

PLAY ASSOCIATION

**PATH**

TOWER HAMLETS

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All policies approved and endorsed by the board of trustees

## **Responsibilities**

The Director has overall responsibility for maintaining the Code of Practice and ensuring that it is regularly reviewed and updated. This responsibility may be delegated to other PATH office staff.

The Project Manager is responsible for ensuring that the Code is implemented at each PATH project through the Senior Playworker.

The Senior Playworker at each project is responsible for ensuring that the Code of Practice is maintained in good condition and is available for all staff and volunteers to consult. In particular, the Senior Playworker is responsible for ensuring that, as part of induction, new staff and volunteers are fully aware of their responsibilities.

Project staff and volunteers are responsible for ensuring that they know and follow those parts of the Code of Practice that are related to their jobs.

The Director is responsible for ensuring that the Code of Practice is available to all staff via the website.

## **Chapter One**

### **PATH PLAY PROJECTS**

**1.1 Aims and objectives**

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## 1.1 Aims and objectives

As an organisation, PATH aims constantly to develop and improve practice in pursuit of the highest possible standards of service delivery.

Article 31 of the United Nations convention on the rights of the Child:

1. States Parties recognise the right of the child to rest and leisure, to engage in play and recreational activities appropriate to the age of the child and to participate freely in cultural life and the arts.
2. States Parties shall respect and promote the right of the child to participate fully in cultural and artistic life and shall encourage the provision of appropriate and equal opportunities for cultural, artistic, recreational and leisure activity.

Through its projects, PATH specifically aims to:

- Enable children to play adventurously, creatively and imaginatively.
- Enable children to become as autonomous and independent as possible.
- Maintain and promote Equal Opportunities.
- Innovate and model best practice.

In aspiring to the aims of PATH's Play Projects, the following objectives are identified:

- To provide a stimulating environment in which children have access to a wide variety of structured and unstructured play opportunities and feel safe.

- To be aware of, and sensitive to, children's differing needs.
- To give each child as much support and encouragement as he or she needs in order to make choices and participate fully in their chosen play opportunities.
- To challenge discrimination and prejudice and encourage awareness and understanding among children of differing abilities, cultures and backgrounds, in a sensitive and appropriate manner whilst protecting each child's Play Frame\*.

**\* Play Frame: is a real or imagined boundary that contains the play; the frame may be the sandbox that the children are playing in, or the 'lets pretend' game they carry with them through the whole play space. Perry Else and Gordon Sturrock (1998)**

## 1.2 Children's choice

“Play is a process, freely chosen, personally directed, intrinsically motivated. That is, children and young people determine and control the content and intent of their play, by following their own interests, ideas, in their own way for their own reasons” – **Playwork values and principles.**

The play experience offered at PATH projects is **child-led and play-centred**. Play environments reflect the interests and choices of the children and at all times can be altered to accommodate particular requests (provided that appropriate staffing levels and skills are available). With a more complex request such as a trip out, a spontaneous change to the programme is unlikely to be possible, but suggestions will be taken into consideration when making future plans.

Staff at projects promote children's choice by:

- Observing, engaging with and responding to: children's ideas and initiatives.
- Talking<sup>1</sup> with children about the things they like doing.
- Ensuring all children feel confident about accessing and utilising the play environment. Introducing themselves, their role and their team to all children.
- Introducing new equipment and loose parts<sup>2</sup> to children and leaving it available for them to explore how it may be used, its possibilities etc.

Having free choice where children know they can access equipment, loose parts, games and materials on demand and supporting this with a permissive attitude. Some children do not express themselves verbally, and staff at projects must

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<sup>1</sup> In the documentation which follows, “talking” to children is used as a generic term for all the various types of appropriate communication with our service users, many of whom communicate by non-verbal means.

<sup>2</sup> Loose parts in the context of a play setting are things which can be used for anything, usually natural materials.

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maintain an awareness of the different ways in which children communicate. Close observation and getting to know each individual, their habits, characteristics and personalities, helps staff recognise children's preferences, and interests and reading their play cues.

A systematic audit of the whole play environment is a key tool in ensuring that provision actually meets the play needs of the children. Paying particular attention to the warm welcoming environment criteria as detailed in "Best Play"; Criteria for an enriched play environment. (See Appendix 1)

### **1.3 PATH Playworkers**

Playworkers on PATH projects:

- Assist the children in accessing the play environment.
- Maintain an absolute focus on the child, giving them time, and freedom to express themselves and their feelings.
- Encourage the children to take control of their own play experience.
- Recognise that children can be disabled by their environment and by people's attitudes.
- Value play as a tool which children use to develop physically, emotionally, socially and intellectually. Recognise the value of play as a process.
- Recognise play as a means through which children develop and express themselves creatively and imaginatively.
- At all times take account of Health and Safety considerations and recognise that, at times, this may necessarily place boundaries or limits on children's play.
- Create and facilitate a high quality, challenging play environment.

## 1.4 Visitors/The non playing public

All projects welcome visitors. Visitors provide an opportunity for people, whether from the immediate community or beyond, to see children at play, facing challenges and discovering their abilities. This is also an opportunity for visitors to find out more about the work of PATH and the Play projects, to receive advice and support from staff and to be put in contact with other services and agencies etc.

- The provision should be welcoming and accessible.
- Staff will greet all visitors to the Play project.
- Where possible, visitors should make an appointment to come to the Play project.
- Names of visitors, and the times of arrival and departure are to be noted in the Day Book.
- Visitors are to be supervised when they are at the Play Space, and must not be left alone with the children.
- People who enter the Play Space, and are not accompanied by a child, will always be approached by a member of staff in order to ascertain the purpose of the visit.
- Visitors are required to obey instructions from staff and the Play project's rules regarding health and safety and contact with children.
- Smoking is not permitted when children are present, and is never permitted in play buildings.
- Alcohol is only permitted for social events approved in advance by the Director. Alcohol must never be consumed when children are present.

**Non – prescription drugs will not be permitted at any time.**

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## **Chapter 2**

### **EQUAL OPPORTUNITIES**

- 2.1 Rationale**
- 2.2 Statement of intent**
- 2.3 Service provision**
- 2.4 Inclusion policy**

## **Rationale**

PATH aims to address and remove inequalities wherever it can. All of PATH's work is aimed at improving the access for all children to play and to reducing prejudice directly, in our services; and indirectly, through information, training and campaigning. It is the responsibility of everybody who works for the organisation to implement that commitment.

In recruitment and employment, we consider first whether existing staff may be suitably qualified and experienced when opportunities for employment or additional responsibility are identified. Filling vacancies by internal recruitment, in accordance with our recruitment and selection procedures, provides career development for the staff concerned, ensures continuity for the organisation, and enables us to make the maximum use of limited funds and resources.

PATH's commitment to Equal Opportunities extends to the wider community and we aim to ensure that we neither discriminate nor condone discrimination by or against those with whom we work or come into contact. Instances of discriminatory language or behaviour will be challenged in a timely and appropriate fashion.

## Statement of intent

PATH recognises that certain individuals and groups are discriminated against on grounds of disability, race, ethnic origin, culture, socio-economic background, gender, sexuality, religion, creed, marital status and age. PATH is committed to eliminating all forms of discrimination both through its own work and through its employment policies and practices.

PATH recognises that passive policies will not achieve change and is taking active steps to combat discrimination and remove inequalities.

- **Service provision:** PATH will try to ensure that the service it offers, both through its local project work and information and promotional work, is accessible to all groups. It will strive to avoid receiving or purchasing goods from agencies that practice discrimination.
- **Recruitment and selection:** It is PATH's aim to receive the widest response to employment vacancies within the organisation. If there are likely to be suitable internal candidates they will be encouraged to apply first. If vacancies cannot be filled internally they will be advertised publicly, using a suitable variety of publications and agencies. Information sent to potential applicants will include job descriptions, person specifications and details of the Equal Opportunities policy. Selection will be against job description and person specification criteria only.

PATH will aim to ensure that people from under-represented groups are fully involved at all levels within the organisation and will endeavour to ensure that the opportunities and services it offers are available to all under-represented groups.

- **Terms and conditions:** PATH will ensure that staff in employment are not discriminated against through the terms and conditions under which they are employed. PATH's Terms and Conditions of Service apply to all staff. They contain reference to the requirements imposed by PATH's Equal Opportunities Policy.

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PATH recognises that from time to time the family and social needs and circumstances of staff may change. PATH will attempt, where opportunities and resources permit, to accommodate the needs of those employees.

- **Staff support:** Staff are entitled to support from management and immediate colleagues within the organisation. All staff will receive regular supervision from their line manager. If particular conditions suggest it, and resources are available for it, access to outside support will be encouraged.
- **Training:** PATH recognises that training and development is an important factor in leading to job achievement and opportunity. Induction training is particularly important and will be made available to all new staff. When other needs are identified every effort will be made to ensure that appropriate training and development is available.
- **Monitoring:** In order to assess whether PATH accurately reflects the communities within which it operates, a procedure to monitor this policy is essential. Monitoring can also help PATH to identify strengths and weaknesses which will enable it to operate more effectively. Appropriate instruments and methods of measurement will be used to assess the membership and staffing of PATH and the use of its facilities.

## **Service provision**

### ***Information and promotion***

People must have easy access to information about our services. This may involve making the information available in a variety of media (for example, in Braille, on cassette, translation support etc).

### ***Equipment, activities and environment***

**The site** should be easy to access (i.e. no physical obstructions) and the play space should be defined and welcoming. The staff should facilitate a play centred atmosphere.

**The play environment and its resources** should support the play of existing and potential users.

## **Inclusion Policy**

PATH's projects are open to all children. They have a play-centred approach which focuses on the child as an individual – their likes and dislikes, their needs and wants. When playwork is approached from this perspective there is only the playing of a group of individual children with individual needs.

Whilst working onsite PATH aims to a 1:10 ratio, however, it recognises that individual children's needs or project circumstances may necessitate a different ratio. This will be evaluated through Risk Assessments based on child observation. (see section 4.6)

This will assess the level of support required by a particular child is sometimes greater than that which can be provided through the standard staff:child ratio.

## **2.5 Race Equality and Diversity**

- 2.5 – 1 Introduction**
- 2.5 – 2 Legal Framework**
- 2.5 – 3 Definitions**
- 2.5 – 4 Aims and Objectives**
- 2.5 – 5 Procedures**
- 2.5 – 6 Monitoring and Review**

## **2.5 – 1 Introduction**

PATH recognises that certain groups and individuals in our society are discriminated against for a variety of reasons, including their ethnic origin. We are committed to working towards eliminating any such discrimination in all aspects of our work.

At PATH we value the individuality of all our children and staff. We are committed to giving all users every opportunity to express themselves safely and to achieve their highest potential. Within this ethos we do not tolerate bullying, harassment or discrimination of any kind.

This policy will help to ensure that the projects promote the individuality of all users, irrespective of ethnicity, age, disability, gender, background or behaviour. We aim to reflect the multi-ethnic nature of our society and ensure that the service we offer fosters positive attitudes to all people.

The purpose of this policy is to communicate PATH's commitment to race equality and to establish objectives, responsibilities and monitoring arrangements for the organisation.

The policy itself should be actively promoted and made readily available so that staff, users and the wider community can be aware of the ethos and commitment PATH has to inclusion and race equality.

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## 2.5 – 2 Legal Framework

PATH recognises the importance of equal opportunity and strives to ensure that our services are accessible to everyone who needs them. All PATH staff, services, resources and activities try to reflect the wide breadth and diversity of cultures within the local community and to meet this variety of local needs. This policy has been written to meet the organisation's statutory duty under the **Race Relations (Amendment) Act 2000**. General and specific duties are required as follows:

The general duty requires us to have due regard to the need to:

- eliminate racial discrimination
- promote equality of opportunity
- promote good relations between people of different racial groups

The specific duty requires us to:

- prepare a written policy on racial equality
- assess the impact of our policies on children, staff and parents of different racial groups
- Monitor the operation of our policies through the impact they have on children, staff and parents

PATH strives to ensure that we follow our legal responsibilities as laid down in current legislation:

The **Race Relations Act 1976** amended by the **Race Relations (Amendment) Act 2000** makes it unlawful to discriminate – directly or indirectly – against someone on racial grounds. The Act places a general duty on public authorities to promote race equality and tackle discrimination and promote good relations between people of different racial groups.

**The Children's Act 1989** states:

Children from a very young age learn about different races and cultures, and will be capable of assigning different values to them. The same applies to gender, and making distinctions between male and female roles. It is important that people working with young children are aware of this so that their practice enables children to develop positive attitudes to differences of race, culture, language and gender.

**Children's Act** standards require all staff to provide care with equal concern and in doing so, acknowledge and respect children's specific needs with regard to their religious persuasion, racial origin, cultural and linguistic background, as well as gender or disability.

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## 2.5 – 3 Definitions

**Institutional Racism:** The collective failure of an organisation to provide an appropriate and professional service to people because of their colour, culture or ethnic origin. It can be seen or detected in processes, attitudes and behaviour which amount to discrimination through unwitting prejudice, ignorance, thoughtlessness and racist stereotyping which disadvantage minority ethnic people.

The Race Relations Act (RRA) has legally binding equal opportunities provisions for employers and service providers. It defines three main types of discrimination:

- **Direct discrimination.** When a person is treated less favourably than others on grounds of race, sex or marital status. The RRA defines 'racial grounds' as race, colour or nationality (including citizenship) and ethnic or national origins.
- **Indirect discrimination.** Where an organisation treats all its staff in the same way, irrespective of their background, but where the result of that treatment is that employees belonging to a particular group are disadvantaged, for example, if an organisation holds a residential training course during Ramadan, this might prevent practising Muslims from attending.
- **Victimisation.** When a person is discriminated against for taking action under the RRA or SDA, or for supporting such action by another person.

