



Accidents and First Aid

At **HPPN** we aim to protect children at all times. We recognise that accidents or incidents may sometimes occur. We follow this policy and procedure to ensure all parties are supported and cared for when accidents or incidents happen; and that the circumstances of the accident or incident are reviewed with a view to minimising any future risks.

Accidents

Location of accident files:

- The person responsible for reporting accidents, incidents or near misses is the member of staff who saw the incident or was first to find the child where there are no witnesses. They must record it on an Accident Form and report it to the nursery manager. Other staff who have witnessed the accident may also countersign the form and, in more serious cases, provide a statement. This should be done as soon as the accident is dealt with, whilst the details are still clearly remembered. Parents must be shown the Accident Report, informed of any first aid treatment given and asked to sign it on the same day, or as soon as reasonably practicable after
- The nursery manager reviews the accident forms at least monthly/ for patterns, e.g. one child having a repeated number of accidents, a particular area in the nursery or a particular time of the day when most accidents happen. Any patterns will be investigated by the nursery manager and all necessary steps to reduce risks are put in place
- The nursery manager will report serious accidents to the registered person for investigation for further action to be taken (i.e. a full risk assessment or report under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR))
- The Accident File will be kept for at least 21 years and three months
- Where medical attention is required, a senior member of staff will notify the parent(s) as soon as possible whilst caring for the child appropriately
- Where medical treatment is required the nursery manager will follow the insurance company procedures, which may involve informing them in writing of the accident
- The nursery manager/registered provider will report any accidents of a serious nature to Ofsted and the local authority children's social care team (as the local child protection agency), where necessary. Where relevant such accidents will also be reported to the local authority environmental health department or the Health and Safety Executive and their advice followed. Notification must be made as soon as is reasonably practical, but in any event within 14 days of the incident occurring.

Organisation	Contact
Ofsted	0300 123 1231



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Local authority children's social care team	0207 926 3344
Local authority environmental health department	0207 361 3002
Health and Safety Executive	0300 003 1747
RIDDOR report form	http://www.hse.gov.uk/riddor/report.htm

Head injuries

If a child has a head injury in the setting, then we will follow the following procedure:

- Calm the child
- Assess the child's condition to ascertain if a hospital or ambulance is required. We will follow our procedure for this if this is required (see below)
- If the skin is not broken, we will administer a cold compress for short periods of time, repeated until the parent arrives to collect their child
- If the skin is broken, then we will follow our first aid training and stem the bleeding
- Call the parent and make them aware of the injury
- Complete the accident form
- Keep the child in a calm and quiet area whilst awaiting collection
- We will follow the advice on the NHS website as per all head injuries <https://www.nhs.uk/conditions/minor-head-injury/>
- For major head injuries we will follow our first aid training.

Transporting children to hospital procedure

The nursery manager/staff member must:

- Call for an ambulance immediately if the injury is severe. DO NOT attempt to transport the sick child in your own vehicle
- Whilst waiting for the ambulance, contact the parent(s) and arrange to meet them at the hospital
- Arrange for the most appropriate member of staff to accompany the child taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Redeploy staff if necessary, to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together
- Inform a member of the management team immediately
- Remain calm at all times. Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the accident

First aid

The first aid boxes are located in: **In every classroom**

These are accessible at all times with appropriate content for use with children.



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The appointed person responsible for first aid checks the contents of the boxes regularly* **Philip Culling** and replaces items that have been used or are out of date.

The staff first aid box is kept **Main Kitchen**. This is kept out of reach of the children.

First aid boxes should only contain items permitted by the Health and Safety (First Aid) Regulations Act 1981, such as sterile dressings, bandages and eye pads. No other medical items, such as paracetamol should be kept in them.

The appointed person(s) responsible for first aid is All staff

*All of the staff are trained in paediatric first aid and this training is updated every three years.

All first aid trained staff are listed in every room. When children are taken on an outing away from our nursery, we will always ensure they are accompanied by at least one member of staff who is trained in first aid. A first aid box is taken on all outings.

Food Safety and play

Children are supervised during mealtimes and food is adequately cut up to reduce choking. The use of food as a play material is discouraged. However, as we understand that learning experiences are provided through exploring different malleable materials the following may be used. These are risk assessed and presented differently to the way it would be presented for eating e.g. in trays,

- Playdough
- Cornflour
- Dried pasta, rice and pulses.

Food items may also be incorporated into the role play area to enrich the learning experiences for children, e.g. Fruits and Vegetables. Children will be supervised during these activities.

Personal protective equipment (PPE)

The nursery provides staff with PPE according to the need of the task or activity. Staff must wear PPE to protect themselves and the children during tasks that involve contact with bodily fluids. PPE is also provided for domestic tasks. Staff are consulted when choosing PPE to ensure all allergies and individual needs are supported and this is evaluated on an ongoing basis.

Dealing with blood

We may not be aware that any child attending the nursery has a condition that may be transmitted via blood. Any staff member dealing with blood must:

- Always take precautions when cleaning wounds as some conditions such as hepatitis or the HIV virus can be transmitted via blood.
- Wear disposable gloves and wipe up any blood spillage with disposable cloths, neat sterilising fluid or freshly diluted bleach (one part diluted with 10 parts water). Such solutions must be carefully disposed of immediately after use.



