at risk or allegation about an adult	Safeguarding and allegations procedure; DSL/LADO/social care/police as appropriate.
Poor or unsafe practice affecting others or the public interest	This whistleblowing procedure.
Personal employment complaint affecting the worker	Grievance procedure, unless the substance also raises public-interest wrongdoing.
Parent concern about provision	Policy 21 complaints procedure; safeguarding information is escalated regardless of label.
Low-level conduct or boundary concern	Report immediately under Policy 16; the Manager decides the correct safeguarding, conduct or whistleblowing route.

The setting follows the substance of a concern, not the label used by the reporter. One matter may require more than one route.

3. How to raise a concern

1. **Report promptly.** Tell Oliver Riddett verbally or in writing, stating what happened, when, who may be affected, available evidence and any immediate risk. A report can be made without completing a form.
2. **Use an alternative.** If the concern involves Oliver, there is a conflict, or the reporter feels unable to approach him, report to Beth Morgan or directly to the appropriate external body.
3. **Preserve, do not investigate.** Keep relevant lawful records and exact words, but do not question children repeatedly, confront the subject, search devices or copy confidential material beyond what is necessary to report safely.
4. **Anonymous concerns.** Anonymous information is considered on its merits, although anonymity may restrict questions, updates or the ability to establish facts.

4. What happens after a report

5. **Acknowledge and protect.** The receiver records the concern, checks immediate safety and acknowledges it as soon as practicable. Emergency or safeguarding action takes priority.
6. **Triage and refer.** Decide whether LADO, social care, police, Ofsted, the ICO, HSE, insurer or another body must lead or be notified. Obtain advice before an internal investigation where external evidence could be affected.
7. **Control conflicts.** Appoint a person with sufficient independence and competence. Anyone implicated or with a material conflict does not decide the scope, evidence or outcome.
8. **Examine fairly.** Set proportionate terms, preserve evidence, hear relevant people and distinguish allegation, fact and professional opinion. Confidentiality is protected as far as lawful and practicable, but cannot be promised absolutely.
9. **Update.** Tell the reporter, where possible, how the matter will be handled and provide proportionate progress information. Child, employment and third-party confidentiality may limit detail.
10. **Conclude and learn.** Record findings, actions, referrals, support, review and completion. The reporter is told that the process has concluded and the broad outcome where lawful. Systems are improved even where individual misconduct is not established.

5. Protection and conduct

- Bullying, dismissal, loss of opportunity, threats, isolation or other detriment because a person raised a genuine concern is not tolerated and is reported immediately.
- Statutory whistleblowing protection depends on the legal tests, including the type of disclosure, reasonable belief, public interest and route used. The setting does not promise a legal outcome but will not retaliate for responsible reporting.
- A concern that is mistaken or unsubstantiated is not malicious. Knowingly fabricating evidence or making a deliberately false allegation may be dealt with under conduct procedures after careful, independent assessment.
- The subject of a concern is treated fairly and receives appropriate support; confidentiality is not used to suppress necessary safeguarding or regulatory reporting.

6. External routes

- NSPCC whistleblowing advice line: 0800 028 0285 or help@nspcc.org.uk for concerns about how child-protection issues are being handled.
- Ofsted complaints route for concerns about a registered early-years provider. Ofsted is a prescribed person for relevant disclosures within its remit.
- Police, children's social care, LADO, HSE, ICO or another prescribed person where the concern falls within that body's remit.

- Protect or Acas for independent information about whistleblowing rights and routes. Legal advice may be appropriate before wider disclosure to media or social media, which can expose children, evidence and the reporter to harm.

A worker may go directly to an external route where internal reporting is inappropriate, unsafe or has not addressed a genuine concern. They should give accurate information, avoid unnecessary personal data and state any immediate safeguarding risk.