**Racial harassment** can be defined as conduct which is intended to cause, or has the effect of causing, physical or emotional harm or mental distress to a person for reasons of racial, ethnic or national origins or for reasons of colour. Some examples are;

- Insensitive jokes or pranks of a racial, ethnic or religious nature
- Racist graffiti
- Racially abusive language
- Offensive photographs or drawings or racist propaganda.

Harassment of a person on the grounds of their association with a person or persons who belong to a racial or minority ethnic group will also constitute racial harassment.

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## 2.5 – 4 Aims and Objectives

Anti-racist policy and practice will be managed through PATH's management processes for planning. Our commitment is demonstrated through:

- Endorsing the principle of inclusion throughout the organisation
- Eliminating barriers in order to maximise participation and development of all users, staff and volunteers.
- Promoting mutual understanding and respect for the linguistic, cultural and religious diversity of the communities we serve.
- Drawing on the diverse experiences and skills of staff and the wider community.
- Aiming to ensure representation on the projects of the wide range of heritages in our community.
- Actively challenging discriminatory behaviour to ensure that no staff/ user/ parent/ community member suffers unfair prejudice, and to act on any such incidence in accordance with employment procedures/ rules on behaviour etc. in an appropriate and timely fashion.
- Enabling all children to have equal status and to have the right to appropriate access, with each child being included, and given encouragement to fulfil their individual potential.
- Directly addressing issues related to cultural diversity and staff effectiveness in dealing with issues of race equality in staff induction and training sessions, staff meetings and/or performance management meetings as appropriate.
- Monitoring the impact of all our policies on different ethnic groups.

## 2.5 – 5 Procedures

### **PATH, as an organisation, will:**

- Ensure that play provision is available to as many residents in the specified age range as resources allow, with no child being unfairly excluded or disadvantaged.
- Ensure that all potential users have access to information about the services, and that all leaflets and publicity materials are easy to read, are understandable, and representative of the project.
- Ensure that PATH representatives meet regularly with users and their families to evaluate the service and look at ways of enhancing it.
- Ensure playwork methods encourage positive attitudes to difference, faith, cultural diversity and race equality.
- Help children and staff know how to identify and be confident to challenge racial bias and stereotyping.
- Actively tackle racial discrimination through PATH's practice.
- Ensure staff have the necessary support so that they are aware of their responsibilities and are better equipped to deal with issues of cultural diversity and race equality.

Projects should be proactive in building positive relationships with their local communities and establishing their presence within the community.

- Do our best to facilitate access to tools such as interpreters and document translation to provide support, information and services to parents, staff and visitors for whom English isn't appropriate.
- Ensure that PATH obtains information about the local community with which to compare our monitoring records.

## **Playworkers**

- Must take into account children’s cultural backgrounds, language needs and religious requirements to ensure that all children feel fully included – personally, racially and culturally.
- Must ensure that all personal and intimate care procedures respect the dignity and culturally diverse needs of all users.
- Should be proactive in building positive relationships with their local communities, they should be open, friendly and welcoming to children and other community members to promote mutual confidence and trust.
- Must be able to recognise incidents of racial abuse and take appropriate and timely action in dealing with them.
- Should encourage all children to play freely with each other and participate equally in the fullest possible range of opportunities.
- Must take care to give positive responses to other languages.

## **Action**

If racial harassment occurs involving either staff or children, it must be reported and recorded on an incident report form, and must be specifically recorded as a racial incident. This is done so that the levels of racially motivated behaviour can be monitored, reviewed and the appropriate action taken.

Racial harassment on PATH projects needs to be acted in a timely and appropriate fashion dealt with through procedures set out in the bullying and harassment policy.

If staff feel they are suffering discrimination or are concerned about the behaviour of another member of staff they should report to their Senior Playworker or line manager where a full written record of the incident or concerns will be taken. If the concerns are about the Senior Playworker or line manager you should approach that person’s line manager (i.e. Director or

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Trustee). Any such approach will be treated with the appropriate professional sensitivity.

## **2.5 – 6 Monitoring and Review**

The Equal Opportunities Policy and Race Equality Policy will be monitored and updated on a regular basis to ensure that our aims and objectives are being achieved, and to address any problems in achieving those aims and objectives.

Ethnic monitoring is a method of ensuring that people are receiving the services they need. The purpose of ethnic monitoring is to identify trends and patterns that may show up differences and inequalities between ethnic groups. If trends of under-representation of certain children are identified, it may be that the service is not reaching all those in our community: specific targeting may be required.

Review of our Code of Practice should be carried out periodically to ensure that policies take into account inclusion and equality of opportunity for all. Policies, practices and procedures will be amended whenever it is necessary to incorporate any changes to legislation, and to include any improvements that may have been identified.

**Chapter 3****WORKING WITH CHILDREN**

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- 3.2 Referrals to PATH play projects**
- 3.3 Children's records**
- 3.4 Guidelines for Playworkers**
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- 3.18 Confidentiality**

**3.19**            **Internet**

**3.20**            **Photography on PATH projects**

### 3.1 Introduction

The children who come to PATH projects come to play, to make choices and to take risks in a supervised environment. We want the children to be safe and feel secure when they are with us.

The guarantee that we offer children who come to the projects is that:

- They will be cared for and their care needs will be met.
- They will be respected as individuals, and their rights and dignity will be protected.
- They will be safe, within the context of the Play Space.

Safety in play has been a growing concern for many play providers and a balance needs to be struck between the risks and benefits of play. The Play Safety Forum, a grouping of national agencies involved in play and safety matters, has produced a document to support all those who work to provide play to children. The document summary is as follows:

**“Children need and want to take risks when they play. Play provision aims to respond to these needs and wishes by offering children stimulating, challenging environments for exploring and developing their abilities. In doing this, play provision aims to manage the level of risk so that children are not exposed to unacceptable risks or death or injury.” \***

Children may need some degree of encouragement and assistance to enable them to make the most of the play environment and the opportunities on offer there. The role of the Playworker is to help children enjoy the fullest access to the play environment. This places significant responsibilities upon the Playworker.

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\* Extract taken from the Play Safety Forum ‘Managing risk in play provision: A position statement’

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The policies, practices and guidelines in this chapter are designed to assist the Playworker with these responsibilities. They provide protection for both children and staff, and all Playworkers should be familiar with them.

## **3.2 Referral to PATH Play Projects**

PATH runs a range of services which are adapted to meet local need and funding streams. Referrals are made in a variety of ways.

### **Procedure**

- PATH play projects are contacted by a referral agent to register. This could be parents, carers or Statutory Sector Services e.g. Social Services or Children's Services.
- The project may arrange a preliminary visit to the project for the child accompanied by a referral agent.
- During the visit, staff talk with child and referral agents to find out more about the child's individual needs, abilities etc.
- A Child Record Form is completed and signed by the parent or carer for each child who is referred to the project.
- The child's level of support will be initially assessed at this point. This process to be ongoing as long as the child attends the project.
- Where children are assessed as requiring individual support and supervision, PATH/ the play project/ key agencies will work together to assure appropriate resources are secured. If resources are not currently available then PATH will not endanger the child, their peers or PATH Playworkers by over commitment. The Senior Playworker will endeavour to find a reasonable and practical solution to ensure the child's needs are met and that they may attend the Play Project in the future.
- As part of PATH's playwork teams ongoing assessment process Child Risk Assessments will be carried out, these need to be signed off by the PATH Project Manager. The Child Risk Assessment is completed by the Playwork Teams, who assess the degree of risk involved and agree the control actions which are necessary to manage that risk satisfactorily.

These control actions will detail ways of working with the child and the play environment which aim to *prevent* potentially hazardous situations occurring, as well as detailing strategies for dealing with such situations if they do occur. As with Risk Assessments generally, all staff need to be aware of the details of new assessments. (See section on Risk Assessment 4.6)

## **Open Access**

PATH Play Projects work in open access sites which are not owned by PATH and may be public and open spaces. This means that the play staff will be working in a specific space which may not be fenced or have a marked boundary. This area is referred to as the Play Space.

- Playworkers must monitor all open access 'traffic' – i.e. they must be aware of who is coming onto and leaving the Play Space.
- Playworkers should make themselves known to the children and parents/carers and where possible wear photo ID cards.
- The Playworkers must inform parents/carers that Playworkers cannot be responsible for the care of children under the age of five years.
- The Playworkers can ask other adults on the Play Space to be aware and respectful of the fact that this is a space for children's play.
- No adults, including Playworkers, may have unsupervised access to any child or children other than their own.

## **Collection of children**

Where a prior agreement regarding collection of a child has been made it is PATH policy to only hand over a child to the parent, carer or someone who has been authorised in advance to collect the child. If a child is to be collected by someone other than in the agreement this must be indicated to a member of staff by the parent, carer or agency and recorded. Identification may be required or sought to ensure the correct person has come to collect the child.

See also Uncollected Children Section 3.8 (page 6 of 7)

### **3.3 Children's records**

The basic source of information about who has attended the project on any given day – both staff and visitors – is to be completed at the end of each working day in the Day Book.

All projects have Day Books or meeting books which record details about each session, playwork with individual children and notes of any developments and/or changes in a child's behaviour. The day book also includes notes about any feedback/information received from visitors, parents or carers and should have some evidence of Reflective Practice<sup>3</sup>.

The following records are to be kept on file:

- Child Record Form
- Outing and photographic consent form
- Medical consent form
- Attendance Registers
- Day Books

The procedures associated with each of these documents are set out below:

#### **Child Record Forms**

- The forms are to be completed and signed by the parent/carer.
- Ideally they are to be updated every year between April 1<sup>st</sup> and June 30<sup>th</sup>.

Any interim changes to the information on the form are to be notified to the project by the child's family. If this is done via a telephone call then confirmation is to be obtained by the relevant parent/carer in writing (it will be sufficient for them to sign the project's amended copy).

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<sup>3</sup> Reflective Practice is the process of evaluating your interactions with others, stepping back from the normal everyday environment and thinking about what we do, how we do it and whether we would do it differently next time.

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## Outings and Photographic Consent Form

These confirm the consent, in principle, of the child's parent or carer, for the child to leave the project with staff members for trips and outings.

- Ideally they are updated every year between April 1<sup>st</sup> and June 30<sup>th</sup>, at the same time as the Child Record Forms.
- Specific consent is sought from parents/carers for particular trips.

PATH periodically updates its collection of photographs for use in training and publicity promotional material. The consent form also specifies whether permission is given for photographs of the child to be taken. For policy and procedures relating to photography on PATH projects, (see section 3.20).

## Attendance Registers

These are filled in for all the children who are registered with the play session i.e. who are there by prior arrangement with the play staff. The Attendance Register records each child's daily attendance. If the Play Spaces are subject to Ofsted registration then the child's arrival and departure time and any absences also need to be recorded. It is used to check that all children are present at the beginning and end of the day, on outings and in fire drills.

## School Groups and Information

The following information is collated by the PATH office from information provided by the projects:

- **List of schools using the project** with details of name, address, teacher-in-charge, head teacher.
- **List of groups using the projects** with names, address and telephone number of contact person.
- **Timetables:** each project is responsible for informing the PATH office of any changes to its timetable.

The PATH office also maintains the following information:

- **Lists of local schools and schools with special needs units** who do not currently use the project.

## **Staff Records**

The amount of personal information concerning staff and volunteers which is held at the PATH office is to be kept to an essential minimum. Staff records held should include the following:

### *Permanent staff*

- **Name, address and telephone number of all staff members**
- **Staff absences:** to be recorded in the main diary when they occur, together with a brief note of the reason for the absence. These absences are then collated and transferred to the staff records sheets sent to the PATH office at the end of each month.
- **Notes of supervision and appraisal meetings**

### *Sessional staff*

- **Name, address and telephone number**
- **Contract** for each employment period – staff also hold copies of their contracts
- **Appraisal forms**
- Record of CRB number and confirmation
- Application Forms
- References

### *Volunteer staff records*

- **Name, address and telephone number**
- Record of CRB number and confirmation
- Application Forms
- References

### **3.4 Guidelines for Playworkers**

PATH provides a range of projects which work directly with children. These projects provide and model high quality play opportunities. All Playworkers working in PATH projects are expected to work within PATH's policies, Code of Practice and following the Playwork Principles.

#### **Playwork Principles**

These Principles establish the professional and ethical framework for playwork and as such must be regarded as a whole. They describe what is unique about play and playwork, and provide the playwork perspective for working with children and young people. They are based on the recognition that children and young people's capacity for positive development will be enhanced if given access to the broadest range of environments and play opportunities.