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Needle punctures and sharps injury

We recognise that injuries from needles, broken glass and so on may result in blood-borne infections and that staff must take great care in the collection and disposal of this type of material. For the safety and well-being of the employees, any staff member dealing with needles, broken glass etc. must treat them as contaminated waste. If a needle is found the local authority must be contacted to deal with its disposal.

At **HPPN** we treat our responsibilities and obligations in respect of health and safety as a priority and we provide ongoing training to all members of staff which reflects best practice and is in line with current health and safety legislation.

First Aid Policy

All members of staff are paediatric first aid trained. This is updated every three years. In line with the EYFS requirements (2018) all new members of staff that do not hold an up to date first aid certificate will be trained within the first three months of employment. The fully qualified paediatric first aiders are available to administer first aid, to deal with any accidents or emergencies or to help if someone is taken ill during a session.

We will keep our first aid training refreshed through in-house staff training and staff meetings as a means of recapping 'what would you do...' in different scenarios.

Each classroom has their own first aid box. We also have a first aid box in the main office. These are replenished as soon as an item is removed.

All staff are aware of the Health and Safety Policy. All new members of staff will be supported in understanding what they should do in case of any accidents or emergencies.

We keep records of all accidents and injuries, and these are audited and evaluated each term. Any recurring accidents in the same place will indicate that further risk assessment is required in this area and action will be taken.

We will contact parents or carers if we have any worries or concerns over a child's health. If a child has a bump to the head or has a significant mark to the body a member of the Management Team will be informed, and the parent will be called.

The nursery acknowledges its responsibility to have reference to RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) and to report relevant incidents to the Health and Safety Executive (telephone 0845 300 99 23).

Please also refer to the Sickness policy, Health and Safety Policy, and Risk Assessment Policy.

Medicine procedure:

If the child is on prescribed medication during school hours, then the following procedure will be followed:



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- If possible, the child's parents will administer medicine. Where staff are administering medication, a Medication Form will be completed by the parent beforehand. This is in accordance with Holland Park Pre-Prep School and Day Nursery Insurance guidelines.
- Only staff holding a first aid qualification can administer medicine and they must sign on a Medicine Form the dosage and time given. A witness must be present and sign the Medicine Form at the time the medicine is administered, to ensure that the dosage and time are correct.
- All medications will be kept out of reach of children. No medication should be left in children's bags. Medication must be stored in the original container and clearly labelled with child's name, dosage and any instructions. We will not administer any medication which does not come into the setting in its original container together with a pharmacy label or information leaflet provided by the manufacturer. This will alert us to any possible side effects.
- If medication requires refrigeration, then it will be placed on the top shelf of the fridge. All staff on the floor in question will be made aware of this.
- Where medicine such as insulin, adrenalin injections or the use of nebulisers, is used for illnesses, training for staff is required on an individual basis before the child starts the nursery and an Individual Protocol Form is to be completed.
- We will try to administer medication wherever possible, but we will not force it against the child's wishes. Where a child refuses medication, we will contact the parent and inform them, letting them make the decision as how to proceed.

Policy for children with a temperature and administration of non-prescription medicines:

Non-prescription medication should not usually be administered unless there is a clear health reason to do so. Children who are unwell and require pain or fever relief medication should not be attending nursery or school. These medications will only be administered in exceptional circumstances and at the discretion of the person in charge. Medication such as teething gels and skin creams can be administered with prior written consent.

In line with NHS guidelines if we do recognise that a child does have a temperature we will:

- give them plenty of fluids;
- look out for signs of dehydration;
- give them food if they want it;
- stay alongside them, giving them comfort;
- call their parents;
- administer Calpol: if the child has a temperature of 38.5C or higher, the child appears distressed and unwell, and the parent has given consent. Even if signed consent has been obtained, the parent will be called before it is administered. A record of this will be documented on a medicine form and the parent will be asked to sign the form when they collect their child from nursery. Only one dose of Calpol will be administered at nursery; and
- seek medical attention straight away if we think that the child is in danger.



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If we recognise that a child has a temperature, we will not:

- undress the child or sponge them down to cool them – fever is a natural and healthy response to infection;
- cover them up in too many clothes; and
- administer Calpol if the parents have not given consent unless we think that the child is at risk of convulsion or if we have been given medical advice to do so. The parent will be called before it is administered. A record of this will be documented on a medicine form and the parent will be asked to sign the form when they collect their child from nursery.

NB:

- The term ‘medicine’ also covers homeopathic remedies and therefore the same procedures apply.
- The setting reserves the right to refuse to give any medication we do not feel comfortable to administer.
- We will not administer aspirin-based medication unless prescribed by a doctor.
- Staff taking medication that may affect their ability to care for children should notify the Manager.

Long Term Medical Needs & Life-threatening Illnesses:

- Parents of children with known illnesses e.g. anaphylaxis or serious allergic conditions, blood disorders, epilepsy, HIV and AIDS etc. will need to complete an Individual Protocol Plan to ensure staff are fully aware of the signs, symptoms and treatment of that individual child. In some cases, professional training may need to be organised for staff.
- In the case of a child with a known illness/allergy suffering a reaction, the child’s personal protocol as written by the parents will be strictly followed in all cases.
- Parents should ensure their child’s Protocol is kept up to date and inform the Key Person of any change in circumstances.

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