7. Records, training and review

The Manager keeps a restricted record of the report, risk assessment, referrals, evidence, decisions, updates, outcome and actions. Access is limited and retention follows legal, safeguarding and employment needs. All staff, students and volunteers receive this procedure at induction, know the alternative and external routes and revisit it through scenarios. The committee/owner reviews themes and retaliation risk without exposing identities. The policy is reviewed annually and after any use or legal change.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (paragraphs 3.7-3.8; effective 1 September 2026)
- GOV.UK: whistleblowing for employees (current statutory overview)
- Ofsted complaints procedure (current external route)
- Protect: whistleblowing advice (independent specialist support)
- Acas: whistleblowing at work (current employment guidance)

Approval / Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 30

Emergency, Lockdown and Critical Incident

PURPOSE Provides a flexible, child-centred response to security, premises, public-health and community emergencies, with safe communication, reunification and recovery.

Policy	30	**Owner**	Oliver Riddett, Owner/Manager
Approved	14 August 2026	**Next review**	August 2027 or sooner
Version	2.0	**Applies to**	All staff, volunteers and students

1. Policy statement

Children of Towan Preschool plans for foreseeable emergencies while recognising that each incident is different. The immediate priorities are life safety, safeguarding, accurate accounting, emergency-service instructions and calm care. This policy states the operational principles; the current confidential site plan holds exact signals, secure locations, contacts, maps and access details.

LIFE SAFETY FIRST Call 999 for immediate danger and follow police, fire, ambulance or other emergency-service instructions. No policy, register, bag, telephone call or approval process should delay moving children away from danger.

2. Incidents covered

- intruder, serious violence, nearby police incident, suspicious item, bomb threat or other security concern
- fire or smoke under Policy 25, gas leak, chemical release, structural damage, flood, severe weather, power/water/telecommunications failure or unsafe premises
- serious injury, missing child, transport incident, significant infection or public-health incident
- cyber incident, data breach or loss of essential systems affecting safe operation
- death, traumatic event, community disaster, prolonged closure or need for temporary premises

3. Roles at the time

Function	Immediate responsibility
Incident lead	Assesses danger, chooses evacuation, invacuation/lockdown or shelter, calls for help and coordinates with emergency services.

Function	Immediate responsibility
Children and supervision	Brings children together or moves them, maintains ratios as far as possible, reassures them and supports individual needs.
Attendance and communication	Completes name-to-face checks, accounts for staff/visitors, manages verified updates and records key times and instructions.
First aid and essential needs	Provides first aid and brings immediately available medication or essential equipment only when this causes no delay or extra risk.

Roles are allocated by function at each session and do not depend on one named person being present. One adult may hold more than one function in a small team, but no task is allowed to undermine direct supervision.

4. Choosing the protective action

- **Evacuate -** move away from danger when the building or immediate area is unsafe, using the nearest safe route and an alternative assembly or relocation point if the usual point is compromised.
- **Invacuate or shelter -** bring everyone into the safest available internal area for an external hazard such as severe weather, smoke, chemical release or local incident, following official advice about ventilation.
- **Lockdown -** secure children and adults from an intruder or violence threat using the current site plan, while avoiding movement into the path of danger.
- **Dynamic change -** switch action if conditions or emergency-service instructions change. Staff do not continue toward a pre-planned location that is visibly unsafe.

5. Lockdown and security response

1. **Alert and call.** Use the agreed discreet or full signal and call 999 when safe. Give the premises address, threat, description, location, people affected and the safest known access point.
2. **Secure or escape.** Move to the current assessed internal safe area and secure accessible doors/windows if safe, or evacuate away from the threat when that is clearly safer. Do not confront an intruder.
3. **Account and quieten.** Complete a name-to-face check, keep children close and calm, reduce sound and visibility, silence devices without disabling emergency contact, and maintain sight and hearing.
4. **Communicate safely.** Use the agreed channel and minimum information. Do not post live locations, routes, images or unverified information and do not open a door because of an unverified voice or message.
5. **Wait for verified all-clear.** Remain protected until police or the incident lead verifies that movement is safe. Parents do not enter or collect during lockdown unless the emergency services direct a controlled reunification.