- 1. All children and young people need to play. The impulse to play is innate. Play is a biological, psychological and social necessity, and is fundamental to the healthy development and well being of individuals and communities.**
- 2. Play is a process that is freely chosen, personally directed and intrinsically motivated. That is, children and young people determine and control the content and intent of their play, by following their own instincts, ideas and interests, in their own way for their own reasons.**
- 3. The prime focus and essence of playwork is to support and facilitate the play process and this should inform the development of play policy, strategy, training and education.**
- 4. For Playworkers, the play process takes precedence and Playworkers act as advocates for play when engaging with adult led agendas.**
- 5. The role of the Playworker is to support all children and young people in the creation of a space in which they can play.**
- 6. The Playworker's response to children and young people playing is based on a sound up to date knowledge of the play process, and reflective practice.**

- 7. Playworkers recognise their own impact on the play space and also the impact of children and young people's play on the Playworker.**
- 8. Playworkers choose an intervention style that enables children and young people to extend their play. Playworker intervention must balance risk with the developmental benefit and wellbeing of children.**

**(Endorsed by SkillsActive – May 2005)**

**Downloadable from Play Wales Website:**

**<http://www.playwales.org.uk/downloaddoc.asp?id=48&page=50&skin=0>**

### **The Key Task of all Playworkers are:**

- Work with other Playworkers to ensure the delivery of high quality inclusive play opportunities.
- Ensure safety and well being of children and young people attending the sessions.
- Provide appropriate play props and environment to support play opportunities suitable for children, with and without disabilities, which includes preparing the site, a range of opportunities and the materials required.
- Use appropriate intervention styles to support a range of play types.
- Carry out day to day record keeping and observations of play mechanisms and types used by the children to improve quality and range of play offered.
- Attend meetings with line manager and other project staff as appropriate.
- Lead volunteers.

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- Carry out all responsibilities and activities within an equal opportunities framework.
  - Work within agreed policies.
  - Any other duties as required.
  - Where situations arise in areas of the project other than where the child is the Playworker should alert other staff to this rather than leave the child to deal with another matter.
  - Playworkers must be aware of the children and their individual needs at all times.
  - The Playworker should take care not to burden any child with excessive or unnecessarily overt attention (e.g. by intrusively shadowing the child).
  - If during a session, the Playworker requires a break, responsibility for the child must be formally handed over to another member of staff who is available to take over.
  - The Playworker should avoid creating a dependency of the children on the support or on the Playworker as an individual.
  - The Playworker is required at all times to uphold the dignity and right to privacy of the child.
  - If the child is hurting themselves or others and the Playworker feels it necessary to intervene, PATH's Positive Physical Intervention Policy must be followed (see section 3.12).
  - Playworkers need to be sensitive about the language they use and should not talk about the children in front of them.
  - On the play projects Playworkers are employed to engage with the play environment and process at all times.

- The play environment should be such that Playworkers can ask for help when they need it, and should always be encouraged to ask if they are unsure about anything.
- Playworkers should use reflective practice to evaluate how we interact with others and to try and learn from our experiences.

### **3.5 Minimum staffing levels**

A minimum of three staff must be present for play services to run. If there are not three members of staff available the session should be cancelled. This would be a rare circumstance, which is at the discretion of the Senior Playworker, and based on Risk Assessment.

After each session the nominated Senior Playworker should report to the PATH office by phone or email (a pre-arranged number will be made available for out of hours services):

- Any members of staff who are absent due to personal problems or sickness.
- Any members of staff who have left the session due to personal problems or sickness.
- Notes kept in First Aid book of staff who have been told to seek further medical advice.

All annual leave should be booked with the Project Manager two weeks in advance.

#### **Project closure**

It is very important that the service offered by PATH Projects is consistent and reliable. It is vital that each particular group, family and individual user has confidence in the fact that the projects will be open and adequately staffed.

There are however, occasions when the project will be closed. If the session has to be cancelled due to extreme weather conditions or staff shortage the following procedure should be followed:

The nominated Senior Playworker should:

1. Where possible in advance have contacted the Project Manager or Director in the PATH office to inform of cancellation.

2. The cancellation and reason would be recorded on form in the Directors office.
3. Post notice of cancellation at session venue with reason for cancellation and times and dates of session.
3. Record cancellation in daybook

## 3.6 Outings and off-site activities

### Risk Assessment

The basis of all safe and successful outings and off-site activities is the Risk Assessments on which they are based and planning. **A Risk Assessment must be undertaken prior to every outing and off-site activity.** These don't need to be complicated, but they do need to be comprehensive. The fundamental principle, as always, is that children must not be placed in situations in which they are exposed to unacceptable levels of risk. Activities with unacceptable risk are to be avoided.

A permanent member of staff is appointed **group leader** for each specific trip by the Senior Playworker. It is the responsibility of the designated group leader to draw up this Risk Assessment, which must then be countersigned by the Senior Playworker. These Risk Assessments must be kept on file for future reference. Some venues will have drawn up their own general Risk Assessments, which can be obtained in advance from places you are planning to visit.

Note: this is essential when visiting venues that provide adventurous pursuits, e.g. climbing and canoeing.

It is also the group leader's responsibility to ensure that all staff members accompanying the group are fully briefed, **prior to departure**, about the details and contents of the Risk Assessment. Each member of staff accompanying the group must be aware of the potential hazards and know what he or she is required to do to control the associated risks.

**At least one member of staff accompanying the group must be a qualified first-aider.**

The Risk Assessment is to be recorded on the standard Risk Assessment form and must take into account the following:

- The specific needs of the individuals going on the trip, including medical needs.

- The relationship and any potential problems between the children who are going on the trip.
- Any hazards that are associated with the venue and/or activities, planned and unplanned.
- Any hazards associated with travel to and from the venue.

**Most importantly of all, it will need to specify the staff ratio that is necessary to ensure that all foreseeable risks to the members of the group can be managed safely, for that specific trip and those specific children.**

Note that:

- Staff are to carry ID badges at all times whilst accompanying children off-site. These are obtained from the PATH office.

## **Planning**

If the planned venue/activity is unfamiliar, a member of staff – preferably the group leader – should make an exploratory visit to assess its suitability. Where this is not possible, all relevant information should be obtained from the operators of the venue/activity. If appropriate, check the venue for wheelchair access.

Other factors which should form part of the planning stage include:

- The facilities/equipment that the group will need to take on the visit.
- The facilities/equipment to be provided at the venue.
- Information to parents.
- Briefing the children prior to the trip.

- Contingency measures for enforced change of plan or early return, including emergency contacts and arrangements for sending children home early.
- Agreed plan and procedure to check that all children are accounted for before leaving the venue.
- How much it will cost.

A standard letter is to be given to the hosts of each off-site visit/activity, giving contact details, a brief overview of the needs of the client group, and the procedure to follow in the case of an emergency.

The following items are to be taken on the trip and held by the group leader or other nominated person:

- First Aid kit
- Permission slips
- Staff ID
- Individual medication and consent forms (where required)
- Copies of the individual child record forms
- A copy of the Risk Assessment.
- A copy of the standard letter given to hosts outlining contact details and contingency procedures.
- Contact card with mobile phone and office numbers in all vehicles.

A list of all children and staff on the trip is to be left at the PATH office with the register; a similar list is to be held by the worker-in-charge on the trip. The

PATH Office must be informed **in advance** of the time and the destination of each outing that is arranged in case of emergency.

### **Contingency Plans**

- The group leader should also have a contingency plan in situations where the weather could alter activities.
- If changing plans always take a lower risk option than the previous plan.
- DO NOT add a higher risk activity – such as swimming if you have not sought parental permission for this.

### **Further Information:**

PATH offers trip leaders training – see training and information officer and [www.hse.gov.uk](http://www.hse.gov.uk) (5 steps towards making a Risk Assessment).

Other items to take on the trip will usually include:

- Wipes, gloves, bodily fluid spillage packs, plastic bags.
- Spare clothing
- Towels
- Drinks and packed lunches
- Extra water

## **Equality of access and opportunity**

It is recognised that not all trips will be appropriate for every child. To ensure equality of provision, staff should plan their programme of outings and activities to ensure that all children attending the Playscheme have the same overall level of opportunities available to them, and ensure that they are included in outings and activities that are stimulating and enjoyable for them. All children and young people should be encouraged to participate in as wide a range of activities as possible.

Any specific health needs must be taken into account, and any prescribed medication, which PATH has agreed to administer and for which we have obtained written consent via the Medication Consent Form must be taken on the outing if necessary.

## **Consent**

Written consent must be obtained in advance for each trip from each child's parent/carer, using the Consent Form. The completed consent forms must be retained and filed securely. No child may go on an outing or off-site activity unless this consent has been obtained.

## **Mobile Phones**

At least one of the staff on the outing, including the group leader, should have a mobile phone with them.

Each of the children should have a label attached to their shirt with the PATH number and the mobile number on it (but **not** their individual name), so that staff can be contacted in case of an emergency.

If a member of staff has to use their own mobile phone for this purpose, PATH will reimburse you for the cost of any work-related calls. This can be done via the PATH expenses form.

**Other staff working on site are not to use mobile phones during work hours. Personal phone calls can only be made if authorized by the Senior Playworker.**

The senior member of staff remaining on site must have comprehensive contact details for the outing venue and for the group leader.

### **Once the outing is underway**

- Staff members are to be allocated responsibility for specific children, and will be responsible for organising the children and their belongings.
- Staff on the trip should be clear about the relevant needs of each child, as detailed on their child information records and any individual child Risk Assessments.
- PATH's standard toileting and changing policies and procedures apply to all off-site outings and activities. Additionally, a member of staff should supervise all children safely to the cubicles and stand outside until they have finished.

**Frequent headcounts must be made to ensure that no-one has slipped away unnoticed. These are to be made as a matter of course before any journeys, either outward or return, and any changes of location *within* the venue.**

### **3.6 Lost Child**

**In the event of a child becoming separated or missing from the group the following action should be taken:**

Alert the member of staff in charge who will make enquiries of the relevant member of staff as to when and where the child was last seen.

- Remember the safety of the other children; ensure that the remaining children are secure and sufficiently supervised.
- One or preferably two members of staff should search the immediate vicinity.
- If the child cannot be found within ten minutes (this time would vary according to the risk assessed needs of the child) then the Playwork team and for example; venue security staff must be informed, if in a public place the police must be informed. Parents must also be contacted if the child cannot be found.
- Continue the search, opening up the area, keeping in touch with mobile phones if possible.

When the situation has been resolved members of staff should review the reasons for its occurrence and ensure that measures are taken to ensure it does not happen again. An incident report must be completed when the group returns and Risk Assessments must be reviewed and updated.

**Note:**

In the event of a medical emergency, the emergency services, then the parents are to be contacted immediately. The PATH office should also be contacted at the earliest opportunity. The registered First Aider will care for the child and where necessary administer First Aid while waiting for the ambulance.

### 3.7 Transport

The bus journey is an extension of the service for the children. The tone and atmosphere of the travel time should be in continuity with that of the play space.

Transport may be managed and organised by:

- PATH
- Schools
- Statutory Services (using an approved agency)

**For those out-of-school services for which transport is provided,** parents/carers should complete booking forms informing staff of their transport needs. Needs for transport will be prioritised and places allocated accordingly.

**Where projects have their own bus it is the responsibility of staff to ensure that:**

- Routine checks are made on a daily basis.
- Vehicles are checked weekly for on-going maintenance needs, and a checklist completed on each occasion.
- Vehicles are serviced annually (minimum).
- Other problems/repairs are dealt with as they arise.
- Standards of vehicles meet all legal/safety requirements.
- Drivers and escorts are available (this may necessitate cover). One or two escorts will accompany the children, depending on the needs of the children.

- Drivers have passed the MiDAS test.
- Drivers are insured to drive the bus.
- The bus has a valid MOT.
- Projects have a list of drivers and copies of licenses. Licenses will need to be photocopied and checked annually.
- Minibuses are equipped with current safety requirements including: fire extinguisher, first aid kit, basic tool kit and wheelchair clamps.

### **Drivers' duties:**

The driver is responsible for the safety of his/her passengers. PATH drivers will be required to have passed a recognised local authority or MiDAS minibus driving test. Drivers from other agencies e.g. community transport will have been checked by their employer.

- Drive at all times with full care and consideration for the safety and comfort of their passengers, and of other road users.
- **Do not** attempt to deal in any way with the vehicle's passengers, or with issues arising from their behaviour, while the vehicle is moving. If a situation arises that cannot be ignored then the driver must stop the vehicle before attempting to help the escort deal with the situation.
- Park considerately and safely.
- Immediately report any accidents, maintenance needs or malfunctions on the bus.
- Ensure that no parking tickets are received.

- Long journeys are to be avoided where possible. Although the length of the journey will depend on how far the children have to travel, and the volume of traffic when they need to make that journey, staff must try to ensure that **children will not be on the bus for more than one hour**, for each journey. Most local authorities now have guidelines which prohibit individual journeys which exceed this duration.

**The driver has overall responsibility to ensure a safe service is provided. Responsibilities include making sure the vehicle is roadworthy before taking it out onto the road and ensuring the safety and welfare of all passengers on board (see Minibus Procedures).**

#### **Escorts' duties:**

- The escort should introduce him/herself to parent/carer – liaising with parents/carers in the morning and/or afternoon is often an important way of passing on or receiving information about, for example, medication, any incidents or upsets during the day or at home, and of course any positive feedback about the child's day.
- The escort should stay on the bus until all the children, are off the bus (as far as is possible).
- The escort must physically escort the child from the bus to the child's front door, and must ensure that someone is there to receive them. If this is not the case, the child *must* be returned to the bus.
- Remember that the bus is an extension of the play day for the children and the environment on the bus should reflect that.

*Additionally, the following guidelines are to be followed by Drivers and Escorts:*

- Emergency sickness procedures and numbers should be kept on the bus at all times.

**In the morning:**

- The escort and/or the driver must assist wheelchair users off the bus, and any other passengers who require physical assistance.
- Any medication must be clearly labelled with the child's name and handed to a full time member of staff upon arrival.

