

Accidents and First Aid policy

At Inglenook we always aim to protect children. 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: Locked filing cabinet in office.

- The person responsible for reporting accidents, incidents or near misses is the member of staff who saw the incident or was first to see/be made aware of the accident and any injury 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 regularly 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 records will be kept for at least 21 years and three months
- Where medical attention is required, a member of staff will notify the parent(s) as soon as possible whilst caring for the child appropriately
- Where medical treatment is required the registered person will follow the insurance company procedures, which may involve informing them in writing of the accident
- The nursery manager/registered person 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.

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 they need to be collected by parents to seek medical attention, be taken to hospital or emergency medical advice be sought. (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 to reduce swelling until the first aider dealing with the injury is happy that they can return to play, a parent arrives to collect their child or emergency first aid arrives.
- 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 and give a minor head injury form to the parent.
- If the child is remaining in our care, we will monitor their wellbeing following head bump advice.
- If the child is to be collected, we will 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 or the child is unwell and needs medical attention, for example difficulty breathing. We will not attempt to transport the child ourselves.
- Whilst waiting for the ambulance, we will contact the parent(s) and ask them to come to the nursery straight away – keeping them informed if the emergency services arrive first and decide to take the child to the hospital.
- If the parent has not arrived before the child needs to be taken to hospital, an arrangement will be made for an 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 if not already aware.
- Always remain calm. 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 in the Preschool room, Tweenie room, Baby room, Office, and Kitchen.

These are always accessible with appropriate content for use with children.

The appointed person responsible for first aid checks the contents of the boxes at least 6 monthly and replaces items that have been used or are out of date, however all staff are responsible for replacing any items that have been used. Additional supplies are kept in the office.

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 are The Manager and Owner

We always aim to have all staff trained in paediatric first aid and this training is updated every three years. The only occasions where this may not be the case is if a new member of staff starts employment and does not have this qualification until training is arranged or a staff members training lapses before we can arrange training.

All first aid trained staff are listed by our 2 entrances by staff photographs. 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 used with caution, 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, children are always supervised when playing with food, such as:

- Playdough
- Corn flour
- Dried pasta, rice and pulses.
- Dried cereals

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, and sterilising fluid.

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 Inglenook we treat our responsibilities and obligations in respect of health and safety as a priority and we provide any updates regarding health and safety to all employees whenever applicable as soon as possible.

All accidents that occur at home must be recorded on a prior injury form (This is a legal requirement) If the injury is not shared with us when a child is dropped at nursery a prior injury form will be completed and it will be discussed when the child is collected (As long as this discussion is not likely to cause any further harm to the child and does not go against any advice given from children's Social care). We will ensure that the form is fully completed, and we agree with the description of the injury, for example it may be written as a scratch and we feel it appears to be a cut. This form must then be seen and signed by a Designated Safeguarding Lead (DSL) straight away. If any prior injury causes concern, advice must be sought from the DSL and/or Children's Social Care.

Staff accidents/incidents and near misses

All staff accidents should be treated in the same way as the procedures outlined above. First aid must be administered as required, emergency medical assistance sought if necessary and a manager being informed. All accidents, incidents and near misses must be recorded on a staff accident form and given to the manager/ owners to complete their section, sign and ensure that there any actions that may be needed are taken, e.g. removing faulty equipment. Staff accident forms are in the office.

If a member of staff has an accident whilst with the children, the children must be reassured as much as possible by other staff present to try to avoid un-necessary distress to the children, while still tending to their colleague.

The emergency contact name for a member of staff should be called as soon as possible if they need hospital treatment or it is felt that they need assistance to go home.

Reviewed: APRIL 2020

Due for review by: APRIL 2021