Exact signals, safe areas and access arrangements are kept in the live confidential plan and practised by staff. They are not published in this parent-facing policy.

6. Accounting, family contact and reunification

- Use the live register, visitor record and name-to-face checking. Tell emergency services immediately who is missing, injured or believed to be elsewhere; staff do not re-enter or search an unsafe area without instruction.
- One approved person issues concise, factual updates through the agreed channel when safe. Staff do not speculate, identify a child or incident publicly, or individually promise collection arrangements that conflict with the plan.
- Reunification takes place at the location confirmed to families, which may differ from the normal entrance. Identity and authority to collect are verified and each release is recorded. No child is handed over merely because an adult is known by sight.

- Emergency contacts, medication, first-aid materials and a grab bag are taken only if immediately accessible. Critical information is also maintained so that loss of one paper or digital system does not prevent safe action.

7. Inclusion, health and safeguarding

- Individual emergency arrangements cover mobility, sensory, communication, medical and emotional needs and are coordinated with fire PEEPs, care plans and parent/professional advice.
- A missing-child event follows Policy 14; fire follows Policy 25; serious injury follows Policy 11; infection follows Policy 15; data breach follows Policies 01 and 05. The incident lead coordinates the combined response rather than choosing only one policy.
- The DSL remains alert to exploitation, domestic abuse, family separation, unauthorised collection, traumatic impact and children already known to services. Safeguarding information is shared lawfully and urgently where needed.

8. Closure and continuity

The Manager decides closure, delayed opening, reduced activity or relocation from current risk, official advice, staffing, utilities and the ability to meet EYFS safely. Families and the hall are informed through approved channels. Temporary premises are not used until suitability, registration/notification, insurance, safeguarding, fire, access, ratios and essential records have been checked. Vulnerable children and family support are considered during disruption.

9. Training, exercises and readiness

- Staff receive the live site plan at induction and after change. Opening checks confirm communications, access, exits, emergency information and any shared-hall activity that changes risk.
- Scenarios and exercises test decision-making, accounting, alternative routes, communication and individual support. Lockdown practice with children is calm, brief and age-appropriate and does not simulate violence or cause avoidable fear.
- Defects and learning have an owner and completion date. A drill is not judged only by speed; safe decisions, supervision, communication and inclusion are reviewed.

10. Recovery, reporting and review

- After the immediate danger, the Manager confirms care and collection, preserves evidence where safe, records decisions and contacts the hall, insurer, local authority, Ofsted, HSE, ICO, safeguarding agencies or other bodies where thresholds apply.
- Children, families and staff receive proportionate emotional support. Debrief separates learning from blame, protects confidentiality and avoids repeatedly exposing children to traumatic details.
- Only an authorised person responds to media or public enquiries. Personal data and the live location of children are not released.
- The policy and confidential plan are reviewed at least annually and after every activation, exercise, premises change, local alert or legal update.

Legal and guidance basis

- EYFS statutory framework for group and school-based providers (paragraphs 3.80-3.81; effective 1 September 2026)
- Emergency planning and response for education and childcare settings (official DfE guidance)
- Working Together to Safeguard Children 2026 (March 2026)

Approval / Manager signature	_____	**Date**	_____

CHILDREN OF TOWAN PRESCHOOL | POLICIES & PROCEDURES

Policy 31

Artificial Intelligence, Children's Data and Digital Content

PURPOSE Sets safe, transparent limits for using artificial intelligence in administration, planning, communications and publicity while protecting children's information, images, dignity and rights.