**In the afternoon:**

- The escort is primarily responsible for getting the children and their belongings onto the bus at the end of the day.
- If no parent or authorized carer is at home to receive the child when they are dropped off, PATH should be contacted immediately; staff will then attempt to reach the parents/carers. In the last resort, staff will contact the duty social worker at the relevant Statutory Sector Services office and arrange for them to care for the child. Escorts should always have the relevant Statutory Sector Services contact number available to them on the bus.

**Sickness and emergencies on the bus**

If a child becomes sick on the bus:

- Try to make the child as comfortable as possible.
- If necessary get the driver to pull over in a safe area to clean up any body fluids.
- Ensure that the child is comfortable and ready before resuming the journey.

If the child is unable to continue the journey due to serious illness, medical advice should be sought immediately. PATH office must be advised and staff will inform parents or the emergency contact.

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## IMPORTANT POINTS TO REMEMBER:

- The escort is responsible for physically escorting the children from their front door to the bus, from the bus to their front door, and for handing them back to their parent/carer at the end of the day.

The escort must ensure the children remain seated whilst on the bus with their seatbelts fastened at all times.

## The following must be recorded:

- Any messages from parents/carers.
- Any incidents that occur during the journey.
- Children's outer clothing and baggage.
- The escort is responsible for ensuring that the child is handed over to their parent or authorised carer, **AND NEVER TO ANYONE ELSE.**

## Medication

- Escorts need to collect any medication children have with them as soon as they get on the bus.
- The escorts must make a note of any medication received or any changes to a child's medication requirements.
- On arrival, medication must be labelled and handed immediately to the Senior Playworker or other key holder to the medicine cupboard. The key holder must then transfer all labelled medication to the medicine cupboard without delay.

## Insurance

If at any time you need to use your own vehicle to do something, it is likely to be viewed by your insurance broker as 'business usage'. If therefore, you choose to have your own vehicle for PATH business, it is essential that you are covered for such use by your insurers. If you are not, and are involved in an accident, you will be uninsured. Your insurers may not take a charge for arranging cover for this casual and infrequent business use. If your manager agrees that such use is essential (subject to budgets), PATH will meet any additional premium required.

## Uncollected Children

If no parent of authorised carer comes to collect a child at the end of a session, the parent, carer or designated adult who is due to pick up the child should be called to ascertain the cause of the delay and how long it is likely to last. If the parent or authorised carer cannot be contacted or only their answer phone is available, try the other emergency contacts for the child in the order in which they are listed. Messages should always be left on answer phone requesting an immediate response.

While the child is waiting to be picked up, they should be supervised **by at least two members of staff**. The usual contact with children rules apply. (see section 3.13).

If after repeated attempts, no contact is made with the parent or authorised carer and a further period of 30 minutes has gone by the Senior Playworker should call the local Statutory Sector Services department for advice.

The child should not be taken away unless absolutely necessary and under no circumstances should they be taken to a member of staff's home.

Incidents of late collection should be recorded by the Senior Playworker and discussed with the parents or carers at the earliest opportunity.

Add any incidents to ongoing Risk Assessments.

### **3.9 Promoting Positive Environments**

The play environment consists of much more than the physical play space. The environment and the atmosphere within it, reflects a subtle blend of attitudes, priorities and considerations – which can influence how secure and at ease children feel and consequently, how they behave. Children will be more at ease if they are respected as individuals, if they are listened to and treated sensitively, if their needs are taken into account, and if the activities and images that are available to them are appropriate for them.

#### **Guidelines**

Reasonable steps must be taken at all times to ensure a healthy and safe environment (see Chapter 4). Playworkers should offer high status behaviour for children. This means Playworkers should be in control and aware of their behaviour at all times and be aware of the affects of their behaviour on children and adults. Development of consistent attitudes to safety and good practice by Playworkers should have a beneficial effect upon the children by:

- Having basic agreed boundaries – which help to ensure that the service operates smoothly.
- By creating a friendly, welcoming atmosphere that promotes respect between all children and Playworkers.
- By the team being consistent in the methods they use, backing each other up and supporting each other. Experiences should be shared and discussed at team meetings, again using reflective practice.

#### **Boundaries**

The play site should have an agreed set of boundaries. The workers should ensure the children are aware of these. Workers on any site should endeavour to make other adults using the site aware of the boundaries and of the Code of Practice.

### 3.10 Dealing with Tensions

All play spaces aim to develop a safe environment in which children are encouraged to express themselves freely, and which fosters the social and emotional development of the children who come to the site.

Tensions do arise at times, and incidents need to be handled sensitively and consistently.

When tensions arise it is essential that:

- Actions are taken to calm the children down, and to allow them to express how they are feeling in a way that is safe to other children.
- A positive, calm approach is maintained, both physically and verbally.
- Negative behaviour is not rewarded.
- Understand that behaviour that has negative effects is not always negative behaviour (for example, Tourettes Syndrome or a child under stress).
- The response to a situation should take account of the child's understanding/ability.
- Blame is not attributed to individuals in situations involving more than one child. **The focus should always be on dealing with unacceptable behaviour, the children should never feel it is they who are unacceptable.**

### 3.11 Behaviour that Challenges Us

Where a child presents challenging behaviour on a regular basis, a Risk Assessment Form must be completed. The Risk Assessment Form is a confidential document that details observations about the way a child behaves. (see section on Risk Assessment).

When dealing with behaviour that is challenging to them, the Playworker should consider the behaviour and why it happened. For example, triggers – was the behaviour an attempt by the child to communicate something?

When dealing with behaviour that challenges us the Playworker should, in the first instance, attempt to defuse the tension. The following techniques, termed **distraction and deflection**, describe how this can be done:

- **Avoid confrontation and power struggles.** Getting into one of these means that the situation cannot be resolved unless someone backs down, which will make matters worse rather than better. The child will see you as an opponent rather than someone to be trusted. (Avoid Binary opposition – ‘Yes/No’ conflicts).
- **Speak calmly, quietly and clearly.** This is particularly important with children who are feeling stressed or communicate non-verbally. Children may be attending more to your tone than to the words you are using.
- **Keep your distance.** Be aware of the effects of violating someone’s personal space. Never put your face ‘in’ theirs and be aware of how much space feels comfortable to the child.
- **Keep your body stance as natural and neutral as possible.** Avoid exaggerated and confrontational movements.
- **Remove immediate pressures and any background distractions** where possible.

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- **Be confident and assertive, but never aggressive.** Make sure that what you say to the child, is clear and unequivocal.
  - **Keep with the child.** Use eye contact sensitively, offer choices, be prepared to negotiate and to compromise. Give the situation time to de-escalate. It is sometimes useful to just share quietness with the child.
  - **Be aware of yourself and your own reactions.** Try to take time to determine how your mood may affect your objectivity and tolerance. Don't be afraid to ask to swap with another Playworker.

**Note: Concept of 'Good Enough Playworkers: You can only do the best you can – don't try and be perfect because you will only fail'.**

The team should ensure that the member of staff dealing with the incident does not require assistance, and should check this periodically until the incident has finished. It would be advisable to prearrange agreed non-verbal signals to communicate with each other on this: a direct, verbal question carries significant risk of undermining the authority of the member of staff dealing with the incident.

Should these techniques fail to resolve the situation, it may be necessary to use physical restraint. Physical restraint should always be avoided, and must only be used as a response to a child's challenging behaviour when staff are convinced that personal injury or serious damage would have resulted had the action not been taken.

## **Breathing Space**

Breathing Space is a way of pre-empting crisis situations. It should be used in support of boundary setting and Health and Safety requirements. It is not a punishment, reflection of 'badness' or special treatment but a time to think, calm down and perhaps reflect.

Breathing Space is never used to shame, embarrass or punish children and it needs to be clearly understood by all children and staff that it is a supported recovery time with the goal being to resume play.

## **Time Out**

Should it be necessary for a child to have Time Out:

- It should be initiated in delicate and courteous way so the play setting is disrupted as little as possible.
- It must be taken in an area in view of other members of staff.
- Only paid Playworkers should supervise this.
- The child should be helped to turn negative energies into something positive.
- It should be clear to the child and to other staff members why the Time Out is taking place.
- Time Out should be timely and appropriate.
- Anywhere in the play space can be used in Time Out. It should take place in a calmer space, preferably away from the scene of the incident and from other children who were involved in it.
- Boundaries are different for each child depending on understanding or circumstance.

**Note: The overall aim is for the child to help him/herself to understand that they can manage and control their own behaviour and recover their playing.**

It is important that any major conflicts arising during the day are discussed during daily team meetings (reflective practice meetings), where there will be an opportunity to discuss any issues arising from them.

## **3.12 Positive Physical Intervention**

These are three types of Positive Physical Intervention. Physical guiding, physical prompting and physical intervention.

### **Physical Guiding**

For the purpose of this document physical guiding is distinguished from physical restraint by being a strategy for discouraging unwanted behaviour, rather than as a strategy of prevention.

Physical guiding may also be construed as a method of showing affection, giving the child a sense of security and offering some comfort when they are distressed.

Physical guiding, as a method of control and restraint, would generally involve only the placing of a hand on the child's shoulder, an arm around their shoulder or the flat of the hand *resting* against their back to guide them towards another place or activity.

Physical guiding would be used as a method of avoiding external dangers – for example, holding a child's hand or arm whilst crossing the road – or as a method for diverting and/or discouraging a child from disruptive or destructive behaviour.

It is essential that the use of physical guiding as a technique avoids hurting or alarming the child in any way. As with any physical intervention, positive communication techniques should be used throughout to seek to reassure the child. (see section 3.11)

### **Physical Prompting**

There are a number of activities in which it is necessary or helpful for staff to physically prompt a child. It is essential that the physical contact involved in this does not give cultural offence, provoke anxiety about being harmed, or arouse sexual expectations or feelings.

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- Prompting may be used to help a child in the performance of a particular task or sporting activity.
  - Prompting may be used as an accompaniment to a verbal instruction such as 'hands down' or 'Please look at me'. It should always be persuasive and not coercive.
  - Prompting may be needed to encourage a child to sit down. Staff may hold one or both of the child's hands whilst repeating the instruction to 'sit down' and making gentle movements in the direction of the floor or seat to achieve the sitting position.
  - Prompting may be used to assist the child in carrying out the tasks necessary for self-care and personal hygiene.

## Physical Intervention

Physical intervention is occasionally used to prevent a child from harming themselves or others, or from causing serious damage to property.

The purpose of these guidelines is to ensure that the children who use PATH sites are not subjected to any form of unnecessary, inappropriate, excessive or unlawful physical intervention.

- Physical intervention should **never** be used as a punishment, and **never** as an expression of the worker's frustration or anger.
- The method of intervention used will always be dependent upon the circumstances and individual needs of the child. The age and competence of the child, the nature of the behaviour, any recent changes in the child's personal circumstances, and the potential risks involved – both in the behaviour itself and any intervention to deal with it – are all areas that need to be considered. It must never go beyond the bounds of reasonable force.
- Physical restraint should continue only for the minimum time for it to be effective. One of its purposes is to allow a child to regain self control

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and it should always be accompanied by calming dialogue to that end. The reasons for restraining a child should always be explained to them afterwards.

- There should always be another worker present. Whenever possible, call for assistance before engaging in physical restraint. Having a second person present is a safeguard for both the child and the adult: they can act as a witness and can assist if necessary.
- Any physical restraint should be preceded by clear instructions to the child, either spoken or signed; any instructions must be accompanied by attempts to calm the incident until any risk has passed.

‘Holding’ is often the most effective form of restraint technique for a Playworker to use. This typically involves sitting behind the child with your arms wrapped around their arms and torso. This prevents them both from striking out with their hands and from getting up and moving away. Sometimes it is possible for you to link your hands together with your arms encircling the child’s torso without actually touching or restraining the child. It may also be necessary to cross your legs over theirs if they are using their legs to kick someone or to try to break away. Always remember to keep your head back.

In cases of hair pulling, the person having their hair pulled should lean their head towards the pulling hand and try to gently hold the hand to your head until the grip is loosened.

### **Prohibited Forms of Physical Restraint**

- **Any gratuitously violent act, or threat of such an act:** examples would include hitting, slapping, punching, spitting, poking, prodding, biting, throwing an object, hair pulling, or rough handling.
- **Restriction of liberty:** No child is to be confined alone in a room. If ‘time out’ is used as a sanction, the area chosen for the time out should be in view of by others and have open access.

- **Deprivation of food or drink:** No child is to be deprived of full access to the amount and range of food and drink normally available to them or to other children.
- **Dangerous Procedures:** Staff must avoid interference with the child's blood supply, breathing, genitals, neck, fingers or throat.
- Children **must never** be placed in a face-down position.

### **Recording and Reporting**

Each incident that necessitates the use of physical restraint must be recorded in the day/meeting book. Staff must also record any incident in which they have taken action involving accidental physical contact with a child to which the child reacted adversely. Such information would be extremely important if subsequent allegations of misconduct were to be made against a member of staff.

The following incidents must ALWAYS be reported and recorded, using the Incident Report Form.

- Any incident where physical intervention that either resulted in or contributed to hurt or caused injury to a child, or which failed to prevent it.
- Any incident where significant physical restraint was used for example, the 'holding' technique described above.
- Any incident of physical intervention which had to be used to prevent a child leaving the premises.
- Any sign from a child that physical contact used during a play activity was resisted or found to be strongly objectionable.

## **Support and debriefing**

A member of staff who has been involved in an incident in which significant physical restraint was required should have the opportunity to discuss the event and any matters arising from it with their senior worker. If this is not possible for any reason they should have the opportunity to discuss it with another colleague. Staff involved may need to take a calming break after such incidents.

