

Innsworth Preschool Staff Wellbeing and Fitness to Practise Policy

Last Updated: June 2026

1. Purpose and Scope

1.1 Overview: This policy defines Innsworth Preschool's commitment to supporting staff wellbeing within a clear framework that prioritises child safety, safeguarding, and operational stability.

1.2 Objective: It outlines our approach to managing staff fitness for duty, absences, and requests for support, ensuring all actions are fair, consistent, and legally compliant.

2. Legal and Statutory Framework

2.1 Compliance: This policy is underpinned by our duties as an employer and an early years provider under the following:

- The Health and Safety at Work etc. Act 1974.
- The Statutory Framework for the Early Years Foundation Stage (EYFS).
- The Equality Act 2010.
- The Employment Rights Act 1996.
- The ACAS Code of Practice on Discipline and Grievance Procedures.

3. Fitness for Role: A Core Requirement

3.1 Context: Working in an early years setting is a physically and emotionally demanding role. A fundamental requirement of employment is that all staff are consistently fit and able to perform the full range of their duties.

3.2 Core Abilities: This includes the ability to:

- **Remain Alert:** Maintain high levels of vigilance to ensure effective supervision of children at all times.
- **Physical Resilience (Outdoor and Practical Learning Context):**
Manage the specific physical demands of outdoor and practical

provision where this is an essential requirement of the deployed role. Deployment may vary by risk assessment. This includes walking on uneven terrain, lifting children or equipment, working safely in outdoor, practical, gardening, growing and nature-based learning areas, and working outdoors in varied weather conditions.

- **Emotional Regulation:** Respond calmly and professionally to challenging behaviour, unexpected incidents, and parental communication.
- **Compliance:** Uphold all safeguarding and health and safety procedures without exception.

3.3 Incapacity: An inability to consistently meet these core requirements—whether due to health, fatigue, or other factors—may indicate that a staff member is not fit for their role. This will be assessed on a case-by-case basis and managed fairly, including consideration of reasonable adjustments and medical advice.

3.4 Extreme Heat and Environmental Conditions: Management will review staff welfare where heat, humidity, poor ventilation, fatigue or other environmental conditions may affect fitness to practise. Staff must report symptoms or concerns promptly. Reasonable controls, breaks, hydration, cooler duties, redeployment and individual risk-assessment review will be considered, with particular attention to pregnant or otherwise vulnerable staff.

3.5 Operational Safety: Adjustments must not compromise ratios or safe supervision. Where sufficient fit staff cannot be deployed safely, management may restrict activities or attendance, reduce hours, close a room, close in advance or close during the day under the Staffing, Health and Safety, and Emergency Closure policies.

4. Medication at Work

4.1 Notification: We recognise that staff may need to take medication for various health conditions. However, child safety is paramount.

- **Safety Disclosure:** Staff must inform the Manager if they are taking medication (prescribed or over-the-counter) that may impair safe practice (e.g. drowsiness, dizziness, reduced reaction times) or if they are advised not to drive or operate machinery.
- **Non-Disclosure:** Failure to disclose medication that subsequently compromises child safety will be treated as a disciplinary matter.

4.2 Management:

- **Confidentiality:** This information will be handled in strict confidence and used solely to assess fitness to practise and safeguard children. We record only what is necessary (medication impact, restrictions, review date), not the underlying diagnosis unless required.
- **Risk Assessment:** Upon disclosure, we will conduct a brief risk assessment. If the medication impairs the ability to supervise children safely, we may agree on temporary adjustments or, where necessary, deem the staff member medically unfit for work until the treatment concludes.

5. Our Commitment to Reasonable Adjustments

5.1 Duty: In line with the Equality Act 2010, we have a duty to make reasonable adjustments for employees with a disability. We will consider requests for adjustments and may request medical evidence where needed to assess suitability and risk.

5.2 Limits: However, the legal duty is to make adjustments that are "reasonable". We reserve the right to refuse a requested adjustment if it would:

- Compromise the safety or welfare of children in our care (e.g. inability to evacuate children quickly).
- Impede our ability to meet statutory staff-to-child ratios.
- Place an unreasonable or disproportionate burden on other team members.

- Create a disproportionate burden (including cost) given the size and resources of the setting.

6. Managing Sickness Absence

6.1 Attendance: Regular and reliable attendance is essential for operational stability. We monitor absence levels to identify any potential wellbeing or performance concerns.

6.2 Procedure: Where patterns of absence give cause for concern, we will manage the situation supportively and in line with ACAS best practice. This may include:

- Return-to-work interviews, which are standard after any sickness absence.
- Requesting a fit note and/or occupational health advice in line with employment law.

7. Mental Health: Stress vs. Pressure

7.1 Environment: We are committed to fostering a professional and supportive work environment. We recognise the difference between "pressure" (which is intrinsic to the role) and "stress" (which is an adverse reaction to excessive pressure).

- **Role Reality:** Early Years practice is inherently dynamic, noisy, and demanding. It requires constant engagement and vigilance. While we support staff wellbeing, we cannot fundamentally alter the nature of the job to remove these standard operational pressures.
- **Risk Assessment:** We will risk-assess stress-related concerns where they may affect safeguarding, supervision, or safe practice.

7.2 Support: Our commitment to staff with mental health concerns is to encourage open dialogue, maintain confidentiality (except where safeguarding is a concern), and signpost to external professional services such as GPs or NHS Talking Therapies.

8. Staff Responsibilities

8.1 Expectations: We expect all staff to:

- Take personal responsibility for their health and well-being.
- Arrive for work fit, rested, and ready for all duties, including not being impaired by alcohol, drugs, or fatigue.
- Communicate any health concerns that may impact their ability to work safely and effectively to the Manager at the earliest opportunity.
- Engage openly and constructively in discussions about their health and cooperate with any agreed support or absence management plans.

9. Support, Capability, and Disciplinary Procedures

9.1 Approach: Our primary approach is supportive. However:

- **Capability:** Where health issues lead to an ongoing inability to meet the core requirements of the role, or where attendance levels become unsustainable, we will invoke our formal Capability Procedure.
- **Disciplinary:** Any failure to engage honestly or cooperatively, or reporting for duty while unfit (e.g. under the influence of alcohol or undisclosed medication), may be addressed under our Disciplinary Procedure.

9.2 Process: Any formal action follows our Capability/Disciplinary procedures and ACAS guidance, including the right to be accompanied at meetings where applicable.

10. Monitoring and Review

10.1 Review: This policy is reviewed annually to ensure it remains compliant with employment law and current best practice.