Policy	31	**Owner**	Oliver Riddett, Owner/Manager
Approved	12 September 2026	**Next review**	September 2027 or sooner
Version	1.0	**Applies to**	All staff, volunteers, students and contractors

1. Policy statement

Children of Towan uses artificial intelligence (AI) only as an assistive tool. AI may help staff draft generic materials, organise non-identifiable information or create design ideas, but it is not a child-record system, a safeguarding adviser or a decision-maker. The setting remains accountable for every input, output and published item.

NON-NEGOTIABLE Names, photographs, recordings or other information that identifies a child or family must not be entered into or uploaded to a personal or standard consumer AI account, including standard ChatGPT.

2. Scope and responsibilities

This policy covers generative AI chatbots, writing assistants, image generators and editors, transcription or translation tools, automated classification, summarisation and any service that learns from or generates text, images, audio, video or other data. Only authorised users may use setting accounts or information with AI.

- **Manager** - approves tools and purposes, maintains the approved-tool register, authorises any higher-risk use and ensures privacy information remains accurate.
- **DSL** - leads safeguarding action where AI content, image manipulation or online activity may place a child at risk.
- **Authorised users** - use only approved accounts, minimise data, check outputs and report mistakes or concerns immediately.

3. Permitted and prohibited uses

Use	Rule
Generic drafting and ideas	Permitted with non-identifiable information; verify the result before use.
Organising or summarising information	Use invented or properly anonymised data. Add names only later in an approved local system.
Children's photographs or recordings	Do not upload to a personal or consumer AI account. Use only an approved service and the specific permission process in section 7.
Safeguarding, SEND, health or assessment	AI may not decide, diagnose, score or replace professional judgement. Identifiable case information is not entered.

Permitted examples include generating generic activity ideas, refining non-confidential parent communications, creating blank templates, checking grammar, drafting timetables without names and producing artwork that is not based on an identifiable child. AI output is always treated as a draft.

4. Personal data and anonymisation

The minimum necessary information is used. Staff do not enter children's names, dates of birth, addresses, contact details, attendance, health, SEND, development, behaviour, family circumstances, safeguarding information, photographs, voice or video into an unapproved AI tool. The same restriction applies to confidential staff and family information, passwords, door codes and private correspondence.

- Initials alone do not make information anonymous where dates, a rare event, family detail or the context could identify the child.
- For routine drafting, staff use invented examples or remove all direct and indirect identifiers, then add necessary details only within the setting's approved local system.
- Prompts and generated output are not used as the official record. The verified final record is stored in the proper setting system and temporary working material is deleted where possible.
- Turning off model training, using a temporary-chat option or deleting a conversation does not by itself make the use authorised, private or lawful.

5. Approval of AI tools and accounts

Before a service may process setting information, the Manager documents its purpose, data flows, terms, security, retention, deletion, sub-processors, international transfers, incident arrangements and whether inputs are used to train or improve models. A data protection impact assessment is completed where processing is likely to create a high risk, and specialist data-protection advice is obtained when required.

- Setting work is carried out through an approved setting account, not a personal login.
- Accounts use strong unique passwords, multi-factor authentication where available and access limited to authorised people.
- Training or improvement using setting inputs is disabled where the service provides that control; this is an additional safeguard, not permission to upload child data.
- The approved-tool register records the service, approved purposes, account owner, review date and any prohibited data types.

6. Human judgement, accuracy and fairness

A competent member of staff checks every output for accuracy, fabricated information, inappropriate assumptions, bias, safeguarding risk, tone, accessibility and copyright before it is relied upon or shared. Legal, medical, safeguarding and regulatory content is checked against an authoritative current source.

- AI must not make or materially determine decisions about safeguarding, admission, attendance follow-up, SEND, behaviour, assessment, funding, staffing, discipline or risk.
- AI must not create observations that did not occur, attribute words to a child, infer emotion or diagnosis from an image, or produce a false record.
- The Archetype Approach may inform reflective professional discussion but must not be automated into a score, label, personality profile or prediction about a child.