### **3.13 Contact with children**

'Contact with children' refers to the relationship between Playworkers and individual children, both within PATH's usual working environment and also in those instances where contact takes place outside this environment. In this context 'children' refers to all users of PATH projects, regardless of their age.

The fact that PATH works with vulnerable children places a great responsibility on all staff to use their discretion in avoiding situations where those children could be at risk, or where their own actions could be open to misinterpretation.

**Within the play environment** (including authorised trips and outings), the following procedures apply:

- Staff should ensure that their contact with individual children is always observable by other adults.
- Staff who unexpectedly find themselves in a situation where they are alone with a child must immediately inform another member of staff of the fact and give the reason for it (by phone if necessary).
- No member of staff is to remain alone with a child who is waiting to be picked up. (see uncollected children 3.8 – page 6 of 7).
- Staff must avoid taking children on their own into enclosed spaces or rooms where they are not in visual contact with other staff.
- As the toileting and intimate care policy (see section 3.14) states, any child who requires such assistance must always be attended by two members of staff. It is preferable in such situations that both members of staff are the same sex as the child. In any event male staff are not to assist with the changing or toileting of girls or young women. This is for the protection of both staff and children.
- The children of PATH staff are not to use the project where their parent or carer works, other than in exceptional circumstances (for instance, when

problems have arisen with their childcare arrangements at short notice).

- There may be instances where the child of a member of staff has a legitimate need to use the project and will be dealt with on a case-by-case basis. In either circumstance their use of the project requires the formal agreement of the Director.

### **Outside:**

To protect the safety of both staff and children, staff should not give their home address or phone number to children, or in any way encourage children to visit their home address. Children must not have access to staff mobile phones.

If a child arrives at the home of a member of staff unexpectedly; he or she should not be turned away if that is likely to cause danger. However, every effort should be made to ensure that another adult is present and:

- The relevant authorities (parent, guardian, relative, Statutory Sector Services, police) must be notified immediately.
- The PATH office is notified at the earliest possible opportunity.

Staff may legitimately undertake respite care outside working hours, provided that this is properly authorised and monitored by a recognised authority. Before joining such a scheme they must inform their line manager in writing of the arrangements.

Staff are not to take children home except in an emergency, or as part of a previously authorised respite care scheme.

### **Recording and reporting**

- All projects must ensure that they have an agreed system which all staff are familiar with (for example, a diary or a day book) in which all such

incidents are recorded.

- Staff must give written notice to the PATH office of any situation where children visit their homes on a regular basis (for example, where their own children have friends who use the project).
- Any staff member who has concerns about the behaviour of another member of staff has a duty to approach their line manager to discuss the matter. If the concerns are *about* the line manager, they should approach that person's line manager (i.e. PATH Director or a member of the Management Committee). Any such approach will be treated with the appropriate professional sensitivity. (see Safeguarding Children policy).
- Any breach of these procedures is to be reported to PATH by the Senior Playworker. This report will be investigated and appropriate action taken.

### **3.14 Toileting and intimate care**

Some children require assistance to go to the toilet and with other intimate care tasks, especially where the child has limited mobility. (Note: in the context of this document, 'toileting' refers both to toileting and to intimate care tasks, which include changing clothes). The child's dignity and privacy is to be respected at all times, and staff must use the utmost discretion when providing intimate care.

- **Children must always be toileted by two members of staff.**
- Female children are to be toileted only by female members of staff.
- Male children are to ideally be toileted by male members of staff.
- Volunteers, trainees are not permitted to assist with toileting.
- Children who need assistance should be toileted at least twice a day, and should be checked regularly throughout the day to see if they need or want to be changed or toileted.
- Children should be regularly reminded to use the toilet.
- Children who need supervision, but not direct assistance, should be monitored by a Playworker. The Playworker should be visible to other members of staff.
- Any cultural practice which parents/carers have notified us of are to be observed, and dealt with sensitively; for example Muslim children having specific washing routines.

Any child who needs changing (but not necessarily toileting) must be attended by two workers, as above.

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## **Lifting and handling**

Any necessary lifting and handling will be covered by the Risk Assessment for each particular child who requires it. As with all Risk Assessments, all staff to which the contents are relevant must be made aware of its details in advance. Any such lifting and handling must pay due regard to the dignity and personal sensitivities of the child concerned, whilst following the precepts for safe lifting and handling which each Playworker will have been instructed in. (see section 4.7)

## 3.15 Medication

### Medical Consent Form

The Medical Consent Form provides specific written consent for Playworkers to administer prescribed medication to the child; it is used in conjunction with the Medicine Record Book (see below). Note that the Medical Consent Form covers *only* prescribed medication: **Playworkers are never to administer non-prescribed medication to children in their care.**

- Written consent is to be obtained from the parent/carer before medication can be administered. **No medication can be given without specific written consent.**
- The Medical Consent Forms are updated prior to the beginning of each holiday playscheme.
- It is particularly important that any changes to either medicine or dosage are notified to staff immediately. Again, if this is done via a telephone call then confirmation is to be obtained from the parent/carer in writing, or by the parent initialling the change on the existing Medical Consent Form.
- All medication needs to be in sealed and have a clear expiry date.

### Medicine Record Book

At the start of each holiday playscheme a copy of each child's Medical Consent Form is securely attached to the Medicine Record Book. The following procedures are then observed when giving the medication:

- Two members of staff must **always** be present when medication is administered.
- Only permanent members of PATH staff are permitted to administer medication

- The medicine and dosage and expiry date are checked and correct before administering it to the child.
- Both the Playworker administering the medicine **and** the witness **must** sign and record the time in the Medicine Record Book to confirm that medicine, dose and procedure were all correct, on each occasion that the medicine was administered.
- *All medicines are to be kept in a locked and secure cupboard.*
- *All medicines must be clearly marked with the child's name.*

### 3.16 Bullying and harassment

Children have a right to play in an environment which is free from fear and intimidation. Firm action will be taken whenever bullying and harassment occurs: maintaining a consistent stance against bullying helps to create a positive, caring and healthy play environment where individuals are respected.

Any allegation of bullying made against a member of PATH's staff will be dealt with via the Safeguarding Children procedure if it involves inappropriate physical contact with a child and via the line management system otherwise (e.g. verbal harassment or intimidation).

Bullying is defined as deliberately hurtful behaviour that is repeated over a period of time, against which it is difficult for those being bullied to defend themselves. It is important to remember that not all conflicts involve bullying; when children with the same power, numbers and strength fight or argue from time to time, this is not bullying.

Bullying occurs when a person is made to feel unhappy by one or more people. Playworkers need to be aware of the many different ways in which a child can be bullied or harassed:

- **Verbal** - name-calling, taunting, teasing, gossiping and humiliating.
- **Physical** - violence: hitting, kicking, pushing, pinching etc.
- **Psychological** - being spoken to in a demeaning way or being pressured to conform or do things.
- **Social** - isolation, rude gestures, exclusion from groups.
- **Material** - having possessions stolen, damaged or extortion taking place.

The most common form of bullying is name-calling; the next most common is being physically hurt or threatened. Whilst teasing and name-calling can sometimes be intended - at least initially - to be taken as a joke, staff need to be aware of how quickly and easily such behaviour can escalate and cross over the line into bullying. Such behaviour should always be addressed at an early stage.

A failure to challenge bullying behaviour can lead children to see bullying as a quick and easy solution to getting what they want.

Playworkers should aim to raise awareness of PATH's anti-bullying ethos by:

- Opening up discussions: allowing children to talk about their feelings and concerns in a safe environment, and to enable them to share concerns about bullying.
- Helping children to feel comfortable: they are able to tell staff about any concerns they have with regard to bullying.
- Adults modelling high status behaviour; leading by example and not bullying each other or the children.

To really help prevent the spread of bullying, there must be support for **all** children involved in any incident. The needs of the bully and the bullied should always be taken into account; it is often the case that a child who bullies in one situation may be a victim in another. The focus must be to solve the problem rather than necessarily to punish the bully.

**Staff response to bullying:**

- Act consistently and fairly - and *be seen* to act consistently and fairly - against bullying in a timely fashion.
- Don't make premature assumptions - listen carefully to all accounts, providing a forum so that all parties can express their point of view. Offer support to both parties: the needs and problems of all the children involved are important.

- Avoid blame, particularly in the early stages of dealing with the situation as it tends to cause defensiveness and a breakdown in communication. Reassure the victim, and do as much as you can to empower them (the child may prefer that this be done confidentially).
- Encourage the bully to see the victim's point of view, and discuss the impact and consequences of their behaviour.
- Encourage children not to be passive and not to accept bullying behaviour, whether they themselves are being bullied or they see someone else being bullied.
- Share information with other members of staff in your reflective practice and find playful insights and strategies to address the behaviours.
- It is important to reinforce the anti-bullying ethos through the Play Space
- Record the details of any serious incidents and the action that was taken, and ensure that both sets of parents are informed. This can be used should there be any involvement/queries from parents/carers

### **If Parents Involve Themselves:**

- Be constructive
- Be careful with the language you use when dealing with sensitive issues: for example, say "it seems your son/daughter and the other child have not been getting on very well lately" rather than "your son/daughter has been bullying the other child".
- An automatic assumption of blame or an accusation is much more likely to make the parent react defensively and make it much harder to reach a solution.

- Confidentiality must be observed when dealing with issues of bullying, as an accusation of harassment can create problems between families and is potentially defamatory. As a general rule, you should avoid naming the bully when discussing the matter with the family of the child who has been bullied.
- Playworkers are advocates for the playing of children

Projects need to monitor bullying, and should address it in team meetings. The nature, frequency, and the suitability of actions taken in response to incidents should be discussed. Action points may be offered to parents/carers for information and reassurance.

### 3.17 Safeguarding Children

PATH takes its responsibility for the care of other peoples children extremely seriously. This policy acknowledges that children and young persons under the age of 18 of all races, religions and cultures, with or without disabilities, from any model of family life have an equal right to protection from abuse.

Safeguarding is a relatively new term which is broader than 'child protection' as it also includes prevention. Safeguarding has been defined as:

- All agencies working with children, young people and their families taking all reasonable measures to ensure that the risks of harm to children's welfare are minimised; and
- Where there are concerns about children and young people's welfare, all agencies taking appropriate actions to address those concerns, working to agreed local policies and procedures in full partnership with other local agencies.

*(Safeguarding Children (2005), The 2nd Joint Chief Inspectors Report on Arrangements to Safeguard Children.*

Dealing with child protection issues can be personally and professionally challenging, and must be dealt with sensitivity, judgment, and a calm head. It is **essential** that Playworkers understand what their responsibilities are, and what action to take, if abuse is suspected, discovered or disclosed. The following procedure and associated guidelines apply to **all** instances of suspected, discovered and disclosed abuse, whoever the suspected abuser may be.

It is the senior workers role to ensure that PATH staff are aware of PATH safeguarding policy and procedures and that all staff are trained to a minimum of the 'The Introduction to Child Protection'. This training is to be updated whenever legislation changes.

## Definitions of child abuse

### All forms of child abuse centres upon the misuse of adult power over children.

The Children Act says that children who are at risk of “significant harm” must be protected. The Government publication *Working Together under the Children Act* defines abuse in the following ways;

- **Neglect:** The persistent or severe neglect of a child, or the failure to protect a child from exposure to any kind of danger, including cold, starvation or extreme failure to carry out important aspects of care, resulting in the significant impairment of the child’s health or development.
- **Physical injury:** Physical injury to a child, or failure to prevent physical injury or suffering to a child.
- **Sexual abuse:** The sexual exploitation of a child or adolescent.
- **Emotional abuse:** Severe adverse effect on the emotional and behavioral development of a child caused by persistent or severe emotional ill-treatment or rejection.

Note: it is rare to see one form of abuse in isolation from other forms.

There are three ways of finding out about abuse:

- **Injury:** where a physical injury points to the possibility of abuse.
- **Allegation:** where someone, perhaps the child, says that abuse is happening.
- **Observation:** where a change in behaviour or development signals that there may be a cause for concern.

It is rare for children, and in particular young children, to make false accusations of abuse. If a child alleges that they are being abused, this should be taken seriously. If the allegation is subsequently found to be false it may, nevertheless, be an indication of a child's need for help in other ways.

Playworkers' responsibilities **do not** include investigating suspected abuse. This is the role of your child protection officer, Statutory Sector Services or the NSPCC, who have statutory powers and obligations under the **Children Act 1989**. If you discover or suspect abuse, do not attempt to interview the child (some guidelines on responding to a disclosure are given further in this section).

The following steps **must** be taken:

- **The Senior Playworker or Designated Officer for child Protection must be informed immediately.** If the Senior is not available then the next person in your line management structure must be informed and they will deal with the necessary referrals to the PATH Office. Note that **team discussions are to be avoided** before putting this procedure into action. **All** suspicions and disclosures are to be reported to the PATH Office.
- **A full written record of the reasons for the suspicion must be made.** Record everything that has been observed and any decisions/actions taken. Stick to the facts, record anything actually said by the child **it is important to write all this down as accurately as possible**. Keep the information factual: you must try to **avoid personal interpretation, comment or feelings**. It is important to record information as soon as you can, so you have as fresh a record as possible.
- **If the allegations concern an adult** then that person will be asked by the Senior Playworker to leave the Play space until the situation has been resolved. The named child protection officer will be contacted and advised of what has happened, and the Senior's instruction will be confirmed in writing (see 'Allegations against Staff' below).
- **In cases of suspected neglect or emotional abuse,** Playworkers should discuss their concerns with their senior, line manager or the designated

Child Protection officer of safeguarding issues. This senior person should then discuss this concern with the child's parent/ carer or duty social worker, but only if they feel it will be possible to do so without in any way compromising the child's safety or well being.

**Once these initial actions have been taken:**

- A formal referral is made to Safeguarding Board if the PATH designated officer is satisfied that the suspicion is well founded. This will be by phone initially, and then followed up in writing - the same day if possible, the following day if not. The PATH Office will be informed of this by phone and a copy of the referral letter will be sent to the Director.
- The referral letter will include the written record of the Playworker as above (with the names blanked out if appropriate). It will also include a request to be kept informed and involved, and will request advice about who should be informed of developments. PATH will cooperate with any investigation and will follow the advice of the investigating officers.
- If the senior has any doubt about whether or not to initiate a procedure, he or she must consult with their manager, PATH's named child protection officer or the PATH Director.

**Important:** Every suspicion is to be recorded and reported to the named child protection officer. This is the case even when the senior is satisfied that it is not well founded.

**If Statutory Sector Services instigate a child protection investigation, Ofsted will be informed that an investigation is proceeding, but will not be informed of any details.**

*For more information go to the government document:*

*‘What to do if you’re worried a child is being abused’*

<http://www.everychildmatters.gov.uk/files/34C39F24E7EF47FBA9139FA01C7B0370.pdf>

### **Allegations against staff:**

By following the procedures and guidance in this chapter, staff will minimise the chances of allegations being made against them and assist the investigation process if allegations are made.

If a member of staff is the subject of the allegations they will be suspended on full pay until the matter has been resolved. The Director will write to them immediately to confirm this. Other PATH projects will be advised that the individual(s) concerned are not to be permitted on PATH sites until further notice.

PATH will aim to support all concerned through this process, in so far as this is consistent with advice or instruction from the investigating authority.

### **Subsequent action:**

The Director will take action in the light of advice from the authority investigating the case:

- If abuse is shown or strongly suspected, then the staff member will be dismissed. PATH will also ensure that the case is referred to List 99, POCH etc.
- If abuse is discounted then the suspension will be lifted.

If there are long delays or investigations are inconclusive either way then the Director will act on the balance of probabilities.

If volunteers, temporary workers or committee members are involved they will be instructed to avoid going on any PATH site and to refrain from attending committee meetings. Temporary workers will receive compensation for days

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they are unable to work only in exceptional circumstances, and will not be offered future work until (a) the investigation is concluded and (b) the Director is satisfied that they were not involved in any inappropriate activity.

A confidential record will be held at the PATH office.

Note: All PATH staff must have an up to date CRB check. When a member of staff is appointed a CRB will be automatically run. PATH will not employ someone who refuses to go through this process. When interviewing staff it is vital to check the candidates career history and ask about gaps in employment and any other suspicions arising from their applications.

### **Guidelines on Disclosure**

- Let them know that you cannot keep some things secret.
- Tell them that you believe them. The abuser will have told them that no-one will believe them.
- If you feel shock or disbelief, try not to show it; do not let the child think that you are unwilling to hear what they are telling you. Do not say things like 'Are you sure?', 'Why didn't you tell me before?', 'I don't believe it'.
- Say 'You were right to tell me'. The abuser will have tried to frighten them into keeping silent, and will have told them the abuse is a secret that they must keep.
- Tell the child that the abuse was not the child's fault. The abuser will have made them feel responsible. If you have shown anger, make sure the child knows that your anger is with the abuser, not with them.
- Tell the child that the abuser was 'wrong' rather than 'bad': the child may love the abuser whilst hating the abuse.
- Use reflective listening and minimal responses.

- Sit down with the child so you do not tower over them.
- Do not ask leading questions.
- Tell the child you will help them stop the abuse.
- Do not promise things you cannot do: ***do not agree to keep what the child has told you secret***. Do reassure the child that you will do all that you can.
- Tell them who you will be telling, and why.
- Remember that by telling you they are taking the first steps towards ending the situation. They may not realize it, but they want action taken.
- If the child tells you and you are surprised, do not rush away to inform other people. Control your reaction and spend time with the child until you have reassured them.
- Seek help for yourself if necessary e.g. support from other staff or counselling.
- Do not broadcast sensitive information to the wider world.

**Note: Be very careful and aware of how you use any physical contact at this point.**

### **Supplementary Information on safeguarding Children**

#### **Common Assessment Framework (CAF)**

The CAF form is an integral part of current Safeguarding Children legislation and it is a new, more standardized approach to assessing children's needs for services.

The Common Assessment Framework form is used for gathering and recording

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information about a child that a practitioner has concerns about. It is a standard format form, identifying the needs of the child and how the needs can be met. If a Common Assessment already exists on the child, this will be identified within the **Information Sharing index**, and the practitioner can update the existing CAF based on discussions with the child and his/her family and make contact with the other practitioners already working with the child.

It has been developed for practitioners in all agencies so that they can communicate and work together more effectively and so that problems can be tackled before they become serious.

The decision to undertake a CAF is a matter for professional judgement and it should only be completed when it will help the child. It should not duplicate existing assessments and should only be done when the parent and/or carer agrees.

### **Who should use the CAF?**

Everyone working with children, and young people and families should at least know about the CAF. Find out from your manager or named child protection officer when, how and under what circumstances a CAF form should be completed.

For more information you can go to the website;  
[www.everychildmatters.gov.uk/deliveringservices/caf/](http://www.everychildmatters.gov.uk/deliveringservices/caf/)

#### **PATH has a CAF lead:**

Currently Suzannah Walker, contact on Tel: 020 7729 3306

#### **Tower Hamlets Safeguarding Children Board**

Tower Hamlets Social Services, 22-28 Underwood Road,  
London E1 5AW  
Tel: 0207 364 2063

Chair: Kevan Collins, [kevan.collings@towerhamlets.gov.uk](mailto:kevan.collings@towerhamlets.gov.uk)  
Development Officer: Elaine Ryan, [Elaine.ryan@towerhamlets.gov.uk](mailto:Elaine.ryan@towerhamlets.gov.uk)

**Safeguarding training: Michelle Benoit at PATH, Tel: 020 7729 3306**

## 3.18 Confidentiality

### Children

Senior staff will decide if playworkers cannot access any information regarding the children. There should be two levels of information; a basic card index with general information and private information with access permitted only to permanent staff, unless the Senior has decided that it is *necessary* for other staff to be aware of a particular issue or issues. The Senior will usually brief the staff on the issues concerned rather than give them direct access to the written records. Information pertaining to children must always be handled with discretion.

As always, *the welfare of the child is paramount*. This means that considerations of confidentiality are not be allowed to override the right of children to be protected from harm. However, in any situation where abuse is alleged or suspected, it is important that the rights of both the victim and the alleged perpetrator are protected by ensuring that only those who need to know are given the relevant information.

### Staff

With main staff records being kept in central administration, staff details held at the PATH office should be kept to a minimum and locked away in a secure place. This information should be accessible only to permanent staff or named staff as appropriate.

Essential information which should be kept at the PATH office include name and contact telephone number(s) staff and up-to-date contact name and telephone numbers in case of an emergency.

Additional information which should be kept at the office are those details which aid management of staff, e.g.

Permanent staff (including cleaners on permanent contract)

- Start date
- Date of probationary appraisal.
- Advance date of annual appraisal.

- Training attended (inc. Date of first-aid certification and expiry/renewal date)
- Annual leave entitlement and records
- Record of approved TOIL
- Notes arising from supervision/appraisal sessions

Playworkers:

- Start date (actual)
- Hours worked record sheets
- Date of appraisal/recommendation to the higher rate of pay
- Notes arising from appraisal/supervision sessions

PATH should also keep daily record sheets and copies of the signed weekly absence returns

All the above information should be archived by central administration once a member of staff has left.

### **3.19 Children and Computers**

The Internet provides children with a rich source of information and PATH believe the benefits of using the Internet can far outweigh the risks. The Internet is similar to books, videos and other information sources which can be beneficial to a child's learning, communication and social development. Because it is impossible to predict or control what information might be accessed, it is the responsibility of staff and children to adhere to the Internet rules. Any Playworker accessing the Internet with children will need to have an appropriate understanding of computers and their processes. Playworkers using the Internet with children have a responsibility to help them develop the skills needed to identify, discriminate and evaluate appropriate information.

**The use of the Internet will only be permitted if the child, the child's parent/carer and the staff member in charge of the activity have all signed permission and agreement forms.**

#### **Staff need to ensure:**

- Software is filtered for appropriate use by children.
- Records are kept of who uses the net and how often it is being used. Sites visited should also be monitored and recorded whenever possible.
- There will always be at least one adult present when undertaking any activity on computers.

#### **Basic rules:**

- Children and staff are not to reveal their personal details, home/postal or e-mail addresses and/or telephone numbers on the web or when in dialogue with another internet user – If you need to register with a web page provider, e.g. Disney, use a PATH e-mail address. This can only be done by the Senior Playworker.

- Children do not have individual e-mail addresses, and no access is allowed to Internet e-mail accounts such as hotmail.
- Children are not to use newsgroups or chat room.
- Children are not to subscribe to mailing lists as this can lead to unwanted junk mail.
- Children do not engage in conversations or dialogue with other users on the internet or e-mail without permission or supervision of a Playworker.
- Any child who finds themselves uncomfortable or upset by anything they discover on the internet knows they should report this to a Playworker immediately.
- Downloading of files is restricted to staff, or children under supervision.

If a child is ever exposed to unsuitable or upsetting material on a computer staff must report the incident to the child's parents or carers, and the senior Playworker must also report the incident to their line manager.

### **3.20 Photography and film footage on PATH projects**

The Photographic Consent Form, signed by the parent, will ensure that the photographer has formal permission to photograph the child. Under Human Rights Legislation the use of photographs without a person's permission could be considered an infringement of their Human Rights so when conducting the shoot, you should ensure that the children themselves are happy to be photographed.

These guidelines are intended to cover photography organised on the PATH projects. The general principles and the permissions policy also apply to PATH's own photographic projects or staff's own personal photographs. Procedural questions about these should be addressed to the Senior Playworkers and the PATH office.

We must ensure that:

- Photographs are never taken or used without permission of both the child and parent.
- The co-ordination of photographic sessions happens efficiently and with minimum disruption to the project or play.
- The photographs are obtained of the highest quality and portraying images that are consistent with PATH's message.

#### **Principles**

- No photographs or film footage of children will be taken or used for any purpose, without the express written permission of their parents and unless the children agree. It is important that children are never portrayed in ways that patronise, demean or misrepresent them.
- The need for photographs for promotional and publicity purposes needs to be reconciled with the prior consideration of the rights of children and their

Families to privacy, respect and dignity.

- It is important to be clear about the purpose of the photography session and what the pictures are to be used for. Brief the photographer as fully as possible; discuss the articles or other text that the images will be used to support. The chances of getting the right pictures are increased if the photographer or journalist understands the message we want to convey.

The best pictures project a message without the need to explain. If the message is about inclusive play the challenge for the photographer is to “show disability” without resorting to stereotypes or clichés.

### **Photographs for PATH**

- Once permission has been obtained, staff will need to decide when the most suitable time for the shoot will be. Ascertain when there is most likely to be the optimum number of children, the most representative mix of children, and the most interesting range of activities. Watch out for things like trips out during playschemes as there is no point in a photographer turning up if no one is there.
- Once the photographer is there, they must spend some time with the Senior or other Playworkers to identify those children for whom we don't have their parents consent for photographs, or who are personally unwilling to be photographed. If a signed form has not been received and/or the child does not want to be photographed – don't! This is a lot simpler and more efficient than taking photographs of everyone and then checking which ones we can use later. It also prevents the frustration of ending up with great photographs that can't be used.

## Requests for photographs from other organisations

- If another organisation wants to feature PATH in a publication in an informative and constructive way this can be, and usually is, consistent with our aims of promoting the work. It is covered by the Photographic Consent Form.

## Visitors

Visitors are not permitted to take photographs of children and must be informed of this prior to the visit. They may be permitted to take photographs of the play space and its equipment without children, providing it is for their own information and not for publication purposes. Exceptions are only made by arrangement with the director.

## Copyright

- PATH retains copyright of all photographs by arrangement with the photographer. All photographers will be given an appropriate acknowledgement whenever photographs are used for publication.
- In the case of exceptional circumstances where PATH is unable to retain copyright (e.g. if PATH projects are featured in a film/documentary), PATH is responsible for ensuring that usage will be in accordance with the criteria outlined above, prior to giving permission to undertake filming or photography.

**Chapter 4****HEALTH AND SAFETY**

- 4.1 Introduction**
- 4.2 Monitoring and recording**
- 4.3 Cleanliness and hygiene**
- 4.4 Food**
- 4.5 Hazardous substances (COSHH)**
- 4.6 Risk Assessments**
- 4.7 Lifting and handling**
- 4.8 Fire precautions and procedures**
- 4.9 Recording accidents**
- 4.10 First Aid**
- 4.11 Sick children**
- 4.12 Spillages of blood and body fluids**
- 4.13 Hepatitis B**
- 4.14 Bouncy castle safety**
- 4.15 Smoking, drugs and alcohol**

## 4.1 Introduction

It is PATH's policy to give the greatest importance to the safety of all those using the project and its employees. PATH's Health and Safety Policy sets out PATH's requirements in each of the principal areas of operation. Every member of staff should read and be familiar with this Policy. This section of the Code of Practice gives the details to be followed to implement the Health and Safety Policy for each of these areas.

All new staff should be fully aware of the Health and Safety procedures. Appropriate training and induction is to be given to enable staff to feel confident to deal with situations as they arise.