7. Children's photographs, advertising and image alteration

A photograph or recording of an identifiable child is personal data. Publicity use, including the website, prospectus, social media or paid advertising, follows Policies 01 and 05 and requires a clearly explained lawful basis and current recorded permission. The child's wishes, comfort and dignity are considered even where an adult has agreed.

IMPORTANT Permission to publish a photograph is not automatically permission to upload it to a third-party AI service. AI editing or generation involving an identifiable child must be specifically explained and authorised before it happens.

- An identifiable child's image is never uploaded to a personal or standard consumer ChatGPT or other consumer AI account.
- Where AI-assisted editing is genuinely necessary, the Manager must approve the service and purpose, complete the privacy assessment, confirm the permission covers AI processing, and use the least data possible.
- Safer alternatives are preferred: ordinary local editing, cropping or blurring before any AI use, setting-only photographs, licensed stock images, or wholly synthetic artwork not derived from a real child.
- No tool may face-swap, age-progress, change a child's body or identity, fabricate speech or conduct, or place a child in a misleading, frightening, sexualised, degrading or otherwise harmful scene.
- Legitimate editing must preserve dignity and identity. Material alterations are identified where needed to avoid misleading viewers, and an unaltered original plus the permission record is retained securely.
- If a child objects or becomes uncomfortable, the image is not taken or used. Withdrawal of permission stops future use and prompts reasonable removal from controlled channels, although already circulated or cached copies may not be fully recoverable.

8. Transparency and records

Parents and carers are told, in clear language, when an AI service will process personal data or an identifiable image, why it is used, what is shared, who provides the service, where information may be stored, how long it is retained and how rights or withdrawal can be exercised. The privacy notice and image-permission wording are updated before the new use begins.

- No covert recording, transcription or automated monitoring is used.
- Significant AI use in public content is acknowledged where a reasonable reader would otherwise be misled.
- The Manager retains a proportionate audit record for approved uses involving personal data or publicity images.

9. Safeguarding, harmful content and data breaches

1. **Stop.** Do not continue uploading, regenerate the content, forward it or share it more widely.
2. **Protect.** Secure the account or device where safe and preserve the minimum factual information needed to understand what happened.
3. **Report.** Tell the Manager and DSL immediately. Do not attempt a private investigation.
4. **Assess and refer.** Follow Policies 01, 03, 05 and 16, including breach assessment, notification to the ICO where legally required, and safeguarding referral to police, social care, LADO, Ofsted or another agency where appropriate.

Suspected indecent, abusive or exploitative images of children, including AI-generated or manipulated material, are treated as an urgent safeguarding concern and possible criminal matter. Staff do not search for, copy or view such material beyond what is unavoidable to recognise and report the concern.

10. Intellectual property and public communications

- Staff check that text, images, logos, fonts and source material may lawfully be used and do not ask AI to imitate a living artist or copy protected work.
- Public information is checked for accuracy, accessibility and consistency with Children of Towan values before publication.
- AI-generated testimonials, reviews, quotes, photographs presented as real events, or endorsements are not used.

11. Training, monitoring and review

The policy is covered at induction and refreshed when tools, law or guidance change. The Manager samples practice, reviews the approved-tool register at least annually and after any incident, and withdraws approval where a service no longer meets the required controls. Staff can raise concerns under Policy 29 without fear of detriment.

Legal and guidance basis

- UK GDPR guidance and resources (Information Commissioner's Office)
- Children and the UK GDPR (Information Commissioner's Office; updated 15 May 2026)
- Guidance on AI and data protection (Information Commissioner's Office; under review following the Data (Use and Access) Act)
- Taking photos in schools (Information Commissioner's Office)
- Generative AI and data protection in schools (Department for Education; updated 9 July 2026; principles applied proportionately to this early-years setting)
- EYFS statutory framework for group and school-based providers (effective 1 September 2026)
- OpenAI Data Controls FAQ (service-specific operational reference checked 12 September 2026)

Approval

Manager signature	_____	**Date**	_____