The current "Employer's Liability (Compulsory Insurance) Certificate" must be displayed on the office wall. The current "Health and Safety Information for Employees Regulations" poster must also be displayed.

## **4.2 Monitoring and recording**

Site checks must always be carried out.

These include checks for:

- Litter
- Cleanliness and hygiene issues
- Any other obvious hazards

If the condition of any part of the site or premises are unsafe in terms of Health and Safety, the defect should where possible be rectified before the start of the project. Where the repair work that is required is substantial and too great for the time available, the structure/equipment/area should be sealed off from use until such time as it has been repaired. If this is not practicable and the hazard needs immediate attention, the site should be closed until the necessary repairs have been made.

### **Formal health and safety inspections for playgrounds**

Formal Health and Safety checks should be conducted each year by a designated inspector (either local or independent authority). These consist of a detailed inspection of buildings, equipment, grounds, general levels of cleanliness, and recording systems: Risk Assessments, site check logs, fire drill reports, accident reports, accident book, cleaning schedules and hazardous substance records. All faults or problems are recorded and the necessary action noted. The report states who is to take action on each particular item and gives a deadline for that action to be carried out. The subsequent recheck is carried out by PATH or other designated inspector.

Where the site is Ofsted registered, Local Authorities have a legal right to ensure that Health and Safety standards are being met by services operating in the borough. Inspections may be initiated by different local authority departments, depending on the requirements of the borough. Spot checks may be made at any time.

## Records

The following records should be maintained:

- health and safety site check register based on risk assessment.
- details of Risk Assessments for environment, children, equipment and activities.
- health and safety reports.
- details of equipment as purchased: date, description and supplier (needed for insurance purposes).

### **4.3 Cleanliness and hygiene in playgrounds and play spaces**

Levels of cleanliness and hygiene are monitored as part of the daily checks. Where relevant the areas which require particular attention are:

- Kitchens
- Toilets
- Washing and changing areas

Maintain a schedule for cleaning and tidying to ensure that these and other relevant areas are attended to: daily, weekly, monthly or quarterly as appropriate. Many of the requirements of these schedules need to be implemented by or with the cleaners; the cleaners must therefore be issued with a detailed schedule of work so that they are fully aware of what is required. A checklist based on risk assessment is to be used for each particular area. This is initialed and dated as tasks are completed, and is checked and acted upon in a timely fashion as part of each formal health and safety inspection.

Other specific areas and equipment which require regular attention are:

- minibuses
- soft play equipment and ball pools
- special activity areas - darkroom, home corner, etc
- toys and other activity items including bouncy castles, Art area and face paints
- storage areas
- office
- dressing-up clothes (washing and sorting)
- laundry room and spare clothing (washing and sorting)

Each of these either has its own cleaning schedule or is included as part of a larger schedule, as appropriate. Checklists are completed as stipulated above, and are inspected during the formal health and safety checks.

## 4.4 Food

If children bring packed lunches and snacks, there must be adequate provision for storage and lunch boxes/bags should be clearly marked with names. Lunch/snacks should be refrigerated, especially in hot weather. Lunches which contain meat or dairy products must be refrigerated at 8°C (46°F) or below.

Where projects provide food or undertake cooking activities the following guidelines apply:

- Special dietary needs are recorded in detail and must always be checked before planning any food preparation.
- Always wash hands before handling food.
- Clean up any spills on the floor immediately.
- Ensure all utensils and surfaces are cleaned thoroughly before and after use.
- Wash all fruits and vegetables before preparation or cooking.
- Ensure that the cooker and kettle is supervised at all times.
- When food has been cooked or prepared, if it is not being eaten straight away cool it and keep it covered.
- Take care when using knives.
- When mixing food take care that spoons and fingers are not licked (until afterwards).

Ideally, menus should be nutritionally balanced, varied, of good quality, and adequate in quantity. In developing a balanced meal, a variety of nutritious food should be encouraged and promoted.

- Menus and meals should be prepared which are sensitive to cultural and religious preferences.
- Suitable arrangements will be made for food waste.

Meal and snack times should be treated as social occasions with staff eating with the children, where possible. Children may be encouraged to eat, but must not be pressured to finish their food.

There should be adequate space, cutlery and crockery for meals to be served and eaten comfortably.

Please Note: if hot drinks are provided for staff or children, thermal cups with spill proof lids should be used.

## **4.5 Hazardous Substances (COSHH)**

Projects must maintain a list of any potentially hazardous substances that are kept on site. Any product in this category will usually have product safety information on the packaging. If it does not then a hazard data sheet is obtained from the suppliers, who are obliged by law to provide such sheets upon request. These sheets must be kept in a dedicated file. The file of record sheets and the list of substances will both be examined as part of the formal health and safety checks.

Any substance which is potentially harmful is stored in a locked cupboard or cabinet. Any flammable substances must be kept in a metal cabinet. Anyone who is handling these substances must be informed of the risks involved and must take the necessary precautions. If a hazardous substance is to be used by children (for example, an art material) it must be used only under the supervision of a member of staff.

For each potentially hazardous substance a COSHH Assessment is made, and is recorded on a COSHH Assessment Form. This details the nature of the risk posed by specific items, who is at risk, the control action to be taken, and the First Aid that should be applied in the event of an accident. All team members are to be aware of the details and decisions set out in the form, and are required to follow any guidelines. Completed forms are to be filed.

Where there is any doubt about the nature of a substance it is to be treated as though it were hazardous, and stored appropriately.

## 4.6 Risk Assessment

Adventure play provides opportunities for children to explore and experience themselves and their world and involves, by its very nature involves an element of risk. PATH Playworkers are therefore required to make judgements about what is reasonably practicable in relation to the PATH service objectives.

In order to make these assessments, Playworkers must take into account:

- The difference between a hazard and a risk: the level of risk is the likelihood of a hazard causing harm.
- The difference between acceptable and unacceptable risk.
- The fundamental importance of children having the opportunity to take 'acceptable' risks.

We need to strike a balance between keeping children safe and making sure they have an exciting challenging options to explore. Risk taking is an essential and beneficial feature of play environments and gives children a chance to stretch themselves, develop abilities and learn about the real consequences of risk taking.

Risk Assessments are to be carried out for every aspect of PATH play projects, including all equipment (indoor and outdoor, fixed and non-fixed) and activities and outings and where appropriate, children. Risk Assessments are reviewed and updated in the light of experience and changing circumstances, and should be made for all new items. It is the Senior Playworkers responsibility to ensure that all necessary Risk Assessments have been made, that they are up-to-date, and that they continue to be adequate. Risk assessments should be kept in a dedicated file.

**All staff, including volunteers, are to be made aware of the contents of every Risk Assessment which pertains to their work. It is the duty of all staff to implement the agreed control actions in each case.**

**The Management of Health and Safety at Work Regulations of 1999** require that an assessment be made of all the risks arising from an organisation's operations and activities.

5 steps of writing a Risk Assessment;

1. A **Hazard** is identified:  
A **hazard** is defined as 'anything that has the potential to cause harm' or to cause 'fatal or permanent disabling injury'. Take a critical look around at your surroundings to see what could potentially cause harm or injury to any children, staff members, volunteers or members of the public.
2. **Risk element:**  
The **risk element** is the likelihood of that hazard causing harm and what could potentially happen in a worse case scenario.  
Decide who might be harmed and how.
3. The **level of risk** assessed:  
**The level of risk** should be given a scale for example: 1 (lowest level) to 5 (highest level of risk) or a scale of low, medium and significant. When evaluating the risk arising from the hazard, decide whether existing control measures are adequate or should something be done to reduce the risk.
4. The necessary **control action** or actions specified:  
What needs to be done to ensure we are reducing the risk of injuries. This could be a physical alteration or the way the site is staffed. For example a control action might be cross referenced with a Child's Risk Assessment.
5. Then any supplementary **comments** added.

Make one copy for the project and one copy for the PATH office. Review the Risk Assessment from time to time and make changes if necessary.

These five elements together constitute the Risk Assessment for a particular hazard, and each assessment must be recorded on a Risk Assessment form and signed by the project manager.

The completed Risk Assessments forms are to be kept on file. Each form must be signed and dated. These assessments will need to be reviewed and updated in the light of experience and changing circumstances, and it is the responsibility of each staff team to ensure that the Risk Assessments they have made continue to be adequate.

An assessment of the risk of particular activities must be balanced against the cost and feasibility of safety measures which would avoid risks. If the risk is very high and cannot be reduced, the activity cannot be continued.

See: Play Safety Forum 'Managing risk in a play provision: A position statement'

## 4.7 Lifting and handling

The **Manual Handling Operations Regulations 1992** and the **Management of Health and Safety at Work Regulations 1999** require that all hazards be identified and controlled so as to prevent injury. Manual handling operations regulations apply to all workplaces and application of these regulations should reduce the chance of injury. Manual Handling operations are defined as physically lifting, carrying, putting down, pushing, pulling or moving a load by hand or bodily force. A load could be a person or an object.

The regulations require PATH as employers to

- Avoid moving heavy loads as far as is reasonably practicable. If this is not possible automate or mechanise the process.
- Assess risks regarding task, load and working environment.
- Provide training and information for employees.
- Renew Risk Assessments regularly.

In all cases where employees have to carry, lift, push or pull people or objects as part of their work a Risk Assessment needs to be done. Assessments are done to determine whether manual handling operations can be avoided, especially where there is a foreseeable risk of injury. If an operation cannot be avoided, then we need to take steps to reduce the risk of injury by giving information about the object to be moved for example its weight and structure.

People are instructed not to lift loads they consider

- too heavy
- too bulky/ unwieldy
- too difficult to grip
- of a dangerous nature (hot, sharp, chemical)

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When considering any manual lifting or handling it is important to take into account not only the weight of what you are about to move but also, the nature of the task, the working environment and the individual's capability.

Where lifting is a part of Playworkers daily responsibilities PATH's full-time Playworkers should receive regular training in the correct way to perform any lifting and handling activities which they have to perform in the course of their duties.

Any foreseeable, potentially hazardous lifting and handling activities - a common example would be a child who needed to be toileted by staff and who had to be lifted in a particular way - will be covered by Child Risk Assessments, and all staff are to be aware of the findings and requirements of these assessments. <sup>4</sup>

Once a new Playworker has been shown how to lift properly, and has been inducted in the contents of the Risk Assessments, it is his/her responsibility to adhere to these respective instructions.

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<sup>4</sup> This is of course the case for all Risk Assessments; it is mentioned here specifically in the context of lifting and handling. A Risk Assessment on a particular child may specify a particular type of two-person lift, for instance.

## 4.8 Fire precautions and procedures

Regular fire practices are held with different groups of children. For playgrounds, a minimum of three fire practices must be conducted each year: one during a playscheme, one during the school term, and one on a Saturday. On all projects a Fire Drill Report Form must be completed after each practice and a copy sent to the PATH Office. These reports are checked as part of the formal Health and Safety inspections.

In addition:

- A fire Risk Assessment of the premises or project must be made, and must be reviewed and if necessary updated automatically developing appropriate control actions.
- Fire alarms are to be checked regularly.
- All fire extinguishers and other fire fighting equipment are checked and maintained by outside contractors twice each year. Staff must be shown how to use the equipment.
- Fire fighting equipment should be kept in the same, known place.
- Where possible, projects should seek the opportunity to talk with staff from the local fire department in order to refresh skills and knowledge, and feel confident about handling a fire should the situation arise.
- All flammable substances must be stored in a locked metal cabinet.
- Fire exits are to be kept unlocked and clear while the premises are occupied.
- Exits from buildings must be clearly marked and free from obstruction.
- Fire procedures are to be clearly displayed

## **Fire as an activity**

When having small fires as part of play activities the following guidelines apply:

- Risk assess the fire activity taking into account the location and the children taking part.
- Have one member of staff dedicated to watching and controlling the fire activity.
- Have two buckets of water near the fire.
- Have a fire extinguisher and fire blanket close by.

## 4.8 Recording accidents

It is **essential** to record the details of all accidents:

- Accidents and/or injury to adults (staff, visitors) must be recorded in the Accident Book.
- Accidents and/or injury to children must be recorded on a Child Accident Report Form.

Accident Books are held with the project and a copy of each entry is forwarded to the PATH Office.

Three copies of the Child Accident Report Form are made:

- One copy is held with the project.
- One copy is forwarded to the PATH Office without delay.
- One copy is given to the child's parent/carer - or, if the child is attending with a group, to the group leader.

Where a child is admitted to hospital, an additional copy of the Child Accident Report Form is made and given to hospital staff.

**Note:** it is **essential** that all sections of the accident report form are completed fully. The full names (i.e. first and last names) of **all** persons referred to on the form - children and adults - must be given.

## RIDDOR

The Reporting of injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) requires that some work-related accidents, diseases and dangerous occurrences be reported. The information reported enables local authorities to identify where and how risks arise and to investigate serious accidents. The following must be reported:

- A death or major injury

- An 'over three-day injury (i.e. one that results in the injured person being unable to work for more than three days).
- A work-related disease
- A dangerous occurrence

Relevant incidents can be reported to the Incident Contact Centre (ICC) based at Caerphilly in Wales. Incidents can be reported by phone, fax, Internet, or by post. It is best to report the incident immediately by phone and then send the forms by one of the other methods within 10 days.

The telephone service is available Monday to Friday between the hours of 8.30a.m. and 5p.m. Tel. 0845 300 9923; fax: 0845 300 9924.

Postal address (for reports): Incident Contact Centre, Caerphilly, CF83 3GG

E-mail: [riddor@natbrit.com](mailto:riddor@natbrit.com)

Any event that leads to a Riddor submission may also lead to an insurance claim against PATH or the service provider.

**Central office must be notified at the time of the event or at any event no later than the next working day.** PATH will investigate all accidents resulting in significant or potentially significant injury.

## 4.10 First Aid

- At least one, and where possible two, members of staff formally qualified to administer first aid<sup>5</sup> must be present when children are on site.
- The identity and general location of the appointed First Aider must be made clear to everyone on site.
- All full-time PATH Playworkers must hold a current First Aid at Work qualification.
- A first aid box is kept at each project. This must be kept fully stocked, clearly labeled and safely stored with the first aid book and a pen.

The area set aside to administer First Aid must be kept clean, tidy and ready for use. It should be in a quiet area of the building yet always observable by other adults.

**Any first aid actions need to be recorded and appropriately reported.**

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<sup>5</sup> A minimum one-day course must be attended before qualification can be obtained as an appointed First Aider. First Aiders need to be re-trained within three years of their last training.

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## 4.11 Sick children

Instructions on the exclusion of children from projects on account of infectious diseases are outlined in the information sheet entitled **Instructions on Infectious diseases** . If a child has an infectious or contagious illness, or is distressed because of a non-infectious illness, he or she should not attend the project until they have fully recovered.

If a child becomes ill while at the project staff will inform parents or the emergency contact, who must come without delay to collect the child (as per the signed agreement on the child record form). While waiting arrival of the child's parent or carer, staff will ensure the comfort of the child, If the child appears to be in any danger from their illness take the appropriate action, which would include seeking medical advice if necessary or calling the emergency services.

If the child is in danger staff will seek medical advice immediately.

Note: Staff must notify RIDDOR (see section 4.9) and Ofsted of any communicable diseases.

## Anaphylaxis

Some of the children who attend PATH projects are registered Anaphylactic. Anaphylaxis is a severe allergic reaction of the immune system to the presence of a foreign body which it wrongly perceives as a threat. The whole body can be affected, often within minutes of exposure to the allergen but sometimes after hours. Anaphylaxis can be triggered by certain foods like peanuts, eggs, cow's milk or shellfish. Other causes can be insect stings, latex and drugs but on rare occasions there may be no obvious trigger.

## Anaphylaxis Management Plan

When a child starts at a PATH project and the process of filing in the child record form is being done, it is best to draw up a management plan, together

with the parent, to ensure the child receives the proper care and support for their individual situation and it will help with any concerns that parents or carers might have.

Many parents will have been issued with a management procedure by their hospital consultant. It should be kept on the child's record form and a copy should also be attached to the child's medication so it can be readily accessible in case of emergencies.

The management plan might include the specific symptoms to look out for concerning the individual child, how the child best responds, appropriate administration of the medicine (for example: "Jess will be given the EPIPEN ADRENALINE AUTO INJECTION into the outer right side of the thigh, midway between the knee and hip") and further contact numbers. All staff should be made familiar with the procedure and where the medicine is kept in case of emergencies.

## **Consent**

### **Parents must give written consent for staff to take responsibility of administering medication**

#### **Symptoms can include:**

- Flushing or a rash on the skin
- Swelling of the throat and mouth
- Difficulty swallowing or speaking
- Alterations in heart rate
- Severe asthma
- Abdominal pain, nausea and vomiting
- Sudden feeling of weakness (drop in blood pressure)
- Collapse and unconsciousness

Symptoms that should be regarded as **serious** and which **require immediate treatment** are:

- Difficulty breathing or swallowing

- Sudden weakness or floppiness
- Steady deterioration

### **Emergency procedure for Anaphylactic shock**

There is a drug which will work against all the effects of all the dangerous substances released in anaphylaxis and this is adrenaline (epinephrine).

#### **It is given in the form of an injection (called an EpiPen).**

- The injection must be given as soon as serious reaction is suspected.
- Call an ambulance.
- If there is no improvement in five minutes, give a second injection.

**Remember that when there is any doubt at all about a child's medical condition dial 999 immediately and ask for the paramedic ambulance.**

### **Administration of Diazepam**

Sometimes people who suffer epileptic convulsions can develop a condition called "status epilepticus" where they enter a state of constant seizure, experiencing prolonged or rapid successions of epileptic seizures. In such emergency cases, rectal Valium or Rectal Diazepam is prescribed. Diazepam is the chemical name of the drug also marketed as Valium or Stesolid. The medication is administered rectally, in the form of a small tube with a nozzle which is inserted into the child's anus; this is to help facilitate rapid absorption into the body so that the seizures can be controlled.

Clearly the administration of rectal medication raises a number of sensitive issues. However members of staff who are trained to administer Diazepam should consider the following points:

- The gender of the child concerned and the gender of staff who will be assisting in an emergency.

- The need to maintain at all times the dignity of the child during and after the procedure.
- The need to undertake procedures as privately as possible.
- To protect the staff and the child during the procedure it is important that two members of staff are present at all times during the administration of the drug.

**The consent of the parents and the child (where appropriate) must be obtained.** A medication form must be filled in and a copy kept on the child's file as well as copy kept with the medication in the medicine cabinet. This should include any advice from the child's parents or GP in regards to the child's individual symptoms, like for example prior warnings (if any), what form the convulsions take, how long do the fits normally last and under what circumstances should Diazepam be administered and after how long.

Diazepam can be administered ONLY if workers have been shown how to do so by a qualified person, which will often be the child's parents or carer.

**Remember that when there is any doubt at all about a child's medical condition dial 999 immediately and ask for the paramedic ambulance.**

## 4.12 Spillages of blood and body fluids

In the interests of Health and Safety, staff must make every effort to avoid coming into direct physical contact with spilled body fluids, and to minimise the risk of anyone else doing so. All Playworkers are to be aware of the following guidelines (issued by the Department of Health) with regards to dealing with spillages of blood or body fluids:

- Staff must keep any cuts or open wounds on hands covered with waterproof plasters at all times.
- Use household rubber gloves when mopping up spillages (and when handling bleach and disinfectants).
- Spillages of blood or other body fluids should be dealt with as soon as possible.
- Spilled blood should be completely covered, either with chlorine granular compound or with disposable towels which are then treated with a freshly prepared solution of household bleach, diluted one part in ten.
- Paper towels etc should be left for several minutes before being put into a plastic bag and disposed of.
- Plastic bags should then be disposed of into Paladin bins.

Staff are to ensure that the project has adequate stocks of barrier equipment (gloves, disposable aprons etc) and must ensure that this equipment is readily available to all staff, including visiting staff.

### **4.13 Hepatitis B**

Hepatitis B is a blood-borne infection, and it is possible that workers on PATH projects may at some time be exposed to the virus. The above guidelines in dealing with spillages of blood and body fluids should, where it has been practicable to follow them, prevent the spread of the virus.

However, where exposure has occurred despite these precautions, infection can be prevented through the administration of a specific gamma globulin. This can be obtained from a general practitioner or the Accident and Emergency Department of a local hospital, after full consideration of all the circumstances of the exposure by the treating doctor. Post-exposure treatment should be administered as soon as possible and certainly within one week of exposure.

PATH strongly recommends that its staff consider immunisation against Hepatitis B. Given the nature of the work and the degree of risk involved, GPs should provide the vaccination on prescription. If a GP is reluctant to do this for any reason, PATH will provide a letter to the GP supporting the request for the vaccination. (If a receipt is obtained for the prescription for the vaccine, PATH will refund the cost of that prescription.)

#### **Other infectious diseases**

See instructions on the exclusion of children due to infectious diseases - Appendix 3.

## 4.14 Bouncy Castle safety

Most injuries on bouncy castles are from children bouncing off the inflatable onto the ground, being hit by other children or just falling awkwardly. Many of these accidents can be avoided by appropriate supervision.

### **The following safety instructions should also be followed:**

- Do not use bouncy castles in high wind or wet weather.
- Castle must be adequately secured to the ground.
- Soft matting covering hard surfaces must be placed adjacent to the front or open sides.
- The number of children using the bouncy castle must be continuously monitored to ensure that all those using it can do so safely. **There must never be overcrowding.**
- A rota system for different age and size groups should be operated.
- All children must be made to remove footwear. Hard or sharp objects like jewellery or buckles should also be removed.
- No food or drinks are allowed on the inflatable.
- There must be no access to the moving parts of the blower.
- The power cable to the blower must be adequately secured away from users or spectators and supervised at all times. If the cable is on the ground it needs to be covered by rubber trunking and if it is overhead it needs to be out of arms reach.
- The power cable must be plugged into an RCD (circuit breaker) plug, **never** directly into a 13 amp socket.

- Never allow anyone on the castle while it is being inflated or deflated.
- If the castle starts to deflate for any reason, all users must be instructed to get off the castle immediately.
- Ensure adequate numbers of staff to move the deflated castle for packing away and storage.

## **4.15 Smoking, Drugs and Alcohol**

Smoking is not permitted when children are present, and is never permitted in play buildings.

Drinking alcohol or being under the influence of alcohol at work is prohibited will be treated as a serious disciplinary offence.

No alcohol must be brought onto or consumed during normal working hours including lunchtimes. Alcohol must never be consumed while children are present.

Being under the influence of drugs\* or being found to be in possession of drugs is a serious disciplinary offence and could lead to serious safety, work and personal consequences. Action will be taken under the disciplinary procedure if someone is found to have brought drugs onto, or consumed drugs, on play premises. If an employee is known to be, or is strongly suspected of being, intoxicated through drugs during working hours, arrangements will be made for the person to be escorted from the play space immediately.

Being under the influence of, or possessing drugs at work is a gross misconduct offence under the disciplinary procedure and workers are therefore liable to dismissal.

If a parent or carer arrives to pick up or drop off a child and is suspected of being under the influence of drugs or alcohol, Playworkers should discuss their concerns with their line manager or the 'named person' in charge of child protection issues.

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\* This policy applies to drugs, which are unlawful under the criminal law and not prescribed for medication.

## **Appendix 1**

Taken from the document Best Play

### **Play provision should provide opportunities for:**

#### **A varied and interesting physical environment**

Examples: Things at different levels, spaces of different sizes, places to hide, trees and bushes as well as things that have been made, places to inspire mystery and imagination.

#### **Challenge in relation to the physical environment**

Examples: activities which test the limits of capabilities, rough and tumble, sports and games, chase.

#### **Playing with the natural elements – earth, water, fire, air.**

Examples: beams and ropes, soft mats, bike riding, juggling equipment, ladders, space.

**Movement** – e.g. running, jumping, rolling, climbing, balancing. Examples: beams and ropes, soft mats, bike riding, juggling equipment, ladders, space.

#### **Manipulating natural and fabricated materials**

Examples: materials for art, cooking, making and mending of all kinds; building dens; making concoctions; using tools; access to bits and pieces of all kinds.

#### **Stimulation of the five senses**

Examples: music making, places where shouting is fine, quiet places, different colours and shapes, dark and bright spaces, cooking on a campfire, rotting leaves, a range of food and drink, objects that are soft, prickly, flexible, large and small.

#### **Experiencing change in the natural and built environment**

Examples: experiencing the seasons through access to the outdoor environment; opportunities to take part in building, demolishing, or transforming the environment.

#### **Social Interactions**

Examples: being able to choose whether and when to play alone or with others, to negotiate, co-operate, compete and resolve conflicts. Being able to interact

with individuals and groups of different ages, abilities, interests, gender, ethnicity and culture.

**Playing with identity**

Examples: dressing up, role play, performing, taking on different kinds of responsibility.

**Experiencing a range of emotions**

Examples: opportunities to be powerful/powerless, scared/confident, liked/disliked, in/out of control, brave/cowardly.

The full document Best Play can be downloaded at:

[http://www.ncb.org.uk/dotpdf/open%20access%20-%20phase%201%20only/bestplay\\_cpc\\_20040115.pdf](http://www.ncb.org.uk/dotpdf/open%20access%20-%20phase%201%20only/bestplay_cpc_20040115.pdf)

## **Appendix 2 : Common core of skills**

### **Common core of skills**

The consultation on the Green Paper, *Every Child Matters*, says that everyone working with children, young people and families should have a common set of skills and knowledge.

These are set out as six areas of expertise:

#### **1. Effective communication and engagement**

This involves listening, questioning, understanding and responding to what is being communicated by children, young people and those caring for them. Communication is not just about the words you use, but also your manner of speaking, body language and, above all, the effectiveness with which you listen.

#### **2. Child and young person development**

Times when development changes occur differ greatly from person to person but it is important to have a basic understanding of those changes and how they can affect a child or young person's behaviour.

#### **3. Safeguarding and promoting the welfare of the child**

We have a responsibility to safeguard and promote children's welfare. It is important to identify concerns as early as possible so that children, young people, their families and carers can get the help they need.

#### **4. Supporting transitions**

Transitions are natural stages children and young people pass through as they grow and develop. Movements from primary to secondary school and sometimes from children's to adult services are also transitions. Some children face very particular and personal transitions not necessarily shared or understood by all their peers. It is important to recognize and support children through times of transition.

**5. Multi-agency working**

Meaning different services, agencies and teams of professionals and other staff working together to provide the services that fully meet the needs of children, young people and their parents or carers. To work successfully on a multi-agency basis you need to be clear about your own role and aware of the roles of other professionals.

**6. Sharing information**

Sharing information in a timely and accurate way is an essential part of helping to deliver better services to children, young people, their families and carers. Indeed, sometimes it will help save lives. Practitioners in different agencies should work together and share information for the safety and well-being of children.